Prenatal Care at CHA

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CHA Cambridge Health Alliance

Routine Prenatal Care

Routine prenatal care typically follows this schedule:

The first 28 weeks – you will see your prenatal provider about every 4 weeks.
From 28-36 weeks – you will see your prenatal provider about every 2 weeks.
From 36 weeks to labor – you will see your prenatal provider every week.

Pregnancy Confirmation	Ultrasound, identify pregnancy in uterus (if indicated)
Prenatal Lab Work	Blood Type & Rh Factor Antibody Screen Complete Blood Count (CBC) Treponema/RPR (Syphilis) Rubella Antibody Hepatitis B Surface Antigen Cystic Fibrosis Screening (if desired) HIV Gonorrhea & Chlamydia Culture Urine Culture
11-14 Weeks	1st Trimester Genetic Screening (if desired)
15-21 Weeks	2nd Trimester Genetic Screening (if desired)
18-20 Weeks	Full Fetal Survey Ultrasound
24-28 Weeks	Gestational Diabetes Screen, CBC Tdap immunization administration Rhogam administration (if Rh Negative)
35-36 Weeks	Group B Strep Culture

Have questions?

Please **call us to discuss any concerns about the baby, your pregnancy care or symptoms you are having.** If you use MyChart, please use it for non-urgent messages as they are only checked every 24-48 hours. Please don't wait to get the health advice you need.

Basic Nutrition While Pregnant

Pregnant women, transgender and gender expansive people need an extra 300 healthy calories per day during the second and third trimester (450-500 with a twin pregnancy), this is about one extra snack per day. Please be sure to take a daily prenatal vitamin with at least 400mcgs of Folic Acid, unless directed otherwise by your prenatal provider.

Healthy weight gain: Ask your health care provider how much weight you should gain. A person who was average weight before getting pregnant should gain 25 to 35 pounds after becoming pregnant. People who are underweight should gain 28 to 40 pounds. People who are overweight should try to keep weight gain to no more than 15 pounds total during pregnancy. Remember that this weight you gain includes the extra blood/fluid and the baby.

In general, you should gain anywhere from 0 to 4 pounds during the first three months you are pregnant and 1 pound a week during the rest of your pregnancy. If you are expecting twins you should gain 35 to 45 pounds during your pregnancy. This would be an average of 1 ½ pounds per week after the usual weight gain in the first three months.

Fluids: You and your baby need extra fluids while pregnant. Aim to drink 2 liters (4 water bottles) of water daily; on hot days you will need more. Fluids also decrease constipation, limit swelling as well as flush toxins in the body and bacteria in the urinary tract. Water is best, but other options may include water/seltzer water with a slice of lemon/lime, juice diluted with water, low-fat or fat-free milk (or soy or rice milk with added calcium) and clear soups or broths that are low in salt.

Healthy eating: Eating a well-balanced diet is important. Fresh vegetables and fruits are a large part of healthy nutrition. Protein is also important while pregnant, whether you eat meat or not. Good sources of protein include lean meats, some seafood, beans, nuts, eggs, tofu/soy protein or cottage cheese.

Food hygiene basics:

Wash your hands before you cook or eat, and after you use the bathroom or touch raw meat.

Wash fruits and vegetables thoroughly. To prevent cross-contamination, keep cooking equipment used with raw meats or fish separate from those used with other foods.

When reheating food, be sure to heat it until steaming hot.

Things to avoid/limit:

Seafood is a great source of lean protein, and the omega-3 fatty acids in many fish can promote your baby's brain development. However, some fish and shellfish contain potentially dangerous levels of mercury which could damage your baby's developing nervous system. The FDA and the EPA encourage pregnant women, transgender and gender expansive people to avoid: *Swordfish, Shark, King mackerel and Tilefish.*

Limit tuna steak and canned light tuna to 6 ounces per week. Limit other fish and seafood to 12 ounces per week.

If eating locally caught seafood, be aware of local fish advisories, particularly if water pollution is a concern.

Raw or undercooked seafood, shellfish, meats or eggs may contain unsafe bacteria. In addition, we do not recommend smoked seafood or meats such as lox or deli meats, unless they are cooked prior to eating. If you must eat deli meats, be sure they have been in your refrigerator for less than one week, and heat to steaming (in a microwave) before eating. Avoid refrigerated meat spreads, patés and raw meats that have been stuffed.

Unpasteurized dairy foods (such as soft cheeses like Brie, Feta, Camembert, Blue Cheese and Mexican-style cheeses) and juices have not had processing to remove harmful bacteria. Check food labels to ensure pasteurization.

Caffeine. There is no firm data on safe levels of caffeine. We recommend limiting caffeinated drinks to 1-2 cups per day, or switch to decaf. Please remember that tea and sodas often contain caffeine.

Alcohol and nicotine are both considered unsafe in pregnancy, as they can affect your health, your pregnancy and your baby's health.

If you have any concerns about your dietary health, please discuss with your prenatal provider; she/he may refer you to a nutritionist.

Common Discomforts of Pregnancy

Pregnancy causes all sorts of changes in your body, some of which cause discomfort.

Lifestyle changes and over the counter medications may help with some symptoms that you experience throughout your pregnancy. If your symptoms do not resolve, or if you have more questions, please call the clinic and speak with your nurse or provider. Here are some basic suggestions to help common issues.

Nausea and vomiting. Nausea and vomiting in early pregnancy is very common. The symptoms can be very unpleasant and can interfere with your daily routine. The good news is that nausea and vomiting aren't usually harmful to you or the pregnancy. And there are many ways of easing your nausea and vomiting.

For most women, transgender and gender expansive people, nausea and vomiting doesn't last all day and there are times when you may feel hungry and can keep food down. However, in severe cases you may not be getting the nutrients and fluids that you and your baby need. The biggest worry is dehydration. If you are not urinating regularly or cannot keep any fluids down for 24 hours or more, please call your clinic. You should also get help if you are so sick that you are missing meals day after day or losing weight rapidly.

Severe nausea and vomiting can be difficult to control; the sooner you are diagnosed and treated, the more likely you are to avoid severe symptoms. For less severe cases, here are some tips to help with nutrition and fluids:

In the morning, eat a few crackers and rest for 15 minutes before getting up.

Get up slowly and do not lie down right after eating.

Eat small meals or snacks often so your stomach does not become empty (for example, every two hours). Try not to skip meals.

Eat what you feel like and eat when you are hungry, though you may want to avoid cooking or eating spicy, fatty or fried foods because of the smell.

If cooking smells bother you, open windows and turn on the stove fan. If possible, ask someone else to cook. Eat cold food instead of hot, as it may not smell as strongly.

Sniffing lemons or ginger can sometimes help an upset stomach.

Eating salty potato chips or crackers can help settle the stomach enough to eat a meal.

Sip small amounts of fluid often during the day.

Sometimes cold liquids like popsicles sit well in the stomach.

Avoid drinking fluids during, just before or immediately after a meal.

Aches and pains. Your growing belly can cause a change in posture which leads to back pain. Hip and pelvic pain can develop in pregnancy due to hormones that relax joints and soft tissues. To prevent backaches, try to maintain straight/tall posture, wear low-heeled shoes with proper support and avoid sitting or standing for too long. Getting rest, a massage, applying heat and taking acetaminophen (Tylenol) will likely help. While sleeping, you can keep a pillow between your knees and under your belly to help support your back and joints.

Headaches. Minor headaches are common in all phases of pregnancy. Rest, fluids, stress reduction and acetaminophen (Tylenol) will help. If none of these methods work or you develop a headache that is sudden or severe, please contact your prenatal clinic.

Leg cramps. Many people have leg cramping, particularly at night, in the second and third trimester. Often, simply pointing your toes towards your knees or walking can help relieve these cramps. Please let us know if you develop any particular areas of tenderness or redness.

Swelling. Lower extremity swelling can be relieved by elevating your feet several times every day or lying down on your left side. Hands can also become swollen, particularly in the mornings, so be sure to remove rings if you start to notice this. Please call us if you develop sudden swelling, particularly in your face and hands.

Is there medication that can help? If these suggestions do not ease your symptoms, speak with your prenatal provider to discuss other solutions. Please have caution with products labeled as "natural" or "herbal" as many have not been properly tested for safety during pregnancy.

Constipation and hemorrhoids. Many people have increased constipation due to a combination of hormones in your body, supplemental vitamins and body changes. Regular light exercise, increased fluids and dietary fiber are great first steps in keeping the bowels moving. Other options include Miralax and Colace.

Hemorrhoids (dilated veins in the rectum) can develop for many people as well. Anal itching and burning, pain with bowel movements and spots of blood when wiping are common symptoms of hemorrhoids. Preventing constipation helps most with this problem, but hemorrhoid creams that do not contain hydrocortisone and Tucks pads (try refrigerating them!) are also good options.

Heartburn. Hormone changes in pregnancy slow digestion and relax the swallowing muscles. This can lead to a pressure and burning sensation in the chest. Lifestyle changes like eating at least 2-3 hours before sleep, propping your upper body up while resting and avoiding spicy and fatty foods can help. Mild antacids such as Mylanta, Tums and Gelucil, used in small quantities, may help relieve this sensation. Talk to your prenatal provider if these tips don't help.

Vaginal discharge. An increase in creamy white vaginal discharge is very common during pregnancy. Practice good hygiene; regular external washing with mild soap and wear cotton underwear, but do not douche. If you develop vaginal itching or discharge with a color or odor to it, please call your prenatal clinic.

Fatigue/sleep. The physical changes your body goes through during pregnancy can be exhausting and affect your ability to sleep. Take naps during the day as you are able. It is common to need to urinate several times at night. To minimize this, try to drink most of your fluids in the early part of the day. Limiting caffeine from coffee, most teas, and sodas can also help. Practice positive sleep hygiene (a warm shower before bed, muscle massage, quiet activities such as reading) and use pillows to support your back or belly and between your legs to rest more comfortably.

Medications Frequently Used in Pregnancy

These are some over the counter medications that may help with some symptoms that you have through your pregnancy and are ok to take while pregnant. There are many more medications that could be used. If your symptoms do not resolve, or if you have more questions, please call the clinic and speak with your nurse or provider.

Headaches and muscle aches
Tylenol Regular Strength - 2 tablets as directed
Tylenol Extra Strength- 2 tablets as directed (not to exceed maximum dose)

Nasal congestion (stuffy or runny nose)
Ocean Nasal Spray
Benadryl (can cause drowsiness)
Sudafed or Actifed (over 12 weeks gestation)
Mucinex

Allergies
Claritin
Zyrtec

Sore throat
Gargle with warm salt water
Throat lozenges (try putting them in the freezer for even more relief!)

Cough
Robitussin - Plain or DM

Indigestion or heartburn
Mylanta
Gelusil
Tums

Constipation
Miralax
Colace

Hemorrhoid
Hemorrhoid cream without hydrocortisone
Tucks pads

Rash
Calamine lotion

If you develop fever >101°F with body aches and cough, please contact your primary care provider.

Frequently Asked Questions

For the most part, you can continue most activities that you do everyday throughout your pregnancy.

Smoking, secondhand smoke, alcohol, non-prescription drugs and some prescription drugs are not considered safe for you or your pregnancy. This exposure can put you, your pregnancy and the baby's health at risk. Please discuss with your prenatal provider if you have any questions.

Below are some commonly asked questions and answers.
Don't hesitate to ask your care team questions!

Can I still have sex while I'm pregnant?
Unless your prenatal provider has told you not to, it is safe to have sex during pregnancy. You'll want to make sure to use a condom for STD protection.

Should I avoid things like painting, hair care or manicure/pedicure?
Water-based latex paints are generally acceptable, and fumes are usually non-toxic if you are in a well-ventilated area. Nail care is acceptable, though ventilation is key; be sure to open windows or use a fan. Many providers agree that hair treatments are unlikely to pose an increased risk to the developing fetus, thus it is a personal choice regarding hair treatments during pregnancy.

For specific questions about exposures during pregnancy, please call the Pregnancy Exposure Hotline: 1-800-322-5014

Is it true that I shouldn't change the litter box?
Yes. Changing the cat's litter box can expose you to a disease called toxoplasmosis, sometimes carried by cats. While it typically causes a mild infection, during pregnancy it can affect the development of the baby's brain and eyes. We recommend having someone else attend to the litter box, but if you must do it yourself, please protect yourself with a mask (covering your nose and mouth) and gloves - and wash your hands directly after.

Is it still safe to travel?
It is generally safe to travel up to about 36 weeks with a normal pregnancy unless your prenatal provider says otherwise. Whether traveling by plane*, train or car, drink plenty of fluids and be sure to get up and walk around every ½-1 hour to stretch your legs and avoid blood clots. In a vehicle, always wear a seatbelt; you can move the lap belt below your belly as it grows. You should also always have your airbags on, if your car has them.

* Some airlines may have restrictions; it is always a good idea to check with the airline before planning travel.

* Please discuss your travel destination with your provider.

Is it possible to be too warm while pregnant?
Yes. On warm days or while exercising allow for rest and cooling down, and drink plenty of water. Do not use a Jacuzzi or hot tub while pregnant, as these can raise the body temperature to an unsafe level. A warm bath is fine, as long as the water temperature does not exceed 100°F.

Should I continue my routine dental work?
Yes. Routine cleaning is good to continue while pregnant. Beyond that, your dentist should make a decision about the risks/benefits of needed care while pregnant. General anesthesia and gas should not be used. X-rays may be done if deemed necessary by the dentist, but patients should be shielded appropriately. If there is any question about medications during pregnancy, your dentist may contact the clinic.

Support Services and Classes

Childbirth classes. We offer free childbirth education classes at CHA Cambridge Hospital in English, Spanish, Portuguese and Haitian Creole. Join us to learn what to expect when you deliver your baby at CHA. Welcoming pregnant parents with a gestational age between 20 to 36 weeks, and their support person at no cost. Call **617-665-1660** to register. Scan the QR code for upcoming events.

Breastfeeding. We consider breastfeeding an important part of a healthy postpartum period for both parents and babies. Please discuss with your provider options for breastfeeding resources available at CHA.

Meeting other providers. Whether you will deliver with a doctor or midwife, we offer meet and greets where you can meet other providers who might be on-call when you deliver. These events happen once every three months, so ask at your next appointment about the next one. You will have an opportunity to tour the maternity floor following the event. Call **617-665-1660** to register.

Scan the QR code for upcoming events.

Other Resources

Many local organizations offer a variety of classes and drop-ins, sometimes with a cost involved. Classes include Childbirth, Natural Childbirth, Newborn Care, Breastfeeding, CPR, etc.

Mama & Me (http://www.mymamaandme.com/)

Boston Baby Beginnings (http://www.bostonbabybeginnings.com).

Jewish Family Services: new mom support and postpartum depression support group
http://www.jfcsboston.org/

There are many great websites and books available.

What to Expect When You Are Expecting

The Mayo Clinic Guide to a Healthy Pregnancy

www.whattoexpect.com

www.babycenter.com

text4baby – free text messages each week on pregnancy and baby care health tips.
Text B-A-B-Y to 511411 (or B-E-B-E for Spanish)

www.Kellymom.com

www.zipmilk.org

Massachusetts WIC Nutrition Program - (800) 942-1007

La Leche League - (800) LA LECHE

Nursing Mothers' Council - (617) 244-5102

Massachusetts Breastfeeding Coalition - www.massbfc.org

International Lactation Consultant Association - www.ilca.org

National Women's Health Information Center - (800) 994-9662

When to Call Your Care Team

Please do not use MyChart for questions or concerns that require a same day response!

Weeks 1 – 28 (first and second trimester) call the clinic for:
- Vaginal bleeding
- Strong, persistent lower abdominal pain
- Loss of fluid

Weeks 28 – 41 (third trimester until delivery) call the clinic for:
- Loss of fluid (watery gush or persistent leaking of watery fluid)
- Vaginal bleeding
- Decrease in fetal movement

Signs of preterm labor (prior to 37 weeks)

If you experience any of these signs prior to 37 weeks, please empty your bladder, drink 2-3 large glasses of water, lay down and rest on your left side.
- Persistent abdominal cramping or contractions
- Persistent abdominal or pelvic pressure, may radiate into thighs
- Constant low back pain/ache

If these symptoms do not resolve within one hour, please call your clinic.

You can always reach an on-call provider 24-hours a day.
Our team members will answer any important questions about your pregnancy that cannot wait until business hours. Just call the main number of your care center and be sure to tell us you are pregnant. You will get a call back from a provider who can help with your specific needs. If you do not hear from us within 15 minutes, please call back.

Clinic Phone Numbers

CHA Obstetrics and Gynecology at Revere	617-665-2800
CHA Obstetrics and Gynecology at Cambridge	617-665-2800
CHA Obstetrics and Gynecology at Somerville	617-665-2800
CHA Birth Center 1st Floor	617-665-2800
CHA Revere Primary Care/OB	781-485-8222
CHA Malden Primary Care/OB	781-338-0500
CHA One Cabot Primary Care/OB	617-665-3370
CHA Windsor Primary Care/OB	617-665-3600

If you call during regular office hours, a triage nurse will respond to your call.
All calls are answered in order of medical urgency.

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