

# A pregnancy guidebook



You are entering the most exciting time a woman can know as you watch your baby grow and anticipate your new relationship. It will be nine months of joy and anticipation, but also a time that you will deal with many physical changes and new responsibilities to ensure the health of your baby.

This pregnancy guide provides information you need to know about what you can expect, how to care for yourself and your baby, and what to do in an emergency. We encourage you to read it with your partner so that you will be informed about the coming months. Let the excitement begin!

## Contents

- 3 Office information
- 4 Pregnancy issues
- 6 Pregnancy and nutrition
- 7 Pregnancy and weight gain
- 9 Pregnancy procedures
- 10 Pregnancy medications
- 11 Pregnancy trimester stages
- 12 Pregnancy exercises
- 13 Labor and delivery
- 14 Breastfeeding
- 15 Genetic testing
- 16 Postpartum depression

# Meet our team

## Providers



Noelle Baker, MD



Jeff Chancellor, MD



Makenzie Kothmann, MD



Mark Moore, MD



Melissa Davis Pettis, MD



Zachery Pettis, MD



Erin Wait, MD



Katherine Haynes, MD  
*Gynecology only*



John Bagnasco, MD  
*Gynecology only*



Amber Koonce, PA-C



Beth Truman,  
RNC-OB, WHNP-BC



Kameron Harrison,  
MSN, RN, FNP-C



## Office information

Our medical and office staffs are here for you. We want to be available to respond to your needs and questions during this important time in your life. Below, you will find general information about appointments and contacting us.

### Hours

Monday–Friday, 8 a.m.–5 p.m.

254-772-5454

If you are unable to keep an appointment, please contact our office as soon as possible.

### Calls and prescription refills

If you need immediate attention, notify the person answering the phone. We will respond as quickly as possible.

If you call after office hours, you will connect with our answering service. Leave a message and call back if you do not receive a call within 30 minutes.

Call your pharmacy for medication refills. Please allow 24 hours for routine refills. Only emergency prescriptions will be filled after office hours.

### Appointments

First 28 weeks — Your doctor will see you once a month.

28-35 weeks — Your doctor will see you every two weeks.

The doctor will check your blood pressure, weight, urine, fetal heart tones, and fetal growth.

36 weeks to delivery — Your doctor will see you every week.

The doctor will perform a pelvic exam to assess your cervix. This may cause some spotting or light bleeding for a few days, which is normal. However, if your bleeding becomes heavy (such as during a period), notify our office.

This is a family affair, so your spouse or family members, including children, are always welcome. However, due to limited space, we ask that you limit the number of people you bring to one or two. For the safety of other expectant moms, if your child has been ill within the past 72 hours, please do not bring him or her to the office.

### After-hours problems

Call the office number if you have problems or complications after hours. The answering service will have a nurse or nurse practitioner return your call. After hours, however, the nurse on call will not have access to your medical chart. You will need to advise the nurse of any significant medical history and drug allergies.

Do not go to the emergency room for conditions that are not an emergency (earache, sore throat, nausea, cold, etc.). If you do have an emergency, it is important for you to know that our doctors admit our patients to Ascension Providence hospital only. If you go to Baylor Scott & White - Hillcrest, we will not be able to provide care for you there. If you are experiencing an emergency before 20 weeks gestation, go to the emergency room. If you are beyond 20 weeks, report to Labor and Delivery at Ascension Providence.

# Pregnancy issues

One thing is for sure: Things are about to change as your body and lifestyle adjust to the baby growing within you. Familiarize yourself with the list of possible issues below. Be sure to ask your doctor any questions you might have.

## Nausea

Nausea is certainly one of the most familiar and unpleasant effects of pregnancy. It will usually last through the first three months. Below are some ways you can deal with nausea.

- Wear acupressure wristbands 24 hours a day (available in drug stores).
- Avoid milk and water. Drink Gatorade, 7-Up, ginger ale or Sprite.
- Try chips, french fries, lemonade, sour candy and other salty or sour foods.
- Avoid cream-based foods.
- Eat smaller meals several times each day and avoid large meals.
- Take vitamin B6 — 75mg per day.
- Take ground ginger capsules — 250mg every 6 hours.
- Take Unisom (1/2 tablet) plus B6 — 25mg every 8 hours.
- Take prescription prenatal vitamins.

Call our office if the above methods fail to give you relief, or if you are unable to keep any liquids down for 24 hours.

## Headaches

Headaches can be common during early pregnancy. Migraine headaches could be worse during pregnancy, but **do not** take your migraine medication. You **can** take Extra Strength Tylenol®. If that fails to offer relief, contact our office for a prescription. During your second or third trimester, if you experience a severe headache accompanied by sudden swelling, contact our office.

## Backaches

Backaches are the result of gaining weight and the body producing an important hormone called relaxin, which causes the pelvic ligaments and cervix to relax during pregnancy and delivery. You can get some relief with exercise (see the pregnancy exercise section, page 12), good posture, and a heating pad on the low or medium setting. The nurse can also provide you with the names of massage therapists who specialize in back massage for pregnant women.

## Shortness of breath

During the later stages of your pregnancy, you could experience shortness of breath. Try sleeping while propped up on pillows, and call our office if the problem becomes severe.

## Constipation

If your prenatal vitamin causes you to become constipated, drink lots of fluids, exercise, eat fruits and raw vegetables, bran and whole-grain bread. You can also take mild laxatives or stool softeners such as Surfak® or Colace®.

## Hemorrhoids

If hemorrhoids become a problem, treat with Dermoplast® spray, Tucks® pads, or Preparation H®. You can also soak in a warm bath and drink plenty of liquids. Avoid constipation, which will make hemorrhoids worse.

## Fainting and dizziness

Fainting and dizziness are common during pregnancy. The best way to prevent these is to move your legs and feet frequently, and avoid sitting or standing in one place for an extended period of time.

## Heartburn and indigestion

Avoid large meals by eating five or six small meals each day. Fried, greasy and fatty foods, fizzy drinks, citrus juice, and fruit can cause heartburn and indigestion. Try to eat several hours before going to bed. It might also help for you to sleep propped up. Refer to the pregnancy medications list for products that you can take for relief. If they do not help you, let us know so we can give you a prescription.

## Round ligament pain

As your uterus grows, you may experience sharp pains around your lower abdomen or groin. They are painful, but there is no need to be concerned. They are not a sign that something is wrong with you or your baby. If it happens, relax and be still. Activity will usually make it worse.

## Swelling

Swelling of your feet and ankles is possible. The swelling is not harmful, but you can help control it by avoiding salty foods and drinking more water. If there is sudden swelling of your face and hands, or if headaches or blurred vision occur with the swelling, contact our office immediately.

## Weight gain

You are most likely going to gain weight during pregnancy. The amount of weight gain is typically about 20-30 pounds. To decrease the possibility of stretch marks, it is best to keep your weight under control. For more information, there is a pamphlet available in our office.

## Nosebleeds and gum bleeds

Nosebleeds and gum bleeds are another common occurrence during pregnancy. They are merely another sign of the changes that you will go through during pregnancy, and are not a cause for concern.

## Sex

Many couples are concerned about having sex during pregnancy. However, sex will not cause any harm to you or your baby, so you can continue to have sex throughout your pregnancy. Later in pregnancy, you will feel contractions after sex, but they usually last only a few hours. You may notice some light bleeding or spotting after intercourse. Tell the nurse if it happens often. If there is a concern or complications, your doctor could tell you to stop having sex.

## Douching

Avoid douching during pregnancy.

## Saunas and hot tubs

Avoid very hot water and steam during your pregnancy, and do not sit for long in a hot tub over 99 degrees.

## Mucus plug

During pregnancy, a mucus plug will block the cervix opening. The plug is yellow, white, brown or blood-tinged, and losing it just means things are progressing. It does not mean that you will go into labor, and you do not have to contact our office.

## Flu shots

Flu shots are recommended in any trimester of pregnancy during flu season, but never take FluMist.

## Smoking

Do not smoke during pregnancy. If you smoke, the tar, nicotine and carbon monoxide will put your baby at risk for numerous problems, including low birth weight, miscarriage, premature delivery, stillbirth, respiratory problems and sudden infant death syndrome.

## Alcohol

There is no way to know how much alcohol will be harmful to your baby. It's best not to make assumptions and take chances. Avoid drinking alcohol during pregnancy.

## Illegal drugs

Illegal drugs can seriously harm your baby. Fetal brain damage, preterm delivery, stillbirth, developmental delays, placental abruption, and long-term behavioral and learning problems are just some of the risks.

## Toxoplasmosis

A parasitic infection called toxoplasmosis can be transmitted to the fetus. Avoid raw and undercooked meat. Also, don't make contact with cat feces, which is possible when cleaning a cat's litter box.

## Cord blood

Blood that remains in the cord and placenta after birth can be used for bone marrow transplants and other procedures. Private banking is available through companies such as ViaCord and CBR.

## Pain management and labor

The pain associated with labor and delivery is manageable with several natural or medical options. If you prefer natural pain management, breathing, movement, massage and hypnotherapy can work very well. Medical options include IV pain medication and epidural anesthesia.

## Domestic violence

This is one of the most unpleasant characteristics of some pregnancies. Partner abuse is more common with pregnant women than with women who are not pregnant. Let your doctor know if you are in an abusive relationship. There are resources that can help. And please understand that this is why we ask screening questions when you visit our office.

## Work

You can keep working as long as you feel well, unless instructed otherwise.

## When to call our office

Many of the issues we've covered are natural and no cause for alarm. However, there are some signs that should prompt you to call us.

- Heavy vaginal bleeding (as much or more than a period, with or without pain)
- Sudden or slow leak of amniotic fluid from the vagina
- Severe constant abdominal pain
- A temperature over 100.4 for more than 24 hours
- Persistent vomiting
- Painful or burning urination
- Absence or drastic decrease in fetal movement
- Severe headache in second or third trimester that is not relieved by Tylenol
- Severe headache in second or third trimester accompanied by swelling of face, hands and feet
- Persistent blurred vision or seeing "spots"

# Pregnancy and nutrition

Healthy eating is important during pregnancy. Good nutrition is needed to meet the added demands on your body as well as those of your growing baby.

## Prenatal vitamins

During pregnancy, you need more folic acid and iron than a woman who is not pregnant. Taking a prenatal vitamin supplement in addition to eating a well-rounded diet can ensure that you are getting enough.

## Folic acid

You need at least 400mcg of folic acid daily to help prevent major birth defects of the baby's brain and spine called neural tube defects. Many foods contain folic acid, such as dark green leafy vegetables, beans, orange juice and fortified cereals.

## Iron

You need about double the amount of iron during pregnancy to help your body make more blood to supply oxygen to your baby. Good sources of iron include lean red meat, poultry, fish, dried beans and peas, iron-fortified cereals and prune juice.

## Caffeine

Most experts believe that it is safe to consume less than 200mg of caffeine (one 12-ounce cup of coffee) a day during pregnancy.

## Fish

Omega-3 fatty acids are important for your baby's healthy brain development. Women should eat at least two servings of fish or shellfish per week while pregnant. Choose shrimp, salmon or catfish instead of shark, swordfish and king mackerel to limit mercury exposure. Limit white (albacore) tuna to 6 ounces a week.

## Special diets

If you are vegetarian, make sure you get enough protein from foods such as soy milk, tofu and beans, and that your intake of iron, vitamin B12 and vitamin D is sufficient.

## Preventing listeria

- Avoid unpasteurized milk and soft cheeses, including feta, queso blanco, brie and blue cheese.
- Heat hot dogs, lunch meats and cold cuts until steaming hot, just before serving.
- Wash food before eating.
- Avoid raw or undercooked seafood, eggs and meat.



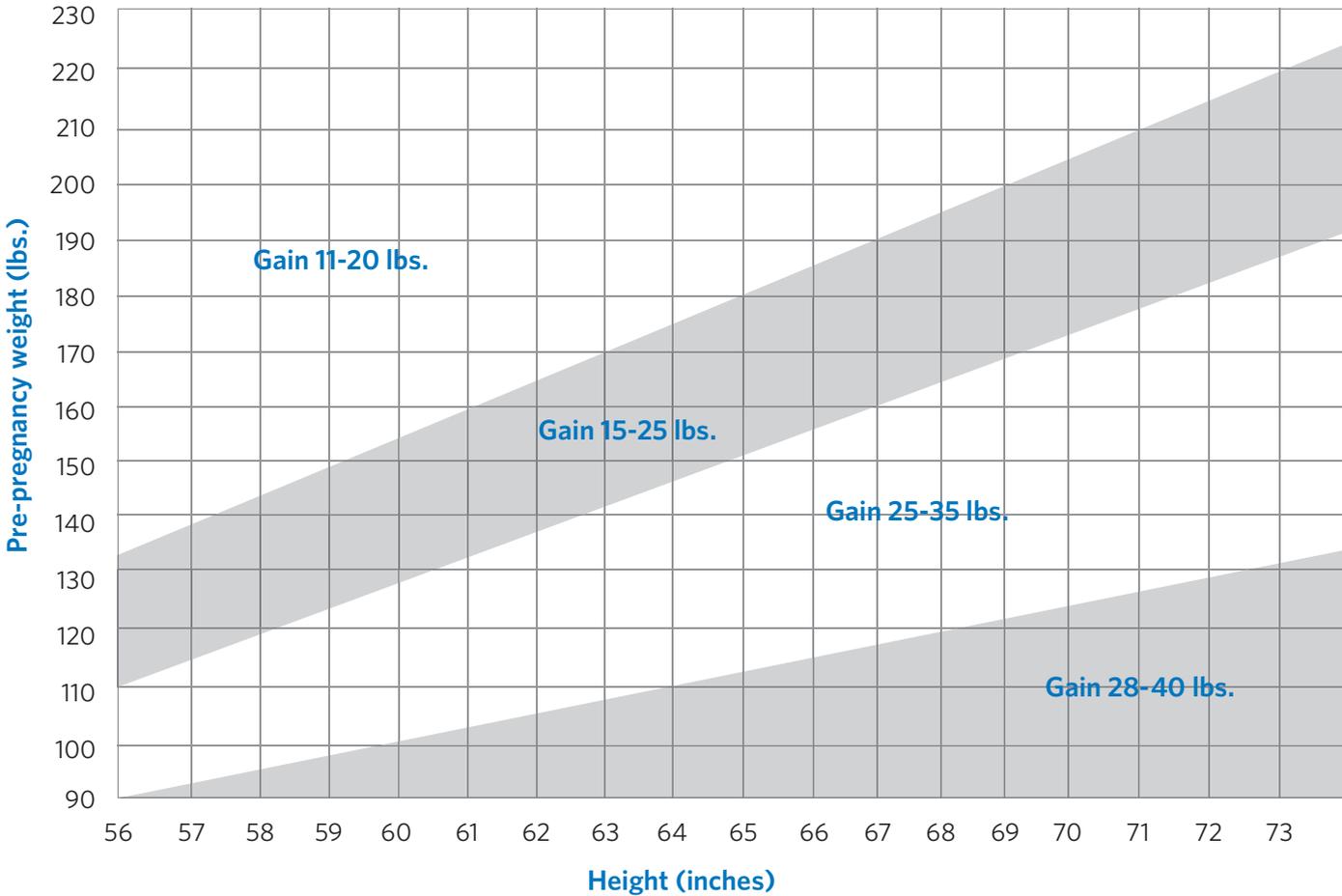
# Pregnancy and weight gain

## How much weight should you gain during pregnancy?

During pregnancy you should consume about 300 extra calories per day.

Overweight and obese women are at increased risk of gestational diabetes, high blood pressure, preeclampsia, preterm birth, and cesarean delivery. We will closely monitor your weight gain and the baby's growth through the pregnancy.

## Pre-pregnancy weight graph

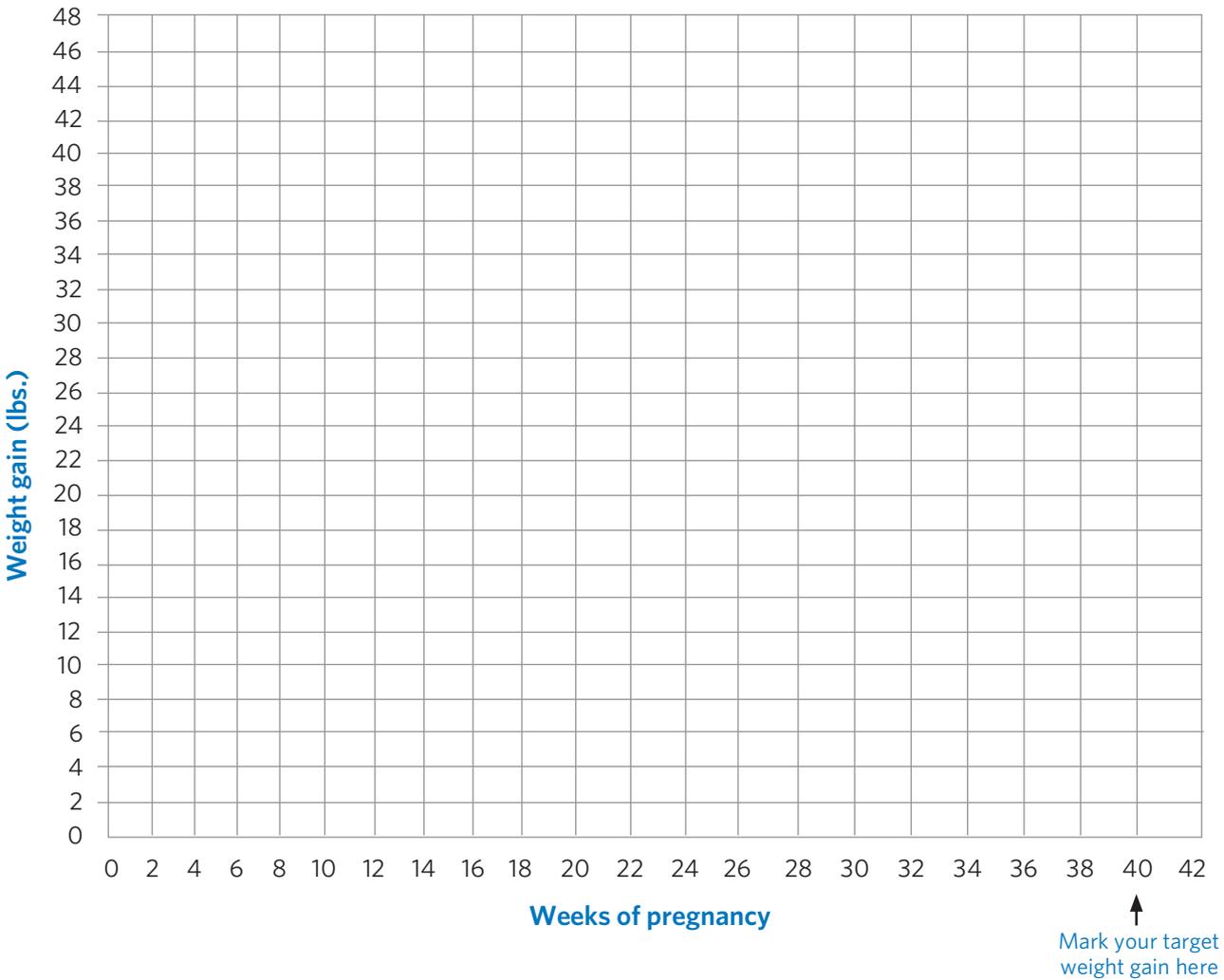


## Vital sign log

Date										
Gestational age										
Weight										
Blood pressure										

## Weight tracking graph

My target weight gain is \_\_\_\_\_ pounds.



## Vital sign log

Date										
Gestational age										
Weight										
Blood pressure										

# Pregnancy procedures

There are numerous ways for us to monitor your health and that of your baby throughout your pregnancy.

## Ultrasounds

A fetal anatomy survey scan will be done at about 20 weeks. At that time, the sonographer may be able to determine the sex of your baby. Most insurance companies will pay for one scan, and possibly a second if it is medically necessary. Ascension Medical Group Providence Women's Health is accredited by the American Institute of Ultrasound in Medicine.

## Lab work

Our lab work is done by outside labs, which will bill you separately. Please know that Ascension Medical Group Providence Women's Health is not responsible for what your insurance covers regarding lab work. Please verify coverage options for lab work prior to your visit with us.

On your first visit, your doctor will probably order several lab tests, including blood type, HIV, hepatitis, rubella, varicella, complete blood count, a urinalysis, a Pap smear if indicated, and screening for STDs.

As your pregnancy progresses, you will have the opportunity for other tests that will screen for potential problems.

After 10 weeks, some patients will be offered cell-free DNA or NIPT testing, to screen for chromosomal abnormalities.

11-14 weeks — A first trimester screen includes a blood test and an ultrasound, and is an alternative to screen for chromosomal abnormalities.

15-21 weeks — A quad screen blood test can screen for neural tube defects and some chromosomal abnormalities.

24-28 weeks — A test is done for gestational diabetes and a complete blood count for anemia.

35-36 weeks — A vaginal culture will test for Group B strep and a repeat blood screen will test for HIV and syphilis.

These are tests that will give you and your doctor important information about any possible issues with your pregnancy. Our medical staff will contact you if any of your lab work shows a cause for concern. "Normal" results will be discussed at your next visit, so we ask that you resist calling our office for lab results.

## Vaccines

A Tdap vaccine is recommended for you at 27 to 36 weeks. It vaccinates against tetanus, diphtheria and pertussis (whooping cough). We encourage close contacts and care providers to be vaccinated also. We recommend a flu vaccine if you are pregnant during flu season.



Scan to use the Providence Patient Portal to check your normal lab results.



# Pregnancy medications

It is very important that you notify any other doctor that you are pregnant. You are going through a time when you must be thoughtful about everything you ingest, including medications. Our doctors prefer that you avoid Pepto-Bismol®, Advil®, Aleve®, Motrin® or any other ibuprofen or aspirin product. You can take regular or Tylenol® Extra Strength for headaches, fever and muscle and joint pain. Below is a list of medications that you can take during your pregnancy.

## Approved over-the-counter medications

### Upper respiratory

- Actifed®
- Allegra®
- Benadryl®
- Chloraseptic® Throat Spray
- Chlor-Trimeton®
- Claritin®
- Claritin® D
- Delsym®
- Dimetapp®
- Emergen-C®
- Mucinex®
- Mucinex® DM
- Robitussin®
- Robitussin® DM
- Saline nasal spray
- Sudafed®
- Tavist®
- Throat lozenges
- Tylenol® PM
- Vicks®
- Zicam® (not nasal)
- Zyrtec®
- Zyrtec® D

### Pain

- Tylenol (acetaminophen)
- Extra strength Tylenol (extra strength acetaminophen)

### Antiemetics - nausea

- Doxylamine (Unisom®)
- Dramamine®
- Emetrol®
- Vitamin B6

### Sleep

- Benadryl®
- Unisom®

### Gas and indigestion

- Gas-X®
- Maalox®
- Mylanta®
- Mylicon®
- Pepcid®
- Phazyme®
- Prilosec®
- Riopan®
- Rolaid®
- Tagamet®
- Titalac®
- Tums®

### Constipation

- Chronulac®
- Citrucel®
- Correctol®
- Dulcolax®
- Magnesium citrate
- Metamucil®
- Miralax®
- Stool softener - Docusate Sodium - Colace® - Surfak®

### Diarrhea

- Diasorb
- Donnagel
- Imodium® AD
- Kaopectate®

### Hemorrhoids

- Anusol®
- Preparation H®

# Pregnancy trimester stages



## 1st trimester: 0-13 weeks

### Mother

- Period stops or menstruation is very light
- Breasts may become larger and more tender
- Nipples may protrude more
- May need to urinate more often
- Could feel very tired
- Possible nausea and vomiting
- Loss of appetite or craving certain foods
- Possible heartburn or indigestion
- Possible constipation
- May gain or lose weight

### Fetus

- Placenta develops
- Major organs and nervous system form
- Heart starts beating
- Bones appear
- Head, face, eyes, ears, arms, fingers, legs and toes form
- Genitals develop
- 20 buds for future teeth appear



## 2nd trimester: 14-28 weeks

### Mother

- Appetite increases
- Abdomen begins to expand — the top of the uterus will be near the rib cage by the end of this trimester
- Skin on abdomen and breasts stretches, and may itch and feel tight — possible stretch marks
- Feel the fetus move between weeks 16 and 20
- Abdomen may ache on one side or the other as the ligaments that support the uterus are stretched
- A dark line (linea nigra) may appear down the middle of the stomach from the navel to pubic hair
- Possible brown patches on the face (chloasma — the “mask of pregnancy”)
- Areolas (the darker skin around the nipples) could darken
- Possible swelling of feet and ankles

### Fetus

- Grows quickly from now until birth
- Organs develop further and begin to function
- Eyebrows, eyelashes and fingernails develop
- Skin is wrinkled and covered with a waxy coating (vernix) and fine hair (lanugo)
- Moves, kicks, sleeps and wakes
- Can swallow, hear, pass urine, and suck thumb



## 3rd trimester: 29-40 weeks

### Mother

- Feels the baby’s movement strongly
- Shortness of breath as the uterus pushes up against the diaphragm (a muscle that helps breathing). Toward the end of this trimester, the baby may drop into a lower position, which will make it easier to breathe.
- Needs to urinate more often after the baby drops, putting extra pressure on the bladder
- Colostrum — a yellow, watery pre-milk may leak from the nipples
- Navel may protrude
- Possible contractions (abdominal tightening or pain), which can signal false or actual labor
- Cervix may begin to efface (thin out) and dilate (open)

### Fetus

- Kicks and stretches — activity may slow as the fetus grows and the uterine home becomes more cramped
- Lanugo disappears
- Gains weight very quickly because major development is complete
- Bones harden but the skull remains soft and flexible for delivery
- Usually turns to a head-down position for birth
- Lungs begin to develop

# Pregnancy exercises

It is important to exercise during pregnancy to maintain the health of both you and your baby. Below are good exercises to strengthen and stretch the muscles of your back, abdomen, hips and upper body, which will help ease back pain and prepare you for labor and delivery. Regular exercising also helps with recovery after delivery. Many forms of exercise are good, but limit weightlifting to 35 pounds after 20 weeks. Also try to keep your heart rate below 150 at all times.

**Don't overdo it; take breaks and drink plenty of water.**



## Upper body bends

Strengthens muscles of your back and torso.

- Stand with your legs apart, knees bent slightly, and your hands on your hips.
- Bend forward slowly, keeping your upper back straight. You should feel a slight pull along your upper thigh.
- Repeat 10 times.



## Forward bend

Stretches your back muscles.

- Sit in a chair in a comfortable position. Bend forward slowly with your arms in front and hanging down.
- Hold this position for a count of 5, then get up slowly without arching your back.
- Repeat 5 times.



## Trunk twist

Stretches your back, spine and upper torso.

- Sit on the floor with your legs crossed, and your left hand holding your left foot and your right hand on the floor at your side for support.
- Slowly twist your upper torso to the right, then to the left.
- Repeat on both sides 5-10 times.



## Backward stretch

Stretches your back, pelvis and thighs.

- Kneel on your hands and knees with your knees 8-10 inches apart and your arms straight.
- Curl your back upward, slowly tucking your head toward your knees and keeping your arms extended.
- Hold this position for a count of 5 and repeat 5 times.



## Leg lift crawl

Strengthens your back and abdomen.

- Kneel on your hands and knees with your arms straight.
- Lift your left knee and bring it toward your elbow.
- Straighten your leg without locking your knee.
- Extend your leg up and back.
- Do this to a count of 5.
- Repeat on both sides 5-10 times.



## Rocking back arch

Stretches your back, hips and abdomen.

- Kneel on your hands and knees with your weight distributed evenly and your back straight.
- Rock back and forth to a count of 5.
- Return to the original position and curl your back upward as much as you can.
- Repeat 5-10 times.



## Back press

Strengthens your back, torso and upper body, and promotes good posture.

- Stand with your back against a wall and your feet 10-12 inches away from the wall.
- Press the lower part of your back against the wall.
- Hold this position for a count of 10, then release.
- Repeat 10 times.



## Labor and delivery

Any one of the conditions listed below is a sign that you need to go to labor and delivery.

### Contractions

When your contractions are five minutes apart and last 45-60 seconds and have been that way 1-1 ½ hours. True labor contractions gradually get stronger, are closer together and last longer. They will not go away with activities like walking, warm baths, or a change of position.

### Rupture of membranes

Can be either a slow leak or a sudden gush of liquid that may be clear, yellow, brown or blood-tinged.

### Decreased fetal movement

### Heavy vaginal bleeding

With or without pain.

### Your on-call doctor at the time of delivery

Each day at 5 p.m., the on-call doctor receives check-out information from each of the other doctors for all patients who are in labor. That means that your prenatal care and the specifics of your pregnancy and labor are discussed in detail so that the on-call doctor is fully informed. In most cases, he or she will drop by to meet each patient. The on-call doctor provides care for all patients admitted overnight.



Scan the QR code for  
OB preregistration



For more information about our birthing center, visit: [ProvidenceTXBaby.com](http://ProvidenceTXBaby.com)

# Breastfeeding your baby

Ascension Medical Group Providence Women's Health recommends breastfeeding for the health of both you and your baby. Lactation nurses are available at Ascension Providence Hospital and will be happy to help you. Call 254-751-4570 and ask for a lactation specialist. For additional guidance and support, contact the local LaLeche League or the H.O.T. Breastfeeding Coalition. Ascension Providence Healthcare Network also offers classes.

## Breastfeeding facts

### Breastfeeding is best for babies.

- Breast milk has natural protective ingredients that are not found in formula that protect your baby from getting sick.
- Breastfeeding reduces your baby's risk of sudden infant death syndrome (SIDS) or developing allergies, asthma, diabetes and certain cancers.
- Breast milk changes to meet your baby's needs as they grow.
- Breastfeeding helps your baby's brain develop.

### Breastfeeding is best for mothers.

- Helps moms heal after delivery by reducing bleeding and shrinking the uterus.
- Burns about 600 calories a day, which can help mom return to her pre-pregnancy weight sooner.
- Releases a hormone that creates a strong connection between moms and babies. It also helps moms feel calm and relaxed.
- Lowers mom's chance of developing breast and ovarian cancer, diabetes and cardiovascular disease.

## Breast engorgement

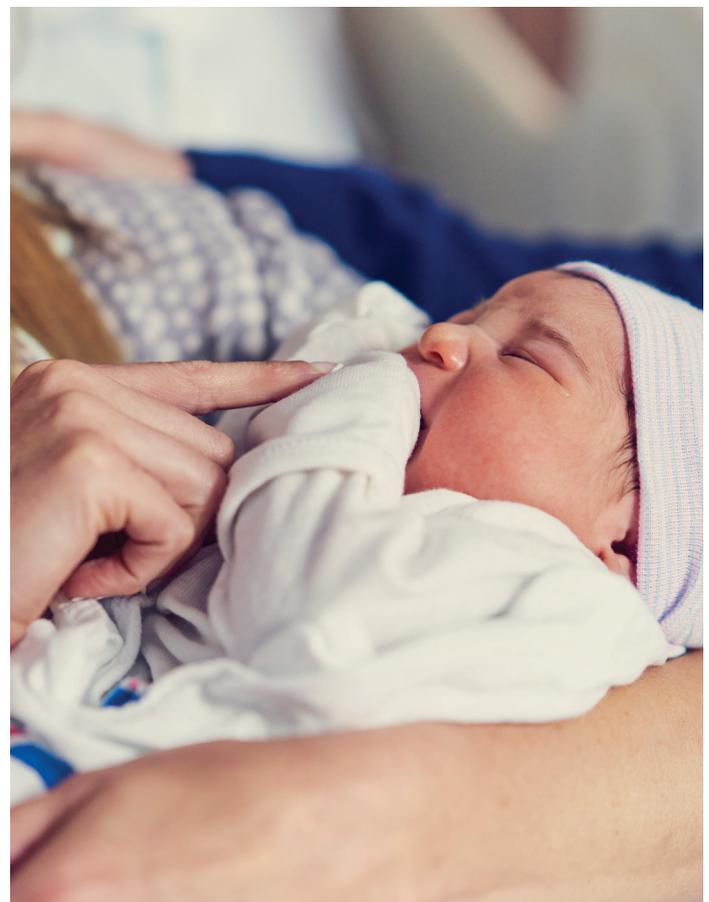
Green cabbage is a natural way to reduce the swelling in your breasts. Follow the directions below carefully and don't overdo it. Using this method too much could cause you to make less milk.

Wash your hands and cut a large head of green cabbage in half. Remove the outer leaves and discard them. Remove the rest by layers and wash them with water. Drain the water and cover the cabbage with a towel. Store in the refrigerator.

To reduce engorgement — lightly crumple the leaves you will use. Cover your entire breast with one layer of cabbage and under your arm if it is also swollen. Lay a towel over the cabbage and your breast for 20-30 minutes. Remove the cabbage leaves and discard them. Massage your breast in small circles all over — be firm but not rough.

Call our office if:

- Engorgement lasts longer than a few days
- Your breasts develop lumps or become painful
- Your baby won't accept the breast
- You have fever or flu-like symptoms



# Genetic testing

## Carrier screening

Carrier screening is a type of genetic test that can tell you whether you carry a gene for certain genetic disorders. When it is done before or during pregnancy, it allows you to find out your chances of having a child with a genetic disorder. Carrier screening involves testing a sample of blood. Once you have had a carrier screening test for a specific disorder, you do not need to be tested again for that disorder.

**All women who are thinking about getting pregnant or who are already pregnant are offered carrier screening for cystic fibrosis, fragile X, hemoglobinopathies, and spinal muscular atrophy (SMA).** You can have screening for additional disorders as well. In expanded carrier screening, many disorders are screened using a single sample. Companies that offer expanded carrier screening create their own lists of disorders that they test for. Some test for more than 100 different disorders. Screening panels usually focus on severe disorders that affect a person's quality of life from an early age.

## Prenatal genetic testing

Prenatal genetic testing gives parents-to-be information about whether their fetus has certain genetic disorders.

Cell-free DNA is the small amount of DNA that is released from the placenta into a pregnant woman's bloodstream. The cell-free DNA in a sample of a woman's blood can be screened for Down syndrome, trisomy 13, trisomy 18, and problems with the number of sex chromosomes. This test, also called NIPT (NonInvasive Prenatal Testing) can be done anytime starting at 10 weeks of pregnancy. It takes about one week to get the results. Because the test identifies X and Y chromosomes, this result also includes the baby's gender.

**First-trimester screening** includes a test of the pregnant woman's blood and an ultrasound exam. Both tests are done between 10-13 weeks of pregnancy:

- The blood test measures the level of certain substances.
- The ultrasound exam, called a nuchal translucency screening, measures the thickness of a space at the back of the fetus' neck. An abnormal measurement means there is an increased risk that the fetus has Down syndrome (trisomy 21) or another type of aneuploidy. It is also linked to physical defects of the heart, abdominal wall and skeleton.

**Second-trimester screening** includes the following tests:

- The "quad" or "quadruple" blood test measures the levels of four different substances in your blood. The quad test screens for Down syndrome, trisomy 18 and NTDs. It is done between 15-22 weeks of pregnancy.
- An ultrasound exam done between 18-22 weeks of pregnancy checks for major physical defects in the brain and spine, facial features, abdomen, heart and limbs.

**We cannot guarantee insurance coverage with any of these tests, so please consult your insurance company if you have questions about coverage.**

It is your choice whether to have prenatal testing. Your personal beliefs and values are important factors in the decision about prenatal testing. It can be helpful to think about how you would use the results of prenatal screening tests in your pregnancy care. Remember that a positive screening test tells you only that you are at higher risk of having a baby with Down syndrome or another aneuploidy. A diagnostic test should be done if you want to know a more certain result. Some parents want to know beforehand that their baby will be born with a genetic disorder. This knowledge gives parents time to learn about the disorder and plan for the medical care that the child may need. Other parents do not want to know this information before the child is born. In this case, you may decide not to have follow-up diagnostic testing if a screening test result is positive. Or you may decide not to have any testing at all. There is no right or wrong answer.



## Postpartum depression

Postpartum depression can be a complication of giving birth and should not be considered a weakness in the mother. Treatment is available and prompt treatment will allow a mother to enjoy her new baby.

Symptoms include strong feelings of sadness, anger, doubt, guilt or helplessness; intense concern or worry about the baby or a lack of interest in the baby; anxiety, panic attacks, or trouble doing tasks at home or on the job.

If you think you might be suffering from postpartum depression, seek professional help at one of the resources listed to the right or contact your doctor. After hours, contact the Ascension Providence Emergency Room.

**Postpartum Support International** (bilingual)  
Texas support  
[postpartum.net/locations/texas](https://postpartum.net/locations/texas)

**Heart of Texas Behavioral Health Services**  
110 S. 12th St.  
Waco, TX 76701  
254-752-3451

### After hours:

**Ascension Providence Emergency Room**  
6901 Medical Parkway  
Waco, TX 76712  
254-751-4000