

Obstetrics and Gynecology

Frequently Asked Questions for Obstetrics Patients

Congratulations! You're expecting! Pregnancy is an exciting time in your life. It is a condition that will result in many changes for you and your family. We encourage you to remain active and go about your normal routine, keeping in mind the recommendations and guidelines provided by your obstetrician.

You will make an important first step in the care of your unborn child by obtaining prenatal care. Prenatal care visits provide monitoring, screening, and education throughout the pregnancy to help ensure the best possible health of you and your child.

By partnering with your physician you can help minimize risks to your pregnancy. You can do this by keeping all prenatal appointments and contacting your obstetrician if you experience any unusual signs or symptoms.

Here you'll find answers to many of our patients' most frequently asked questions.

Lifestyle

How much can I exercise while pregnant?

Many women ask about exercise during pregnancy. Generally speaking, please continue with your existing exercise program. If you are thinking of beginning a new exercise program, it is important to discuss it with your physician first.

There are no recommendations specifying a maximum heart rate that you should achieve during pregnancy. We do, however, recommend that you avoid lying flat on your back during exercise for prolonged periods of time during your third trimester. In addition, the American Congress of Obstetricians and Gynecologists (ACOG) recommends avoiding contact and extreme sports during pregnancy, as well as scuba diving.

Moderate exercise, defined as being able to carry on a conversation while exercising, has been shown to have many benefits, including leaner babies and shorter time in labor. There is also evidence that moderate exercise helps reduce some common pregnancy complications, such as preeclampsia and gestational diabetes. If that isn't enough to make you think seriously about

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exercising during pregnancy, consider that women who exercise gain less weight and tend to take it off much faster after delivery.

If you have any questions about a specific exercise program, please speak with your doctor.

Are there any limits on travel during pregnancy?

Traveling is another topic we are often asked about. Assuming that there are no complicating factors in your pregnancy, airplane travel is allowed up to about 36 weeks gestation for domestic travel but may be earlier for international travel.

Pregnant women are more likely to develop blood clots in their legs, so we recommend wearing support hose for long flights and performing the leg and ankle exercises recommended by the airlines. Both of these recommendations may prevent blood clots from forming in your legs due to prolonged inactivity.

Regardless of your mode of travel, we recommend getting up frequently to move around and stretch your legs to improve circulation.

Will having sexual intercourse while pregnant hurt my baby?

As long as your pregnancy is progressing normally, you can continue having intercourse. If you should abstain from intercourse during pregnancy, your doctor will notify you. The conditions that would preclude intercourse include placenta previa, preterm labor, or rupture of the membranes. If you have any questions about the safety of intercourse during your pregnancy, please ask your obstetrician.

How will smoking affect my baby?

One of the most important things you can do to ensure a healthy baby is to not smoke. Smoking affects your blood vessels and reduces blood flow to the uterus and placenta. This adversely affects the growth of the baby and can cause low birth weight. There are other risks associated with tobacco use during pregnancy, including preterm rupture of the membranes, preterm delivery, placenta previa, and placental abruption. Placenta previa is a condition in which the placenta covers the cervix and puts the mother at risk for excessive vaginal bleeding. Placental abruption is a condition in which the placenta separates from the uterus prematurely before the delivery of the infant. All of these conditions lead to a risk of infant mortality. Therefore, if you smoke, we strongly encourage you to quit. Please discuss your individual situation with your obstetrician. There are classes and medical therapies available to help you stop smoking.

My work exposes me to chemicals, radiation and high temperatures. Will these conditions hurt my baby?

Certain work and environment hazards may lead to birth defects, miscarriages or stillbirths. Substances that can interfere with the development of an embryo or fetus are called teratogens. The effect of these teratogens on the fetus depends on the dose, duration and gestational age at exposure. If

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your profession involves any exposure to chemicals, radiation or hazardous conditions, such as prolonged high temperatures, notify your obstetrician.

I work at a school, hospital or daycare facility. Can I keep working there while I'm pregnant?

If you work in a school, hospital or daycare facility, you may be exposed to certain viruses such as CMV (cytomegalovirus), chicken pox or Fifth's disease. Exposure to these diseases may have consequences on the health of your fetus. Women who are pregnant during the influenza season, which runs from October through mid-May, should receive the flu shot. All pregnant women at risk for tuberculosis should be screened with a PPD skin test when they begin prenatal care. Women at high risk are women with HIV, those who have close contact with persons known or thought to have TB, or healthcare professionals working in high-risk facilities such as prisons. If you think you may be at high risk for TB or have been exposed to TB, please discuss this with your obstetrician.

If you have come into contact with anyone with these diseases, notify your obstetrician. If you should contract a fever or a rash, your doctor may want to perform blood tests to determine if you were exposed to any of these diseases.

I have a cat. Should I be concerned about being near my cat while I'm pregnant?

If you have a cat at home, you may be exposed to toxoplasmosis. This infection can be contracted by coming in contact with feces from an infected cat, eating or handling raw meat, or eating fruits and vegetables that have not been properly washed. We recommend that you do not change your cat's litter box during your pregnancy, however it is unlikely that indoor-only cats would be affected.

If you own a cat, notify your obstetrician. If you should contract a fever or a rash, your doctor may want to perform blood tests to determine if you were exposed to toxoplasmosis.

Can I still color and highlight my hair while I'm pregnant?

Not much is known about the use of hair dyes or colorants during pregnancy. What we *do* know is that when these dyes come in contact with your scalp, a small amount of the chemical is absorbed into your system. What we don't know is how much, if any, of these chemicals cross the placenta to the fetus. Some health care providers will recommend waiting until the first trimester is completed before coloring your hair. Though the FDA does not specifically address safety issues and coloring your hair during pregnancy, they do recommend the following general safety precautions:

- Don't leave the dye on your head any longer than necessary.
- Rinse your scalp thoroughly with water after use.
- Wear gloves when applying hair dye.
- Carefully follow the directions in the hair dye package.
- Never mix different hair dye products because you can induce potentially harmful reactions.

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Can I have my hair chemically straightened while I'm pregnant?

Some women undergo chemical hair straightening using a variety of different products, grouped under the name "Brazilian straightening" or "Brazilian blow-out." Many of these products contain the chemical formaldehyde and should not be used while pregnant. If in doubt, please ask for a list of ingredients in the product and review it with your physician prior to treatment.

Can I go in a hot tub while I'm pregnant?

Hot tubs should be avoided during your pregnancy.

Can I paint while during my pregnancy?

There are no studies that document the effects of household painting on pregnancy and the developing baby. According to the FDA, most paints today do not contain lead. Based on limited data, we recommend the following precautions while you are pregnant:

- Avoid remodeling projects that requires exposure to old lead-based paint
- Wear protective clothing while painting
- Avoid eating and drinking where you are actively painting and
- Ensure that the room and house are well-ventilated during and after a painting project

Can I go to a tanning salon while I'm pregnant?

The use of tanning beds should be avoided.

Tanning beds increase your risk of developing skin cancer.

Lying in a tanning booth can raise your body temperature to a level that may be hazardous to your baby, particularly during your first trimester.

Can I use a self-tanner while I'm pregnant?

Since the effects are not known, avoid self-tanners. Consider using brush-on bronzers instead.

Can I sleep on my back while I'm pregnant?

Yes, you can sleep on your back! Some women faint when they lay on their backs while pregnant. If you are one of those women, don't do it. We understand that pregnant women do not sleep in one position all night. Studies have shown, however, that the position resulting in the best maternal cardiac output, or blood flow, to the uterus is side-laying. Interestingly, the position with the lowest maternal cardiac output is standing, something you do all day, and do not worry about. So make yourself comfortable so you can sleep.

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Diet and Nutrition

How much caffeine can I have while pregnant?

During pregnancy, caffeine crosses the placenta and reaches the baby. Until more is known about the effects of caffeine on pregnancy, based on limited data we recommend that pregnant women limit their caffeine intake to less than 200 milligrams a day (roughly two cups of home-brewed coffee).

Here are some examples of the caffeine content of popular beverages:

Caffeine Chart

Beverage	Estimated Caffeine (mg) in 8 oz Serving
Green Tea	25
Diet Coke	30
Red Bull	76
Home Brewed Coffee	107
Starbucks Coffee	168

Can I still drink a glass of wine while I'm pregnant?

The American College of Obstetricians and Gynecologists recommends that you abstain from alcohol consumption during your pregnancy. In addition, the U.S. Attorney General has stated that no amount of alcohol consumption may be considered safe during pregnancy. Drinking alcohol during pregnancy may cause the baby to be too small and increases the chance of having a miscarriage or a preterm baby. Persistent alcohol use can cause heart defects and may also affect the baby's brain. This can lead to problems with learning, memory, speech and behavior. You may not be able to see these problems until later in life.

Fetal alcohol syndrome is a mixture of physical, mental and behavior problems. It is the most severe effect of drinking during pregnancy. It most often results from heavy drinking or binge drinking.

Illegal drug use is widespread and affects people of all backgrounds. As many as 1 in 10 babies may be born to women who use illegal drugs during their pregnancies. These substances can be harmful to the health and growth of your baby during the pregnancy. Remember, if you use illegal drugs, so does your baby.

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What vitamins should I take while pregnant?

You should plan to take some type of nutrition supplement throughout your pregnancy, to ensure you and your baby receive the proper amount of vitamins and minerals. These supplements do not replace a healthy diet - they are in addition to eating right. You may take either a multivitamin or a prenatal vitamin, depending on your preference and in consultation with your physician after review of laboratory analysis. Choose a vitamin that contains at least 0.4 milligrams of folic acid daily, a vitamin that helps prevent neural tube defects, or of the brain and spinal cord.

How much weight should I gain during pregnancy?

The average weight gain during pregnancy is approximately 25 to 35 pounds, depending on your pre-pregnancy body mass index. Overweight women can anticipate a weight gain of 10 to 15 pounds. Underweight women may experience a weight gain of about 40 pounds. When you are pregnant you need about 300 calories more per day than you usually eat. This is roughly equivalent to drinking two extra glasses of milk per day.

I'm a vegetarian. Do I have to change my diet when I'm pregnant?

If you are a vegetarian, you should continue your normal diet during your pregnancy. Keep in mind it is important to take in an adequate amount of protein during your pregnancy, which will be more difficult if you do not eat fish, chicken, milk, cheese or eggs. You may need additional supplements such as vitamin B12 and vitamin D to ensure that you get all of the nutrients you and your baby need.

Your obstetrician can help you determine the supplements you need and address any other special dietary circumstances you might have. Registered, licensed dietitians are available for consultation as well.

I'm lactose intolerant. How can I make sure I get enough calcium while pregnant?

If you are lactose intolerant, you may need to take calcium supplements to ensure that you receive the proper amount of calcium in your diet. Almost all pregnant women should take calcium. Do not take calcium supplements at the same time as your multivitamin or prenatal vitamin, as this will interfere with absorption of the calcium. Many women take the antacid Tums for acid reflux during their pregnancy, which also happens to be an excellent source of calcium.

Your obstetrician can help you determine the supplements you need and address any other special dietary circumstances you might have. Registered, licensed dietitians are available for consultation as well.

Are there any foods that can hurt my baby during pregnancy?

Unpasteurized foods carry risks for you and your baby. During your pregnancy do not eat any food or drink any milk that is unpasteurized. Closely examine the labels on soft cheeses such as feta, brie, camembert and

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blue vein cheeses. If the label says it was made with pasteurized milk, it will be safe to eat.

There are no official recommendations regarding sushi and pregnancy. We recommend only that you follow the fish guidelines put out by the FDA and the Environmental Protection Agency (EPA).

Fish absorb mercury naturally from oceans and lakes. Fish that live longer absorb more mercury. Some fish absorb more mercury than others. Fish that contain very high levels of mercury include shark, swordfish, king mackerel, and tilefish. Do not eat these types of fish while you are pregnant. You may eat fish that are lower in mercury. The FDA recommends eating no more than 12 ounces (roughly two meals) per week of these types of fish, which include shrimp, canned light tuna, salmon and catfish. If you prefer to eat albacore tuna, you should limit your intake to one meal per week.

Health Care

Who will be involved in my care at Baylor?

We share in your excitement and joy, and look forward to providing exceptional care for you and your baby every step of the way.

It is our desire that you choose one physician for your prenatal care. The majority of your prenatal visits will be with your chosen doctor. Should you need care when your physician is out of the office or unavailable, you may be seen by another physician in our practice to ensure you receive prompt care.

The Baylor OB/GYN practice includes obstetrician-gynecologists, maternal-fetal medicine specialists, genetic counselors, ultrasonographers, a nurse practitioner, specially-trained nurses and scheduling care coordinators who will collaborate in your care throughout your pregnancy.

What role will medical students and residents play in my care?

Residents are doctors who have completed medical school and are now learning about OB/GYN. This is a long process, and at one time all of our physicians were residents. If it wasn't for the women like you who allowed them to help their attending physician, they would not be your choice for an OB/GYN.

The residents are on the unit, and will be involved in your care. They are not making major decisions in your care, but they are there to both help you through your labor or surgery as well as to learn about specific diagnoses and procedures related to OB/GYN. As residents, they do not perform any procedures without complete supervision.

What medications are safe to take when pregnant? Can I use herbal supplements?

We understand that pregnancy may sometimes become overwhelming, especially when you're not feeling your best. Our group of physicians has created a guideline of approved over-the-counter medications that are safe to

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use during pregnancy. We recommend that you not consume any prescription medication unless advised by your obstetrician. Be wary of Complimentary and Alternative Medicine or CAMs because they have not been adequately studied and are not FDA approved.

Be sure to tell your doctor about any prescription medications you take.

Medication not listed should not be taken without first consulting with your obstetrician.

Safe Medications Chart

Symptoms	Medication
Colds, Flu & Minor Aches and Pains	Actifed, Sudafed, Tylenol products, Robitussin CF, Robitussin DM, Cepacol, Chloroseptic Lozenges, Benadryl, Tavist-D, Claritin (over the counter) - (Do not take Aspirin or Advil)
Headache or Pain	Regular or Extra-Strength Tylenol
Indigestion and Heartburn	Avoid spicy foods. Eat smaller, more frequent meals. Mylanta, Maalox, Riopan Plus, Roloids, Tums, Pepcid, Zantac, Prevacid
Constipation	Dialose Plus, Milk of Magnesia, Surfak, Senokot, Metamucil, Fibercon, Colace, Surfak
Diarrhea	Kaopectate, Immodium A-D
Leg Cramps	Exercise leg and calf muscles by stretching three times daily. Increase milk and dairy intake to three or four portions per day. If you cannot take dairy products, take Calcet or Fosfree according to the label.
Stretching Pains of the Uterus	Usually occurs between 12 and 20 weeks of pregnancy. Avoid sudden movements, bending over, heavy lifting, moving quickly in and out of a car, anything that can cause sudden stretching pain on uterine ligaments. Take Tylenol and rest with your feet up.
Nausea	Dramamine, Emetrol, Unisom – 1/2 tablet per day or Vitamin B6 – 50-100 mg per day. Try eating six small



meals throughout the day. If you are unable to keep any food or liquids down, contact your doctor.

Dental	Dental care is encouraged. X-rays may be performed as necessary with proper shields.
Rash	Calamine or Caladryl lotion, Lanacort, Hydrocortisone 1% cream
Allergies	Benadryl, Claritin, Zyrtec
Congestion	Saline nasal spray, Mucinex
Fever	Tylenol
Hemorrhoids	Preparation H, Tucks, Anusol cream or suppositories
Yeast Infection	Monistat

Will X-rays and MRIs during pregnancy harm my baby?

Sonograms and MRIs do not use harmful radiation and, therefore, are considered safe in pregnancy. Also, any X-rays you would receive during pregnancy, such as a chest X-ray or dental X-rays, expose the baby to only minimal amounts of radiation and are considered safe. If you are going to obtain X-rays during your pregnancy, you should be provided a lead apron to shield your abdomen.

Should I still go to the dentist while I'm pregnant?

We encourage you to have regular dental care during your pregnancy. Good dental hygiene is the cornerstone of good health.

Dental x-rays expose the baby to only minimal amounts of radiation and are considered safe. If you are going to obtain x-rays during your pregnancy, you should be provided a lead apron to shield your abdomen.

If you need to have a dental procedure performed during your pregnancy, your dentist may have questions about what type of anesthetics, antibiotics and pain relievers you may receive. We can provide you with a list of medications that are considered safe during pregnancy.

I'm not feeling well. When should I call my doctor?

We care about how you are feeling and ask that you please contact our office if your symptoms persist, worsen or if you have a temperature that exceeds 100.5° F.

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Should I get the flu shot while I'm pregnant? What about other vaccines?

The CDC (Center for Disease Control) and the American Congress of Obstetricians and Gynecologists recommend that pregnant women receive the seasonal influenza vaccination during pregnancy. Only the shot form of the vaccination should be used during pregnancy because it is made up of inactive or killed virus. The nasal version of the vaccines, in the form of nasal sprays, contains live virus that can harm a developing fetus. Avoid these nasal sprays during pregnancy.

ACOG also recommends the tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine or Tdap for pregnant women. All women should receive Tdap during pregnancy, preferably after 20 weeks of gestation. Alternatively, if not administered during pregnancy, Tdap should be administered immediately postpartum. Furthermore, all adult caretakers of the baby require this vaccine prior to the birth. Tdap can be obtained at almost any pharmacy without a prescription and the pharmacist will administer it.

There are other vaccinations that are thought to be safe during pregnancy and may be administered after consultation with your obstetrician, if necessary.

However, there are certain vaccinations that are not given during pregnancy. These include the measles, mumps and rubella vaccination (MMR) and the varicella vaccination (chicken pox). If you have any doubts as to which vaccinations are safe during pregnancy, always check with your obstetrician first. (We do recommend that titers and/or history of the disease is checked pre-conceptionally whenever possible.)

What genetic testing should I have while I'm pregnant?

We offer several types of testing for women who are interested in detecting potential genetic conditions in their fetus. All women have the option of undergoing these tests but you are not required to have any genetic testing or screening during your pregnancy. A certified genetic counselor will provide the most up-to-date information regarding available testing and help decide what tests are appropriate for you.

There are two non-invasive screening options that look for three particular chromosomal abnormalities: Down Syndrome (Trisomy 21), Trisomy 18, and Trisomy 13. The first test is offered at approximately 11 to 13 weeks gestation and involves blood work for mom and an ultrasound of the fetus. This is referred to as "first trimester screening." The second test is called a "quad screening" and is a blood test performed on the mother at 16 to 20 weeks gestation.

All women regardless of their age at the time of delivery will be offered a comprehensive anatomy ultrasound of their baby at 18-20 weeks to look for any structural abnormalities.

The Prenatal Genetics Clinic at Baylor College of Medicine provides education and support to families regarding the risks, possible causes and tests related to genetic and fetal conditions. If you have questions about

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genetic testing or require genetic counseling, please call for an appointment with one of our certified genetic counselors.

How often do I need to see my doctor while I'm pregnant?

Usually your prenatal visits will be with your chosen obstetrician. Initially, your appointments will be monthly. By the end of your pregnancy, you will be coming in weekly. If problems arise during your pregnancy, your schedule of appointments may be different.

How many ultrasounds will I have during my pregnancy?

In the first trimester, you will have an ultrasound to confirm your pregnancy and your due date if you have not already had one. A second ultrasound is offered at 18 to 20 weeks to evaluate the fetal anatomy. Additional ultrasounds will be obtained as needed for medical indications. In a normal pregnancy, you may not require any additional ultrasounds.

I have a chronic medical condition. Will it affect my pregnancy?

If you have an existing medical condition or disorder, special care will be taken to address both the effects the pregnancy can have on your condition, and the complications your medical condition may cause during pregnancy. Some examples include:

- Diabetes
- Hypertension (high blood pressure)
- Cardiovascular disease
- Asthma
- Hepatitis
- Thyroid conditions
- Cancer
- Inflammatory bowel disease (IBD)
- HIV
- Syphilis
- Epilepsy
- Depression
- Connective tissue disorders

What do I do if I have a concern about my pregnancy on weekends or in the evening?

Phone support is available 24 hours a day, seven days a week for emergencies. During the day, these calls are answered by the nursing staff. After hours these calls are forwarded to the on-call physician. Our physicians take turns being on call throughout the week and on weekends. We request that you only call the after-hours number in the event of a true emergency or labor. Some examples of true emergencies include vaginal bleeding, temperature over 100.5 degrees, abdominal pain and severe headache. Questions related to colds and medications can typically be answered during normal business hours.

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Labor and Delivery

Who will deliver my baby?

During regular work hours, your primary physician will make every effort to be present for your delivery. In the event that your physician is unavailable, a member of our group will be present for your labor and delivery, 24/7. As a result, it is possible that the physician who delivers your baby will not be your primary obstetrician. If you require a scheduled procedure such as a Cesarean or induction of labor, this may be coordinated with your primary obstetrician.

Where can I deliver my baby?

We deliver at Texas Children's Pavilion for Women in the Texas Medical Center. Texas Children's Hospital is primarily staffed by faculty from the Department of Pediatrics at Baylor College of Medicine, enabling our OB/GYN and pediatric specialists to collaborate for the best possible care for you and your baby.

You will receive a new patient packet including information about the registration process, tours and childbirth classes.

Can I personalize my labor and delivery?

During your prenatal care, your doctor will review topics with you including pain management in labor and the routine progress of labor. If you have specific delivery requests, please discuss these with your provider early in your third trimester.

My first baby was delivered by C-section. Do I have to have another Cesarean delivery with this baby?

If you have had a prior Cesarean delivery, you may be eligible for a vaginal delivery in this pregnancy. This is called TOLAC or trial of labor after cesarean. A successful TOLAC is termed a VBAC or vaginal birth after Cesarean. Specific eligibility criteria must be met before you may be offered TOLAC. Ask your doctor if you meet these criteria.

What is a hospitalist and what role will they play in my delivery?

Hospitalists are physicians who are dedicated to inpatient care. A laborist is a labor and delivery hospitalist. All of our hospitalists are Baylor College of Medicine faculty members just like your obstetrician. The purpose of the hospitalist is for patient safety and patient satisfaction. One Baylor hospitalist and one Baylor private practice physician are in the hospital at all times to care for you in the hospital in the event your primary physician cannot be present.

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