



Patient Information and Instructions – Preparation for Your Visit at 28 Weeks Gestation

Things to know before your gestational diabetes screening test:

- ❖ What is gestational diabetes?

Diabetes mellitus is a condition in which too much glucose (sugar) stays in the blood, instead of being used for energy. Some women develop diabetes for the first time during pregnancy – a condition called gestational diabetes. Women with gestational diabetes need special care both during and after pregnancy.
- ❖ What causes gestational diabetes?

Insulin produced by your body helps keep blood sugars level. During pregnancy, pregnancy hormones can interfere with insulin metabolism, leading to insulin resistance. Usually, the body can make more insulin, to keep the blood sugar levels normal. But, in some women, the body cannot make enough insulin, and blood sugar levels increase, leading to gestational diabetes.
- ❖ When does screening occur?

Screening for gestational diabetes is usually performed between 24 and 28 weeks of pregnancy. If you have risk factors for gestational diabetes (as determined by your doctor), you may be asked to test earlier and/or more than once.
- ❖ Why all the fuss?

Anyone can get gestational diabetes, even women that are very healthy. There are risks associated with uncontrolled gestational diabetes, including large babies, prolonged labor, need for C-section, and fetal demise. Early recognition, proper diet/management, and careful surveillance of both mother and baby may minimize these risks.

For accurate results, follow instructions exactly!

On the Day of the 1-Hour Glucose Tolerance Test

- ❖ Fasting is NOT required for this test – but this is also not a time to over-indulge in sugary pancake syrup, lots of orange juice, etc. A small, healthy, protein-rich breakfast is best.
- ❖ How is the test performed?
 - You will be given a beverage containing 50 grams of glucose.
 - DRINK the entire bottle in 3 minutes. Chilled or not – up to you! PLEASE note the time you finish the drink.
 - DO NOT eat or drink anything except plain water after finishing the beverage.



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- DURING the next hour, please plan to stay in the clinic. We usually use this time to discuss a variety of relevant topics with you, including hospital registration (instructions for completion below), cord blood banking, and the TDAP vaccine (further information below). But please also bring something to do to help pass the rest of the time; we do have Wi-Fi if you are interested.
- AT THE END of the 1 hour, you will have your blood sample drawn. *Please feel free to remind our staff as your time mark approaches to be sure we draw your blood on time! Of note, we may also screen you for anemia during this blood draw, and obtain an optional repeat STD screen.



- ❖ AFTER the test is complete, you may eat and drink normally. BRING a protein-rich snack with you to eat after your blood has been drawn.
- ❖ Your results will be sent to your portal within 3 days, but we will call you with any abnormal findings in order to discuss next steps.

Do you need to complete a 3-hour gestational glucose tolerance test?

- ❖ IF you have an abnormal gestational glucose tolerance screen, you may be diagnosed with gestational diabetes, or you may be asked to complete a 3-hour glucose tolerance test on another day. This is a more SPECIFIC test that helps us discern whether or not you truly have gestational diabetes.
- ❖ A **3-hour glucose tolerance test** does **require fasting** after midnight the night before the test. However, carbohydrate-loading the day(s) before the test is no longer recommended.
- ❖ Your appointment for this test will begin at 9:00 AM. We will first obtain a fasting glucose level (lab draw). Then you will be given a beverage containing 100 grams of glucose to consume within 3 minutes. You will then have a blood draw every hour for the next 3 hours. You CANNOT eat anything during the test but please bring something to eat/drink afterwards!

If these test results are abnormal, you will be given the diagnosis of gestational diabetes. We will refer you to the Diabetes Resource Center for education on diet (recommended by the American Diabetic Association) and how and when to check your blood sugar levels at home. Gestational diabetes is unique to pregnancy and usually resolves after delivery. You will be offered a 2-hour glucose tolerance test about 6-8 weeks after delivery to ensure you no longer have diabetes.

Questions? Feel free to call/message!

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What is Umbilical Cord Blood Banking (UCBB)?

- Cord blood is extra blood that's left in a baby's [umbilical cord](#) and [placenta](#) after the [cord is cut](#). Babies do not need this leftover blood after they are born, but it contains cells that may be able to help those who are sick, now or in the future.
- Cord blood contains all the same components as normal blood, including red blood cells, white blood cells, platelets and plasma. What makes it special is that it is also rich in hematopoietic stem cells — special blood-forming stem cells that are similar to those found in bone marrow. These cells have the potential to be used to treat many types of diseases.
- Collection technique: after the baby is born and the umbilical cord is cut, a cord blood collection is obtained by cleaning the umbilical cord, (painlessly) inserting a needle, and allowing the umbilical cord blood to drain by gravity into a bag. After that, the blood is frozen and stored (or “banked”) for future use. When stored properly, cord blood has the potential to last indefinitely.
- Umbilical cord blood collected from a neonate CANNOT be used to treat a genetic disease or malignancy (cancer) in the same individual because the stored cord blood has the same genetic variant or cells that led to the condition of concern.
- Private UCBB can be considered when there is knowledge of a family member with a condition that could benefit from cord blood transplantation. Public UCBB is the *recommended* method for use in transplant, immune therapies and other medically validated indications. UCBB is an active area of research, and the list of conditions that may be able to be treated with cord blood continues to grow (e.g. sickle cell disease, blood cancers, etc.).
- Families of all ethnicities and races should consider the societal benefit of public UCBB donation to increase the availability of a match for people of all backgrounds. Public banking is free!
- Sometimes, circumstances may arise on labor and delivery that preclude an adequate umbilical cord blood collection – so collection is therefore not guaranteed. We will not compromise obstetric or neonatal care, but we will certainly try our best to secure a collection! Please note that UCBB can be performed with delayed cord clamping.
- If you opt to do private UCBB, there are many companies to choose from – each with a different initial collection fee/yearly storage fee. Once you have decided on a company, they will send you a collection kit to bring to the hospital; please let your labor and delivery team know about your UCBB preferences upon admission.



PIEDMONT
WOMEN'S
HEALTHCARE

Piedmont Women's Healthcare
A Division of Atlanta Women's Healthcare Specialists
275 Collier Road, N.W., Suite 100-B
Atlanta, GA 30309
404-352-3656 (Phone) | 404-350-5820 (Fax)
www.piedmontwomenshealthcare.com

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TDAP vaccine in Pregnancy

Pertussis (whooping cough) disproportionately and most severely affects infants 3 months and younger, as infants do not receive their first TDAP vaccination until approximately 2 months of age. The Advisory Committee on Immunization Practices recommends that TDAP be given during each pregnancy at 27-36 weeks gestation, regardless of prior immunizations, to make sure that each newborn receives the highest possible protection against pertussis at birth. There is no evidence of adverse fetal/infant effects from vaccinating pregnant women with an inactivated virus or bacterial toxoid (like that within the TDAP vaccine).

Adult family members, partners and caregivers that will have close contact with an infant younger than 12 months *may also consider* a single dose of the TDAP vaccine to further protect that infant against pertussis.



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Piedmont Hospital Registration & Resources

This is the Piedmont Maternity Website:

https://www.piedmont.org/maternity-services/piedmont-atlanta

On the left-hand side of the page, under "Resources" there is a link for "Pre-registration"

Click the second pre-register option for Maternity/Mason Clinic services.



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Clicking the maternity button sends you here:

https://phcapps.piedmont.org/preadmit/

You can use the direct link above if registration is all you would like to do rather than navigate through other Piedmont Resources (tours, classes) & general maternity info.

Then click on the second option on the left "Piedmont Atlanta Hospital" and the first option on the right "Maternity Pre-Registration" and it will get you to this page (below) to start to fill:



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Piedmont Atlanta Hospital (Maternity PreRegistration Only) > Restart PreRegistration Process

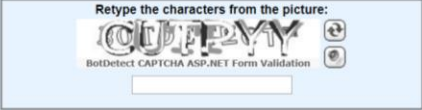
Welcome to the Piedmont Healthcare Online Maternity PreRegistration Application!

i This process will take a few minutes. **ONCE YOU BEGIN YOU MUST COMPLETE THE PROCESS.** You cannot stop in the middle of the form and return later. You will have the opportunity to edit your information at the conclusion of the form. Do not use the Back button on your web browser to go back and edit the forms.

- Do not use the "Back" button on your web browser. Use the buttons within this page to navigate through the steps of the pre-registration process.
- This application uses pop-up windows for certain functions. If you have pop-up blocking software installed on your computer or have your web browser configured to block pop-up windows, please enable pop-ups for this site.
- You will need your physician information, insurance information and employer information for you and your spouse to complete this Pre-Registration.
- Depending on the information you enter on the "Required Information" section (the first section), you may or may not have to complete all sections.
- Complete as many of the fields as you can (**required fields are labeled with a red star**) and click the Continue button at the bottom right corner of each page to proceed.
- You will have the chance to review and edit all information you have entered **BEFORE** your registration is finalized.
- After your registration is complete, you will need to download additional forms to complete by hand and sign. Bring the completed forms with you to the hospital when you arrive for delivery along with your photo ID, insurance card and advance directive.

For security purposes, please check the checkbox below to verify that you are a human using our system and not a computer program or "robot". This is a security measure called a "CAPTCHA" and is a standard method used to prevent hackers from utilizing computer programs called "robots" or "bots" to flood our system with automated form submissions

Retype the characters from the picture:



BotDetect CAPTCHA ASP.NET Form Validation

Note: Please consult with your physician before going to the hospital for your delivery.

*** You MUST pre-register ASAP, ideally the day you are here for your glucose challenge. ***

To successfully register, you will need basic information, including your due date, your social security number, our office address and phone, your insurance policy data, and employer information for both you and your partner. You cannot hold or back out of the site or you will have to start over, so it is best to have all this information immediately accessible.

Please let us know if you are having trouble with the form, or if there is any way we can help or supply you the information you need. Thank you!

Piedmont Women's Healthcare