2204 South Dobson Road, Suite 202 Mesa, Arizona 85202 • 480-633-6868 • fax 480-633-6996

Pregnancy Reference Guide

APPROVED MEDICATIONS DURING PREGNANCY & BREASTFEEDING

These medications have been approved by your obstetrician and are generally safe for pregnant and nursing mothers.

Allergy:	Most over the counter allergy meds are okay including: Benadryl, Claritin, Tylenol Sinus medication, and Zyrtec. Allergy shots may be continued, however, please consult with allergist.
Colds (sinus, cough):	Actifed, Afrin Nasal Spray (use no longer than 3 consecutive days), Benadryl, Benadryl cough syrup, Chloraseptic Spray, Claritin, Contac, Dimetapp, Netti Pot, Nyquil (alcohol content <15%), Mucinex, Robitussin DM, Sudafed (Pseudoephedrine), Throat Lozenges, Tylenol Cold/Sinus, Vicks 44.
Constipation :	Citrucel, Colace (Docusate Sodium), Dulcolax, Fibercon (half dose), Glycerin Rectal Suppositories, Metamucil Peri-Colace, Milk of Magnesia, Peridiem, warm prune juice.
Diarrhea:	BRAT Diet (bananas, rice, applesauce, and toast), Gatorade, Imodium, Kaopectate.
Headache/Pain:	Acetaminophen or Tylenol (regular or extra strength), Excedrin (Aspirin Free).
Heartburn/Upset Stomach:	Tums, Rolaids, Maalox, Gelusil, Mylanta, Tagamet, Zantac, Pepcid, Gavison
Hemorrhoids:	Anusol Rectal Suppositories or Cream, Nupercainal Ointment, Preparation-H Suppositories or Cream, Sitz Baths, Tucks.
Nausea/Vomiting:	Chewing gum, Emetrol as directed, Ginger Ale or Tea, Dramamine 50 mg four times daily, Unisom ½ tablet every 6 hours as needed (may cause drowsiness), Vitamin B-6 50 mg twice daily.
Vaginal Yeast Infection:	Femstat, Gyne-Lotrimin, Monistat 3 or 7 Vaginal Cream.

MEDICATIONS TO AVOID

Advil

Claritin D

- Aleve
- Aspirin

- Ibuprofen
- Motrin

- Orudis
- Pepto-Bismol
- Zyrtec D.

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FREQUENTLY ASKED QUESTIONS

• Are there any foods I should avoid during pregnancy?

Pregnant woman are more susceptible to food borne illnesses because their immune system is naturally and normally weakened. It is essential to follow the basics of safe food handling and consumption. It is suggested to avoid the following foods:

o Ready to eat meats, poultry, seafood, and dairy products

Ready to eat foods can contain harmful bacterium called Listeria. Listeria has the ability to cross the placenta and may infect the baby leading to miscarriage, infection, or blood poisoning, which may be life threatening. If you choose to eat the following foods, ensure you reheat the meat until it is steaming:

- Luncheon meats
- Hot dogs
- Soft cheeses like Feta, Brie, and Camebert (pasteurized cheese is okay)
- Smoked seafood (lox)
- Un-pasteurized milk

o Certain fish

All fish contains some level of methyl mercury, which can be harmful to your baby's developing nervous system. Fish containing high levels of mercury consumed during pregnancy has been linked to developmental delays and brain damage. It is safe to consume fish with low levels of mercury such as shrimp, canned tuna, salmon, Pollock, and catfish. Those fish with the highest level of concentration, and should be avoided, include:

- Swordfish
- Tilefish
- King Mackerel
- Shark

o Raw or undercooked foods

- <u>Meat</u> Rare or undercooked beef or poultry should be avoided because of the risk of contamination with Toxoplasmosis Gondii, a parasite that can cause mental retardation, hearing loss, and blindness in your baby. It is estimated toxoplasmosis infects between 400 and 4,000 fetuses in the U.S. each year (CDC).
- <u>Seafood</u> The Majority of seafood borne illness is caused by undercooked shellfish, which include oysters, clams, and mussels. Cooking helps prevent the algae-related infections that are associated with red tides. Raw shellfish pose concern for everybody and should be avoided altogether during pregnancy.
- <u>Fruits and Vegetables</u> Raw fruits and vegetables are not only safe to eat, but are recommended to eat during pregnancy. However, it is essential to make sure they are washed to avoid potential exposure to Toxoplasmosis.
- <u>Eggs</u> Raw eggs or any food containing raw eggs should be avoided because of the potential exposure to salmonella. Some homemade Caesar dressings, mayonnaise, homemade ice cream or custards, and hollandaise sauces may be made with raw eggs.
- o <u>Caffeine</u>

Most studies show caffeine intake is okay. However, caffeine intake should be limited to less than 300 mg per day during pregnancy. Caffeine is a diuretic, which means it helps eliminate

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fluids from the body. This can result in water and calcium loss. It is important you are drinking plenty of water, juice, and milk rather than caffeinated beverages. Some research shows large amounts of caffeine are associated with miscarriage, premature birth, low birth weight, and withdrawal symptoms in infants. The safest is not to consume caffeine.

o <u>Alcohol</u>

There is NO amount of alcohol that is known to be safe during pregnancy and therefore should be avoided during pregnancy. Prenatal exposure to alcohol can interfere with the healthy development of the baby. Depending on the amount, timing, and pattern of use, alcohol consumption during pregnancy can lead to Fetal Alcohol Syndrome or other development disorders. If you consumed alcohol before you knew you were pregnant, stop drinking now.

"The effects of alcohol on the breastfeeding baby are directly related to the amount the mother ingests. When the breastfeeding mother drinks occasionally or limits her consumption to one drink or less per day, the amount of alcohol her baby receives has not been proven to be harmful. It takes a 120 pound woman about two to three hours to eliminate from her body the alcohol in one serving of beer or wine...the more alcohol that is consumed, the longer it takes for it to be eliminated". Therefore, if a nursing mother chooses to have a drink, it is recommended to wait at least two hours per drink to nurse. (La Leche League International).

Should I start taking prenatal vitamins before I see the doctor?

If you are having no problems with nausea, you may begin prenatal vitamins at any time. Prenatal vitamins may aggravate nausea in some patients. Wait until seeing the doctor and they will instruct you when to begin vitamins.

• I am having a lot of nausea, occasional vomiting, and food doesn't sound good at all. What should I do?

The early nausea and vomiting of pregnancy are caused by the elevated hormones circulating through your system. Some patients have more problems than others. If you are primarily queasy with no vomiting, we recommend small frequent feedings (eight per day), no prenatal vitamins, and Vitamin B6, 50 mg, four times daily. If you have persistent vomiting and are unable to keep liquids down, you should notify our office right away.

• Why am I so tired all the time?

Early pregnancy creates general fatigue by the usage of 300 calories of energy per day in the development of the fetus. Be assured that usually after a period of time, you will begin to feel better and have more energy.

• If I get a headache or cold systems, are there any medications that are safe to take?

You may use non-aspirin products for headaches. If headaches persist and are uncontrolled by medication, call our office. For colds, you may use Sudafed orally. Kaopectate may be used for diarrhea, and over-the counter antacids for heartburn. Please refer to the "APPROVED MEDICATIONS DURING PREGNANCY & BREASTFEEDING" section for a comprehensive list of safe medications.

• What type of diet should I be following while I am pregnant?

An average pregnancy diet includes 2,000-2,200 calories a day. The emphasis is on food groups and increasing certain areas of each. Average daily allowances should include: six servings of proteins (meat, eggs, fish, and poultry); four to five servings of milk products (milk, dairy products, cheese,

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yogurt, etc.), and four to six servings of breads (bread, rice, rolls, cereals, pastas). Fluids should be increased to six to eight glasses of water daily. These are basic guidelines to get you started.

• How much exercise and what type of exercise is safe during pregnancy?

Exercise is very important to your well-being and better health during pregnancy. We prefer you avoid riskier sports such as water and snow-skiing, all-terrain vehicles, horseback riding, etc., in which you could more easily fall or injure yourself. Prenatal aerobics, stationary bike, swimming, walking, and jogging (if you are already in condition) are very safe.

• How much weight should I gain?

We usually anticipate an average of 24-48 pounds during pregnancy. We will discuss individual situations.

• May I continue working during pregnancy?

It is safe for woman to work if they desire and the pregnancy progresses well. As you get further along, we will be reevaluating your work and its effect on the pregnancy or vice-versa

• I seem to be urinating more frequently. Is this normal?

Initially, as the uterus enlarges, more pressure is placed on the bladder thus causing a need to urinate more frequently. As you progress in the pregnancy, the uterus will raise away from the bladder and some of the early symptoms will subside.

• What should I do if I see any bleeding or have any cramping?

A small number of abdominal twinges are normal as the uterus enlarges and the fetus grows. Anything equivalent to menstrual cramping occurring on a regular basis should be evaluated by our office. Bleeding as a period is never considered normal and should be reported immediately. Spotting or a few small brown-red drops may occur after intercourse and would be considered normal. If spotting occurs without having intercourse or is combined with cramping should be reported to us.

• What should I do if I am exposed to a communicable disease (i.e. chickenpox, measles, mumps, etc.)?

Mumps is not of a concern during pregnancy. Measles, Rubeola, and Roseola are the most common form of measles seen today. They are usually childhood diseases, and if transmitted to an adult are mild and cause no problems to the fetus. However, Rubella or the 3-day German measles are very harmful especially if contracted during the first trimester or 12 weeks. We will draw initial lab work at your first office visit to determine your immune level. If there is no immunity, we will give you guidelines for your pregnancy and also make sure a vaccine is given after delivery. Fortunately, in the general population Rubella is not commonly seen due to childhood immunizations. If you have previously had Chickenpox, you have developed immunity to the disease and if exposed you do not need to worry. If you never have had Chickenpox, contact our office if exposed and we will discuss your individual risk factors. Remember, a true exposure is one who actually has the infection at the time of contact with you. A contact to a parent or family member with an ill child is NOT exposure.

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DO'S AND DONTS OF PREGNANCY

• Exercise

You may run, walk, swim or do aerobic exercise. You should not let your heart rate get above 140 beats per minute. Remember, it is healthy for pregnant women to exercise as it will help you with weight control.

• Intercourse (sex)

You may have sexual intercourse throughout pregnancy unless instructed otherwise.

Baths & Showers

Baths and showers are okay during pregnancy, but hot tubs and Jacuzzis are not. Water temperature should not exceed 99 degrees Fahrenheit.

• Eating

As you know, nausea and vomiting are common during pregnancy. The secret is to eat small amounts frequently, i.e. every two to three hours. It is suggested to eat six to eight small meals a day. If needed, take antacids frequently, as much as every two hours. For more detailed information, please refer to the "FREQUENTLY ASKED QUESTIONS" section, and for a comprehensive list of safe antacids to take, please refer to the "<u>APPROVED MEDICATIONS DURING PREGNANCY & BREASTFEEDING</u>" section.

<u>Smoking</u>

Smoking of any kind is **not recommended during pregnancy**.

<u>Alcohol</u>

Alcohol consumption is not recommended during any time of pregnancy. Please refer to the "FREQUENTLY ASKED QUESTIONS" section for more information.

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BODY CHANGES DURING PREGNANCY

Skin

Your moles and freckles will turn darker during pregnancy. If you have questions about these, please point them out. You will also notice your nipples will enlarge and turn darker, as well as the development of a dark brown line from the pubic hairline to just below your navel. Wear a hat and use sunscreen outside to protect your skin from dark brown spots. Some pregnant women get worse acne and others have a dramatic improvement in their skin. You may use any creams, lotions, oils, or soaps. However, NO oral medications for acne are safe to take during pregnancy. You may develop bright pink "stretch marks" on your abdomen, buttocks, or breasts. There is nothing known to prevent these from occurring and they don't tend to be familial.

Eyes

The eyes can become blurred during pregnancy because the outside layer, cornea, of the eye becomes thicker. If you wear contacts or glasses, don't worry – the refraction will go back to normal after delivery. You may use medications during pregnancy.

Breasts

Your breasts will grow during pregnancy, become extremely tender and may or may not leak some clear or white fluid. This is normal. You should never leak blood from a nipple. Let us know if you should. You should continue to do breast exams throughout the pregnancy.

• <u>Heart</u>

Your heart may seem to pound more during pregnancy. This is normal. If it occasionally skips a beat, please let us know. However, there is nothing to be concerned about. Your heart may occasionally beat faster. This is normal unless it spontaneously beats more than 120 beats per minute. To calculate this, count how many times your heartbeats in six seconds and then add a zero.

Lungs

You will become short of breath during pregnancy due to the baby pushing up all of your organs underneath your diaphragm. Slow down and take it a little easier and sleep in a more upright position at night. If you have wheezing (a high pitched noise when you breath), let us know and we can help you.

<u>Abdomen</u>

In the lower part of your abdomen, at the level of the top of your pubic hairline, is where the growing uterus is located. It is suspended on its side by strong ligaments that will pull when you roll, bend, lift, cough, laugh, or sneeze. These pains are very sharp and painful. They may even give the sensation of menstrual cramps. This is normal. You may use heat and Tylenol. Remember, a miscarriage is pain PLUS bleeding. You should call us if this occurs. As the uterus begins to grow from the lower pelvis, it will put a tremendous amount of pressure on your bladder, causing you to go to the bathroom more frequently. This is normal.

• <u>Veins</u>

Initially, pregnant women create 30% more blood to accommodate the baby. You may notice blue lines (veins) on the back of your hands, legs, and breasts. They are known as varicose veins. Let us know if they begin to hurt.

Vaginal Discharge

An increase in vaginal discharge is normal. However, vaginal discharge that burns, itches, or has a foul smell is abnormal. Please feel free to call us, with any questions.

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BABY BLUES & POST PARTUM DEPRESSION

While it is hoped the transition to mother will be smooth, many new moms experience a sometimes dramatic shift in their emotional well-being. Postpartum adjustment can include mood swings, depression, anxiety, and in its most extreme form, loss of touch with reality. The most common problems are the baby blues and postpartum depression. If you're not feeling like yourself following the birth of your baby and wonder if you may be suffering from a postpartum reaction, call for an appointment for a complete evaluation.

Baby Blues

- Experienced by 70-80% of all new mothers.
- Onset is usually within 2-3 days following delivery and lasts 7-10 days.
- Symptoms may include:
 - Sadness
 - o Fatigue/exhaustion
 - Mood swings
 - Confusion
 - Difficulty coping
 - Increased sensitivity
 - Crying spells

- o Anxiety
- Irritability
- Feeling overwhelmed
- Inability to sleep, even when baby sleeps
- o Loneliness

Postpartum Depression

If the baby blues persists for more than 2 weeks or if the symptoms intensify, then the condition is considered to be postpartum depression.

- Experienced by 10-20% of all new mothers.
- The highest incident of PPD occurs 4-8 weeks postpartum but may start anytime within the first year after birth.
- Though most women will recover within six months to a year without treatment, the condition may become chronic and interfere with mother-baby attachment.
- Symptoms may include all of the problems associated with the baby blues with the addition of:
 - Appetite changes
 - indecisiveness
 - o Anger, agitation
 - Loss of control
 - Wanting to run away
 - Feeling disconnected
 - o Disturbing thoughts
 - Difficulty concentrating or remembering things

- Feelings of worthlessness or guilt
- Obsessive thoughts or fears
- Lack of interest in usual activities
- Loss of the ability to experience pleasure
- Lack of concern with personal appearance
- Fears or thoughts of hurting yourself or your baby

Postpartum Psychosis

This is the most extreme form of postpartum adjustment reaction and occurs very rarely.

- Experienced by one or two mothers birth 1,000 births.
- Onset can be immediate following delivery or occur within the first several months.
- Treatment must be sought immediately as a woman's condition may deteriorate rapidly.
- Symptoms may or may not include those of postpartum depression along with any or all of the following:
 - Extreme agitation
 - \circ Irrational
 - Sleeplessness
 - o Impulsiveness
 - Thoughts of hurting your baby

- Extreme irritability
 Inability to care for self or baby
- Delusions and/or hallucinations
- Suicidal thoughts or plans

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FMLA/DISABILITY FORMS

• What is the difference between FMLA and Short-term disability?

FMLA is a 12 week unpaid time away from work, protecting your job while you are away. It is generally available at companies of 50 employees or more, mandated by the federal law.

Short term disability refers to a medical necessity leave secondary to a physician's recommendations that you no longer work. It can be a paid leave depending on the company you work for and whether they offer this type of protection for the patient. Your employer determines the length and amount of payment allowed. Lindstrom OBGYN only determines the reason you need to be off work.

• How much time out of work am I allowed following a delivery?

National standards allow 6 weeks for a vaginal delivery and 8 weeks for a C-section. Although rare, if you develop a complication following any delivery in which the physician feels you will need to be off work for a longer period of time, this is assessed on a case-by-case basis with the physician.

• What do I need to do when I have forms that I need to fill out?

Our office will assist you with filling out the forms. All companies have their own forms, we do not provide them. We ask you to fill out your portion (name, address, etc.). We will fill out the physician's statement portion of the form. Once you have given them to us, we should have them completed in 10 business days. If you would like them faxed directly to your work place, you will need to provide us with that information.

• Is there a charge for this paperwork?

Yes, there is a \$25 fee for each form. **This fee is due prior to forms being completed.** This fee includes the time for reviewing instructions, searching existing data sources, gathering, maintaining the data needed, completing, and reviewing the collection of information. Dr. Lindstrom and his office staff are not responsible for delinquent paperwork. It is the patient's responsibility for getting the paperwork to Dr. Lindstrom's office in a timely fashion to correspond with our office policies.

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PEDIATRICIAN LIST

Pendleton Pediatrics	1445 W Chandler Blvd, Building B
Judith Pendleton, M.D.	Chandler, AZ 85224
Manisha Thakkar, M.D.	480-385-5055
Angela Zearing, CPNP	400-303-3033
Lauren Carhartt, CNN, CPNP	
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Pediatric Medical Associates	4824 E. Baseline Rd Bldg 3, Suite 125
Norman Saba, M.D.	Mesa, AZ 85206
Louis Iorio, M.D.	480-785-8700
Wm. Seitter, M.D.	
Mesa Pediatrics Professional Association	5110 E. Warner Rd. #100
Angela T. Wong, M.D.	Phoenix, AZ 85044
Susan Chung, M.D.	480-785-8700
Delphis C. Richardson, M.D.	6301 S. McClintock Dr., Suite 110
Alpert M. Schwartz, M.D.	Tempe, AZ 85283
Joseph Piacentine, M.D.	480-831-6800
James J. Smith, M.D.	2550 E. Guadalupe Rd. #115
Robin R. Laks, M.D.	Gilbert, AZ 85284
Jennifer Wallace, M.D.	480-632-1544
Gilbert Pediatrics	4540 E. Baseline Rd. #108
Dale Guthrie, M.D.	Mesa, AZ 85206
Randy Leavitt, M.D.	480-892-3880
	4365 E. Pecos Ste 123
	Gilbert, AZ 85297
	480-892-3880
East Valley Children's Center	3200 S. George Drive
Neil H. Aaron, M.D.	Tempe, AZ 85282
David M. Curran, M.D.	480-839-9097
James G. Leiferman, M.D.	
Gwynne A. Marstiller, M.D.	
Janice Millette, R.N.C.	
John Chiles, M.D.	2152 S. Vineyard Ave Bldg 9, #129
	Mesa, AZ 85210
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Mark Cartila M.D.	
Mark Gentile, M.D.	908 B W. Chandler Blvd, Suite 4
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	480-857-0222

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HOW TO ORDER A BREAST PUMP

The Affordable Care Act requires all health plans to cover breastfeeding support and supplies. Therefore, patients with health insurance are able to obtain a free breast pump with a written prescription from her doctor. Each insurance plan is different, therefore we are unable to list what supplies your insurance company covers.

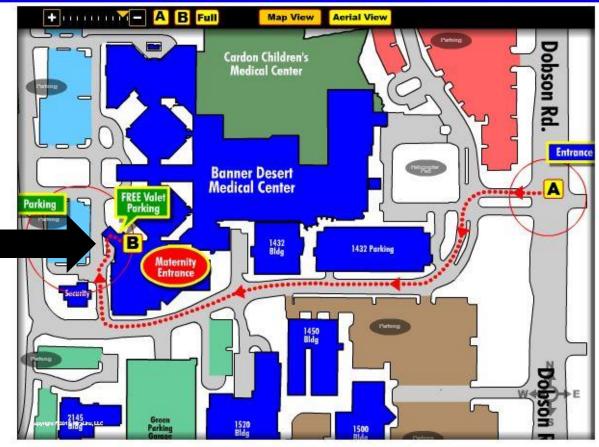
To obtain your free breast pump, follow these estimated steps*:

- 1. Request your breast pump prescription from Dr. Lindstrom.
- 2. Call the phone number on the back of your insurance card.
- 3. Speak to a representative and ask for the steps to order your free breast pump.
- 4. Typically, the insurance company will provide you with the name and number of the medical supply company they work with.
- 5. Call the medical supply company.
- 6. Submit your order.
- 7. Fax the medical company your breast pump prescription.

*As each insurance company is different, these procedures may vary.

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Parking Directions for the: Maternity







1400 S. Dobson Rd. Mesa, AZ 85202 (480) 412-3000

Parking Directions

A Dobson Road Entrance

- 1. Enter campus from traffic light on Dobson Rd.
- 2. Turn left.
- 3. Follow right curve around Parking Structure.
- 4. Proceed past Parking Structure on the right.
- 5. Continue past Desert Medical Pavilion on the right.
- 6. Turn right before the Security building.
- Turn slight right into complimentary Maternity Valet station.
- 8. Park and proceed with walking directions.

B Entrance (Maternity)