

before baby.com



# Your Little Guide to Pregnancy & Delivery

Brought to you by  
<http://www.BeforeBaby.com>

before baby.com





Your First Trimester .....1  
Your Second Trimester.....3  
Your Third Trimester.....5  
Signs of Labor .....6  
Labor and Delivery .....7  
Emergency C-section .....8  
After a Vaginal Delivery .....11  
After a C-section Delivery.....12





## Your First Trimester

The first three months of your pregnancy is called the first trimester. It is here that you need to start your pregnancy off right by establishing a healthy prenatal care routine. You can start this routine by visiting your health care provider.

What to expect on your first visit to your health care provider

Your health care provider will need answers to several questions, so be prepared. The questions that he or she will ask is important information that will help to provide and establish a medical history he or she may need to draw upon at a later date.

You will be asked about your menstrual cycle, what you use for contraceptives, if you have had any previous pregnancies, and if you have any allergies or other medical conditions. Your health care provider will also ask if you are taking any prescription or over the counter medications. If you are not asked, you should still tell your doctor about any family genetic disorders or family history of any congenital abnormalities.

You will be asked when you last period was so the healthcare provider can establish the due date. He or she will do this by adding 40 weeks to the date of when you had your last period.

You will be given a physical exam. The doctor will need to know how healthy you are as well as how healthy the baby is. You will be weighed, have your blood pressure taken, and have your height recorded during this exam.

The doctor will also give you a pelvic exam and a pap test. From this exam, the doctor will determine if there are any infections or other abnormalities, such as cancer. The stage of your pregnancy can be determined by the change in your cervix and the size of your uterus.

You will also be given a blood test, not only to determine your blood type, but also the Rh factor which is a specific kind of protein that is on the surface of your red blood cells. The blood tests will also show if you have had any exposure to diseases like syphilis, measles, mumps, rubella, or hepatitis B.



Your urine will be tested for specific amounts of sugar and protein. Too much sugar or protein in your urine indicates diabetes or kidney problems.

Your health care provider will talk to you about vitamins, exercise and other lifestyle changes that may need to happen, such as not smoking.

### Additional visits to schedule

During your first trimester, doctor visits will be scheduled for every four to six weeks. At these visits, you will be weighed and your blood pressure taken. It is here at these visits that you will need to talk about any questions or concerns that you have. Your doctor is a great support system for you, so it is important to be honest and open about anything you need to discuss. Also during your first trimester is when you will have an ultrasound. This will give you your first look at your new baby. This is also where your doctor will be able to check how the baby is growing and developing.

### Physical changes in your body

Some physical changes in your body may include:

- Tender breasts
- Being nauseated, mostly in the morning, but may last all day
- Being extra tired
- Emotional changes
- Some dizziness. If your dizziness occurs with pain in the abdomen or vaginal bleeding you will need to call your doctor right away.
- More frequent urination, or leaking due to coughing, sneezing or laughing.

The most important thing is to make an appointment to visit with your doctor or health care provider as soon as you know, or if you suspect you may be pregnant. Taking care of yourself and your baby will provide you with a much happier and healthier pregnancy.



## Your Second Trimester

The second trimester includes the fourth, fifth, and sixth month of your pregnancy. Here's what you can expect.

### 1. Monthly visits to your doctor or health care provider

During these monthly visits talk to your doctor about any concerns or symptoms you have had or that you are wondering about. Even if you may think they are insignificant, your doctor will want to know. To your doctor, there is no such thing as a silly question.

Your doctor will measure the size of your abdomen by measuring from the top of your uterus to your pubic bone in centimeters. The number of centimeters will usually equal the number of weeks into your pregnancy you are.

The baby's heartbeat is also listened to by a device called a Doppler.

Your baby will start kicking or moving at about 20 weeks, so it is good to tell your doctor when you notice movement.

Your urine will still be tested for levels of sugar and protein. You will also be checked for signs of gestational diabetes, which is a form of diabetes that is temporary and can occur during pregnancy.

Pelvic exams are generally not required in the second trimester, unless there is a concern from your doctor or health care provider.

### 2. Other tests that may be offered

In your second trimester is when you may be offered a few optional tests

- Blood tests to check for disorders such as spinal bifida or Down's syndrome
- An ultrasound to check on your baby's growth and development



- If the results of your blood test or ultrasound are a concern to your doctor, he may want to do a test that is more invasive called amniocentesis.

### 3. Some physical changes to your body during your second trimester

- Larger breasts as your milk producing glands inside your breasts grow bigger
- A bigger belly as your uterus expands for the baby. You may gain about 4 pounds per month.
- Braxton Hicks contractions strengthen your uterus. They are painless contractions that happen in your lower abdomen and groin area.
- Skin color changes due to increased blood circulation -- darker colored skin around the nipples, on your face, and on the line that runs from your belly button to your pubic bone.
- Increased blood circulation in your mucous membranes cause the lining of your nose and air way passage to swell, resulting in snoring, congestion, and nosebleeds. The extra blood circulation may also cause bleeding in your gums while brushing and flossing.
- Expanding blood vessels will cause occasional dizziness and maybe lower blood pressure. Try not to stand for long periods of time and don't stand up too fast after sitting or lying down.
- Leg cramps caused by the pressure from your uterus to the veins that return the blood from your legs
- Heartburn and constipation is caused from a slower digestive process that allows nutrition to reach your baby.
- Shortness of breath
- A normal vaginal discharge that is thin and white
- Increase chance of bladder and kidney infections due to slower flow of urine and an increase in size of your uterus. Call your doctor if you suspect either one of these two infections.

During your second trimester, you will experience an increase in uncomfortable situations, and that is why you need to have a basic understanding of what is normal and what is not. Also remember, your health care provider is there for both you and your baby.



## Your Third Trimester

The further into your pregnancy you go, the more your doctor will need to monitor your blood pressure and weight. It will also remain very important to monitor the baby's heartbeat and movements. You will also have weekly checkups during your last month of pregnancy.

### 1. Being tested for group B strep

One of the things you will be tested for in your third trimester is a bacterium called group B streptococcus, or GBS. It is harmless in adults, but can cause the baby to become critically ill. If GBS shows up on the swab from your vagina or rectum, you will be administered an intravenous antibiotic during your labor to help protect the baby.

### 2. Resumption of vaginal exams

During the pelvic exams in your third trimester, your doctor will check to see if your baby is positioned head first or butt first, also known as breech. Your doctor may want to try to apply pressure to your abdomen to try to turn the baby. If the baby will not turn to the head-first position, you may need to have a Caesarean delivery, or C-section.

As you become closer to delivery, your cervix will begin to soften and dilate.

### 3. Physical changes to your body in your third trimester

- Backaches and sore hips are common as your baby gains weight. Try sitting on chairs with a good back support, or using a heating pad, or find someone who can give you a massage.
- Swelling of the feet and ankles is normal. Retaining fluids and blood vessels becoming dilated will leave your face and eyelids puffy in the morning.
- Shortness of breath is also normal as your uterus becomes bigger under your diaphragm.
- Heartburn may occur
- Spider veins, varicose veins and hemorrhoids may occur. Try elevating your legs and drinking lots of liquids.



- You may notice more stretch marks that become itchy.
- Your breasts are still growing.
- You may feel an increased pressure on your bladder.
- A continuation of the Braxton Hicks contractions
- A total weight gain of about 25-35 pounds

During your last trimester, as your baby grows, so will your level of discomfort. The best thing to do is keep in mind that you are almost there. Try doing positive things that will help pass the time. Pamper yourself as much as possible.

## Signs of Labor

You're sitting at your baby shower and you ask the inevitable question. "How will I know if I'm in labor?" Of course, through a chorus of laughter, you will hear those famous words being echoed, "Don't worry, you'll know". And you will. But at the same time it will be comforting to know ahead of time a few signs, so you'll know that labor is on its way.

Your doctor will usually provide a handout of signs to watch for as you get nearer to your due date. Here are some items that may be listed on it.

- You may come up with this sudden burst of energy to get things accomplished around the house; this is what is called the "nesting mode".
- If you have a bloody show when you wipe after going to the bathroom, or if it shows up in your underwear, it is a sign that your cervix is starting to dilate. You can also get this bloody show after sex or after a vaginal exam in your late pregnancy.
- You may notice some mucous discharging. It may discharge gradually or the mucous may drain all at once.
- Loose stools or diarrhea, help cleanse the body and prepare it for labor and delivery.
- Contractions will be happening to open and dilate the cervix in preparation for the birth. Contractions don't always mean you are starting labor. Your contractions need to strengthen to build up to labor.
- Backaches that start and stop will sometimes mean that you are starting labor. These aches in your back may also be signs that you are having "back labor".



- If your water breaks that is generally a sign that you are in labor. One thing to remember here is after the water breaks, don't have sex, or take a bath. Also, call your doctor if your water breaks.

Here is a checklist to go over to detect true labor:

- Contractions are getting closer together
- Contractions are getting much stronger
- Contractions make you hurt all over
- Contractions are lasting longer
- When walking, contractions feel stronger

Not everyone's labor and delivery is ever the same. But if you know some of the basics, then you will be able to leave the panicking to your partner. Just make sure you have your bags packed and you'll be set to go.

## Labor and Delivery

A good sign that your labor has started may go something like this; you may feel a series of cramps, almost like menstrual cramps in your lower back or pelvic area. These cramps are happening on and off for at least an hour, lasting about 30 seconds, increasing in strength. No matter what kind of position you put yourself in, they will not go away.

Don't start panicking, though. You still have time to stay home, relax, take a nap if possible (you may need your strength later on), go for a walk, do some reading or find some way to distract yourself so time won't seem to drag while you wait.

If your water should break or you have a bloody show, you should contact your doctor right away. He may want you to go in at that time. Otherwise, prepare to go into the hospital when your contractions have been about 5 minutes apart for the past hour. (Your doctor may provide you with other guidelines, but the 5 minute rule is common.)

When you do get to the hospital, your health care team will share with you what will be happening throughout your labor and delivery. You will probably be given a vaginal exam to determine the size of your cervix and how far you are dilated.



Your baby's position and heart rate will be constantly monitored, and you may be put on a fetal monitor to check how the baby is responding to contractions. If everything is going well, you will be unhooked from the fetal monitor.

### Your labor will come in 3 stages:

The first stage starts when your labor begins and you have dilated to 10 centimeters. The baby is making its way to the birth canal and is preparing to meet the outside world. In this stage you may find you want relief from the pain. Doctors try to encourage you to have your partner there to help you with breathing exercises or give you a massage when desired. If you feel you may need more pain relief, you may want to discuss with your doctor ahead of time about the options you have available to you.

The second stage is the delivery; when the head emerges from the birth canal and you will finally get a glimpse of your little miracle and hold him or her. You will want to discuss ahead of time, with your doctor about how much of a role you will want your partner to play in the delivery itself. Will he cut the umbilical cord? Hand the baby to you? You have many options for your partner's involvement.

The third stage is when the placenta is expelled from the body after a few more contractions.

Obviously, the length of labor will be different for each individual, according to different circumstances, but the average amount of time of labor for the first pregnancy is about 12 hours.

## **Emergency C-section**

### Reasons for having an emergency C-section

There are times when a woman needs help during labor and delivery, and inducing labor is not an option. The only other solution is to do a Caesarean delivery, or C-section.



These times include the following:

- If your baby stops moving down the birth canal and your cervix is no longer dilating.
- If your doctor feels that your baby's heartbeat can't safely handle any more labor.
- If your umbilical cord comes through the cervix, with concern that the baby's oxygen supply will be cut off.
- If your placenta is starting to tear away from your uterine wall, making it imperative that your baby be delivered immediately.
- If you have genital herpes and your water breaks.

If there is time, your doctor will explain to you why a C-section is necessary and you will be asked to sign a consent form. Your partner will be allowed to be with you in most cases. The anesthesiologist will tell you about your different choices for pain control.

The most common type of pain control is the epidural or spinal block. The lower part of the body is numbed, but you will remain conscious to view the birth of your baby.

### The process of the C-section

The doctor will cover your belly with antiseptic and cut through the layers of tissue from just above the pubic bone to the uterus. Once the doctor reaches the uterus, a horizontal cut is made and the doctor then reaches in and delivers your baby. After the baby has been examined and your placenta is removed, you will be given the baby to hold while you are being stitched up, layer by layer. After the surgery is done, then you are taken in to a recovery room where you will continue to be monitored for a few hours.

Once the anesthesia has worn off you may get either pain shots every 3-4 hours or an IV that will allow you to give yourself a safe dosage of pain reliever whenever you feel the need. With a C-section, you may expect to stay in the hospital for about 3-4 days, depending on the situation.



### The first few days after your C-section

You will probably feel somewhat groggy and nauseous after your C-section. Your incision will probably feel numb and sore. The incision itself will look puffy and darker than the rest of your skin color. When you sneeze, cough, or laugh, the area around the abdomen will be sore for a few days. You may experience a gas buildup at first, but once you are able to get up and walk a little, your system will start working again. Your stitches will be removed in 3-4 days before you are sent home.

### What happens when you leave the hospital?

Remember, that you have had major surgery, and you will not be able to do a lot of things for a while. So plan on accepting help from others.

Keep taking your medication as prescribed, drink plenty of liquids and walk, slowly at first. Your vaginal bleeding will take up to six weeks to go away.

### What kind of emotions will you feel?

If you were planning on having a vaginal delivery and ended up with a C-section birth, you may feel disappointed and cheated. You may feel like an incomplete person because you did not get your magical birth moment. All these feelings are normal. Visit with your doctor about any feelings you have so you don't have to feel like you have to suffer these feelings on your own. Also, try talking to others that have experienced the same thing, and get some perspective on what others have felt after their C-section.

You will still be likely to feel the same kinds of emotions that most mothers go through, whether they had a vaginal birth or a Caesarean birth.

The point is that you are not alone with your different feelings and emotions. So please share them with someone, if you need to. You will have enough stress with your hormones adjusting and settling in to a new life with baby around. The less stress you have, the more you will be able to relax and enjoy the precious moments with your little miracle.



## After a Vaginal Delivery

Your recovery from vaginal birth will depend a lot on what kind of pregnancy you experienced.

For example, was your pregnancy and delivery a fairly normal one, or were you blessed with one or more of these nagging problems; back pain, hemorrhoids, constipation, or varicose veins? At least 50% of all new mothers have some sort of health problem to recover from after childbirth.

### Recovering from lack of sleep

One big concern is sleep, or lack thereof. A major cause of depression is fatigue.

Some suggestions for overcoming fatigue are the following:

- Find someone who will be available to help with the work around the house -- such as helping with the other children, cooking the meals, or watching the baby so you can rest. Tell your friends and family that helping you would make an excellent baby gift.
- Take your naps when the baby does for a few weeks.
- Get away for some adult time when you can, even if it is for a short period.

### Getting your body back to normal

Remember it will take the first 6 weeks for your body to heal itself from the strain of giving birth. It will take your genital organs anywhere from six to eight weeks to start to function at their normal size.

The pregnancy hormone called relaxin will stay in your body for about 5 months. This hormone is what causes your ligaments and muscles to increase in both size and elasticity. Because of this, it is important to realize that your joints are fragile and any high impact activity should be put off for a while.

When you have completely stopped bleeding, you can try things like walking and swimming. Other exercises such as tennis or biking or low impact aerobics should wait until 4-5 months after birth.



## Losing weight

Normally, if you were thin before you became pregnant and only gained about 25-30 pounds, you may have your shape back in about 3 months. Moms who have given birth before may take up to 3-6 months to lose the extra weight. Women who are overweight may take from 6-9 months to recover their shape.

Health problems such as hemorrhoids, varicose veins, bleeding gums, and skin pigmentation, may last for months after your baby is born.

## Post-partum depression or 'baby blues'

It is very common for a woman to go through a depression after the birth of their baby. If you feel you are having this problem, please let your doctor know. He is there for your support both before and after your baby is born. Here are some of the symptoms you may feel when going through post-partum depression.

- You have a hard time keeping your concentration.
- You find yourself crying more frequently.
- You are worried about harming your baby.
- You find yourself feeling an overwhelming sense of your world crashing in.
- You find yourself having trouble with sleep.
- You feel helpless or have been contemplating suicide.
- You can't seem to recover from your sadness.

Remember, that there are lots of women who have gone or are going through this same thing. Talk to your doctor. He or she will know what to do.

Just remember, don't get discouraged. It will take time for you and your body to get back to normal. In the meantime, take the time to rest, and hold, and welcome your newest little angel to the family.

## **After a C-section Delivery**

It is important to remember that when you deliver a baby by C-section, it is considered major surgery. Your stay in the hospital will probably be about 3 days,



depending on your reason for having the C-section. You may be in pain, but there are options you can take to control it.

### Pain relief options

Your first pain relief will probably come in the form of an IV after your anesthesia wears off. Your IV will probably be removed within the first 24-48 hours and you will be encouraged to get up and go for a little walk with assistance. The walks will also help to prevent both constipation and blood clots. At this point, you will also be able to take a shower or sponge bath

After the IV is taken out, you will be given oral medications for pain. Your body will feel a normal fatigue because it is using all of its energy to heal itself. While you are in the hospital, the amount of food you eat, how much you drink, and how active your bladder and bowels are, will all be monitored.

### Risks to the mother after C-section

After your C-section, there are a few risks to think about and be monitored for:

- The lining of your uterus becoming infected and inflamed.
- Losing too much blood after surgery
- Increased risk of bladder and kidney infection
- Constipation from the medication and/or surgery
- A fluid leak that goes around your spinal cord and into your back tissues, which will result in a headache.
- Allergy reactions from the anesthesia
- Although rare, there may have to be an additional surgery to repair your bladder.
- There is also a chance you may develop blood clots in your pelvic area, legs, or lungs.

### Once you are home

- Have someone there that will be able to help you with your recovery
- Do not lift anything that is heavier than your baby. Rest, rest, rest



- Support your abdomen, especially when it comes to laughing, coughing, or sneezing.
- Drink lots of liquids and empty your bladder often to reduce the risk of infection
- Be open with your partner about sex. Cuddle and hold each other, but abstain from sex for about 4-6 weeks.
- Continue your hi-fiber diet to prevent getting constipated.

You may feel post-partum depression. If you do start feeling overwhelmed, talk to your doctor or mental health professional. Ask for a visiting nurse or join a support group. All of these options are fine. The main thing is to talk to someone. You do not have to feel alone.

Find someone who can help you recover. And also, remember, that, because your C-section is a major surgery, it will take a little longer to recover. So it is necessary to be patient. Take the time to recover as your doctor allows. In the meantime, hold your new little angel and do some important bonding.