

- YOUR GUIDE TO -

A Healthy Pregnancy



DISCLAIMER: This book is designed to be an aid to patients. The information contained within is intended to be of general informational use and does not constitute medical advice, probable diagnosis or recommended treatments.

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Do you think you're in labor? Or are you experiencing any of these warning signs?

- Bleeding
- Abdominal Pain
- Swollen Hands or Face
- Rapid Weight Gain
- Itching on Hands
- Sudden Injury (Like a Fall)
- Back Pain That Doesn't Go Away
- Blurry Vision
- Fever
- Baby Moving Less Often

Call Us First 518-792-7841

Your Hudson Headwaters Women's Health providers will give you the guidance and direction you need.

In case of a medical emergency, call 911

HUDSON HEADWATERS

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Hudson Headwaters Patient Portal

Ith the Patient Portal, you have secure, ersonal health and billing information.

LOG IN OR SIGN UP

Get Started

During checkin at your mark visit, link to have a Patient Portal account created. Then, when you receive the confirmation email, follow the link to complete the sign-up process.

Established patients may also contact our Patient Portal Indplane at <u>518-824-8620</u> Monday through Friday between 9:00 a.m. and 5:00 pm. for assistance registering for the Patient Portal.

Find Information You Need

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Sign Up for our Patient Portal

With the patient portal, you have secure and convenient online access to your primary care team as well as your personal health and billing information.

HHHN.org/patient-portal

Find Information You Need

- Medical information including medications, allergies, immunizations and vital statistics
- Lab results
- Referrals to other providers
- Appointment history and your provider's summaries of those visits
- Billing statements and payment history

Communicate With Us

- Schedule or modify appointments
- Send questions to your care team and receive answers by secure email
- Attach photos (.jpg or .png) or documents (.pdf) to the messages you send to your care team
- Receive secure emails when new information is available for your review
- Share your personal health information with your family or caregivers
- Complete and update medical forms
- Pay bills online

The patient portal is for non-urgent matters. Messages sent after 5pm will not be seen until the following business day. For emergencies, call 911. For help using the patient portal, please call our support line at 518-824-8620.

Welcome Growing Family,

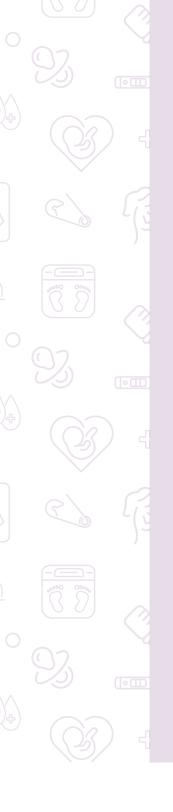
Thank you for choosing Hudson Headwaters for your prenatal care.

During your pregnancy, you will be cared for by our obstetrical team that consists of physicians, certified nurse midwives, nurse practitioners and physician assistants who will work together to provide high-quality care to you and your baby.

Over the next nine months, we hope you enjoy using this educational guide and journal. If you have any questions, please ask us at your next visit.

We wish you an enjoyable, healthy and well-informed pregnancy and a safe delivery.

Your Women's Health Team



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Taking Good Care of Yourself







Wear your seatbelt.



See your dentist regularly for dental cleanings and check-ups. (Page 54)



Protect yourself and your baby from dangerous infections by getting safely vaccinated during pregnancy. (Page 61)



Seek support from your loved ones to help you and your growing family.

Taking small actions daily will help you and your baby stay healthy.

Appointment Schedule

Setting up times to see your providers for prenatal care is an important part of a healthy pregnancy. Every pregnancy is different, but we would like to see you:

Once a month until 32 weeks Every two weeks from weeks 33-36 Weekly from week 36 until delivery

In some cases, your appointments may be more frequent due to complications, high-risk situations or to go over any concerns you may have.

Most of your visits will be routine and consist of:

- Weighing you
- Checking your blood pressure
- Measuring your uterus
- Listening to your baby's heartbeat
- Asking you how your pregnancy is going
- Answering any questions that you may have



Prenatal = the time before birth

What is prenatal care?

From the moment you become pregnant to the time you give birth, prenatal care keeps you and your baby healthy. It includes visits with your health care providers and also includes everything you do to keep your baby healthy like eating properly, learning about food safety, not smoking or drinking alcohol, getting enough exercise and educating yourself about your pregnancy and the birth process. You are a big part of prenatal care. This guide and journal aims to help you along the way.

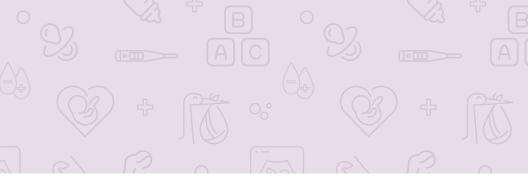


Having a due date helps your provider look for any changes during the final weeks of your pregnancy. But the truth is, most babies are not born on their due date. It's impossible to know the exact day with 100% certainty. Most pregnant people will give birth naturally (without being induced or having a c-section) around their due date.

Date of last menstrual period

Ask your provider what your due date is and write it below.





Questions to Ask Your Care Team

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Trimester Calendar

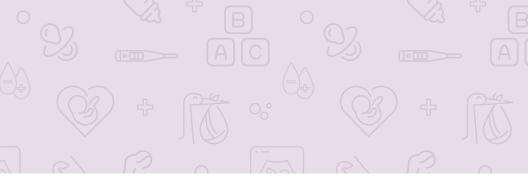
What is a trimester?

A trimester is a period of three months.

Your pregnancy will last approximately 40 weeks, or nine calendar months, from the beginning of your pregnancy to the time of birth.

| Month | Week 1-13 | | | | |
|-------|-----------|----|----|----|----|
| One | 1 | 2 | 3 | 4 | |
| Two | 5 | 6 | 7 | 8 | |
| Three | 9 | 10 | 11 | 12 | 13 |

First Trimester



Second Trimester

| Month | Week 14-27 | | | | |
|-------|------------|----|----|----|----|
| Four | 14 | 15 | 16 | 17 | 18 |
| Five | 19 | 20 | 21 | 22 | 23 |
| Six | 24 | 25 | 26 | 27 | |

Third Trimester

| Month | Week 28-40 | | | | |
|-------|------------|----|----|----|----|
| Seven | 28 | 29 | 30 | 31 | |
| Eight | 32 | 33 | 34 | 35 | |
| Nine | 36 | 37 | 38 | 39 | 40 |



Provider Visits

In your first trimester, you will meet with your provider once a month. During these visits, you will have prenatal tests that can provide valuable information about your baby's health. There are two kinds of prenatal tests:

- Screening tests (such as ultrasounds, blood and urine tests) to see that your fetus is developing normally
- Diagnostic tests to detect fetal genetic abnormalities (see page 22)

All pregnant people will be offered screening tests. Some people may be offered or choose to order diagnostic tests.

Dating Ultrasound (First Visit)

- Confirms your due date and how far along your pregnancy is by measuring the crown-rump length from the top of the head (crown) to the bottom of the buttocks (rump)
- Confirms your baby's heartbeat
- Confirms multiples pregnancy (twins)



What is an ultrasound exam?

An ultrasound exam involves placing water-soluble gel on top of your belly and scanning it with a device that sees your uterus and your growing baby inside. The ultrasound device creates a picture (sonogram) of your baby. Ultrasound exams are safe and very important in caring for you and your baby during your pregnancy. We hope you will find them to be a helpful experience.



Routine Blood and Urine Tests

Blood and urine tests may be ordered to find out:

- Your blood type: Some blood types will need special care.
- Your complete blood count (CBC): To check for anemia (when your blood is low in red blood cells).
- Your infection status: Do you have an infectious disease? You may be given a blood test to look for different infections including hepatitis, syphilis or HIV. A urine sample will be tested for other signs of infection.
- Your STI status: We take a cervical culture to test all pregnant people for the presence of sexually transmitted infections, including gonorrhea or chlamydia.
- Your immunity: Are you immune to rubella/ measles and chickenpox/varicella?
- Your lead level: A simple blood test looks for elevated levels of lead which can affect your baby's brain development.

(See page 22 for prenatal genetic testing.)



Some patients like to record their blood pressure, weight and medications during their first trimester. This information is also accessible in the patient portal.

| Date: | Blood Pressure: | Weight: |
|--------------|-----------------|---------|
| Medications: | | |
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Questions to Ask at Your Next Visit

20 A Healthy Pregnancy Booklet



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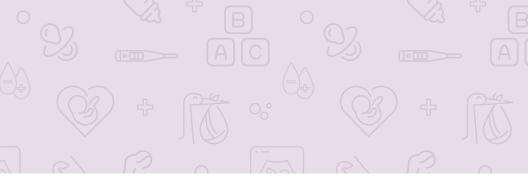
Prenatal Genetic Testing

During your pregnancy, you and your provider will need to make some choices about what kind of prenatal genetic testing you should have to test for birth defects. Deciding which tests to take can be a hard and emotional process. Which tests you choose will depend on your own personal wishes, which trimester you are in and your family health history.

How do you decide if prenatal genetic testing is right for you?

First, ask yourself some important questions before making a decision:

- Do pregnancies that need special care run in your family?
- Is testing covered by your insurance? If not, can you afford the out-of-pocket expense? Some prenatal tests might cost thousands of dollars.
- Are there any risks for my baby and for me to have the testing done?
- What information will each test give me? Do I need to take one test or many?
- How accurate are the results?
- If the test results are not normal, what would I do with this information?

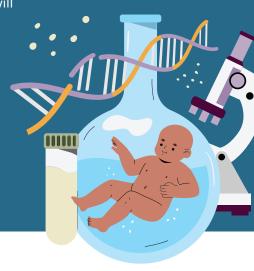


Second, you may want to discuss these questions with your provider or request a consultation with Albany Medical Center Division of Maternal Fetal Medicine, which partners with Hudson Headwaters on high-risk pregnancies.

What is Prenatal Genetic Testing?

Prenatal genetic testing is optional. It allows you to test your baby for some genetic conditions. Genetic testing is offered to all pregnant patients but it is *not* mandatory.

Sometimes your provider will recommend that you get prenatal genetic testing based on abnormal findings during routine screening tests (like ultrasound, blood or urine tests) or family history. Ultimately, you can decide what is right for you and your family.



Prenatal Genetic Testing

At your first trimester visit, your provider will discuss two different testing paths you could take. You may select both, either or neither:

Path 1

These tests can help determine if your baby has a genetic condition caused by the baby having the wrong number of chromosomes. A chromosome is a structure that contains a person's genes. Normally, a person has two copies of each chromosome--one each from his or her biologic parents. Getting an extra copy (or one too few) can cause serious medical problems. The most common condition is Down Syndrome, or trisomy 21, meaning three copies instead of two of chromosome 21. We offer screening for this condition, as well as trisomy 13 and 18.

Cell free DNA (NIPT): Blood test anytime after 10 weeks that detects DNA in your blood from the placenta, which is almost always the same as the baby's DNA. If you get this test, you may also choose to have another blood test to tell the AFP level, which screens for spina bifida, or the 11-13 week ultrasound.



Path 2

These tests can tell you whether you are a carrier of a genetic condition that could be passed on to your baby. Screening for Cystic Fibrosis (CF), a lung and digestive disease, and Spinal Muscular Atrophy (SMA), a neurologic disease, are offered to all pregnant patients. If you have Jewish or certain other heritage, you may be screened for Tay-Sachs. If you have a family member with intellectual disability, developmental delay, or autism, you may also be screened for Fragile X.



Provider Visits

In your second trimester, you will continue to meet with your health care provider once a month. Asking questions about your health and your baby's health will help make your pregnancy as safe as possible. This is also a great time to talk about your birthing plans. (See page 62)

During your second trimester prenatal appointments:

Measurements will be taken to track your baby's growth:

Your provider will measure the distance from the top of your uterus to your pubic bone. Typically, this length (in centimeters) is the same as the number of weeks you are in your pregnancy.

We'll check your baby's heartbeat: A Doppler instrument will be used which allows your provider to "hear" the baby's heartbeat.

You'll begin to feel your baby's movements:

Healthy babies move around a lot, flutter or kick.

What is your blood type?

If you have Rh negative blood (A-, B- or O-), you will need to get a RhoGAM shot during your second trimester at your 28 week visit. If you don't know your blood type, your provider will be able to tell you.

My blood type is:



Anatomy Ultrasound (20 Weeks)

Level I Anatomy Screen:

- Looks for any physical abnormalities
- Shows the growth of your fetus
- Checks if the level of fluid surrounding your baby is too much or too little
- Usually reveals the baby's sex

Level II Anatomy Screen:

If any abnormalities or concerns are identified during your Level I ultrasound, or if you have any conditions that may impact the baby's development, you will be referred to our regional obstetrics specialists at Albany Medical Center's Division of Maternal Fetal Medicine for a more detailed ultrasound exam and discussion.

Blood Work

Complete Blood Count (CBC): To check that you have not developed anemia.

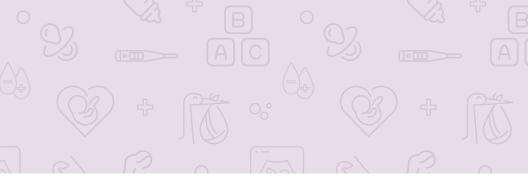
Maternal Diabetic Screen: This test involves drinking a sweet beverage and having blood drawn one hour later to see if you have developed diabetes during your pregnancy.

RhoGAM Screen: To prepare an injection for you if you are Rh negative.



Some patients like to record their weight and vital signs (blood pressure, heart rate and baby's heart rate) during their provider visits. This information is also accessible in the patient portal.

| Date: | Blood Pressure: | Weight: |
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| Your Heart Rate: | | |
| Baby's Heart Rate | | |
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Questions to Ask at Your Next Visit

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Provider Visits

During the third trimester, you will begin to see your health care provider more frequently—once a month until week 32, twice a month from weeks 33-36, and once a week from week 36 until birth. During these visits, your provider will continue to monitor your blood pressure and weight gain, as well as your baby's heartbeat and movements.

Checking your baby's position: Near the end of your pregnancy, your provider will check the position of your baby during your 32 week ultrasound and see if your baby is positioned headfirst, rump-first (frank breech) or feet-first (footling breech). If your baby is not headfirst, your provider will closely monitor to see if your baby will turn headfirst before birth.

Detecting cervical changes: If there are concerns (or at your request), your provider may complete a pelvic exam to check your cervix, which will begin to soften, dilate (open up) and get thinner as your body prepares for birth.

Report any dangerous signs & symptoms immediately.

During your final third trimester visits, continue to ask questions and discuss any symptoms that might seem concerning like:

- Bleeding
- Abdominal pain
- Swollen hands or face
- Rapid weight gain
- Itching

- Back pain that doesn't go away
- Blurry vision
- Fever
- Baby moving less often



Ultrasound (32 Weeks)

Growth Scan:

- Measures approximate weight of your baby
- Checks the position of your baby
- Checks the fluid level surrounding your baby

As you approach the end of your pregnancy, your baby will be about 19 to 21 inches long and weigh 6 to 9 pounds.

Blood Work

Group B Streptococcus Screen (36-37 Weeks): During this test, vaginal and rectal swabs will be taken to detect group B strep bacteria. If you test positive, you will be treated with antibiotics during delivery to protect your baby from contracting the infection at birth.

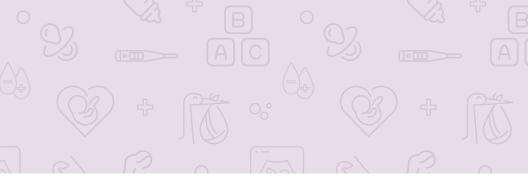
Delivery

We hope that you will deliver your baby at Glens Falls Hospital's Snuggery. If there is a need for intensive care, you may be referred to a medical center such as Albany Medical Center. This is to ensure that you get the highest level of care and that resources are made available when they are needed.



Some patients like to record their weight and vital signs (blood pressure, heart rate and baby's heart rate) during their provider visits.

| Date: | Blood Pressure: | Weight: |
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| Your Heart Rate: | | |
| Baby's Heart Rate | 2: | |
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Your Baby's Growth



Month 1

By 4 Weeks: A fertilized egg has divided into many cells and traveled and attached to your uterus from your fallopian tube. The egg is now an embryo.

Month 2

By 6 Weeks: Your baby's heart is beating and its circulatory system is forming. Your baby's face, eyes, ears and mouth develop as well as its intestines and brain.

Month 3

By 10 Weeks: Your baby's nerve cells create neural pathways and a breathing tube extends from the throat to your baby's developing lungs. Your baby's skin is translucent; its arms and nails form.

By 11 Weeks: Amazingly, your baby's basic anatomy is in place, and the most critical phase of development is complete.



Month 4

By 14 Weeks: Your baby's diaphragm has developed, and your baby is able to kick and stretch and suck his or her thumb.

By 18 Weeks: Your baby can sense light. Your baby can move his or her joints, and your baby's skeleton is forming. Your baby is flexing his or her arms and legs.



Month 5

By 22 Weeks: Your baby's five senses—smell, vision, touch, taste and hearing—are developing. Your baby might even be able to hear you talk.

Month 6

By 26 Weeks: Your baby can suck his or her thumb, swallow and open and close his or her eyes. Your baby now looks like a baby. His or her hair begins to grow, and your baby now has baby fat. Your baby is developing his or her lungs.

Your Baby's Growth



Month 7

By 30 Weeks: Your baby is now in a regular routine of sleeping and waking, and his or her brain is very active. He or she can blink and your baby's head is growing in size.

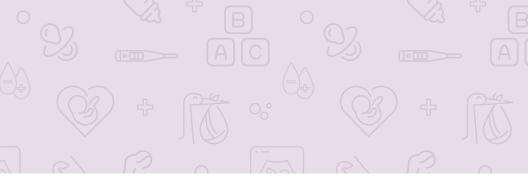
Month 8

By 34 Weeks: Your baby's central nervous system is maturing, as are your baby's lungs.

Month 9

By 38 Weeks: Your baby's kidneys and lungs are now fully developed. Your baby's liver can now process some waste.

By 39 weeks: Your baby's physical development is complete, and he or she is getting ready to enter into the world.



Questions to Ask at Your Next Visit

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How Big is Your Baby?





Nutrition, Weight Gain & Food Safety

How much should I eat during pregnancy?

In the first trimester of pregnancy, many pregnant people feel nauseous (sick to your stomach) or cannot stand the smell of some foods. This can make it hard to eat a regular meal. When you are pregnant, you need to eat about 200 more calories per day than when you were not pregnant. You may feel better if you eat something every few hours. Eating small meals five or six times each day instead of larger meals may help you feel better and make sure your baby has a steady supply of food.

Recommended Healthy Weight Gain During Pregnancy

If you are:

Underweight (BMI less than 18.5):

Gain 28 to 40 pounds

Normal (BMI between 18.5 and 24.9):

Gain 25 to 35 pounds

Overweight (BMI between 25 and 29.9):

Gain 15 to 25 pounds

Obese (BMI 30 or more):

Gain 11 to 20 pounds

Your BMI is your weight in kilograms (kg) divided by your height in meters squared. Ask your provider what your BMI is.



Should you take a prenatal vitamin?

YES! Ideally, it's best to start taking prenatal vitamins before conception. Taking at least 400-800 mcg of folic acid daily reduces the risk of neural tube defects by 70%. Most prenatal vitamins contain folic acid as well as other vitamins that pregnant people and their developing fetus need. Talk to your provider about what is right for you.



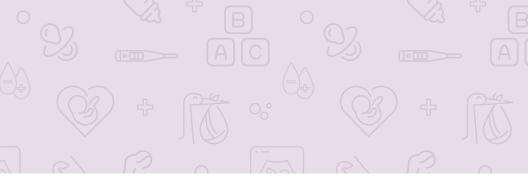
Nutrition, Weight Gain & Food Safety

What should I eat during pregnancy?

You do not have to eat a lot more food during pregnancy. But it is important to eat the right food the most healthy food for you and your baby.

Every day, make sure you have:

- ~64 oz of water
- 6 to 9 servings of whole-grain foods like bread or pasta. By reading the label, you will know that you are getting whole grain and not just brown-colored bread or pasta (1 slice of bread or a half cup of cooked pasta is a serving)
- 3 to 4 servings of fruit. Fresh, raw fruit is best (1 small apple or a half cup of chopped fruit is a serving)
- 4 to 5 servings of vegetables (1 medium carrot or a half cup of vegetables is a serving)
- 2 to 3 servings of lean meat, fish, eggs or nuts (A piece of meat the size of a pack of playing cards is 1 serving)



- 1 serving of vitamin C-rich food, like oranges, sweet peppers, or tomatoes (one half cup is a serving)
- 2 to 3 servings of iron-rich foods, like black-eyed peas, sweet potatoes, greens, dried fruit, or meat
- 1 serving of a food rich in folic acid, like dark green, leafy vegetables (one half cup is a serving)
- 200mg of caffeine is considered safe

Nutrition consults may be recommended by your provider especially if you have maternal obesity, diabetes or develop diabetes during your pregnancy, excess or poor weight gain during pregnancy or history of an eating disorder.



Nutrition, Weight Gain & Food Safety

Eating Fish During Pregnancy

Fish has many nutrients that can help your baby's growth and development. Here are the recommendations for people of childbearing age, especially those pregnant and breastfeeding.

- Eat 2 to 3 servings each week from the "Best Choices" list OR 1 serving from the "Good Choices" list
- Eat a variety of fish

Best Fish Choices Eat 2 to 3 Servings a Week



Good Fish Choices Eat 1 Serving a Week

Bluefish Buffalofish Carp Chilean Sea Bass Grouper Halibut Mahi Mahi/ Dolphinfish Monkfish Rockfish Sablefish Sheepshead Snapper Spanish Mackerel Striped Bass (ocean) Tilefish (Atlantic Ocean) Tuna, Albacore/ White Tuna (canned and fresh/frozen) Tuna, Yellowfin Weakfish/Seatrout White Croaker/ Pacific Croaker

Fish Choices To Avoid Highest Mercury Levels

King Mackerel Marlin Orange Roughy Shark Swordfish Tilefish (Gulf of Mexico) Tuna, Bigeye

Fish caught by family and friends, such as Bass, Walleye, Northern Pike, Trout and Perch are more likely to have fish advisories due to mercury or other contaminants.

Learn more at www.cdc.gov

Nutrition, Weight Gain & Food Safety

Because of the risk of listeriosis (a serious infection caused by eating food contaminated with a type of bacteria called Listeria) to yourself and your baby, follow these food safety guidelines during your pregnancy:

Deli Meats and Smoked Fish

Do not eat spreads and pates made from meat. Always heat or reheat hot dogs, lunch meat, deli meat (such as turkey, salami, and bologna), or deli smoked seafood to 165°F.

Meat (Beef, Chicken and Pork)

Do not eat any meat that is rotten or raw.

Milk and Cheese

Do not eat unpasteurized milk, feta, Brie, Camembert, blue-veined cheeses, and Mexican-style Queso Blanco or Queso Fresco. You can eat hard cheeses, semisoft cheeses like mozzarella, processed cheese slices, cream cheese, cottage cheese, or yogurt made with pasteurized milk, skim or 1% pasteurized milk.

Raw Foods

Do not eat any kind of raw food including raw meat, raw fish, sushi, raw shellfish, foods with raw eggs, raw vegetable sprouts or unpasteurized milk or juices.



Safe Food Prep

As a pregnant person, it is especially important that you or those preparing your food are always careful with food handling and preparation.

How Do I Prepare Food Safely?

- Wash your hands and cooking surfaces often
- Keep raw meat away from fruit and vegetables and cooked meat
- Cook your food until it is steaming hot or at least to 165°F
- Cook meat until no pink remains
- Keep perishable food cold or frozen
- Keep your refrigerator at 40°F or less
- Keep your freezer at 0°F or less
- Throw away perishable food that is left at room temperature for two hours or more
- Do not eat foods if they are past the expiration date on the label



Getting 30 minutes of daily exercise during your pregnancy will help you and your baby stay healthy. During pregnancy, exercise helps to:

- Prepare you for giving birth because your muscles will be stronger, and you'll have more stamina
- Increase your energy before and after birth
- Improve your mood
- Lower stress
- Manage your weight gain
- Decrease backaches and muscle aches
- Keep your digestion moving; not get constipated

Exercises that are considered safe during pregnancy:

- Walking
- Swimming
- Biking
- Yoga
- Low impact aerobics
- Light weight training

- Hiking
- Dancing
- House cleaning
- Yard work
- Stretching



When you exercise, be sure to warm up slowly and cool down slowly. Most exercises are safe while pregnant, but it's important that you talk with your provider about what will work best for you.

During exercise, focus on:

- Staying hydrated (drink water before and after)
- Maintaining normal body temperature (don't get too hot or too cold)
- Testing out your balance before doing any new activity (your growing belly might make you off-balance)
- Not lying flat on your back
- Listening to your body

Stop exercising if you feel:

- Pain
- Dizziness
- Shortness of breath
- Uterine cramps like when you get your period
- Contractions (your stomach gets tight and hard)





How To Meditate

Relaxation during pregnancy is important. Meditation can help. To begin, take a moment to focus on your breathing. Notice your breath and how your belly goes up and down. Follow the in-and-out movement of your breath for a few moments. See how this takes your mind away from worry, pain, anxiety or repetitive thoughts.

You can focus on your breath anywhere. You don't need to be in a yoga studio or in comfortable clothes or all by yourself on a mountain top. You can be in a doctor's office, on a crowded train or in line at the grocery store. Meditation can take 1 minute or 1 hour.

There is no right or wrong way to meditate. Creating artwork, coloring, and doing any activity in a mindful way is also a form of meditating.



Sex During Pregnancy

Desiring, imagining and having sex is normal and acceptable during most parts of a normal pregnancy. Not desiring sex and not having sex is also normal during pregnancy.

If you are having sex, make sure:

- Your partner is only having sex with you
- You are not having any bleeding during or after sex
- Sex isn't causing continuing cramping or contractions
- Sex is comfortable and enjoyable
- You are not being forced to have sex

We understand that you may continue to have questions. Please contact us by phone if you have urgent problems or by portal or in person at your next visit if you would like to discuss further.

Sex After Pregnancy

Intercourse can usually be resumed six weeks after delivery. Having sex too soon can be painful and cause problems in healing after delivery. Not desiring sex after delivery, sometimes for months, is normal.



Alcohol

All types of alcohol, including beer, wine and liquor, can hurt your baby's brain and body. Do not drink alcohol while you are pregnant, not even in small amounts during special occasions. Drinking alcohol during pregnancy can cause miscarriage and stillbirth as well as fetal alcohol spectrum disorder. Babies born with fetal alcohol spectrum disorder may have problems such as:

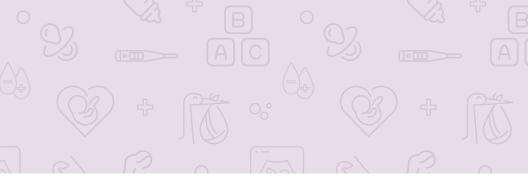
- Learning disabilities
- Hyperactivity
- Difficulty with attention
- Speech and language delays
- Low IQ
- Poor reasoning (thinking) and judgment skills

Beauty Products

Chemicals used in nail and hair salons are not dangerous during pregnancy, but may not be 100% safe.

Caffeine

To be safe, limit caffeine intake to 200 mg per day (2 small cups of coffee). Drinks that contain caffeine include coffee, tea, certain sodas and sports drinks.



Cat Litter

Cleaning the litter box might expose you to a virus called toxoplasmosis. Getting sick with this virus can harm your baby, so ask someone else to change the cat litter.

Chemicals

Do not breathe in any kind of strong-smelling chemicals in your home, workplace or when traveling. This includes paint, cleaning fluids and varnish.

Cleaning Products

Avoid using anything labeled "toxic" or that has a warning label on it. Try natural products like baking soda, vinegar and water. Do not mix ammonia and chlorine products. If you use any cleaning products, make sure to wear thick rubber gloves and open the windows to get rid of the fumes.

Craft Supplies

Avoid using certain craft supplies like stained glass material, oil paints and ceramic glazes. Instead, use watercolor or acrylic paints.





Dental Work

Pregnant people should have their teeth cleaned every six months. Although most dental work is safe during pregnancy, it's wise to delay dental procedures until after the first trimester. Your dentist may also suggest postponing dental treatments during your pregnancy if you've had a history of miscarriage or are at risk for one.

Routine dental x-rays are generally safe, but you may choose to delay them or have them only if it's a medical emergency. This should be a decision that you and your providers make together. Always be sure to shield your belly with a lead apron to protect you and your baby.

Hot Tubs and Saunas

Avoid becoming too hot in a hot tub or sauna as this could be harmful to your baby's brain and body.

Lead Paint

Homes built before 1978 may contain lead paint, so do not touch any paint that is crumbling or peeling. Do not breathe in air particles if paint is being removed or sanded.



Medications/Supplements

IMPORTANT: All medication use should be discussed with your provider prior to use. No medicine, drug or supplement is 100% safe to use during pregnancy.

Almost all pregnant people will face a decision about taking medicine before and during pregnancy but not all medicines are safe. Some medicines may cause birth defects, pregnancy loss, prematurity, infant death or developmental disabilities.

The fetus forms its basic body plan during the first 5 to 13 weeks after conception. This period of time, known as "organogenesis", is when drugs are most likely to induce birth defects. We recommend you refrain from use of over-the-counter medications in the first trimester, unless absolutely necessary.

Safety Precautions

If needed, the following medications are considered to be safe in pregnancy:

| Reason | Safe Medications to Take During Pregnancy |
|--------------|---|
| Allergy | Loratidine (Claritin[®]) Cetirizine (Zyrtec[®]) |
| Cold and Flu | Try non-medicated options first. Humidifiers Warm fluids Warm, moist compress to cheeks/forehead Saline nasal drops or spray Warm salt water gargle Acetaminophen (Tylenol®)* Dextromethorphan (Robitussin®)* Guaifenesin (Mucinex® [plain])* Vicks® Vapor Rub Mentholated or non-mentholated cough drops (Sugar-free cough drops for gestational diabetes should not contain blends of herbs or aspartame) *Note: Do not take the "SA" (Sustained Action) form of these drugs or the "Multi-Symptom" form. Do not use Nyquil®, or a generic version, |
| | due to its high alcohol content. |



| Reason | Safe Medications to Take During Pregnancy |
|-----------------------|---|
| Diarrhea | If you have diarrhea that is not treatable with fluids and/or changing your diet, call your provider. |
| Constipation | Try non-medicated options first. Drink at least 8 glasses of water per day Take a daily gentle walk Fiber/Psyllium (Fiberall[®], Metamucil[®])* Docusate (Colace[®])* Miralax[®]* Polycarbophil (FiberCon[®])* *Note: Be sure to drink lots of water when using |
| First Aid Ointment | Neomycin/polymyxin B/bacitracin (Neosporin[®]) |
| Headache | Acetaminophen (Tylenol[®]) 400mg magnesium oxide |
| Heartburn | Aluminum hydroxide/magnesium carbonate (Gaviscon®)* (Occasional use only) Famotidine (Pepcid AC®) Aluminum hydroxide/magnesium hydroxide (Maalox®) Calcium carbonate/magnesium carbonate (Mylanta®) Calcium carbonate (Titralac®, Tums®) Gas-X®, Mylicon® or Phazyme® |

Safety Precautions

| Reason | Safe Medications to Take During Pregnancy |
|----------------------|---|
| Hemorrhoids | Try non-medicated options first. Cold compress Warm bath Phenylephrine/mineral oil/petrolatum (Preparation H[®]) Witch hazel (Tucks[®] pads or ointment) |
| Insect Repellent | Checking for ticks after being outside is important. Wear long socks/lighter colored pants to prevent tick bites. Use insect repellent like DEET or essential oils. Use over-the-counter options for insect bites like: Plain calamine lotion Non-medicated skin creams |
| Nausea & Vomiting | Try non-medicated options first. Sea-bands Acupressure points Doxylamine (Unisom SleepTabs®) Vitamin B6 Ginger Extract |
| Rashes | Diphenhydramine cream (Benadryl[®]) Oatmeal bath (Aveeno[®]) Topical hydrocortisone |



| Reason | Safe Medications to Take During Pregnancy |
|--------------------|--|
| Sleep | Try non-medicated options first. Create daily bedtime rituals Drink a calming tea Read before bed Talk to your provider about other options. |
| Yeast Infection | Over-the-counter Monistat [®] |

Pesticides

Pesticides can be found in gardens and on fruits and vegetables and can harm your baby. Wash all produce thoroughly.

Smoking (Cigarettes and/or Marijuana)

Do not smoke or use vaping devices while you are pregnant. The risks of tobacco smoke include fetal size (small for gestational age), risk of abruption (placenta separates from uterine wall), risk of preeclampsia, after delivery risk of asthma and SIDS in baby. Cannabis use while breastfeeding is not recommended due to high levels of THC in breast milk due to fat solubility and unknown impacts on fetal development. Secondhand smoke (the smoke that you breathe in from another person smoking near you) can also hurt your baby. Tobacco use is also unsafe after your baby is born.



Street Drugs

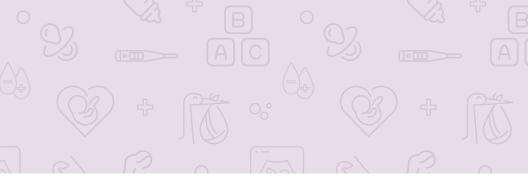
Do not use illegal street drugs while you are pregnant. POSH/K2/Spice, cocaine, heroin, crack, marijuana, prescription pain medications (ones that are not currently prescribed to you) and benzodiazepines can hurt your baby's brain and cause labor to begin too early.

If you are dependent upon or addicted to any illegal street drugs, alcohol or prescription controlled medications, it's important that you tell your provider so that they can help you receive treatment. Many Hudson Headwaters providers are able to prescribe treatment including medications to treat addiction to opiates.

Travel

Most pregnant people can travel up to the last month of pregnancy. Always wear your seat belt and take rest breaks when traveling long distances. When flying, get up and walk around every hour. Drink plenty of water. Take a copy of your prenatal medical records with you.

To avoid Zika Virus and malaria, pregnant people should avoid traveling to some international destinations. If you must travel to an area with Zika or malaria risk, take strict precautions to prevent mosquito bites and avoid sexual contact. Find out more from the Centers for Disease Control (CDC) Zika Travel Information page at www.cdc.gov.



Vaccinations

When you get a vaccine during pregnancy, you become protected against getting the infection and pass this protection onto your baby.

Which vaccinations are safe and recommended?

- Influenza (flu) inactivated injection vaccine is safe at any time during pregnancy
- Tetanus, Diphtheria and Pertussis (Tdap) can be received at 28 weeks or after to protect both you and your baby
- The COVID-19 vaccine is safe and recommended for all pregnant people
- The RSV vaccine can be received in the 3rd trimester during RSV season

All other vaccines should be reviewed with your providers.

It is safe for a person to receive routine vaccines right after giving birth, even while they are breastfeeding. Talk to your provider about which vaccinations are safe for you.

Vaginal Childbirth

Choosing to give birth without pain-relieving medications and using natural pain-relieving techniques (like relaxation and controlled breathing) is called natural childbirth. Some pregnant people find that treating labor like a natural event can be empowering and rewarding.

Methods and Techniques for Natural Childbirth

There are many different types of natural childbirth educational classes available online. Some have local chapters you can join. If you are interested in learning more, we encourage you to visit these websites:

Doula / DONA • www.dona.org

DONA is a leading international doula certifying organization. A doula is a trained (non-medical) professional hired by the expectant parent to provide physical, emotional and informational support to the expectant parent before, during and shortly after childbirth.

Lamaze • www.lamaze.org

Lamaze is a nonprofit organization that promotes a natural, healthy and safe approach to pregnancy, childbirth and early parenting.

Bradley Method • www.bradleybirth.com

The Bradley Method helps your partner or support person know what to do when you are giving birth. This class is a 12-week program and provides small classes, with workbooks and interactive preparation.



Hypnobirthing • www.hypnobirthing.com

Hypnobirthing is an approach to childbirth developed by hypnotherapist, Marie Mongan. It emphasizes breathing and relaxation techniques to help you naturally through labor and delivery.

Besides relaxation and controlled breathing, there are other natural remedies for pain relief including:

- Music Therapy
- Water Therapy (tub or shower)
- Heat/Cold Therapy
- Massage Therapy

- Acupuncture/Reiki
- Position Changing
- Walking, Squatting, Lunging, Sitting or Using a Birth Ball

Additional Childbirth Education Resources

Glens Falls Hospital Snuggery: 518-926-6095 or albanymed.org/specialty/birth-center-in-glens-falls

Warren County: 518-761-6580 or warrencountyny.gov/healthservices

Postpartum Care



We're here for you after the baby, too!

Being a new parent means riding the emotional roller coaster of postpartum hormones, dealing with sleep deprivation, adjusting to your changing body and recovering from childbirth—all while caring for your newborn.

Your first postpartum appointment is scheduled with us at:

Women's Health90 South Street, Glens Falls

Warrensburg Health Center
 3767 Main Street, Warrensburg

West Mountain Family Health
 161 Carey Road Building 2, Queensbury

Moreau Family Health 1299 Route 9, Gansevoort

On this date and time:



Postpartum Birth Control

It is possible to become pregnant very soon after having a baby. Becoming pregnant too soon afterwards can put you and the future baby at risk of more problems.

Birth control should be used for at least the first 12 months after delivery and continued until you and your family are ready for your next child. This helps avoid an unintended pregnancy.

When choosing a birth control method after pregnancy, think about the following:

- **Timing:** Some birth control methods can be started right after childbirth. With other methods, you need to wait a few weeks to start.
- **Breastfeeding:** There are a few methods that are not recommended during the first weeks of breastfeeding because they may affect your milk supply.
- **Effectiveness:** Sometimes, the method you used before your pregnancy might not be the best choice after.

Before you deliver your baby, talk to your provider about what method is right for you.



Call Us Immediately With These Warning Signs After Giving Birth

Possible Infection Discharge with foul odor, redness, increased pain and/or fever

Bleeding Saturating one pad an hour, or more

Mastitis Hard area in breast, redness, fever, flu-like symptoms

Preclampsia

Blurry or spotted vision, severe upper right abdominal pain, headache that won't go away, blood pressure higher than 140/90

> **Postpartum Depression** (see page 68)

518-792-7841

Your Hudson Headwaters Women's Health providers will give you the guidance and direction you need.

In case of a medical emergency, call 911

Postpartum Care

Breastfeeding

Breastfeeding offers many health benefits for infants and expectant parents including providing essential nutrition and protection against certain childhood infections. It is recommended that infants be fed breast milk exclusively for the first 6 months after birth.

Besides talking to your Hudson Headwaters provider, these lactation consultants/programs are available to you to learn more:

Glens Falls Hospital Snuggery: 518-926-6095 Warren County: 518-761-6580 Washington County: 518-746-2400 Essex County: 518-873-3500 Saratoga County: 518-584-7460 LeLeche League: 1-877-452-5324 or www.lllusa.org

Postpartum Depression

The birth of a new baby is expected to be a joyful milestone in a person's life, but that is not always the case. Tremendous changes occur in the expectant parent's life and body. Some pregnant people may experience minor adjustment issues, and some may experience a serious mood disorder known as postpartum depression.



What is postpartum depression?

"Postpartum" means the time after childbirth. Postpartum depression is not a regular or usual part of being a parent. It is when you feel hopeless or empty after childbirth for longer than two weeks.

Postpartum depression can affect anyone, and it is a serious mental illness. It involves your brain and affects your behavior and physical health. You might feel disconnected from your baby, as if you are not the baby's parent, or you might feel as though you do not love your baby or can't properly take care of your baby's needs. Your sad, helpless and empty feelings can be mild to severe.

What are the symptoms of postpartum depression?

Some of the more common symptoms include:

- Feeling sad, hopeless or overwhelmed
- Feeling restless or moody
- Crying a lot
- Feeling worthless or guilty
- Having thoughts about death, suicide or wanting to harm your baby
- Eating more or less than you usually do
- Having trouble remembering things or concentrating



- Not being able to sleep or sleeping too much
- Withdrawing from seeing your friends and family
- Losing interest in things you usually like to do
- Lacking energy, feeling tired all of the time
- Headaches, stomach problems or other aches and pains that don't go away

Postpartum Support

International Help Line: 1-800-944-4773 (4PPD). Anyone can call to get basic information, support, and resources from this toll-free number. (*This is not a crisis hotline and does not handle emergencies.*)

If you or someone you know is in crisis or thinking of suicide, call your provider, 911 or the toll-free 24-hr hotline of the **National Suicide Prevention Lifeline** at 1-800-273-TALK (1-800-273-8255).

Shades of Light: 518-955-6770 or shadesoflightps.org

Postpartum Resource Center of New York's Moms-On-Call: 1-855-631-0001 or postpartumny.org

Postpartum Progress: postpartumprogress.com

Postpartum Care

Postpartum depression is not the "baby blues."

Lots of pregnant people get what's known as the "baby blues" within a few days of giving birth. This is considered normal, but this feeling should go away within 10-14 days. If these feelings don't go away and you feel sad, hopeless or empty for longer than two weeks, you may have postpartum depression.

What causes postpartum depression?

Postpartum depression does not have a single cause, but likely results from a combination of physical and emotional factors. Postpartum depression does not occur because of something an expectant parent does or does not do. After childbirth, the levels of hormones (estrogen and progesterone) in a postpartum body quickly drop. This leads to chemical changes in the brain that may trigger mood swings. In addition, many parents are unable to get the rest they need to recover fully from giving birth. Constant sleep deprivation can lead to physical discomfort and exhaustion, which can contribute to the symptoms of postpartum depression.

How is postpartum depression treated?

There are effective treatments for postpartum depression including counseling/talk therapy and/or medications. If you have postpartum depression, it's not your fault. Talk to your providers today to learn more about treatment during and after your pregnancy. With help, you can feel better.



Hudson Headwaters Health Network offers pediatric services for newborn babies through childhood and the teen years. We are dedicated to making sure your baby is healthy and growing well.

Our Women's Health team is here to help ensure that you and your baby go home with a plan for the first days and weeks—and with a pediatrician selected. That way, your child's pediatrician can support you and your baby from the very beginning.

Making an appointment for your child is easy.

- Hudson Headwaters pediatric providers have regular hours at 12 of our health centers. These are highlighted on the following page. Visit www.HHHN.org/services/pediatrics to learn more about our pediatric providers, services and health center hours.
- Our pediatric providers also visit other health centers on a rotating schedule. Please call your health center to find out exact times and locations.
- Hudson Headwaters primary care providers also see children and adolescents at all health center locations.

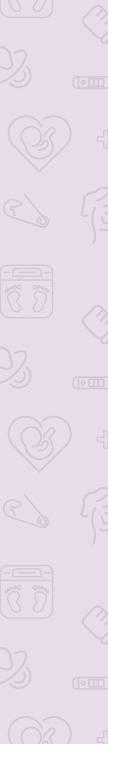
URGENT CARE: Extended coverage is offered at our two urgent care locations (at the Health Center on Broad Street and Warrensburg Health Center) with pediatric backup 24 hours a day.

Find a Hudson Headwaters Pediatric Provider Near You

My pediatric provider is_

| Location | |
|----------|--|
| Phone | |





Champlain Family Health 518-298-2691

Glens Falls Family Health 518-824-8181

Moreau Family Health 518-761-6961

Moriah Health Center 518-942-7123

Pediatric and Adolescent Health (Queensbury) 518-798-6500

Plattsburgh Family Health 518-536-7060

Plattsburgh Pediatric and Adolescent Health 518-824-2563

Saranac Lake Family Health 518-891-3845

Ticonderoga Health Center 518-585-6708

Tupper Lake Family Health 518-359-7222

Warrensburg Health Center (also Urgent Care) 518-623-2844

West Mountain Family Health 518-824-8610

Additional Resources

These are other resources available to help you before and after childbirth. We encourage you to reach out to them if you need help.

Adoption

Friends in Adoption: 1-800-932-3678

Insurance and Nutrition

WIC Program: 1-800-WIC-1007

MOMS Program: 1-800-624-4221

Smoking

Smoking Cessation: 1-866-NYS-QUITS

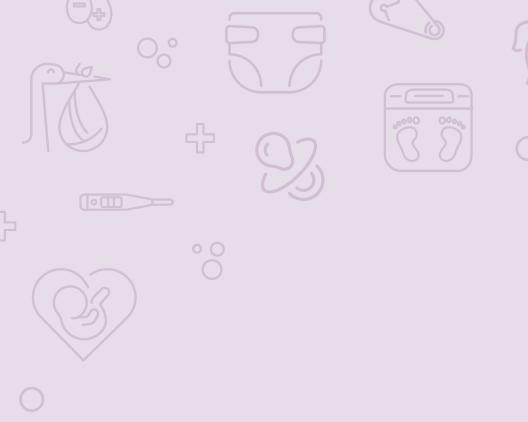
HIV Services

Hudson Headwaters Ryan White Program: 518-415-9220

Alliance for Positive Health: 518-743-0703

Family Problems at Home?

Do you feel safe in your home? Sometimes people hurt each other by hitting, screaming hurtful words or abusing each other. Does this happen in your family? Being pregnant can make the situation worse. Your safety and the safety of your child is the number one priority. There is help available for you and your child. Talk with your provider today or call the National Domestic Violence Hotline: 1-800-799-SAFE (7233)





518-792-7841 HHHN.org/services/womens-health