

Table of Contents

- 3 Preparing for Pregnancy
- 4 Selecting Your Healthcare Provider
- **6** First Trimester
- 7 Second Trimester
- **8** Third Trimester
- **9** Potential Detours
- 11 Nutrition During Pregnancy
- 15 Exercising While Pregnant

- 18 Pregnancy Weight Tracker
- 19 Prenatal Visit
 Calendar
- 23 Movement Tracker
- 25 Weekly Pregnancy Tracker







9 things to check for or have under control before deciding to have a baby

DONE?



ASK ABOUT PRENATAL VITAMINS

Talk to your healthcare provider and ask for their recommendation on when to start taking prenatal vitamins.



DONE?



Some viral and parasitic exposures (including some pets and animals) may increase the risk for birth defects.



MEET WITH YOUR **HEALTHCARE PROVIDER**

Tell them that you are planning to have a baby within the next twelve months. This is also called your preconception visit.

DONE?



SCHEDULE A PHYSICAL INCLUDING A COMPLETE FAMILY HISTORY

Evaluate your risk for chronic diseases. Ask your healthcare provider about the risks of these conditions to your pregnancy and discuss the plan for managing any potential complications.

CONDITIONS TO BE AWARE OF:

Blood Clotting Disorders

Hypertension **Diabetes**

DONE?

Hypothyroidism Asthma

Lupus



DONE?

REVIEW YOUR

CURRENT METHODS

OF CONTRACEPTION

and decide when to stop

contraceptive measures.



PLAN FOR YOUR IDEAL WEIGHT



PRIOR TO PREGNANCY Meet with your healthcare provider to discuss what your ideal weight should be.

DONE?



REVIEW YOUR MEDICATION HISTORY

with your healthcare provider.



DONE?

8



COMMIT TO SOME FORM OF EXERCISE OR ACTIVITY EVERY DAY

Think about your routine and how you will continue to accommodate exercise once you are pregnant. This will be easier to do if you have a plan and start prior to becoming pregnant. The American Heart Association recommends 150 minutes a week or 30 minutes a day for five days a week.

DONE?

MAKE SELF-CARE A PRIORITY

Be sure to discuss your plan to manage your mental health and minimize stressors with your healthcare provider. Chronic stress is associated with higher levels of cortisol which increases the risk for cardiovascular disease, diabetes, obesity, hypertension and eclampsia (a very serious form of hypertension that can develop during pregnancy).





Selecting your of Healthcare Provider

Establishing a good relationship with your healthcare provider will help you feel a lot more comfortable – both physically and emotionally – during your pregnancy. Here are some useful questions to think about before making any final decisions.

Questions to ask the office:

- 1 What are your office hours? Are you open Saturdays?
- What happens if I need to see my caregiver outside of office hours?
- 3 How much time does a routine visit usually take?
- 4 Will I see the same caregiver for every appointment?
- 5 Can I talk to my OBGYN over the phone or by email if I have a problem?
- 6 Am I covered by my healthcare insurance plan?
- 7 At how many hospitals does the caregiver have admitting privileges and where are they?
- 8 What happens if my caregiver is not available when I'm about to go into labor?
- Is there a therapist on staff to assist with my mental health needs? If not, who does the provider usually refer patients to?
- 10 Is there a nutritionist, lactation specialist or social worker on staff to assist with my diet, breastfeeding and resource needs? If not, who does the provider usually refer patients to?

How is the office staff? Were they conscious of waiting times? Did you feel welcome and comfortable when you arrived at the doctor's office, or did you feel rushed? Remember you won't always be able to reach your doctor directly, so it's important you feel comfortable talking to their staff. Most physicians practice in several different offices, so take this into consideration when selecting your healthcare provider.



Questions to ask your practitioner:

- 1 What is your general approach to childbirth?
- Do you deal with high-risk pregnancies such as older mothers, mothers with existing illnesses or a multiple pregnancy? Or will I be referred to a specialist?
- 3 What is your experience? How many babies have you delivered?
- 4 What are your qualifications? Are you board-certified?
- 5 Do you attend homebirths? (if of interest)
- 6 What prenatal tests do you usually perform and why?
- 7 What is your approach to managing pain during labor, including epidurals?
- 8 What is your cesarean section rate and under what circumstances do you perform them?
- What conditions would lead you to induce labor and how would you do it?
- If any problems or complications present themselves during labor, what is your approach to dealing with them?

The doctor's outlook on issues important to you will offer you insights on their approach to care. If at any time you don't feel you're getting the support or communication you need from your provider, it's never too late to look elsewhere. It's important you feel comfortable and on the same page as your provider.





First of Trimester

0 to 13 Weeks



IF YOUR PREGNANCY TEST IS POSITIVE, CONGRATULATIONS!

It's likely to be an overwhelming moment to see that little plus sign, but it's also super exciting for both you and your partner.





Heartbeats and first hellos

The next step is to book a prenatal appointment to confirm your pregnancy. If you haven't already, ensure you have a healthcare provider you feel comfortable and open with. You might have an ultrasound to hear your little one's heartbeat and meet them on-screen for the very first time, even though they'll only be a few centimeters in size!



"OH, NO..."

Morning sickness

They're not the most pleasant of symptoms, but nausea and vomiting are extremely common in early pregnancy due to an increase in hormones. Don't worry, for most women, it usually passes by the end of the first trimester.

Food aversions and cravings



You may find yourself craving certain foods and stronger flavors during your pregnancy.



On the other end of the spectrum, you may be completely turned off by other foods, even those you usually love!

Early signs



LATE PERIOD?



SPOTTING AND/OR CRAMPING?



FATIGUE?



NAUSEA?



IT MIGHT BE TIME FOR A TRIP TO THE PHARMACY!





Second Trimester

14 to 27 Weeks



If you and your partner want to know whether you're having a boy or a girl, you'll be able to find out at the 16-20 weeks mark.

Time to start thinking about names, perhaps!

OR G/O

Getting prepared with classes

The end of your second trimester is a great time to start childbirth classes. When choosing a class, you'll need to consider:

- 1 TOPICS THE CLASSES COVER
- WHETHER YOU GO ALONE OR WITH YOUR PARTNER
- 3 LENGTH OF EACH CLASS
- 4 HOW MANY CLASSES

CHILDBIRTH EDUCATION VIDEO SERIES

Pampers developed a nine-part series, led by clinical childbirth experts, that provides in-depth information for new parents on all stages of the childbirth journey.

Visit Pampers.com to learn more.

Sharing the joy

Many women prefer to wait until
the start of the second trimester to
announce their pregnancy to family and
friends. Why not think of a fun way to make
it even more special!



"WAIT, WAS THAT A...?"

Changing shape

A visible bump, bigger breasts...

This is the time when you'll start to see your body changing. Your uterus expands to more than 500 times its normal size over the course of your pregnancy!



You may start feeling the first little flutterings of movement around weeks 20-25. They'll start off faint but get stronger as your little one grows.



A Changing Wardrobe

With a new shape comes some necessary changes to your wardrobe. It may be time to invest in maternity clothes in stretchy, versatile fabrics so you can continue to feel your best as your belly grows.



Clothes, cribs, and cuteness

Whether you know the gender or not, now you may want to start getting prepared by buying baby clothes, decorating the nursery and choosing a few fun toys.





Final prep

Finding a pediatrician, installing the car seat, packing your hospital bag...

Now's the time to get the last few things prepped so you can feel totally organized and relaxed as your due date gets closer.





It's time to slow down, step away from preparations and have some fun with friends and family!



Baby talk & play

Your baby can hear you and your partner, so be sure to chat away, sing, or read to your bump — these are great ways to create an early bond with your little one.

Did you know? Research shows that reading to a baby between the ages of zero and three is proven to impact core brain development through the exposure to words.

Meeting your little one

The time has finally come — you're about to say hello to your baby and hold them for the very first time! If you're 40 weeks and baby hasn't arrived, that's OK too. Your due date is an estimate and only 5% of babies arrive on it.



Labor signs

You may feel a whole range of different sensations as your body prepares for birth.

BRAXTON HICKS CONTRACTIONS

These "practice" contractions will help you prepare for labor.

PRESSURE AS YOUR BABY MOVES DOWN THE BIRTH CANAL

Your baby will turn head-down at around week 32.

EARLY DILATION

Up to 3 weeks before delivery, your cervix will begin thinning out.

WATER BREAKING

About 15% of women experience their water breaking before they go into labor.

You may even reach your due date with no signs at all. Your healthcare provider will be able to guide you.





Sometimes journeys take a detour. Every pregnancy is different, and what's normal for friends and family could be abnormal for you. Talk to your doctor about your symptoms so your detours don't become roadblocks.

If you experience any of the below symptoms, call your healthcare provider right away.

Potential 🔮 Detours

on Your Pregnancy Journey

DETOUR 1: Pre-Eclampsia

Pre-eclampsia is a severe complication of pregnancy that is associated with high blood pressure. There is risk of damage to the kidneys and the liver, leading to abnormal function.

DID YOU KNOW:

Pre-eclampsia may be related to chronic stress.

Signs and symptoms of pre-eclampsia:

- 1. Severe headaches
- 2. Changes in vision, including temporary loss of vision, blurred vision or light sensitivity
- 3. Nausea or vomiting
- 4. Decreased urine output
- 5. Foamy or bubbly urine (sign of increased protein in urine)
- Abnormal liver function determined by a blood test
- 7. Increasing fluid in the hands and feet leading to swelling (also known as edema)
- 8. Shortness of breath
- 9. Decreased levels of platelets in your blood

DETOUR 2: Gestational or Pre-Gestational Diabetes

Monitoring for diabetes in pregnancy is part of routine prenatal care. Whether you already have a diagnosis of diabetes prior to pregnancy (pre-gestational) or are diagnosed with gestational diabetes, consult your healthcare provider on the best approach for maintaining your glucose levels.

DID YOU KNOW:

Women with gestational diabetes may have increased thirst and/or urination associated with high glucose levels, but many have no symptoms at all.





If you experience any of the below symptoms, call your healthcare provider right away.

DETOUR 3: Premature Labor

Premature labor can happen for many reasons, including infection, hypertension, cervical incompetence, diabetes and chronic stress. But it can also happen for no reason at all.

DID YOU KNOW:

Some women may be in preterm labor without even feeling any contractions.

Signs and symptoms of preterm labor:

- 1. Lower back pain
- 2. Vaginal bleeding or vaginal leakage or change in vaginal discharge
- 3. Feeling vaginal pressure like the baby is lower or pushing down
- 4. Changes in bowel habits
- 5. Cramping that feels like a period
- 6. Abdominal pain belly tightening like a fist less than or equal to every 10 minutes



DETOUR 4: Chronic Hypertension and Pregnancy-Induced Hypertension

It is important to speak with your healthcare provider about the best approach to managing your blood pressure prior to and during pregnancy.

DID YOU KNOW:

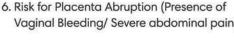
Both chronic hypertension and pregnancy-induced hypertension can be complicated by pre-eclampsia.

Signs and symptoms of uncontrolled blood pressure:

- 1. Severe headaches
- 2. Changes in vision, including temporary loss of vision, blurred vision or light sensitivity
- 3. Secondary heart failure

- 5. Preterm Labor
- Vaginal Bleeding/ Severe abdominal pain)

4. Stroke





The information in this section and others was provided by Dr. Terri Major-Kincade, who specializes in the care of premature infants and their families. She's a leading expert in racial health disparities and neopalliative care whose greatest passion is helping families make informed choices before, during and after life in the NICU.







The expression "eating for two" is one we've all heard before. However, it's a myth!

In fact, you may not need to increase your daily calorie intake during your first trimester. As you progress through your pregnancy, use the following guidelines:

Trimester 1

Trimester 2

Trimester 3



Dairy

+340 calories



Bear in mind that you may need more calories **per baby** if you're having multiples.

Your healthy plate

Work closely with your healthcare practitioner to ensure you're getting the nutrients you need.

This guide outlines how a healthy pregnancy diet can be attained by selecting foods from the five main food groups.

When putting meals together, half of your plate should be made up of fruits and vegetables. The other half should consist of proteins and whole grains.





Toxoplasmosis is a disease transmitted through contaminated food or cat feces. It can cause serious complications for pregnant women and people with weakened immune systems.

TOXOPLASMOSIS PREVENTION



Wash your hands before you cook



Wash all fruits and vegetables



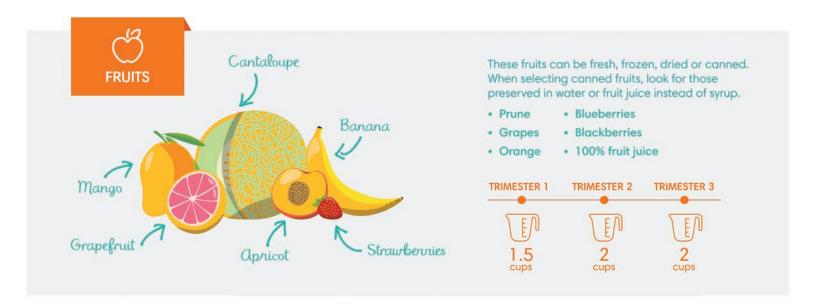
Do not be around cat liter

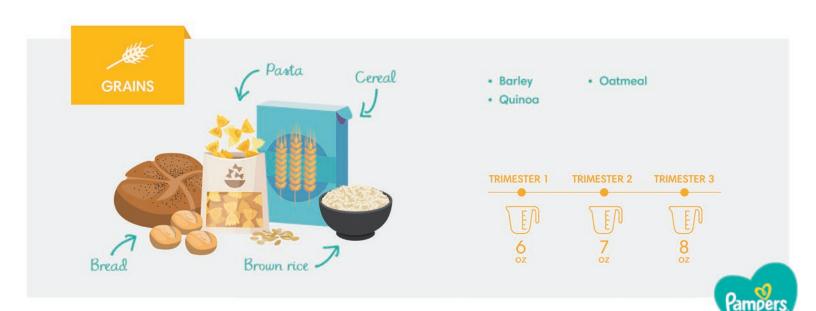
Prenatal vitamins

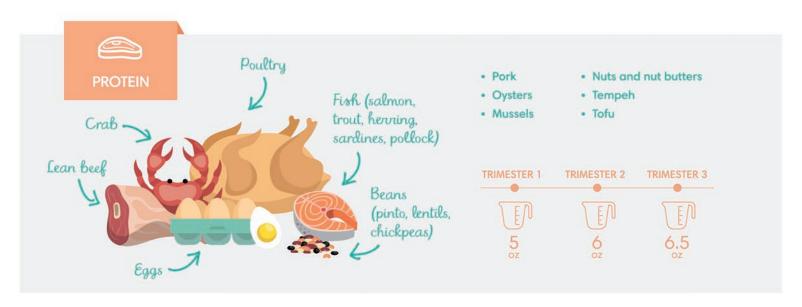
Consult with your doctor on what vitamins and minerals you can take to help support your nutrition.















What Not to Eat or Drink



ALCOHOL



UNCOOKED/RAW MEAT & DELI MEAT



UNWASHED FRUITS & VEGETABLES



UNCOOKED SUSHI & SASHIMI



JUICE



SOFT CHEESES
INSTEAD EAT: hard cheeses

like cheddar or swiss



(Like radishes or alfalfa)

Limit your exposure of methylmercury

Some food items like fish can contain high levels of a metal called methylmercury, which can be harmful to your unborn baby's development. To limit your exposure, do not consume the following:



TILEFISH





SWORDFISH

KING MACKEREL

SHARK





Limit caffeine consumption

Most experts recommend limiting caffeine consumption to less than 200 mg/day. This is equal to a 12-oz cup of coffee. As caffeine is found in teas, sodas, and chocolate, make sure you include these sources in your total for the day.

Exercising while Pregnant

It's important to adapt or modify your exercise routine to accommodate for a growing belly and changes in joints, balance and breathing during pregnancy. Overall, and in most cases, exercise is safe and recommended during pregnancy. However, always consult with your healthcare provider before starting a new exercise program to ensure you do not have a medical reason to avoid exercise.



Light Cardio is another great way to exercise during pregnancy. Walking, swimming and low-impact aerobics can help build stamina and reduce stress.

ESSENTIALS:



Supportive sports bra



Comfortable exercise clothes



Water



Healthy snacks



WARNING SIGNS TO STOP EXERCISING

- Dizziness
- Shortness of breath
- Chest pain
- Muscle pain
- / Headache
- ✓ Irregular swelling
- ✓ Vaginal spotting or bleeding



WHAT EXERCISES TO AVOID DURING PREGNANCY

- X Activities that require extensive jumping or running
- X Contact sports or any exercise that puts you at risk of getting hit in the abdomen
- X Exercise in excessively hot or humid environment
- X "Hot yoga" or "hot Pilates"
- X Activities with a risk of falling



SAFETY RULES FOR PRENATAL EXERCICES

- ✓ Get clearance from your doctor before starting an exercise routine
- Drink plenty of water before, during and after exercises
- Avoid becoming overheated especially in the first trimester
- Avoid lying flat on your back, so the uterus does not press on a large vein that returns blood to the heart
- Avoid standing motionless, because it can cause blood to pool in your legs and feet



Prenatal Stretches

SIMPLE EXERCISES TO DO AT HOME BEFORE OR AFTER YOUR EXERCISE ROUTINE



HARMSTRING STRETCH 20 seconds



STANDING QUADRICEP STRETCH 20 seconds



HIP RAISE 10 repetitions



BUTTERFLY STRETCH 20 seconds



BIRD DOGS /
ALTERNATING REACH & KICKBACK
8 repetitions



5 repetitions









4 repetitions



GARLAND POSE 20 seconds



Pregnancy 📢 Weight Tracker



Healthy weight gain

Pregnancy and healthy weight gain go hand in hand!

Don't worry — these extra pounds you're putting on allow your baby to get a healthy start in life! Bear in mind that optimal weight gain during pregnancy will vary, as no two moms are the same. Your weight gain goal will be based on factors such as your weight and BMI prior to becoming pregnant, your general health and whether or not you're having multiples.



Healthy recommendations

Work closely with your healthcare provider to ensure all is on target. Your provider will make recommendations if calorie boosts or scaleback is needed. Here are some general guidelines from the Institute of Medicine, based on data from the World Health Organization, that your healthcare provider may recommend you use.



+28-40 <

Weight gain



+25-35 pounds







+11-20

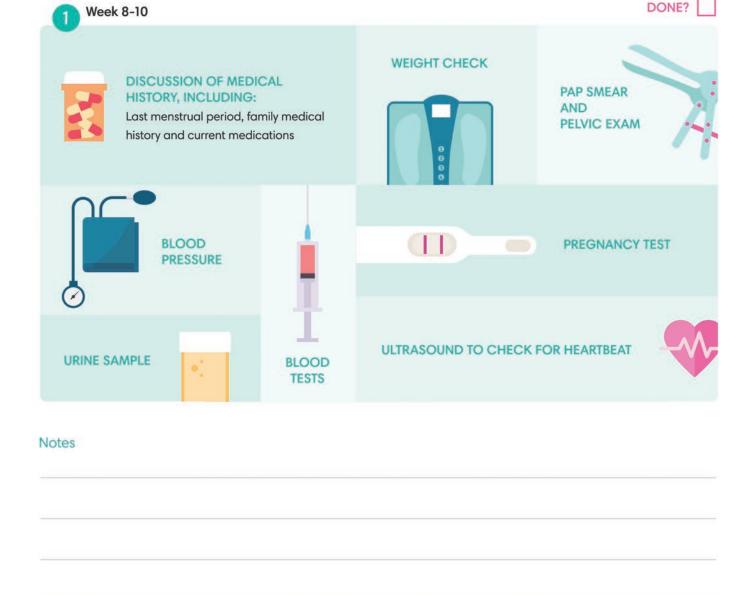


You'll be seeing your healthcare provider often over the next nine months, so it's crucial that the person you choose is someone you feel comfortable with and trust. The number of visits you'll be having can seem overwhelming, but we've outlined some general details below about those checkups to give you an idea of what to expect.

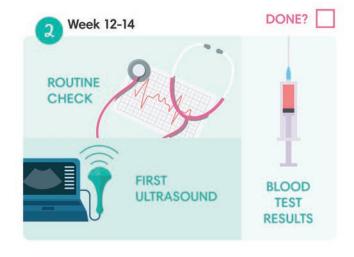


Generally, you can expect the following routine checkup at each appointment: a weight check giving a urine sample, logging blood pressure, listening to baby's heartbeat, and belly measurements. As your pregnancy progresses, fetal movement will also be taken into account.

Weeks 4-28 (1-6 months): One visit per month | Weeks 28-36 (7-8 months): Every two weeks | Weeks 36-Birth: Once a week



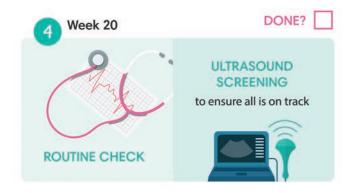














Notes			











DONE?

N	0	te	S
	~	-	-

7 8 Weeks 30+32	DONE?
ROUTINE CHECK	Prof.

Notes	Notes	









