

Congratulations on your pregnancy!

Welcome to our practice



We are pleased you have chosen our office for this exciting time in your life. Our goal is that you will have a healthy pregnancy and delivery. Our commitment is to provide the best care for you and your baby.

We know this is a special time for you and your family. During the coming months you will be going through many changes both physically and mentally. Please feel free to ask us questions and let us know how we can better meet your needs.

Sincerely,

Handwritten signatures of Dr. Peters and Dr. Kroeker in black ink.

Dr. Peters and Dr. Kroeker

Office Information

Address:

7050 N. Recreation Ave Suite 101
Fresno, CA 93720

Office Hours:

Monday - Thursday 8:00-5:00
Friday 8:00-1:30

Phone Hours:

Monday - Thursday 8:00-11:45 and 1:00-4:30
Friday 8:00-1:30

Important Telephone Numbers:

Phone number 559-325-3515
Fax 559-325-3527
After hours 559-325-3515
Press zero once message starts to connect with exchange and speak to the on-call physician

Billing questions 559-325-3515

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What is my due date?

Your Due Date is _____.

You can calculate your due date by subtracting three months from the first day of your last normal menstrual cycle and adding one week. For example, if your period started on August 13, subtract three months (May 13) and add one week, which gives you the due date of May 20. You may have an ultrasound that differs by a few days or weeks. We will inform you if that changes your due date or not. Remember this only marks the 40th week of your pregnancy, and most women do not deliver on their due date. First-time moms will frequently pass their due date. Do not get discouraged if this happens to you.

How often am I seen in pregnancy?

The typical schedule for an uncomplicated pregnancy is as follows: during the first six months, you will come about once a month. Starting at 28 weeks or around seven months you will come in every two weeks. The last month of pregnancy you will be seen every week until you deliver. If you are having any complications or other problems, you will be seen more often as needed.

Each visit we will check your urine, weight, and blood pressure. We will measure how much your uterus is growing and listen to heart tones of the baby. Each visit there will be new topics to discuss and any questions you have we will be happy to answer.

I had a cesarean section previously. Will I have another one?

Most patients with a prior c-section will have the option of a repeat c-section or a vaginal birth after c-section (VBAC). For those who elect to have a repeat c-section, you will arrange the surgery day as you approach your due date. Usually, the surgery day is around one week prior to your expected due date. If you go into labor prior to this time, you will have your surgery at that point with the doctor on call at that time. If you choose a VBAC, we will discuss with you the risks and benefits of a VBAC and whether you are a good candidate for this or not.

Where can I deliver my baby?

Our practice delivers at Clovis Community Hospital.

What medicines can I take?

Our preference is to avoid all medicines in pregnancy if possible. Please discuss with us any medicines you have been taking or would like to take, and we will let you know if they are safe for your baby. Please also ask before taking any herbal medicines or tea; these are medicines as well and not necessarily safe in pregnancy.

Listed below are some safe medications that you can take as needed:

Headache, backache, sore muscles, fevers	Tylenol
Allergies/Colds/Coughs	Robitussin, Sudafed, Claritin, Zyrtec and Benadryl (for bedtime use)
Heartburn	Tums, Maalox, Mylanta
Constipation	Colace, Milk of Magnesia, Metamucil, Miralax
Yeast infections	Monistat or over the counter medicine



Why do I have my blood drawn?

We will perform several important tests on your blood. We need to know your blood type, if you have had exposure to various diseases like rubella, hepatitis, syphilis, and chicken pox, and your thyroid level.

Later in your pregnancy we will ask you to check your blood for diabetes in pregnancy. This check consists of three blood draws: one before and two after drinking a sugar solution (the drink tastes like orange soda). You will need to be fasting for this test.

What is the purpose of the AFP test?

The California Prenatal Screening Program can help detect some birth defects. Please refer to the brochure given on your first visit. While a voluntary test, it is mandated by the state that we offer this option. Please inform your healthcare provider if you consent or decline testing. The testing includes a blood test and ultrasound in the first trimester and blood test in the second trimester.

Will I have an ultrasound during my pregnancy?

We will schedule an ultrasound for you around 18 to 20 weeks to look for any abnormalities in your pregnancy. If you want to know the gender of your pregnancy you may ask at that time, but remember there is no guarantee that we can confirm the gender of your baby definitively. If we are unable to tell the sex of the baby, you can arrange to return for a second ultrasound to try again for a small fee.

What can I do for morning sickness?

One of the most difficult symptoms of pregnancy is nausea and vomiting. Most women have nausea in pregnancy, and the severity ranges from mild to severe. It can last all day, so calling it morning sickness may be misleading. It typically lasts for up to 16 weeks, although some may suffer throughout the entire pregnancy. Listed below are some tactics that may help with nausea.

1. Eat around 5-6 times a day, but only eat a small portion at a time.
2. Try not to get too hungry between meals, and do not overeat.
3. Eat high-carbohydrate, low-fat foods like bananas, bread, rice, and pasta.
4. Avoid spicy or greasy foods. Avoid acidic foods like orange juice or apples.
5. Add protein to each meal and snack.
6. Lemonade may help reduce the extra saliva that is common with nausea in pregnancy.
7. Drink liquids between meals instead of during meals.
8. Keep crackers at your bedside and eat them before getting out of bed in the morning.
9. Stick to foods and beverages that are either cold or hot, not room temperature. Frozen fruit popsicles are great to have on hand.
10. Sea bands, a form of acupressure, apply pressure to your wrists. You can purchase them at the drugstore. While inexpensive and drug-free, there is no guarantee that they will work.
11. Acupuncture may also help and is safe in pregnancy.
12. Avoid activities that make your nausea worse. If cooking makes you ill ask family members to help cook dinner.
13. Go outside for fresh air.
14. Rise slowly from lying down or sitting.
15. Get plenty of rest.
16. Herbal treatments with mint, ginger, or orange may help and are safe.
17. If you are still struggling, talk to your provider about stronger anti-nausea medications.



I am bleeding slightly. Am I having a miscarriage?

Many women will experience a miscarriage during their lifetime. It is a sad time for you and your partner, but remember it is not because of anything you did or did not do. It is out of your control and is usually a sign that the pregnancy's formation was not just right.

If you begin to bleed and cramp this may mean that you are going to have a miscarriage. Brownish discharge or light bleeding near the time of your first missed period is normal. However, bleeding that is as heavy as a period is not normal and needs evaluation. If you pass any tissue, please save it and bring it to us. If you begin bleeding at nighttime and it is not more than a period, please call us in the morning to be seen. If you are bleeding more than a pad an hour, then go to the emergency department at Clovis Community Medical Center.

What is preterm labor?

A contraction is a tightening feeling of your uterus that makes your abdomen feel firm and ranges from barely noticeable to very painful. They last from just a few seconds to a minute. Throughout your pregnancy, you will experience mild contractions that are irregular and not painful. These are normal and they help prepare the uterus for labor. These contractions become abnormal when they become more frequent and painful before 36 weeks. You may also experience contractions as back pain, which come and go, or as a pressure in the pelvic area. If you are experiencing any of these symptoms, try lying down for one hour and drinking a large glass of water or juice. Record the contractions. If you are having more than four contractions an hour for two hours that last longer than 30 seconds, please call the office. We may arrange for you to come to the office or go to the hospital for evaluation of preterm labor.

Other symptoms to watch for:

1. Severe backache
2. Fainting or dizziness, not relieved by lying down and eating
3. Severe headaches, not relieved with Tylenol
4. Swelling of face or hands, or severe rapid swelling of the feet or ankles
5. Blurred eyesight or visual disturbance
6. Fever or chills
7. Pain or burning sensation when urinating
8. Severe nausea and vomiting
9. Vaginal discharge that is bloody, greenish, yellow, or bad smelling or that occurs with burning and itching
10. A large gush of fluid or a continuous feeling of wetness

If you experience any of the following signs or symptoms, call the office right away.

If you call the office after office hours, press 0 to connect to the exchange. The exchange will page the doctor on call. If you do not hear from him or her within 15 minutes, go to Clovis Community Medical Center.

1. Bleeding from the vagina, requiring changing a pad every hour or less
2. Severe pain, cramping or lower abdominal pressure that does not go away
3. Stopping, or noticeable reduction in baby's movements



Am I in labor?

Contractions in labor are usually strong, painful, tightenings of the uterus. They last for 30 to 60 seconds, with a break in between. When you begin to feel contractions, start recording the time and duration. When you have contractions that are every 5 minutes for 1 to 2 hours, call our office, and we will let you know if you should come into the office or go directly to the hospital. After hours, we recommend that you present to the hospital. You do not need to call.

Rupturing your membranes is usually associated with a loss of a large amount of clear to yellow fluid. It may also be subtle, a slow leak causing you to feel wet. Sometimes it is difficult to tell if it is urine or normal discharge causing wetness. If there is any question, let us know, and we can test the fluid to see if you are ruptured or not. Once you have ruptured, you will need to go to the hospital for delivery.

Call our office or go to the hospital immediately if you have any significant increase in bleeding or sense a decrease in fetal movement.

Can I work during my pregnancy?

Most women can work up to the time of delivery. Our preference is to limit heavy lifting or strenuous work during the latter half of pregnancy. In general, your ability to work depends more on you. If you reach the point where you feel you can no longer work, let us know, and we can help you file for disability.

Can I exercise during my pregnancy?

We encourage exercise for our pregnant patients. Keep to, but do not exceed, the exercise level you were at prior to becoming pregnant. Most studies of exercise in pregnancy have shown health outcomes with moms feeling better if they stay fit, including a safer vaginal delivery and less risk for childhood overweightness for your baby. If you were not exercising prior to pregnancy, we encourage you to start a mild exercise program of walking 30 minutes at least three times a week. Swimming and prenatal yoga are other recommended forms of exercise.

Can I have a flu vaccination?

If you are in your 2nd or 3rd trimester during the flu season (winter time), it will be recommended to you to receive the flu vaccine. The vaccine, administered in the fall, helps prevent a bad illness during your pregnancy.

Can I take a vacation during my pregnancy?

Traveling during pregnancy is fine, but avoid staying in the same position for a prolonged period. This kind of inactivity may put you at risk for a clot in your leg, which can be very serious. If you must travel a long distance, we recommend no more than 6 hours a day and stopping every 2 hours to stretch your legs and move around. You may also want to take a copy of your records with you in case you need an examination in another city. Avoid travel altogether after 24 weeks of pregnancy.

Remember always to wear your seatbelt when traveling in a car. Place the lap belt under your belt as it grows.



What should I be eating?

A healthy diet is important for your baby's growth and development. You do need to eat a little more than usual (around 2400 kcal/day) of a balanced diet. We also recommend you take prenatal vitamins and calcium for supplementation of your diet. Iron may be advised on a case-to-case basis. For more information, visit our website and reference the magazines in your folder.

Try to keep these guidelines in mind when planning your meals.

- 3 c. milk and milk products
- 2 ½ c. vegetables
- 2 c. fruits
- 6 oz. grains
- 5 ½ oz. meat and beans
- Calcium foods: 4 servings daily
- Vitamin C foods: 2 servings daily
- Iron-rich foods: some daily
- High-fat foods: 4 full or 8 half servings daily
- Fluids: at least eight 8 oz. glasses daily

Avoid smoking and alcohol during your entire pregnancy.

We recommend that you avoid coffee and other caffeinated drinks as much as possible. If you feel like you need caffeine, limit yourself to 200 mg of caffeine: or, about two cups of coffee, 5 cups of black tea, or 3 cans of soda. Drinking more than two cups of coffee a day during pregnancy increases an unborn baby's risk of childhood leukemia by 60%. Caffeine can trigger changes in the baby's sleep pattern or normal movement pattern in the later stages of pregnancy. Researchers also believe caffeine can act as a "DNA inhibitor," possibly altering the DNA of a fetus' cells, which makes it more susceptible to childhood leukemia.

Where can I take childbirth classes?

We do not offer our classes at this time but would encourage you to attend classes for breastfeeding and childbirth preparation. They are helpful for you and your labor partner to get you mentally ready for the labor and be more successful at breastfeeding. There are various places to call for information about classes. Visit our website for a listing of locations and their contact information.

What do you think about breastfeeding?

We recommend all women breastfeed their babies and we encourage you to take a class to better prepare you for breastfeeding. The American Academy of Pediatrics states a year of breastfeeding is best. Clovis Community Medical Center has lactation specialists who can help with breastfeeding after the baby is delivered and can help you once you have gone home.

Breastfeeding moms need a higher caloric intake than others: about 2800 kcal/day to keep up. Do not go on any strict diets, because you may deprive your baby of necessary nutrients. You will lose weight with time. You will also need to continue taking your prenatal vitamins and calcium to help supplement your diet.



Who will be the doctor for my baby?

Picking a pediatrician for your baby is an important decision. They will see your baby the morning after you deliver and the hospital will notify your physician when you have delivered. You will take your newborn to the doctor frequently the first year, and you will want to be in a place where you feel your needs are being met. Meet with your doctor before the delivery to get to know him or her. Your insurance may prefer certain providers, and you can obtain a list of providers from your insurance company.

Here is a list of questions that might help you in selecting a pediatrician.

1. How much does he charge per visit?
2. Does she accept telephone consultations?
3. What is the after-hours coverage?
4. Who covers for her while she is away?
5. Is there a nurse practitioner who handles well-baby check-ups?
6. Has the pediatric board certified him? Or, if he is a family doctor, how much pediatric experience has he had?
7. With which hospital is she affiliated?
8. Is it likely that he may retire before the child outgrows his services?
9. Will she visit your newborn in the hospital? What procedures comprise her newborn exam?
10. From your interview, do you feel that you would be able to call him as frequently as you feel necessary when the baby first comes home?
11. How does she feel about breastfeeding and bottle-feeding? What method of formula preparation does she recommend?
12. Where should you take your child in case of an emergency? Should you call first before going to the emergency room?
13. Is her office conveniently located to your home?
14. What baby care books does he recommend?

What do you think about saving the cord blood of my baby?

You have the option of saving your baby's cord blood and having it frozen and stored in a blood bank. This blood can be used later for either your child or a similar recipient in need of a bone marrow transplant for different illnesses like leukemia or other cancers. Cord blood contains stem cells, which are immature blood cells that can replicate and produce mature blood cells.

The benefit of saving the blood at the time of birth is that it is a perfect match for your child, and it is easy to obtain. The disadvantage is that it is fairly expensive (around \$2000 initially then \$100 each year), and the chances are high that you will never need it. It is like an insurance policy that you hope you will never need but will be glad of if you do.

The decision to save blood is purely your own. We feel you at least need to be aware of the option so that you can decide for yourself. If you want more information, a helpful website is www.parentsguidecordblood.com. It goes into more detail and gives information on the different companies and prices.



Included here is also a list of companies and numbers you can use for more information.

California Cryobank Inc.	800-400-3430	www.cryobank.com
Cells for Life, Ltd.	905-472-0060	www.cellsforlife.on.ca
CorCell	888-3-corcell	www.corcell.com
Cord Blood Registry	888-cordblood	www.cordblood.com

What other reading material do you suggest?

The Complete Book of Breastfeeding, by Marvin Eiger M.D. and Sally Wendkos Olds

What to Expect When You're Expecting, by Arlene Eisenberg, Heidi Murkoff, and Sandee Hathaway

What to Expect the First Year, by Arlene Eisenberg, Heidi Murkoff, and Sandee Hathaway

When Pregnancy Isn't Perfect, by Laurie A. Rich

Your Baby and Child from Birth to Age Five, by Penelope Leach

Caring for Your Baby and Young Child: Birth to Age 5, by Steven Shelov, M.D

