

Anticipations

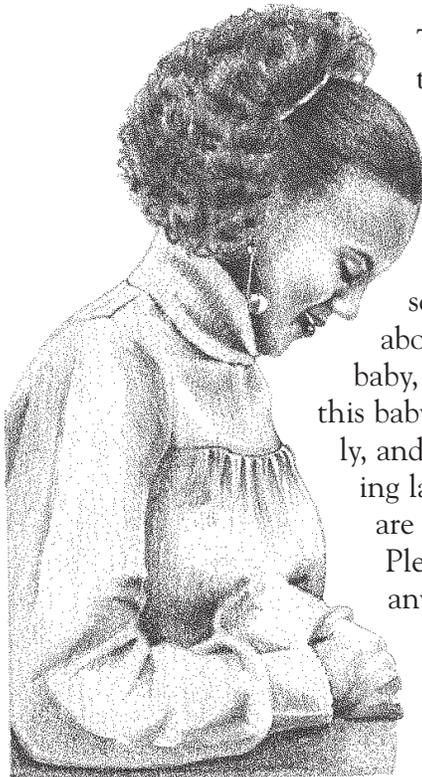
The Perinatal Education Program Newsletter



THE FAMILY PLACE

No. 4 • 7-8 Months

Congratulations- you've entered your last trimester



The third and last trimester of your pregnancy has arrived. As time advances, you may experience many different feelings: joy that your baby will soon be here, anxiety about the health of your baby, uncertainty about how this baby will change your family, and fear about experiencing labor and delivery. These are all normal feelings. Please feel free to share any of your concerns with family, friends and health care providers, who can all offer much support and assistance. Learning as

much as you can through readings, attending classes, and watching videos about childbirth and parenting will help you feel more confident when your little bundle of joy arrives!

What's Inside ...

Growth & Development "My Growing Baby"	2
Suggestions for Siblings.....	2
Common Discomforts.....	3
The Doctor Visit.....	4
Preparing a Safe Baby Nursery.....	4
Exercise for Labor.....	5
The Non-Stress Test.....	6
The Circumcision Decision.....	6
Preterm Labor.....	7
Nutrition Tips.....	8
What to Pack.....	9

Questions or concerns, call or write:

The Family Place at Evangelical Community
Hospital at One Hospital Drive, Lewisburg PA 17837
(570) 522-2610

Growth & Development:



“My Growing Baby”

29-31 Weeks

The baby is gaining weight from an increase in muscle and fat. It appears more “filled out.” At about 30 weeks, the baby’s reflex is present that will make it blink in response to light shown in it’s eyes. It has rhythmic breathing movements and can partially control body temperature. The lungs are still not ready for breathing outside the womb. Bones are fully developed but they are soft and flexible. The baby is beginning to store iron, calcium and phosphorous. The baby appears less red and wrinkled.

Your baby is now receiving antibodies from you that will help him or her fight infection. These antibodies protect the newborn against bacteria and viruses such as german measles, influenza, mumps, whooping cough and strep.

32-35 Weeks

The baby will be getting into position for birth, usually in the head down position called vertex. Other possibilities are VERTEX, COMPLETE OR FULL BREECH, FRANK BREECH, or FOOTLING BREECH.

At 32 weeks, your baby is 15-17 inches long and weighs about 4lbs., 6.5 oz.

Suggestions for Siblings

Following are some helpful hints to help siblings prepare for the arrival of a new baby brother or sister.



◆ **Read books about new babies. Discuss what new babies are like and what changes may occur in your family**

◆ **You might want to make your own preparation book using pictures of your older child when he/she was a baby and pictures of your hospital.**

◆ **Have your child attend the Hospital’s Hello Baby Class. (See Newsletter #2)**

◆ **Spend the day with a young baby. Show your older child how you care for the baby and allow him/her to participate as much as possible.**

◆ **If you are planning a school, room or bed change for the older child, do it as early in your pregnancy as possible so he doesn’t feel “kicked out” by the baby.**

◆ **Allow the older child to help decorate the nursery and help with any other plans.**

◆ **If the child is mature enough, take him with you to the doctor visits so he can hear the baby’s heart-beat. Look at books on fetal development together to trace the baby’s growth.**

◆ **Begin preparing the child for the separation when you’ll be in the hospital. Show him the hospital and assure him that you’ll be home in a few days. If he will be spending the night away from home, you might let him have a practice run.**

◆ **Record bedtime stories that can be played while you’re in the hospital. Say “good- night” at the end of the tape.**

◆ **Pack a new tee-shirt that says “I’m a Big Brother/Sister” and leave it with whoever is keeping him so they can give it to him as soon as the new baby is born.**

◆ **Call your older child as soon as the baby is born to tell him the good news unless it’s during the night. Don’t be disappointed if he is not quite as excited as you are, it takes time.**

◆ **Wrap up some small gifts for the older child to give to the baby and some for you to give to the older child when friends and relatives bring gifts for the baby.**

◆ **When you come home from the hospital, let daddy carry the baby so your arms are open for your older child.**

◆ **Under close supervision, let the older child hold the baby and participate in the care of the baby as much as possible.**

◆ **Ask visiting friend and relatives to greet the older child and pay attention to him before greeting the baby.**

◆ **Read a story to the older child while nursing or giving the baby a bottle.**

◆ **Try to plan a special time each day for just you and the older child.**

◆ **Expect some “acting out” or regressive behavior from the older child. He may wet his pants again if already potty trained or begin sucking his thumb again. It is a great adjustment for him. What is needed most is lots of love and the reassurance that the new baby is not taking his place.**

Common Discomforts & Body Changes

Hemorrhoids

Hemorrhoids are swelling of the veins around the rectum. They can be very uncomfortable with itching, swelling, pain and bleeding with bowel movements. Hemorrhoids can occur with straining during constipation. The pressure from the increasing size of the baby tend to make them more noticeable. Some hemorrhoids are not noticed until the pushing stage of labor. Care should be taken to avoid constipation by increasing fluid and fiber intake in your diet. Gravity can aide in decreasing swelling and pain by lying on your side or in a knee/chest position. Ice packs and topical ointments may be useful for relief. Ask your doctor what he would suggest you use for relief.

Call your doctor if hemorrhoids become hardened, tender to touch or rectal bleeding is more than just spotting.

Leg Cramps

Leg cramps are due to the pressure from the enlarged uterus. They are more common during the last few months of pregnancy, often occurring while lying in bed. Relief from leg cramps can be obtained by applying heat, massage or stretching the calf muscle. This stretching exercise can be done by pulling the top part of the foot toward the ankle. Make sure your bed covers are loose and your toes are not curled under.

Backache

Backache is caused by the baby's weight on the lower spine. Hormonal changes also cause the ligaments to soften and stretch causing backache. Correct posture, avoiding slouching and wearing low heeled shoes will help to prevent back pain. Remember to bend at your knees to pick something up rather than bending at the waist. Pelvic rocking exercises and squatting exercises help to strengthen back and abdominal muscles to prevent or reduce lower back pain.

Stretch Marks

You may get stretch marks on your abdomen, breasts, buttocks, hips and thighs. The marks are dark purple, red or may be clear and shiny. They may itch. Applying lotion or oils may help ease the itching; however, there is nothing you can do to prevent stretch marks. After your delivery, the stretch marks will gradually fade to a silvery-gray color.

Linea Nigra

Around the beginning of the 26th week, you may notice a dark line that runs from your navel to your pubic bone. This line is called linea nigra and is caused by hormonal changes. Linea nigra should disappear six months to one year after the birth of your baby.

The Doctor Visit

During the 7th and 8th months of your pregnancy, your doctor will want to see you more frequently. Appointments will be scheduled approximately every 2-3 weeks. During these visits, your weight, blood pressure, urine and baby's heart rate will be checked. Your belly may be measured to see how the baby is growing. These examinations help ensure that your pregnancy is progressing normally. Internal exams and other tests are not performed on every routine visit. If you have questions or concerns between visits, write them down and bring them to your next appointment.

In the middle of your 7th month (35 weeks), your doctor may order a Group B Strep Culture. This is a culture of your vagina to determine if you carry the Group B Strep bacterium (GBS). The mother can pass this infection onto her newborn, causing the infant to become sick shortly after birth. If your culture would show GBS, your physician would discuss treatment with you.

Towards the end of your 8th month, your doctor may give you a chart to record your baby's movements. Counting fetal movements is one way in which you can play an important role in checking the health of your baby. By counting and recording the number of movements each day, you can create a profile of your baby's activity during the last part of your pregnancy.

Preparing A Safe Baby Nursery

It's very exciting preparing the baby's nursery but there are a few safety tips to keep in mind:

- Never have pillows or stuffed animals in the crib while your baby sleeps. These things could cause suffocation. Properly installed crib guards make the crib safer and softer for your baby.
- The crib mattress should fit snugly so your baby can't get trapped between the mattress and the side of the crib where it could suffocate. You should not be able to fit more than two fingers between the mattress and the sides or ends of the crib.
- Crib slats should be no more than 2 3/8 inches apart. A baby's head may become trapped in a larger opening.
- Remove the plastic cover from the crib mattress. The plastic could cause suffocation.
- Keep strings and cords (such as those from window blinds) out of and away from the crib.
- The crib railing should be at least 26 inches above the mattress so the baby won't be able to climb out when he's old enough to pull himself to a standing position.
- There should be a secure teething rail all the way around the crib railing.
- Keep the crib away from radiators, heaters and hot or cold air ducts. This will prevent burns. Forced air from ducts can dry out the nose and throat, increasing the baby's chances of getting colds and other respiratory problems.
- Hang a smoke detector/alarm in the nursery and check all smoke alarms in your home.
- Use non-toxic paint for the nursery crib and other furniture. Paint the nursery well before your due date so that no odor remains when the baby comes home from the hospital. (Keep the nursery well ventilated during and after painting).
- Insert plastic outlet covers on unused electrical outlets.

These are only a few of the many safety tips you should consider when preparing your home and your baby's nursery. Many others will be covered after the baby is born.

It is a good idea to attend CPR classes prior to the baby's birth. Call Evangelical's Community Health Education at 522-2693 to schedule a class or visit our website at www.evanhospital.com.



Exercise for Labor!

Several exercises will help prepare your muscles for the birth process. They will also help your body return to a better muscle tone after delivery. A few of these exercises are described below. It is important to do these exercises regularly and slowly. Gradually increase the repetitions according to your tolerance.

Pelvic Tilt

This exercise helps prevent or reduce back strain as well as increase abdominal strength. Lie on your back with bent knees and feet flat on the floor. Gently squeeze your buttocks, tighten your stomach muscles and flatten the curve of your back against the floor. Hold this position for five seconds and relax. Repeat three or four times. The pelvic tilt can also be done while sitting in a chair or standing with your back against the wall with your knees bent slightly.

It can also be done on your hands and knees. Get on all fours, keeping your back straight (don't let your lower back sag). Tighten the stomach and buttock muscles so the pelvis tucks under and the lower back rounds upward. Hold for five seconds, relax and repeat.

Abdominal Exercises

A. A basic exercise to increase abdominal tone is to synchronize respirations with tightening of the abdominal muscles. Take a deep breath while you expand your abdomen outward. As you slowly exhale, continue to tighten your abdominal muscles until very tight. Then relax a few seconds and repeat.

B. A partial sit-up can be done as well. Lie on your back with your knees bent upwards and your feet flat on the floor. Stretch your arms toward your knees and slowly pull your head and shoulders off the floor to a comfortable level. Slowly return to the starting position and take a deep breath. To strengthen the muscles on the sides of your abdomen, do the same exercise except reach your right arm to the side of your left leg. Alternate then with reaching your left arm to the side of your right leg.

These exercises can be done about five times in a row and repeated at different times of the day.

Inner Thigh Exercises

The Tailor Press stretches the inner thigh muscles in preparation for labor and delivery. Sit on the floor and put the soles of your feet together. Slowly press your knees toward the floor while providing gentle resistance with your hands beneath your knees. Release and repeat.



Perineal Exercises

Kegel Exercises are done by tightening of the area around the vagina. They strengthen the area and increase its tone and elasticity. To identify the correct muscle to tighten, sit on the toilet and begin to urinate. Contract the muscle to stop the flow of urine. This is the correct muscle. During various times of the day, practice tightening this muscle for 2-3 seconds, release 2-3 seconds and repeat. Do these in groups of ten about ten times each day. An Extended Kegel can be done up to ten times daily. Contract the muscle and hold for 20 seconds. Another variation is the Elevator Kegel. Imagine your pelvic floor muscle is an elevator. Contract the muscle and slowly increase the tension as you go up in the elevator. Then slowly release the tension in the pelvic floor muscle as you are going down in the elevator.

The Non-Stress Test (NST)

During your third trimester (or as early as 27 weeks), various medical conditions may prompt your doctor into doing or scheduling you for a Non-Stress Test. The test allows the health care providers to assess if the baby is having good activity which results in acceleration or increase of the baby's heart rate. If this occurs, it is reassuring that the baby is receiving adequate oxygen and circulation through the placenta and that the baby's nervous system is working properly.

What to expect: Eat two hours or less before the test. You will need to stop at the registration area prior to going to the Labor & Delivery area for the test. If you are having it done in your doctor's office, you do not need to register. Just go to the office. You will be put in a reclining position and a fetal monitor will be applied. It consists of two elastic belts around your abdomen. One holds a device that detects the baby's heart rate. The other holds a device that detects uterine contractions. After that, you'll be instructed to push a button whenever the baby moves. The test usually takes 30 to 90 minutes to complete.



The Circumcision Decision

The decision whether or not to circumcise your son should be made by the parents without any pressure. Circumcision originated as a religious practice. Following are some facts to consider before making your decision:

What is Circumcision?

Circumcision is the surgical removal of the foreskin, the skin covering the end of the penis. The procedure takes about 10 minutes. The baby's legs and arms are restrained as he lays in a plastic tray molded to fit an infant's body. There are two different circumcision methods. Your baby's doctor will use the method of his preference. A local anesthetic is usually given to decrease the pain during the procedure. Discuss this with your doctor. Circumcision is usually done 12-24 hours after birth.

Pros and Cons:

The American Academy of Pediatrics states that circumcision has potential medical benefits and advantages, as well as disadvantages and risks.



Advantages:

- Decreased incidence of urinary tract infections in infants under one year old
- Avoids foreskin infection in older infants
- General cleanliness
- Avoidance of need for later circumcision (which is necessary in only 5% of these males)

Disadvantages:

- Pain during the procedure and a few days following
- Hemorrhage and infection and difficulty urinating (rare problems)
- Irritation and inflammation from contact with urine
- Scarring and/or malformation of the penis is infrequent but possible.

During your hospital stay, you will learn how to care for your son, circumcised or uncircumcised. Proper hygiene is easy to do either way.



Preterm Labor: Signs & Symptoms

Preterm labor is labor that occurs more than three weeks before your due date (before 37 completed weeks of pregnancy). Some women are more at risk than others. However, since any woman can develop preterm labor, you should be aware of the early symptoms. It is important to report any of these symptoms to your doctor so steps can be taken to stop your labor and prevent the delivery of a premature baby. A baby born too early has many serious problems. They include difficulty staying warm, eating problems, immature body organs, and most critical is the lack of development of the respiratory system as it is the last system to mature. If the baby is born too early, the immature respiratory system may have difficulty or be unable to support life.

Signs & Symptoms:

- Uterine contractions that occur every ten minutes or less.
- Mild menstrual-like cramps felt low in the abdomen. They may come and go or be constant.
- Feelings of pelvic pressure, constant or intermittent. It may feel like the baby's pushing down.
- Low, dull backache which may be constant or intermittent.
- Sudden increase in vaginal discharge (an increase in amount or a change to more clear and watery discharge or discharge with a pinkish tinge).
- Abdominal cramping with or without diarrhea.

Remember that it is normal to have occasional contractions throughout your pregnancy. However, if they occur every 10 minutes for one hour, your cervix could begin to dilate. Labor could continue and progress to delivery.

How to Feel for Contractions:

Lie down, tilted toward your side. Place your fingertips on the top part of your uterus. Feel for hardening or tightening of your uterus. Some may be harder than others. "How often" is the time from the start of one tightening to the start of the next tightening.

When to Call the Doctor:

- If contractions occur every ten minutes or less for one hour (or five or more contractions in an hour).
- If any of the other listed signs and symptoms are present for one hour.

Call Immediately If:

- Liquid or blood begins leaking from your vagina.
- You have a sudden increase in vaginal discharge. Arrangements will then be made for you to be checked for ongoing labor.

If You Are Instructed to Come to the Hospital:

Go directly to Labor and Delivery. A monitor will be placed on your abdomen to detect uterine contractions and the baby's heart rate. The nurses will also feel your abdomen for

contractions. Your cervix will be checked to see if it is opening. If any fluid is leaking, it will be checked to determine if your water has broken.

If you are in premature labor, an IV may be started to give medications and fluids to stop the labor. You may be admitted to the hospital for observation and monitoring. If labor stops, you may be able to go home. If it continues and you are quite a few weeks away from your due date, transfer to another hospital may be considered. Transferring you to a hospital with facilities to care for a preterm baby may increase the chance of its survival.

If you experience preterm labor symptoms for more than 15 minutes while physically active, do the following:

- ▶ Empty your bladder
- ▶ Lie down tilted on your side
- ▶ Feel for uterine contractions
- ▶ Drink three to four eight ounce cups of fluid
- ▶ Call your doctor if symptoms persist, even if you can't feel uterine contractions with your fingertips
- ▶ If symptoms stop: Rest for 30 minutes after symptoms have subsided and gradually resume non-vigorous activity.

Nutrition During Pregnancy

What do each of the food groups provide?

Breads, Cereal, Rice and Pastas

(Eat four or more servings/day)

This group provides vitamins, iron, minerals, protein and carbohydrates. These foods provide you with energy and help the baby grow. The fiber helps avoid constipation.

It is best to eat whole wheat bread rather than white. Examples of one serving are: one large tortilla, one ounce ready to eat cereal, 1/2 cup of cooked pasta, rice or cereal, 1/2 bagel or one slice of bread.

Vegetables and Fruit

(Eat 2-4 servings or more of one or more each day)

This group provides vitamins, minerals, and fiber which help prevent constipation. Fruits and vegetables aid in maintaining good eye sight and healthy skin. Include 1-2 servings of citrus fruits like oranges or grapefruits or fruit juice daily. This gives you and your baby Vitamin C which helps your body use iron. Fresh fruits are a good source of fiber. Examples of a fruit serving include: 1/2 cup of canned or cooked fruit, 3/4 cup of grapes, 1/2 cup fruit juice, one medium banana, orange or apple.

Eat a variety of vegetables to get the best nutritional value. Eat vegetables with a deep yellow or dark green color every day. Eat one vegetable that's a good source of Vitamin A, like carrots, spinach, kale, lettuce or winter squash. Other examples of a vegetable serving include: 3/4 cup of vegetable juice, 1/2 cup broccoli, carrots or other raw or cooked vegetable, one medium baked potato, one cup raw leafy vegetables (salad greens).

Milk and Dairy Products

(Eat four or more servings daily)

This group provides calcium, protein, vitamins and phosphorus. It also helps you and your baby build strong bones and teeth. These foods help with the growth of new tissue and repair of damaged tissue. Skim milk and low-fat cheeses and yogurt rather than whole milk or ice cream will help you to keep your fat intake down. Examples of a serving include: 3/4 cup of cottage cheese, one ounce hard cheese, two ounces processed cheese, one cup pudding or custard, one eight ounce glass of milk, and one cup yogurt.

Meat, Fish, Poultry, Eggs, Nuts and Beans

(Eat three or more servings per day)

This food group provides protein, iron and vitamins. It helps build new body tissue that makes up muscles, heart, lungs, brain, eyes, and skin. These foods also help prevent anemia. Examples of a serving include: two Tbsp. of peanut butter, 1/2 cup of cooked dried beans, one egg or 2-3 ounces of cooked meat, fish or poultry. (This helping is about the size of the palm of your hand or a deck of cards).

Others:

Water - Remember to drink six to eight glasses of water daily. Water helps you digest food and carries waste products out of your body. It prevents dehydration.

Iron - Your doctor may advise you to take extra iron or folic acid in the form of a pill. When your doctor tells you to take extra iron, it is



to prevent or to treat anemia. Anemia is a common problem during pregnancy which makes you feel tired a lot of

the time. Anemia is a condition in which your body does not have enough red blood cells. You need twice as much iron now than before you were pregnant. Iron helps you make red blood cells that carry oxygen to the baby. Some foods that are rich in iron are liver, spinach and other dark leafy vegetables, egg yolks, whole or enriched grains, dried fruits, red meats, shrimp, oysters, and dried beans. Vitamin C helps your body absorb iron.

Folic Acid - Folic acid helps your baby grow and helps prevent birth defects of the brain and spinal cord. When you are pregnant you need twice the amount of folic acid you needed when you were not pregnant. Folic acid can be found in green leafy vegetables, broccoli, asparagus, lean beef, oranges, peanuts and liver. Many other vitamins and minerals are needed in pregnancy. Most of them are in your prenatal vitamins. They can be obtained however by eating a healthy diet as described.

Guide for Pregnant Women Who Are Vegetarians

Eat a wide variety of foods to meet increased protein, vitamin and mineral needs. Combine grains, legumes, nuts and seeds to obtain whole protein. Use iodized salt or a supplemental iodine. If no milk is used, you'll need to supplement calcium, vitamin B12 and vitamin D.

What to Pack:



Mom's Bag:



- Robe and several nightgowns or nursing gowns
- Warm socks to wear during labor
- Slippers
- Bras or nursing bras and underwear
- Toiletries, like a toothbrush, toothpaste, lotion, hair brush, deodorant, shampoo, hair condition, hair dryer, curling iron, hair spray, make-up and other personal essentials
- Lollipops to keep your mouth moist during labor
- Chapstick
- A comfortable going home outfit
- Books or magazines
- Going home outfit for a baby boy and girl.
- Baby blankets, tee-shirt, socks, hat and coat for taking the baby home
- Contact lens case, solutions and eyeglasses if you wear contacts
- Birth announcements and thank-you cards
- REMEMBER to have a car seat for taking the baby home

can be scheduled through your doctors' office at about 36-37 weeks. During the visit, you will be pre-registered and the admission process will be started. This will make the admission process very brief when you go into labor).

- Labor aids, such as a tennis ball in a sock or a small paint roller for lower back massage.
- List of telephone numbers of family and friends to call when the baby is born.
- Lots of change for snack and soda machines
- Camera, film, flashbulbs, cassette player and/or camcorder
- Cards, magazines, books
- Focal point for concentrating on during labor
- Snack and drinks for labor

The next P.E.P. issue will have information on:

- **Relaxation Exercises**
- **Preeclampsia**
- **Signs of Labor**
- **Stages of Labor**
- **Pain Relief/Anesthesia**
- **Visitation Guidelines**
- **Your Prenatal Visit**
- **Taking Baby Home**

Dad's or Partner's Bag:



- Watch with a second hand for timing contractions
- Insurance card and forms (Try to come in for a pre-natal visit at the hospital. The visit

DID YOUR ADDRESS CHANGE?

NAME: _____

NEW ADDRESS: _____

SEND TO: THE FAMILY PLACE
 Attn: PEP Newsletter
 Evangelical Community Hospital
 One Hospital Drive
 Lewisburg, PA 17837

DUE DATE:

