

Prenatal Care Program Evaluation and Guide

An overview of completed project goals and resources identified that support the growth of the Spring Branch Community Health Center's Prenatal Program and implementation of supplemental services.

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Introduction

Direct exposure to community health environments and issues around health disparities began during my undergraduate experience. During this time, service-learning opportunities that combined the academic exploration of justice and ethical concepts, reflection, and weekly community service revealed the complex nature of health care delivery and equity of care. While my previous experiences were varied, I had not been exposed to prenatal patients and all of the services necessary to provide comprehensive care to them.

As a result, I was excited to support the Prenatal Program at Spring Branch Community Health Center (SBCHC) in Houston, TX in their efforts to address challenges and accomplish program goals that would enhance the services provided to their prenatal patients. Spring Branch Community Health Center is a Federally Qualified Health Center located north west of the city center. Through three locations they have been serving patients in Houston for just over 10 years. They realize their mission of increasing the number of healthy families in their community by providing quality care and health promotion programming to realize their mission of increasing the number of healthy families in their community.

My project objectives were developed on the basis of addressing needs identified by the prenatal provider team that includes accredited midwives, Nurse Practitioners, and Physicians. My PCLP Scholar Project goals were to develop trimester specific and culturally sensitive patient educational materials, develop a syllabus and program guide for prenatal classes, and source collaborations with outside organizations to provide supplemental services and incentives for prenatal class participants.

Background

Prenatal care is an integral component of patient care that promotes healthy behavior and positive birth outcomes. Comprehensive prenatal care is achieved through a coordinated approach to psychosocial support and medical care that begins preconception and continues into the antepartum period (AAP/ACOG, 2007, p.83). Generally, prenatal care occurs over the course of pregnancy through seven to twelve appointments that include physical exams, routine assessments, genetic screenings, and patient counseling. Various medical and psychosocial issues are assessed. Physiological measurements for mother and fetus are tracked over the course of care (Kirkham, Harris, and Grzybowski, 2005).

Each visit presents an opportunity to educate patients on the importance of a healthy pregnancy, monitor progression, and discuss nutritional and social behaviors. Two psychosocial issues of note during pregnancy are domestic violence and depression. Domestic violence increases the risk of complications during pregnancy and is the leading cause of death among pregnant women in the United States (Zolotor and Carlough, 2014). Perinatal depression is often under-diagnosed and depression induced complications include neurodevelopmental delays, low birth weight,

prematurity, and maternal/infant bonding challenges (Zolotor and Carlough, 2014). Chronic conditions also impact prenatal care and outcomes. Consider the national issue of obesity. In pregnancy, obesity adversely impacts maternal health and birth outcomes and also leads to an increased risk for childhood and adult obesity (Lau et. al, 2011).

Such challenges are best monitored when patients utilize prenatal care early and consistently. In fact, an 8 year longitudinal study of over 25 million deliveries found a direct linear relationship between inadequate prenatal care and increased risk for adverse birth outcomes (Partridge et. al, 2012). That said there are several barriers that contribute to inadequate use of prenatal care, particularly for women in immigrant and underserved communities. Barriers to care fall into several categories including demographics, migration, culture, social network, and accessibility (Boerleider et. al, 2013). By investigating the needs of the community they serve, health centers can develop models to best address the barriers to care and improve health outcomes for their patients.

Spring Branch Community Health Center offers comprehensive prenatal care at two of three locations, but plan to expand to the newest location within the year. OB providers are from the University of Texas Health system and have had a long-standing relationship with SBCHC. From May 1st, 2013 to May 3st, 2014 SBCHC served 1,282 prenatal patients. Of these 28% were uninsured, 49% covered under CHIP Medicaid, 17% covered under STAR Medicaid, 4% covered under traditional Medicaid, 20% via commercial insurance, and small number under catastrophic plans. SBCHC is committed to prioritizing effective prenatal care. Current goals for providers include providing consistent prenatal classes, developing handouts relevant to each

trimester, offering center-sponsored events (baby showers, breastfeeding support groups), improving coordination of care between facilities, tracking of birth outcomes, and nutrition guidance for pregnant patients.

Methodology

Trimester Specific Handouts

In order to facilitate patient education, highlight critical information, and address common concerns trimester specific brochures were developed. The American College of Obstetricians and Gynecologists book *Your Pregnancy and Childbirth: Month to Month* was used as the primary source for brochure content. The format, organization of information, and target audience made this book an ideal source to develop our content. One unique feature of the book is that each month is covered in a chapter that addressed nine topics. The topics include Your Changing Body, Discomforts, Nutrition, Diet, Exercise, Healthy Decisions, Other Considerations, Prenatal Care Visits, and Special Concerns. These were fitting categories to model the trimester brochure sections on. The process began by meeting with OB providers to understand their expectations for the document. Next, I read the relevant chapters of *Your Pregnancy and Childbirth: Month to Month* and developed a first draft of content. OB providers reviewed each draft and the content was edited for brevity and relevance (see Appendix 1). Design of the brochure was initiated by SBCHC staff but ultimately contracted out to a printing company.

Prenatal Class Curriculum

An insurance company sponsors the current prenatal class offered at SBCHC's Hillendahl site. The class is only open to patients covered by this insurance. In order to offer a prenatal class that

is consistent, held at both locations that provide OB care and open to all SBCHC patients an appropriate curriculum needed to be identified. I researched existing prenatal course curriculums. Identification of a bi/multilingual curriculum that was affordable, had the greatest potential for prompt implementation, and offered training for instructors was preferred. The Becoming a Mom/Comenzando Bien curriculum developed by the March of Dimes organization was selected.

Collaborations and Partnerships

To provide resources to support prenatal patients, I researched Houston area and national organizations that could be potential collaborators. I especially made efforts to source and contact area agencies that work with pregnant populations and for women's health. I reached out to different organizations by phone, email, and personal visits. I also submitted partnership and grant applications with the assistance of the Clinical Quality Manager (Mary Ellen McEvoy) and Chief Development Officer (Mike Smith). Specifically, I applied for SBCHC to be a domestic field partner with the Vitamin Angels organization and for the March of Dimes Houston Chapter 2014 Community Award.

Results

Prenatal Program goals were completed in the desired time frame. The trimester specific brochure content was completed and also translated into Spanish by an SBCHC staff member (see Appendix 1). A visually appealing brochure is now in production. A comprehensive prenatal class curriculum was purchased and the anticipated start date for the class is August 20, 2014. SBCHC is connected with several non-profit organizations that will collaborate to provide supplemental resources, patient incentives and educational tools. The organizations include

March of Dimes, Vitamin Angels, Spring Branch WIC, Nurse Family Partnership, Kohl's Cares, and La Leche League.

Discussion

Trimester Specific Handouts

The handouts will be used during appointments as well as included in the Prenatal Program Welcome folder. Other prenatal educational materials were reorganized and updated to contain new resources provided by the local Spring Branch WIC center. The handouts will serve as an important tool for patient education. They address issues that Providers wish to emphasize and common concerns that patients express. The format and organization of the brochure is accessible allowing patients to identify targeted information when needed. For example, if a patient is feeling a new uncomfortable symptom and is concerned about its seriousness, she can quickly refer to the Discomforts and Special Concerns sections to determine whether her symptoms are normal or require immediate attention. Efforts to provide more educational tools will empower patients; improve patient-provider communication, patient knowledge, and birth outcomes.

Prenatal Class Curriculum—Becoming a Mom/Comenzando Bien

March of Dimes is a non-profit organization founded to improve the health of babies by preventing birth defects, premature birth and infant mortality. They achieve their mission through a variety of programming and education initiatives, and by funding organizations working towards the same goals. Education initiatives include the development of a bilingual

evidence based curriculum. It is designed for pregnant women and women of childbearing ages to gather in a supportive group setting in order to learn about having a healthy baby.

The curriculum also includes appendices that aid cultural adaptability for specific racial/ethnic groups including Hispanic/Latino, African-American, and American Indian/Alaska native women.

Curriculum goals align with SBCHC goals for the prenatal class. They include:

- Improving birth outcomes
- Educating prenatal patients about accurate and timely information to promote a healthy pregnancy
- Fostering a supportive environment that promotes healthy behaviors
- Assisting patients in overcoming barriers to care and encouraging that they become proactive and informed consumers of prenatal care services
- Promoting interaction between facilitators, providers, and participants
- Assessing and producing positive knowledge-based behavioral changes in participants

Additionally, the curriculum contains evaluation tools that will be utilized to not only measure the experience of patients but to also track birth outcomes.

SBCHC was granted a 2014 Community Award of \$2,000. We were informed that we received the largest amount of funding of all applicants for this Houston Chapter March of Dimes grant. This funding will go towards establishing the SBCHC sponsored prenatal class, allowing the purchase of the curriculum and necessary supplies. We were also able to hold a meeting at our center with the Director of Program Services and the Becoming a Mom program leader. Through this meeting we gained insight into how to establish a strong program, and learned of resources

available to us as an official partner site (i.e. free instructor training and support, incentives for program baby showers and events, etc.).

SBCHC's Patient Educator, Clinical Quality Manager, and at least one OB Provider will facilitate the prenatal class. They will undergo curriculum training with the curriculum program leader at Houston March of Dimes within the first two weeks of August. The program dates for the first cohort will be August 20th-October 15th. SBCHC will run two groups simultaneously at the Pitner and Hillendahl sites, enrolling the recommended 12 participants per class for each group. One-hour class sessions will be held weekly on Tuesdays, based on the nine topic specific sessions outlined in the curriculum. Providers will encourage patients to attend the class and keep track of attendance. In order to facilitate this, an attendance field will be added to the Prenatal Records card patients that bring to each appointment. Prenatal class participation will be recorded on the card and monitored by providers.

Collaborations and Partnerships

Several organizations were identified that had the potential to support the implementation of more supplemental services for the Prenatal Care Program. Direct contacts and lines of communication were developed. Official partnerships with relevant non-profit organizations were also established.

Vitamin Angels is a nonprofit organization that provides micronutrient supplements for children and pregnant women. Based in California, this international organization operates through field partners around the world. SBCHC was accepted into their Domestic Field Partner program. This partnership ensures a 3-year commitment to provide prenatal vitamins to SBCHC expectant

mothers. The first shipment included 12-month supplies of prenatal vitamins for 660 women. Most of the patients that come to SBCHC to begin prenatal care arrive uninsured. A quarter of new prenatal patients don't engage prenatal care until the second trimester. If they qualify, processing and approval for Medicaid can take up to six weeks. Unfortunately, most patients are forced to wait until they are covered before they access prenatal vitamins. Patients who do not qualify, are uninsured and/or are covered by catastrophic plans have limited to no access to prenatal vitamins.

The opportunity this partnership provides for prenatal patients is significant. SBCHC can not only provide immediate supplementation to patients in need, but also start the important and empowering process of patient education at the onset of prenatal care. We expect that this intervention will allow patients to begin PVN supplementation earlier and will increase the number of patients taking PVNs through the course of pregnancy and lactation.

Spring Branch WIC center is housed in the same location as SBCHC's Pitner Clinic. Ms. McEvoy and I were able to meet with their Nutritionist, Nancy Chapa. This was a very productive meeting where we discussed ways SBCHC could collaborate more effectively with Spring Branch WIC. One opportunity especially pertinent to our Prenatal Program goals is the breastfeeding support programming offered through WIC. WIC Texas, in partnership with the University of Texas Lactation Foundation, offers breastfeeding education and support at their main site on the medical campus. The program is structured and makes free breast pumps available to participants as well. Through our meeting with Ms. Chapa we learned that patients that wish to utilize this free service but are unable to travel to the Foundation site can be connected to their breastfeeding specialists at Spring Branch WIC via video feed. This direct and

open line of communication that has been established with Ms. Chapa is very exciting. The hope is that together, SBCHC and Spring Branch WIC can collaborate to reach more patients and connect them to the resources available to them.

Nurse Family Partnership (NFP) is an organization with an evidence-based intervention program that provides at home support for teen and/or first time moms through pregnancy and the first year of life. Recently, Spring Branch Community Health Center has referred two patients to receive their services. I visited their main Houston location, met with their office coordinator, and obtained informational materials/application forms for potential referrals. This contact has been established and will help SBCHC better navigate the outcomes of their referrals to the NFP organization.

The non-profit organization Local Infant Formula for Emergencies (LIFE) Houston has served Houston communities for 26 years providing emergency formula assistance. Ms. McEvoy and I met with Nicole Browning, MA, who serves as the Executive Director for LIFE Houston. They are currently not partnered with any sites in North Houston and are looking to expand which is a great opportunity for SBCHC.

Most of their clients are referred through WIC and two of their current distribution sites are at WIC locations. They provide one weeks worth of formula for up to 6 times within the first year of life. They describe themselves as a low barrier organization with minimal requirements to access services which includes a photo ID of parent and documentation of birth date and name of infant. LIFE Houston partners with the grocer HEB and distributes HEB brand formula. Special formula is provided with doctor's proof of need. They operate on a walk-in basis; have no zip

code restrictions, and require that a brief application be filled each time services are utilized. This partnership will provide a critical supplemental service to SBCHC prenatal patients, while allowing LIFE Houston to reach an area of the city they have yet to serve.

La Leche League is an international non-profit organization that works to help, encourage, and educate mothers to breastfeed through peer-facilitated support groups. I was able to make contact with the Memorial/Spring Branch Leader for the Texas chapter. We hope to collaborate with group leaders for the breastfeeding session of the prenatal curriculum. If there is enough interest from patients, SBCHC is also willing to host a monthly support group meeting at one of its location. Currently, La Leche League only offers one support group meeting a month in the Spring Branch area at a local church.

SBCHC is a Kohl's Cares partner site and through the prenatal class will continue to partner with this foundation to provide patient incentives including cribs and playpens.

Recommendations

Through their new direct relationship with March of Dimes (MOD), Spring Branch Community Health Center is in a great position to implement a prenatal class that is tailored to their patient population and goals for the program. I recommend that SBCHC continue to work closely with the Houston MOD and apply for more funding through the national MOD body to support the implementation and growth of the Becoming a Mom/Comenzando Bien class.

Nancy Chapa at Spring Branch WIC has several new ideas and is eager to collaborate with SBCHC. I recommend that the center's new Patient Educator work directly with Ms. Chapa to

identify opportunities to join forces especially around nutrition outreach and education. This would further enhance the many supplemental health promotion programs SBCHC already offers to the community.

In conversation with Ms. McEvoy we discussed the challenges that arise around keeping track of resources and opportunities within the community, especially given the packed workload of clinic and management staff. We discussed the possibility of creating calendar alerts to serve as reminders for deadlines, events, and funding opportunities that SBCHC can connect patients to. I recommend that this idea be implemented and suggest that the Patient Educator and a Development Office staff member support the Clinical Quality Manager in following up on collaboration and funding opportunities.

Conclusions

In conclusion, providing quality prenatal care is essential for improving the lives of mothers and babies and promoting positive birth outcomes. SBCHC has a strong foundation of committed OB providers and management in place as they work towards expanding the Prenatal Program. They have consistently demonstrated positive gains in federally reported patient outcomes and actively seek to address areas for growth. Through current and future partnerships, I believe SBCHC will succeed in offering innovative and comprehensive educational and nutritional services that address the growing and evolving needs of their prenatal patient population. Their desire to expand the services and reach of their Prenatal Program speaks to their commitment to quality healthcare for all and patient empowerment.

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Appendix 1: Trimester Specific Handouts, English Text

What you need to now about the First Trimester

Your Changing Body

A missed period is often a sign of pregnancy. Your due date is calculated from the first day of your last period. You may not look pregnant to others, but will feel your waist getting thicker. As your pregnancy progresses you may find sleeping with a pillow under your abdomen and another in between your legs more comfortable.

Discomforts

- Have you had any of the following normal symptoms?
 - Tender/swollen breasts
 - Frequent urination
 - Nausea or vomiting
 - Fatigue
 - Moodiness
 - Bloating
- Have you been feeling nauseous or experiencing vomiting?
 - This is called morning sickness and it can happen any time of day. For relief:
 - Take vitamin B6
 - Eat often but in small portions
 - Keep dry toast or crackers by your bed to eat in the morning before you get up
 - Drink a lot of water
 - By the end of this trimester these symptoms should decrease.
- Have you been feeling more tired?
 - Your body is going through many changes and needs more rest!
- Have you noticed your sense of smell is stronger?
 - This is normal! Avoid the scents that make you feel nauseous.
- Have you been developing more or new acne?
 - Cleanse a few times a day with a mild cleanser to treat. Avoid acne medications that contain Retin-A.
- Have your breasts been feeling more tender or sensitive?
 - Your breasts are preparing for nursing the baby so swelling, soreness, and darkening nipples will occur. You may also experience leaking of a thick yellow fluid called colostrum. All of these symptoms are normal.
- You may also experience constipation. Drink a lot of water and eat more fiber for relief. Try to eat your meals more slowly, avoid gum, and sodas to reduce gas.

Nutrition

Folic acid is **VERY** important! It is a nutrient that helps prevent some birth defects like spina bifida and anencephaly. Folic acid is included in your prenatal vitamins.

Be sure to get enough iron.

Foods with iron:

- Lean beef and pork

- Dried fruits and beans
- Sardines
- Green leafy vegetables

Diet

It is important to keep your weight in a healthy range! During pregnancy you should increase your calorie count by 300 calories. How much you weighed before you got pregnant determines how much you can gain. Limit your sugar intake. By month 3, you may start to notice the weight gain. The chart below describes the safe amount of weight you can gain based on your pre-pregnancy weight.

Pre-pregnancy weight	Recommended weight gain
Underweight (BMI < 18.5)	28 to 40 lbs.
Normal weight (BMI 18.5 to 24.9)	25 to 35 lbs.
Overweight (BMI 25-29.9)	15 to 25 lbs.
Obese (BMI 30 or more)	11 to 20 lbs.

Exercise

Try to be active for at least 30 minutes because exercise has many benefits in pregnancy.

Exercise:

- Boosts your energy levels
- Decreases backaches
- Relieves constipation, bloating and swelling
- Promotes muscle tone and strength
- Helps you sleep better

Healthy Decisions

Do not smoke or drink! Before taking any medications or herbal supplements check the approved medications list in your prenatal folder.

Other Considerations

By month 3 you may notice sudden changes in your mood, skin texture and tone. Mood swings are normal because of all the changes your body is experiencing. Darkening skin and stretch marks are also normal changes. Limit exposure to the sun, use sunscreen, and use moisturizers on stretch marks. If you develop a cold, flu, or experience diarrhea look at the approved medication list before taking anything to relieve your symptoms.

Prenatal Care Visits

At this stage you should be well into your prenatal visits. These visits are really important to keep track of your health and the health of your baby.

Special Concerns

Miscarriages can happen at any point, but are especially common in the first trimester. If you experience vaginal bleeding and cramping, go to the clinic to be evaluated. Try to reduce stress, eat healthy foods, and keep your prenatal appointments to track your baby's health. It is important that you are aware of things that could be harmful for your pregnancy like **sexually transmitted diseases (STD) and domestic violence**. If you think you may have been exposed to an STD get tested as soon as possible. If you are in an emotionally, physically, or verbally abusive relationship let your provider know. They can give you information about where you can get help.

If you experience any of the following symptoms, please go to the Emergency Room:

- Water breaking
- Contractions every 5-10 minutes apart for 1 hour
- Vaginal Bleeding
- Temperature of 101° or greater with chills
- Hypertension symptoms (severe headache, double or blurred vision, seeing spots before your eyes, ringing in ears)
- Trauma to abdomen
- Vomiting or diarrhea that lasts 8 hours
- Baby's movements have decreased in the last 24 hours or you don't feel movement for 4 hours

Emergency contact numbers

OB Triage 713-566-5742

LBJ Hospital 713-566-5503

Ben Taub Hospital 713-873-2000

Ask a Nurse 713-633-2255

What you need to know about the Second Trimester

Your Changing Body

During these months most women feel great and some people call the second trimester the "honeymoon period" of pregnancy. For most women the following are common:

- Morning sickness goes away
- Energy levels are up
- Pregnancy is starting to show
- You can feel baby moving between weeks 16 and 18

Discomforts

- Round ligament pain
 - As your baby grows, the round tissues supporting your uterus pull up and stretch. Sometimes this can cause pain or a dull achy feeling.
- Your gums may swell and bleed.
 - Be sure to floss and brush your teeth daily
- You may experience more saliva.

- You may develop spider veins.
- Common discomforts during month 5 include:
 - Congestion or feeling stuffy,
 - Nosebleeds
 - Lower back pain
 - Dizziness
 - Forgetfulness
- As your pregnancy progresses it is important for you to slow down! Moving around more slowly when you change positions helps prevent dizziness. When you feel dizzy lie down for relief.
- Towards the end of this trimester you may experience:
 - Heartburn
 - Hot flashes
 - More aches and pains than normal
- As your baby grows, the pressure of your uterus against your stomach causes heartburn. Eating 6 small meals a day instead of 3 may help. Remember:
 - Eat slowly
 - Drink liquids in between meals instead of with your meal
 - Avoid spicy or fried foods, chocolate, and citrus fruits
- For aches and pains you can take regular strength Tylenol. **DO NOT** take aspirin or ibuprofen.
- Towards the end of this trimester you may feel off balance more often. The growth of your belly shifts the balance of your weight. If you happen to fall and begin feeling contractions contact your provider immediately.

Nutrition

Make sure the foods you eat the most are healthy choices. Healthy options that help you fight hunger include:

- 100% whole wheat or multigrain bread
- Oatmeal
- Whole wheat pasta
- Brown rice
- Sweet potato
- Corn
- Yam
- Beans
- Apples
- Oranges
- Peaches
- Carrots and other vegetables

Foods rich in Omega-3 fatty acids include:

- Fish (salmon, tuna, trout, sardines)
- Flax seed
- Broccoli

- Cantaloupe
- Kidney beans
- Spinach
- Cauliflower
- Walnuts

Choline is an important nutrient that can be found in:

- Chicken
- Beef
- Eggs and milk
- Peanuts

Diet

Your appetite is increasing and you may want to snack during the day. Healthy snack options are:

- Whole grain crackers and pretzels
- Fruits
- Vegetables
- Low-fat cheese and yogurt

Avoid these types of fish while pregnant and breastfeeding:

- Shark
- Swordfish
- King mackerel
- Tilefish

Avoid raw and undercooked seafood and raw eggs. Wash your fruits and vegetables before eating them. Drink a lot of water.

Exercise

Walking is a good form of exercise. Be sure to wear comfortable shoes and clothes. Go for a 10-minute walk first. As that gets easier add 5 minutes each time until you can do one 30-minute brisk walk each day. Remember: wear shoes that give support, drink lots of water, and stretch before you start. Keep your heart rate below 140 beats per minute.

Healthy Decisions

Between 16-20 weeks schedule an ultrasound to find out the sex of your baby. You will need to make several decisions about your labor and delivery including:

- Choosing a hospital to deliver
- Whether you will use anesthesia during labor
- Whether you will breastfeed
-

Other Considerations

This is a good time to pick a Pediatrician for the baby. After you give birth, the Pediatrician will take over from the prenatal provider to care for your child. Spring Branch provides pediatric care

at all three clinics. We would be happy to continue to serve you and your family after delivery.

Ask us for more information about pediatric and family care at your next appointment!

Start to figure out how you will cover new expenses including childcare.

If you've had challenges so far in your pregnancy traveling is not recommended. If you must travel far, take your pregnancy records with you. If you are planning to travel out of the country, consult your health care provider.

When commuting always wear your seatbelt and position the lap belt below your belly.

Try sleeping on your side while keeping both knees bent, placing a pillow in between your knees and another in under your stomach, or use a full body pillow.

Sex during pregnancy won't hurt the baby. If you are having a normal pregnancy, sex with your partner is okay.

Special Concerns

Towards the end of the trimester it is normal for your heart to beat faster. Vaginal discharge can increase during pregnancy. If your discharge changes color or has a bad odor tell your provider about these symptoms.

What you need to know about the Third Trimester

Your Changing Body

This is the most active time for your baby because of rapid growth. You will feel kicking, rolling, and more. Also, it is normal to feel really tired. *Remember, short naps help!*

Discomforts

Lower back pain may increase during this trimester

Sometimes, pressure on your sciatic nerve causes pain in your lower back that spreads down your leg and may cause numbness in your feet. Contact your provider if you are experiencing these symptoms.

To relieve constipation:

- Exercise
- Drink plenty of water
- Eat foods with fiber (fruits, beans, vegetables, bran-cereal)

When your stomach tightens you are experiencing small contractions. This shows your body is preparing for birth. Typically, small contractions occur towards the end of the day, after physical activity or sex.

If you feel itchier around your stomach and breasts, it is because of the stretching of your skin around these areas due to growth.

Some women develop hemorrhoids. Hemorrhoids are painful itchy varicose veins in your rectal area that develop from pressure pushing downward.

You may experience increased urination.

Snoring is also common during this trimester due to the weight of the baby and certain sleep positions.

Your legs may swell due to the weight on your lower body. For relief:

- Avoid standing for long periods of time

- Don't sit with your legs crossed
- When possible prop up your legs

Towards the end of this trimester you may notice your contractions are getting stronger. Start timing them. When you are in labor your contractions will be 5-10 minutes apart and last for 30-90 seconds each.

It may be difficult for you to get comfortable so you can sleep. Try and get as much rest as you can in these last few weeks.

Nutrition and Diet

Water and fiber are very important at this stage to help your digestion. Keep up the healthy eating and take your prenatal vitamins

Calcium is an important nutrient for strong bones and teeth. Calcium rich foods include dark leafy greens and almonds.

Vitamin C is another important nutrient. Vitamin C rich foods include:

- Citrus fruits, strawberries, broccoli, and tomatoes

Remember to eat small frequent meals because your stomach size has decreased and to help keep your energy up.

Exercise

Want to try a different exercise option? Swimming is a good option because it works your entire body and heart.

Other Considerations

Nesting is when a mom-to-be feels the urge to prepare the home for baby. While you prepare, don't exhaust yourself and ask others to help you complete the tasks you want to get done.

Depression, anxiety, and stress can affect anyone. If you are experiencing the following symptoms for at least two weeks contact your provider:

- Daily depressed mood
- Loss of interest in activities
- Feeling hopeless, worthless, or guilt
- Abnormal sleeping patterns
- Loss of appetite
- Feeling like you have no energy
- Struggling to pay attention

It is recommended that you tour the hospital where you plan to have your baby.

For pain relief during labor you have two drug options:

- 1) Epidural
- 2) IV pain relief

Try to pack for the hospital a few weeks before your due date. Make a list of what you will need and go through it as you pack. The most important item to have ready is the **car seat**. You **must have the appropriate car seat** secure in your car for the hospital to let you leave with your baby.