



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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Congratulations!!

First and foremost, we would like to offer congratulations and well-wishes for your pregnancy! Our goal is to provide you with excellent care during this special time. During the coming weeks and months, we will be seeing you often and working with you to ensure a successful outcome, healthy mother, and healthy baby. This packet will provide you with information about what to expect throughout your pregnancy, and will serve as a guide for the care you will receive during your pregnancy and beyond. In addition to this packet, check out our website and follow us on our social media pages (@piedmontwomens) for more information!

Prenatal Visits

Pregnancy can be an avenue into the healthcare system. Whether you regularly come to see a physician or this is your first visit in years, we see this as an opportunity to talk to you about your overall health and how to optimize it for pregnancy and delivery. As part of your care, we will make sure that you are up to date on routine health screenings. In the beginning, we will see you every four weeks. When you reach about 28 weeks, we will start to see you every 2 weeks. Around 36 weeks, we will see you once a week. We have several physicians and a physician's assistant to provide you with superb care during your pregnancy. Expect to see all of us during your prenatal visits, so that when the time comes for the birth of your child, you will have met and gotten to know your delivering physician.

Ultrasounds/Sonograms

Ultrasound exams are available in the office. The scans are performed by trained technicians and reviewed by the doctor. Routinely, you have an early ultrasound to confirm a pregnancy and determine your due date. You often then have one around 11-13 weeks and around 18-20 weeks to examine the development and formation of fetal organs. We also offer 3-D and elective ultrasounds at your expense.



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When to Call the Doctor

One of us is always on call. Any time you need to reach us, please call the office number above. If it is at night, on the weekend, or a time when we are not in the office, the answering service will be available to direct your call. There should never be a problem with getting in touch with us.

... less than 20 weeks

A small amount of spotting or cramping may be normal. If you have heavy bleeding like a period or cramping becomes significant, please call us. Other reasons to call include a fever that does not resolve with medication, and excessive vomiting with inability to tolerate liquids.

... greater than 20 weeks

If you have significant cyclic pain, a gush of fluids, or heavy vaginal bleeding requiring a pad, please call. Also call if you are not feeling your baby move. When you get closer to your due date, think of the 5-1-1 rule. If you start having contractions that are five minutes apart, lasting one minute, for one hour in duration, please call us. Remember, we only deliver at Piedmont Atlanta Hospital.

Certainly, you will have a lot of questions during your pregnancy. Feel free to call us if they are urgent or jot them down and bring them in with you to your next appointment. We are also delighted to have our patients' partners in the office at any time and would like the chance to meet and discuss any questions that they might have.

We look forward to taking care of you during this time! We hope this pregnancy will be a very happy one for you, and we will certainly do our best to meet you and your partners' wishes as we strive for a safe pregnancy, labor, and delivery.

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Early Pregnancy Screening Information

At your first visit, your doctor will review the available genetic tests for *aneuploidy* and *carrier screening*. These tests are all optional.

Aneuploidy testing evaluates certain genetic disorders involving an abnormal number of chromosomes. There are screening tests and diagnostic tests.

- Screening tests tell us the likelihood that your fetus may have a genetic disorder, including Trisomy 13, 18, or 21 (Down Syndrome).
- Diagnostic tests tell us as much as reasonably certain whether or not the fetus actually has one of these genetic disorders.

Screening tests for aneuploidy, like first trimester and sequential screens, are less invasive than diagnostic tests.

- The screening test for aneuploidy that is typically covered by insurance is called *Sequential Screening*. This test involves an ultrasound and two blood draws for the pregnant mothers. It detects approximately 95% of Trisomy 13, 18, and 21. This is appropriate for most young, low risk women.
- The screening test for aneuploidy with a detection rate approaching 99% is *Cell-Free Fetal DNA*. This is a maternal blood test that looks for circulating blood cells of the developing fetus and can give information about genetic disorders including Trisomy 13, 18, and 21 and also disorders of the sex chromosomes. Because this test is able to detect sex chromosomes, you also are able to learn the sex of the fetus with this test. It is a test meant for women at high risk for a genetic abnormality, for example, women 35 years or older. However, low risk women may opt for this test. You usually have to pay an out-of-pocket fee unless your insurance covers it.

Diagnostic tests are more invasive and involve taking a sample of cells from the developing fetus or amniotic fluid. These are called *Chorionic Villus Sampling* and *Amniocentesis*, and are used at different gestational ages in pregnancy. Ask your doctor if these are right for you.

Genetic carrier screening is blood work that looks for abnormal genes you may have that could be passed down to your baby. Some common genetic diseases for which we screen are Cystic Fibrosis, Spinal Muscular Atrophy, and hemoglobinopathies like Sickle Cell Disease. A carrier is someone who has one copy of a gene that is healthy and one copy that is faulty. Both partners must be carriers of a faulty gene to have the possibility to pass the actual disease on to their offspring. We start by screening the mother and if anything is positive on her screen, then we would test the father. If you or your partner have specific genetic backgrounds like Ashkenazi Jewish heritage, then you may qualify for different or additional screening.

These tests are offered to everyone, but not required. People may choose to have one, all, or none of the tests for a variety of reasons. Some may not want to know any of this information. Others may want to know to prepare for an



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affected or special needs child or to help them decide how to manage the pregnancy.



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Vaccination recommendations

Influenza

If you are pregnant during a time when the flu vaccine is available, we recommend getting it (unless you are allergic to it or its components). Pregnant women are much more susceptible to the flu and if they do contract the flu, they can become very sick and have a higher risk of death from flu-related complications. The flu vaccine is safe at any time in pregnancy.

TDAP

This vaccine should be given to every pregnant woman to help prevent the transmission of Pertussis or "Whooping cough" to newborn babies. Typically, this vaccine is given at 27-36 weeks gestation. This vaccine is also recommended for all people who are expected to come in close contact with the newborn.

Nutrition/Dietary Information

Nutrition is a very important part of a healthy pregnancy. The American College of Obstetricians and Gynecologists (ACOG) recommends 25 to 35 pounds of weight gain for someone with a normal pre-pregnancy body mass index. This usually amounts to 300-400 extra calories daily in addition to your usual intake. Your weight gain recommendations may be more or less depending on your starting weight. Please talk to your physician to discuss individualized recommendations. You will also need to take a prenatal vitamin daily throughout pregnancy, for six weeks after delivery, and if you choose to breast feed, for as long as you are breastfeeding.

Foods to Avoid

Limit Mercury-containing fish (shark, swordfish, king mackerel, marlin, orange roughy, tile fish)
Unpasteurized milk/cheeses
Hot dogs/lunch meats (unless heated well)
Pate and meat spreads
Refrigerated smoked seafood
Raw and undercooked seafood (sushi), eggs, meat

Foods to Limit

White (albacore) tuna: 6 oz/week
Caffeine: one serving daily



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What is Listeria?

Listeriosis is a food-borne disease caused by the bacteria *Listeria*. It is most commonly caused by the consumption of unpasteurized milk or milk products as well as lunch meats or raw fish. An infection from listeria can cause miscarriage, stillbirth, or preterm labor. Babies born with listeriosis may have serious impairments. If you feel that you have been exposed to Listeria and if you have a fever or other concerning symptoms, please contact your doctor. It is best to avoid foods that may be contaminated with Listeria. For more information visit www.acog.org/patients/FAQs/Listeria-and-Pregnancy.

What is Toxoplasmosis?

Toxoplasmosis is an infection caused by a parasite called *Toxoplasma gondii*. If acquired during pregnancy, toxoplasmosis can pass through the placenta to the fetus and can cause seizures, neurodevelopmental delay, blindness, or deafness. Toxoplasmosis can be carried by outdoor cats and shed in their feces in soil or a litter box. You can become infected by contact with litter boxes, eating unwashed fruits and vegetables grown in contaminated soil, eating undercooked pork, or gardening without gloves for example. It is recommended to make sure all produce is adequately washed and to avoid changing a litter box if necessary. Please talk to your provider if you are concerned about exposure to toxoplasmosis.

Tobacco, Alcohol, and Drugs During Pregnancy

Smoking is harmful to any woman's health, but pregnant women should certainly avoid tobacco exposure due to pregnancy-specific risks that include birth defects, preterm birth, low birth weight, and others. If you do smoke, we are happy to work with you to develop a quitting strategy that is right for you.

Less is known about "vaping" in pregnancy, but this exposure is considered to be equally as harmful in pregnancy as cigarette smoke, and is therefore not recommended.

There is also very little data on the impact of marijuana and pregnancy, so this substance should also be avoided.

There is no known safe amount of alcohol in pregnancy, and it is therefore recommended to abstain.

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Medications

We are cautious about recommending or prescribing any medications during pregnancy especially when the fetal organs are developing during the first few months. For most women, the only recommended medications are prenatal vitamins and perhaps iron supplements. However, based on your pre-existing health problems, we may recommend continuing, stopping, or changing certain medications you are on. When in doubt, please ask your doctor.

OVER THE COUNTER MEDICATIONS ALLOWED DURING PREGNANCY AND LACTATION

ANTIHISTAMINES:

- Actifed
- Benadryl
- Claritin
- Claritin-D
- Chlor-Trimeton-D
- Chlor-Trimeton-DM
- Doxylamine Succinate
- Sudafed*
- Zyrtec and Zyrtec-D

* Georgia law now requires that Sudafed be requested from the pharmacist, even though it is not a prescription medication.

** Any antihistamine with decongestant should be used sparingly. Opt for regular antihistamine only.

COUGH:

- Robitussin
- Robitussin DM
- Robitussin PE*

* **DO NOT** use if taking Sudafed or Brethine/Terbutaline. You may take any cough drop.

CALCIUM SUPPLEMENT:

- Tums EX - Two tablets twice daily
- Viativ

CONSTIPATION:

- Colace
- Fibercon
- Konsyl
- Metamucil
- Milk of Magnesia
- Perdiem

* Increase dietary roughage, bran, dark green leafy vegetables and fruits. Drink eight to ten glasses of water daily.

DECONGESTANTS:

- Actifed
- Sudafed
- Sudafed Sinus
- Sudafed Non-Drying
- Tylenol Sinus

* Avoid use of decongestants, use sparingly if needed

DRY SKIN:

- Coconuts Butter
- Eucerin Lotion
- Vitamin E Lotion

FEVER:

- Tylenol
- Tylenol Extra Strength (Two tablets every four to six hours)*

* **DO NOT** take more than twelve tablets in twenty-four hours.

GAS:

- Mylicon
- Mylanta GAS
- Phazyme
- Mylanta Antacid / Anti-gas

HEMORRHOIDS:

- Preparation H
- Colace
- Anusol Suppository / Ointment (with or without Cortisone)

* Add roughage and increase fluids

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Medications (continued)

OVER THE COUNTER MEDICATIONS ALLOWED DURING PREGNANCY AND LACTATION

HEARTBURN:

- Gavison
- Maalox
- Mylanta
- Tums
- Pepcid Complete
- Rolaids

POISON IVY:

- Nutech Wash
- Caladryl Lotion*
- Ivy Dry*
- Benadryl Lotion or Cream for itching

* Clean affected area with soap and then apply medication to prevent the spread of poison ivy

IRON SUPPLEMENTS:

- Ferro-Sequels
- Ferancee HP
- Slow Fe
- Slow-Fe with Folic Acid

DIARRHEA:

- Imodium AD

ITCH:

- Benadryl Ointment
- Caladryl Lotion
- Hydrocortisone Anti-Itch Ointment
- Cortaid

SORE THROAT:

- Chloraseptic Oral Strips
- Chloraseptic Spray
- Sucrets or other throat lozenges

NASAL SPRAY:

- Ocean and Nasal Mist – May use as needed
- Afrin – DO NOT – use more than THREE days

EXPECTORANTS:

- Mucinex

NAUSEA:

- Emetrol
- Relief Band
- Sea Bands
- Vitamin B6 (25mg three times daily)
- Unisom (one 12.5mg tablet daily) together with Vitamin B6

SLEEP:

- Benadryl – 25mg
- Tylenol PM – only occasionally*

* Do not use on a daily basis

PAIN:

- Tylenol
- Tylenol Extra Strength

YEAST:

- Femstat 3
- Gynlotrimin Cream
- Monistat 3 or 7 Cream / Suppository*

* Insert applicator halfway only

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Medications (continued)

OVER THE COUNTER MEDICATIONS ALLOWED DURING PREGNANCY AND LACTATION

DENTAL PROCEDURES:

- Your dentist may use Lidocaine injections, but you may not receive nitrous oxide gas. Tell your dentist that you are pregnant prior to any procedures. If you usually take antibiotics prior to any procedures continue to do so. You may take Amoxicillin or Clindamycin or call the office for other meds. You may have dental x-rays with abdominal shield if necessary.

SUN SCREEN:

- Use SPF or higher

INSECT REPELLANT:

- Ok to use

TRAVEL:

- You may travel up to 34 weeks of pregnancy as long as your doctor has not put you on any restrictions. Check with your individual air carrier or cruise line regarding traveling during pregnancy. When traveling empty your bladder frequently and make frequent stops to stretch.

MISCELLANEOUS:

- No studies have been done indicating that the following procedures have an adverse effect on fetal development:
 - Teeth whitening
 - Artificial nails
 - Hair color – after First Trimester (12 weeks)

ATTENTION:

- If you are ill or have any questions regarding various medications please call the main office number (404-352-3656). Please have the following information available:
 - Name
 - Date of Birth
 - Physician's Name
 - Pharmacy Phone Number
 - Name of Medication (if requesting refills)



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Physical Activity, Exercise, And Sex

In general, activities that you do when you are not pregnant can be done during pregnancy. It is generally safe and typically recommended to continue your routine of jogging, walking, stationary bike, yoga, pilates, etc. Contact sports such as karate, football, and boxing are not recommended. Hot yoga should be avoided. If you have specific questions about exercise regimens or if you are interested in starting a new exercise program, please talk to your doctor.

As long as you do not have a low-lying placenta ("placenta previa") or have not been told specifically to refrain from sex, sexual intercourse is safe throughout pregnancy. In the postpartum period, we recommend refraining from sexual intercourse for six weeks.

Travel During Pregnancy

It is generally safe to travel until about 32-34 weeks. The lowest risk time to travel is during your second trimester, after morning sickness resolves and before you are too uncomfortable. If you are taking a long car or plane trip, make sure to stay hydrated and get up and stretch frequently. It never hurts to bring a copy of your prenatal records with you, and to have information about local hospitals where you are going just in case.

Zika has become a major concern over the recent years. The Centers for Disease Control (CDC) recommends that pregnant women avoid areas with active Zika outbreaks due to the concern for transmission of the virus to the fetus causing significant birth defects. If it is necessary to travel to these places, appropriate protection and mosquito repellent are advised. Repellent containing the ingredient *Deet* is safe and recommended. If you have been to an area where Zika is active or if you have symptoms concerning for Zika exposure including fever, rash, joint pain, or muscle aches please notify your provider. Please use barrier protection like condom throughout the entire pregnancy if either you or your partner has recently been to a Zika-infected area. Please visit the CDC website for the latest recommendations and areas of concern at <https://www.cdc.gov/zika/>.



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Dental Care During Pregnancy

Frequent dental exams and cleanings are an important part of overall healthcare. You should also continue to receive this care during pregnancy. Please let your dental hygienist and dentist know about your pregnancy so that they are aware. At times, they may require a release note from your obstetrician to provide recommended services. Please let us know if this is required and we are happy to provide the necessary documentation.

Routine Cleanings: Safe to continue.

Dental X-rays: Safe as long as the abdomen is shielded properly

Antibiotics: If you routinely require antibiotics for dental procedures, you may continue these. Amoxicillin and clindamycin are commonly used for dental procedures and these are safe in pregnancy and lactation.

Childbirth, Breastfeeding, and More

Our practice offers monthly childbirth and breastfeeding classes, which are taught by Julie Duncan, who is a registered nurse and educator with over 25 years of experience in maternal-child health, childbirth education, and breastfeeding consultation. These are usually held on Saturdays. Please check with the front desk for a flyer for more information on registration and cost for each of these sessions. Piedmont Hospital also offers tours of Labor and Delivery, the Postpartum Unit, and Waters Pavilion, typically on Sundays. Please contact them for any direct information.

While the choice of how to feed your newborn is completely your own, we recommend breastfeeding due to the numerous benefits for both the newborn and the mother. That said, we do also recognize that nursing can be challenging and sometimes exhausting. If you choose to breastfeed, we have lactation specialists available in the hospital for assistance and Julie Duncan (see above) can also provide assistance and consultation on an outpatient basis. Most insurance companies will cover lactation services, in addition to a breast pump. Please speak with your insurance company about these benefits and let us know about any necessary paperwork required for approval.

Cord blood banking

Our practice does not endorse a specific cord blood or stem cell company, but you will receive information about the potential benefits of public donation or private banking at your 28-week visit.



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Miscellaneous Pregnancy Myths

- Artificial sweeteners: safe in pregnancy
- Hair dye: data is limited, but it is believed to be safe after the first trimester
- Hot tubs: not recommended
- Best sleeping position: Anything that is comfortable! Any side is fine. Oftentimes, pregnant women are uncomfortable lying on their backs – just roll to your side or prop a pillow or blanket under your right hip as an alternative.

For additional resources, please talk to a provider in clinic or visit the official website for the American College of Obstetricians Gynecologists at www.acog.org, and explore the tab "For Patients."