

Pregnancy Visit #6

- Normal Discomforts of Pregnancy
 - Gestational Diabetes
- Pregnancy Induced Hypertension
 - Bed Rest
 - NICU

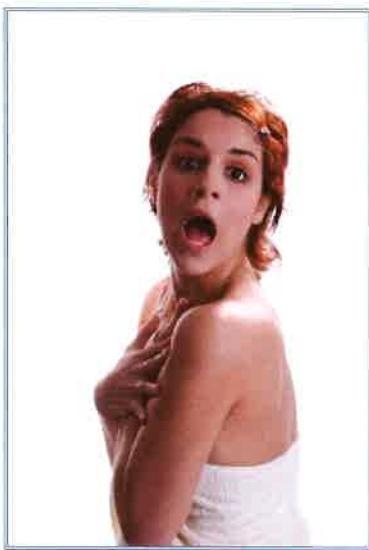


Topics for Next Visit:

- Labor and Delivery
- Pain Relief during Labor
 - Support Person
- Skin to Skin/Rooming In
 - Newborn Screenings
- Group B Strep Infection

Breast Changes During Pregnancy

When you are pregnant, your breasts change to get ready for your baby.



Ouch! Why are my breasts so sore?

Hormones are getting your breasts ready to make milk for baby. Your breasts may feel swollen and sore.

To help reduce the soreness, I could...

What other changes can I expect? Bigger Breasts

Breasts often get bigger during pregnancy. You may go up a cup size or two. The skin on your breasts is stretching. It may itch and get stretch marks.

If your breasts don't get bigger, you can still breastfeed! Even flat-chested moms can feed a hungry baby.

Darker Nipples

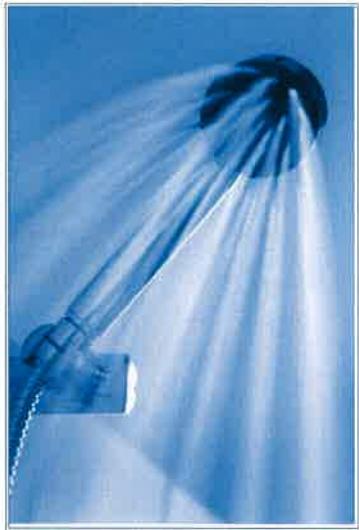
Your nipples might get bigger and darker and they may stick out more. Your areolas — the colored circles around your nipples — also get bigger and darker.

The little bumps on your areolas get larger, too. These bumps produce oil that helps keep your nipples from cracking or drying out.

Leaking Breasts

Colostrum (pre-milk) is a thick, yellowish liquid that is very good for your baby. At the end of pregnancy, you may leak a little bit of colostrum. Some women start to leak early in pregnancy. Some women never leak at all.

Cleanliness During Pregnancy



During pregnancy, you may sweat more. You might have more discharge from your vagina. This is normal. It is caused by pregnancy hormones.

Taking a bath or shower each day helps you feel refreshed. It also helps prevent infections. Avoid using bubble bath and hygiene sprays, sanitary pads, and tampons that contain deodorant.

Avoid *very hot* baths and showers or hot tubs. The water should not be warm enough to raise your body temperature.

Do not douche! Why?

- It hides real infections. Infections can be harmful to you and your baby.
- It forces air into the vagina. This may cause serious harm to mother and baby.
- It may cause irritation to the vagina.
- **Douching is never a good idea unless it is prescribed by a doctor.**



If you notice an increase in vaginal discharge or a vaginal odor, call your doctor.

Common Discomforts of Pregnancy

Headaches



Headaches can be caused by pregnancy hormones in your blood, tiredness, and/or stress.

To try and avoid headaches:

- Eat small, frequent meals.
- Avoid eye strain, bright lights, rushing around, and cigarette smoke.
- Get enough rest and sleep. (8 hours of sleep at night with naps during the day.)

If you do get a headache:

- Put a cool, damp cloth on your face and the back of your neck.
- Massage your forehead and shoulders.
- Find a quiet place and relax.
- Take a warm bath.

 *If the headache is very strong, does not go away, and/or you also have a change in vision, call your doctor.*

Backaches

Loosening of the pelvic joints, muscle tiredness, and the growth of your belly may cause backaches:

To try and prevent backaches:

- Sit and stand straight with your head up. Keep your shoulders back.
- Bend at the knees while keeping your back straight.
- Wear shoes with good support. Avoid high heels.



If you do get a backache:

- Sit in a tub of warm water.
- Ask someone to give you a backrub.



 *If the backache is very strong or you also have a fever, call your doctor.*

Common Discomforts of Pregnancy



Breast Tenderness

As your breasts grow, they may become sore and sensitive. This is caused by pregnancy hormones.

- Wear a well-fitting bra or sports bra day and night.
- Avoid clothes that rub your nipples.

 *If the pain is very strong and does not go away, call your doctor.*



Heartburn

Heartburn is caused by the pressure of your baby against your stomach. Your bowels (intestines) are also moving more slowly.

To try and prevent heartburn:

- Eat small, frequent meals.
- Drink plenty of fluids.
(Recommendations vary. Drink at least eight 8oz glasses of water.)
- Avoid tight clothes.
- Avoid foods that are fried, spicy, or fatty.
- Sit up straight for 30 minutes after you eat.

If you do have problems with heartburn:

- Sleep propped up at night on extra pillows.
- Sip peppermint tea.
- Eat yogurt or try a tablespoon of honey in a glass of warm milk

 *Call your doctor before taking any medication.*



Common Discomforts of Pregnancy

Leg Cramps

Less blood flow to your legs, tiredness, lack of exercise or a lack of magnesium in your diet could lead to leg cramps.

To try and prevent leg cramps:

- Eat foods that are high in magnesium.
(Such as beans, nuts, leafy greens, and avocados.)
- Exercise every day. (Taking a walk is a great idea!)
- Avoid pointing your toes.
- Take warm baths.
- Rest with your legs elevated
- Massage your calves and feet



If you do get a leg cramp:

- Pull your toes up toward your face. Stretch the calf muscle.
- Stand on the cramping leg. Bend your knee while keeping your heel on the floor.

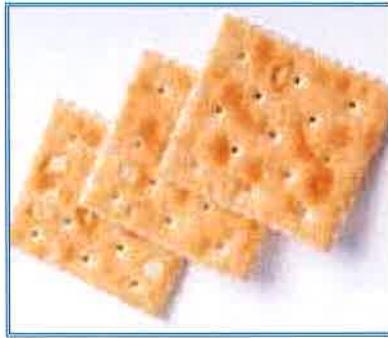


 If you also have swelling, redness, or skin changes, call your doctor.

Nausea & Vomiting

An upset stomach and throwing up are caused by pregnancy hormones and slower movement of your bowels.

To try and prevent nausea and vomiting:



- Eat some dry toast or a cracker before getting out of bed in the morning.
- Get out of bed slowly. Avoid sudden movements.
- Drink fluids between meals instead of with meals.
- Sip peppermint tea.
- Eat small, frequent meals. Eat slowly.
- Eat bland foods (those with little spice).
- Avoid household and cooking odors.



 If you cannot keep any fluids down for 12 hours straight, call your doctor.

Common Discomforts of Pregnancy

Dizzy Spells

You may feel like you are going to pass out. This is caused by the baby pressing on blood vessels in the center of your body, changing positions too rapidly, or not eating right.

To try and prevent dizziness:

- Move slowly when you change positions or get out of bed.
- Eat small, frequent meals.
- Lie on your left side when resting in bed.
- Move around a lot when standing for a long time.
- Wear loose, comfortable clothing to avoid restricting circulation.



 If you totally black out or fall, call your doctor.

Shortness of Breath

Trouble breathing can be caused by the baby pushing on your lungs.

If you have problems with shortness of breath:

- Move slowly. Rest often.
- Sleep propped up on pillows.
- Avoid tight clothes.



 If you notice a significant change in your breathing or have pain in your chest, call your doctor.



Frequent Urination

You need to urinate more frequently because of the pressure of the baby on your bladder. This is normal during pregnancy.

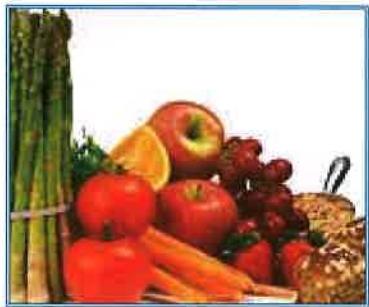
Do not hold urine, because this could lead to an infection.

 If you start to feel burning when you urinate or get a backache with a fever, call your doctor.



Common Discomforts of Pregnancy

Constipation



Constipation is when you have a bowel movement less than three times a week. The stools are hard.

Constipation is caused by the pressure of the baby on your bowels and slower movement of the bowels.

To try and prevent constipation:

- Drink plenty of fluids.
(Recommendations vary. Drink at least eight 8oz glasses of water.)
- Eat high-fiber foods like raw fruits and vegetables, whole wheat or rye bread, and whole-grain cereals. Eating prunes (or prune juice), figs, and dates also helps to maintain soft stools.
- Exercise every day.
- Go to the bathroom when you have the urge. Do not put it off.

 *If you are still unable to have a bowel movement, call your doctor.*



Gas

Gas is caused by slower movements of the bowels and the pressure of the baby on your bowels.

To try and prevent gas:

- Eat small, frequent meals instead of three large ones.
- Avoid foods that cause gas. (Such as fried foods, beans, or peas.)
- Exercise every day. Walking is good.
- Strive for regular bowel movements.



Common Discomforts of Pregnancy

Hemorrhoids

Hemorrhoids are swollen veins in your anus and rectum. They may come from straining during a bowel movement or the increased pressure of the baby on the rectum.

To try and prevent hemorrhoids:

- Prevent constipation.
- Relax with bowel movements. Do not strain.

If you do get hemorrhoids:

- Sit in a tub of warm water. Or apply ice packs to the area.

 *If hemorrhoids get worse or bleed, call your doctor.*



Vaginal Discharge

Your panties may stay wetter than they did before you got pregnant. This is caused by pregnancy hormones and the pressure of the baby.

- Wear mini-pads.
- Do not douche or use tampons.
- Bathe daily.
- Wear panties with a cotton crotch.

 *If fluid changes colors, starts to smell bad, or comes with itching call your doctor.*

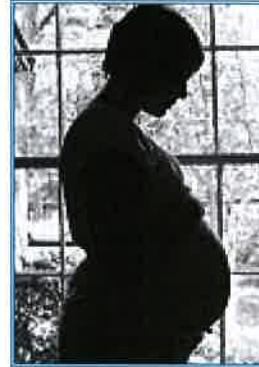


Common Discomforts of Pregnancy

Moodiness

Some pregnant women feel happy one minute then feel sad the next. This is because of hormone changes during pregnancy.

- Understand that these feelings are common.
- Talk to a friend, family member, or your nurse home visitor about how you feel.
- Go for a walk.
- Get regular exercise.



 *If you have feelings of wanting to harm yourself or your baby, call your doctor.*



Tiredness

Tiredness is a natural effect of hormone changes in pregnancy. The body uses more energy when pregnant.

- Get enough sleep and rest.
(8 hours a night, with naps during the day.)
- Exercise every day.
- Take prenatal vitamins as directed by your doctor.



Common Discomforts of Pregnancy

Varicose Veins

Enlarged veins in the legs are caused by the pressure of the baby slowing the blood's return from the legs.

To try and prevent varicose veins:

- Wear low-heeled shoes.
- Wear support panty hose. Don't wear knee-high hose or socks.
- Wear loose-fitting clothes.
- Elevate your legs whenever possible.
- Avoid crossing your legs.
- Avoid standing in one place for a long time.
- Walk every day.

 *If your veins get red and start to hurt, call your doctor. Do not rub your legs.*



Swelling

Swelling of your feet, ankles, or fingers is caused by the pressure of the baby on your blood vessels. Too little protein in your diet may also cause your body to retain fluid.

To try and prevent or reduce swelling:

- Drink plenty of fluids.
(Recommendations vary. Drink at least eight 8oz glasses of water.)
- Avoid standing or sitting in one place for long periods.
- Avoid tight clothes, socks, or knee-highs.
- Rest on your left side twice a day.
- Exercise daily. (Walking is very good.)



 *Swelling can be a danger sign. If swelling appears in your face, gets worse, or does not go down after rest and propping your feet, call your doctor immediately.*



Common Discomforts of Pregnancy

Excessive Salivation

Too much saliva is a rare problem. It is caused by pregnancy hormones in the blood. Eating too many starchy foods can make the problem worse.

If you do have problems with excessive salivation:



- Get a dental check-up.
- Eat a balanced diet.
- Do not eat any non-food items, such as cornstarch, clay, or ice.
- Drink plenty of fluids.
(Recommendations vary. Drink at least eight 8oz glasses of water.)
- Try using mouthwash.
- Chew gum or suck sour candy.

This problem should go away within three days after the baby is born.

Round Ligament Pain

Round ligaments support your uterus – one on each side. As your uterus starts to grow it can stretch your round ligaments. This can create pain or muscle spasms that you feel in your groin or on the sides of your uterus.

- Use good posture – back straight and shoulders back.
- Change positions – bend your knees toward your belly or lie on your side with pillows under your belly and between your knees for support.
- If your round ligament pain is on one side – favor the other side for sleeping.
- Light massage using your fingertips can be helpful.
- Try some stretching exercises and prenatal yoga.
- Rest especially with legs propped up.
- Use a heating pad – avoid extreme heat.
- Avoid sudden movements.

 *Always let your PCP (primary care physician) know when you develop any pain. If the pain lasts more than a few minutes, feels severe or you develop fever/chills or painful urination - call your doctor.*

Comfort Measures in 3rd Trimester

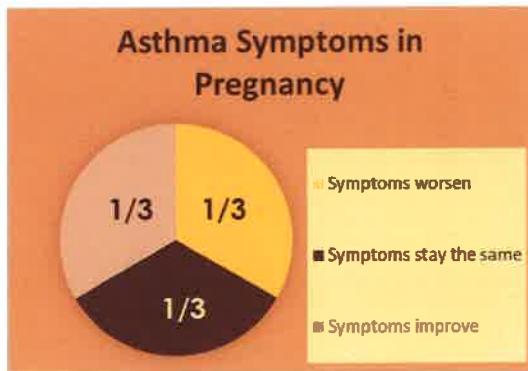
Comfort Measures

1. **Swollen feet + ankles**
Put your feet up. Lie down on your left side.
Drink plenty of water.
2. **Backaches**
Use a heating pad or a warm moist towel.
Get a back rub.
3. **Itchy skin**
Use lotion.
4. **Leg cramps**
Don't point your toes. If you get a cramp, pull toes up toward the front of your leg.
Hold toes up until cramp goes away.
5. **Shortness of breath**
Sit and stand tall to give your lungs more room.
6. **Difficulty sleeping**
Use lots of pillows to support your body.
You will be more comfortable.
7. **Achy hips & pelvis**
Move slowly and carefully. Avoid movements that make the pain worse. Rest when you can.
8. **Braxton-Hicks contractions**
Stop what you are doing. Take a few deep breaths.
Wait for it to pass.
9. **Round ligament pain**
Change positions slowly. Do not flop onto a chair or bed. Get off your feet and rest.
10. **Heartburn**
Eat small, frequent meals. Avoid greasy or spicy foods. Do not lay down with a full stomach. Take antacids approved by your nurse or doctor.

Common Discomforts

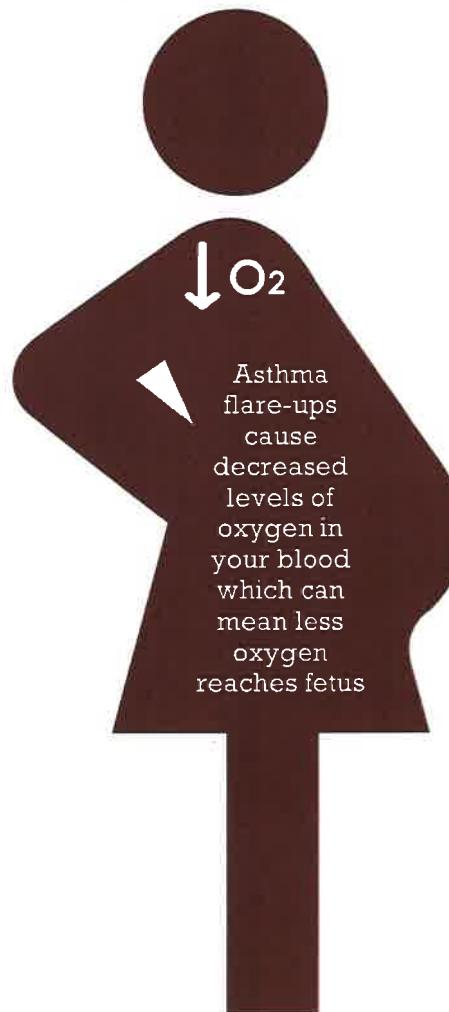
- Achy hips & pelvis
- Backaches
- Braxton-Hick contractions
(painless contractions that do not come at regular intervals)
- Difficulty sleeping
- Heartburn
- Itchy skin
- Leg cramps
- Round ligament pains
(sharp, shooting pain from either side of the uterus down to groin or thigh)
- Shortness of breath
- Swollen feet & ankles

Asthma is a chronic lung disease that causes airways to tighten, making it difficult to breathe. While pregnant, it is important to work closely with your health care provider to monitor symptoms, adjust medications if needed, and create a plan to manage asthma flare-ups.

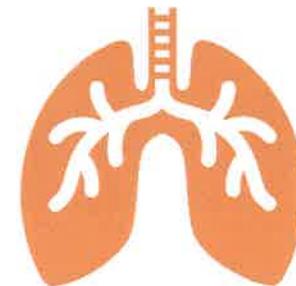


Poorly controlled asthma increases the risk of:

- High blood pressure or pre-eclampsia
- Premature birth
- Low infant birth weight



Keep your asthma well-controlled by:



- Avoiding triggers like dust, smoke, and animal dander
- Taking prescribed medications
- Keeping prenatal appointments
- Managing heartburn

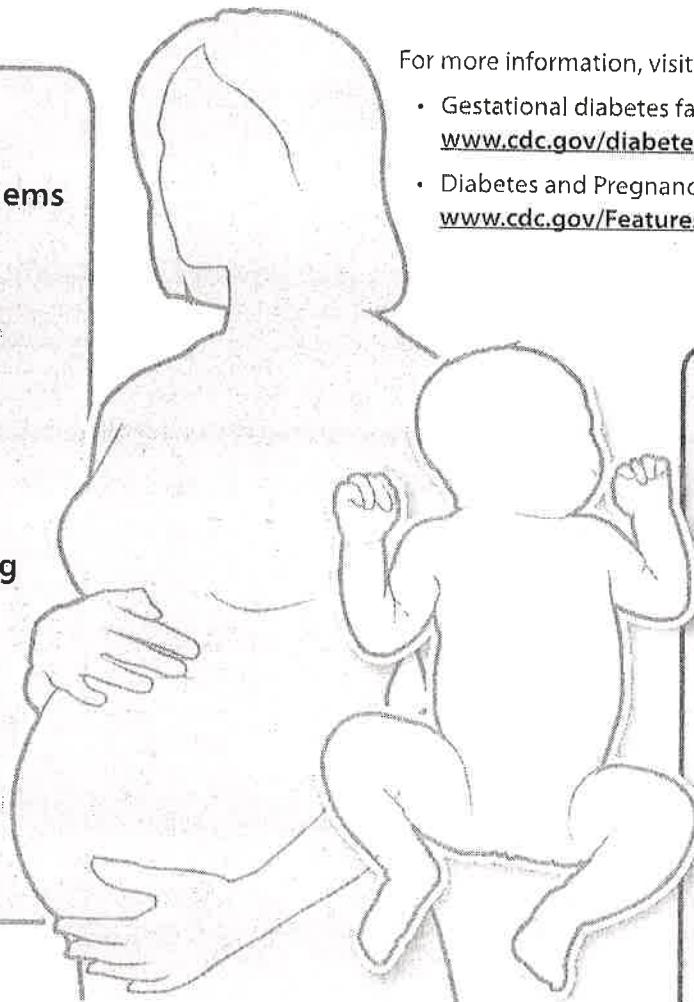
Pre-Existing Diabetes and Pregnancy

Potential Effects of Uncontrolled Diabetes Before and During Pregnancy

If you have diabetes and want to get pregnant, it is important for you to get and keep your blood sugar in control (meaning your Hemoglobin A1c level is within the limits set by your health care provider). Working to keep your blood sugar in control before and during pregnancy increases your chances of having a healthy baby and reduces the chances that you will have other problems. Uncontrolled diabetes increases the chances for the following problems you and your baby:

For You

- Worsening of any existing eye, kidney, heart, or nerve problems caused by diabetes
- Labor may start too early (preterm labor)
- Bladder and other infections
- Gum disease
- Injury from delivering big baby
- Cesarean section
- High blood pressure
- Preeclampsia (high blood pressure + protein in urine)



For more information, visit:

- Gestational diabetes factsheet:
www.cdc.gov/diabetes/pubs/pdf/gestationalDiabetes.pdf
- Diabetes and Pregnancy web pages:
www.cdc.gov/Features/DiabetesAndPregnancy/

For Your Baby

- Birth defects
 - Some heart defects
 - Some major birth defects of the brain and spinal cord
- Stillbirth or miscarriage
- Born very big (more than 9 pounds); if a big baby is delivered vaginally, it may have:
 - Injury to nerves in shoulder
 - Broken collarbone
- Low blood sugar after birth
- Yellow skin and eyes (jaundice)
- Obesity later in life

Remember

Working to control your blood sugar can help prevent these problems.
If you have diabetes,

- Plan your pregnancy, if possible, and get your body ready before you get pregnant
- Eat healthy foods and stay active
- Take your medicines
- Monitor your blood sugar often
- Control and treat blood sugar right away
- Follow up with the doctor regularly

If you've never had a diabetes test and want to learn more about the symptoms, please visit
www.cdc.gov/diabetes/consumer/learn.htm. If you think you might be at risk, talk to your doctor.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

About Gestational Diabetes

What is Gestational Diabetes?

Your body turns the food you eat into energy. **Diabetes** makes it hard for your body to change food to energy. This makes sugar build up in your blood. High blood sugar can cause serious health problems.

Gestational Diabetes is diabetes that begins during pregnancy. It may go away soon after the baby is born. Gestational diabetes affects your health and can also affect baby's health. You should have a test for diabetes 6–12 weeks after baby is born. If your test is normal, you need to be tested for diabetes every 3 years. As your child grows, they should also be checked for risk factors for diabetes, such as obesity.

Who Gets Gestational Diabetes?

You are more likely to get gestational diabetes if you:

- Are older than **25** years during pregnancy
- Have a **family history** of diabetes (parent/sibling)
- Have **high blood pressure**
- Were **overweight** before pregnancy
- Have history of heart disease
- Have history of PCOS

Anyone can get gestational diabetes. However, some people are affected more than others, including people of African, Asian, Hispanic, Native American, and Pacific Island descent.

What Are Symptoms of Gestational Diabetes?

Many times there are **no** symptoms. Sometimes the symptoms are very **mild**. Symptoms may include:

- Blurred vision
- Feeling very tired
- More infections (bladder, vaginal, and/or skin)
- Increased thirst
- Increased urination
- Losing weight even though you eat normally



About Gestational Diabetes

Can I Prevent Gestational Diabetes?

Making healthy choices may reduce your risk of having gestational diabetes.

- Eat **healthy food**. Cut down on fats and calories. Eat fiber, whole grains, fruits and vegetables.
- Stay **active**. Get 30 minutes of exercise most days. Try walking, swimming, or dancing.
- Keep your **weight** under control before getting pregnant. Dieting is not recommended during pregnancy.
- See your **health care provider**. Keep your prenatal appointments. Get tested for gestational diabetes.



Testing for Gestation Diabetes

Usually **between 24-28 weeks** gestation, the health care provider will ask you to drink a sweet drink. Follow their instructions for when and how to drink it.

Then they will draw blood from your arm and test it for blood sugar levels. The test measures your body's response to sugar.

The test may be done earlier in the pregnancy if the health care provider considers your risk for gestational diabetes to be higher.

CONSIDERATIONS:

- Ask what you should/shouldn't eat before the test.
- Tell your provider if you are taking any medications, herbs, supplements.
- Track any symptoms you notice and tell your provider how you feel after having the drink.
- Consider bringing someone with you, if pos

I Have Gestational Diabetes



It's not fair! Why did this happen to me?



I don't feel any different. I don't understand how I can have gestational diabetes.



So I've got gestational diabetes. What do I do now? I need to have a plan.

We don't know why some women get gestational diabetes. You may do all you can to make healthy choices. And you can still have gestational diabetes.

Things that worry me about gestational diabetes...

Gestational diabetes may have no symptoms. You might feel fine. Or you might feel ill.

Your goal now is to keep your blood sugar under control. This helps you feel well. It helps keep your baby healthy.

Your doctor may send you to a dietitian. The dietitian will help you learn to control your blood sugar.

You may need to change your diet. You need to make healthy food choices. Eat the right foods. Eat the right amounts. The dietitian will help you make healthy meal plans.

Get enough exercise. Ask the doctor how much exercise you need. Ask what exercises you should do.

You will check your blood sugar often. This helps the doctor know how you and baby are doing.

Sometimes healthy habits are not enough. Some women do not need to take medicine for gestational diabetes. But some do need medicine to control their blood sugar. The medicine may be in a pill or a shot.

Cholestasis of Pregnancy



Why am I so itchy?

Some itching in pregnancy is normal. It is caused by your skin stretching as baby grows. But some itching comes from **cholestasis of pregnancy**.

What is cholestasis?

Cholestasis of pregnancy is a **liver** problem. The liver helps digest fat. This creates bile.

Sometimes the liver stops working well in late pregnancy. Bile builds up in your liver and blood.

What are symptoms of cholestasis?

- Intense **itching** (mostly on the hands and feet)
- Dark-colored urine
- Light-colored bowel movements
- Yellow eyes or skin
- Fatigue and exhaustion
- Loss of appetite

Cholestasis of pregnancy can be very uncomfortable. It does not often cause problems for the mother. It can be a danger to the baby.

Cholestasis of Pregnancy

What causes cholestasis?

The cause is not well known. Pregnancy hormones may be part of it. Family history may play a part as well.

It is more common in:

- Women pregnant with **twins** (or other **multiples**).
- Women with a **family history** of cholestasis of pregnancy.
- Women with **family history** of related liver disorders.

How is it treated?

Your doctor may prescribe **medicine**. It can help your liver work better. It can help with the itching. **Giving birth** is the only way to stop the itching completely.

How does cholestasis affect my baby?

Your doctor will keep a **close watch** on your baby for any problems.

Your doctor may want to start your labor early. Your labor may start early on its own. Baby could have health or breathing problems from being born too early.

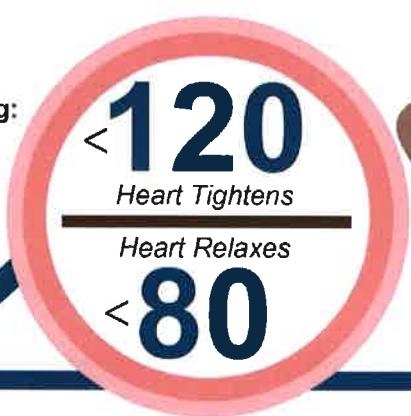
My questions about cholestasis:

High Blood Pressure During Pregnancy

Blood pressure is the force of blood against your blood vessel walls. Your medical provider and nurse will regularly check your blood pressure. A normal blood pressure is less than 120/80. Ask for your reading every time, so you know what is typical for you!

- 1** A cuff (band) is wrapped around your upper arm.
- 2** Air is pumped into the cuff.
- 3** The pressure in your blood vessels is measured.

Normal Blood Pressure Reading:



8%

of women have high blood pressure during pregnancy

MANAGING BLOOD PRESSURE

Go to all prenatal appointments

Check blood pressure regularly

Exercise regularly

Eat healthy food

Avoid drug, alcohol & tobacco use

Follow prescribed medication instructions

COMPLICATIONS OF HIGH BLOOD PRESSURE

- Preeclampsia
- Preterm Labor
- Low Birth Weight
- C-Section Delivery
- Placenta Problems

High Blood Pressure and Preeclampsia

High blood pressure can appear with different pregnancy conditions and preeclampsia is one of those conditions.



What is preeclampsia?

The exact cause of preeclampsia is unknown. Most who have preeclampsia get a mild form. They need to see the medical provider more often and need to rest more. Severe preeclampsia is dangerous for those who are pregnant as they could spend more time in the hospital with lingering health concerns. Preeclampsia could cause a baby to be born early.

What are the symptoms?

- Increased blood pressure
- Severe headaches
- Blurry vision or seeing spots
- Rapid weight gain (4-5 lbs./week)
- Stomach pain
- Swelling in hands and face
- Protein in your urine

Sometimes these symptoms occur in a healthy pregnancy, which can make it hard to know if you are getting preeclampsia.

Be sure to go to your prenatal visits. Your health care provider needs to check your blood pressure and urine often.

You are at risk for preeclampsia if . . .



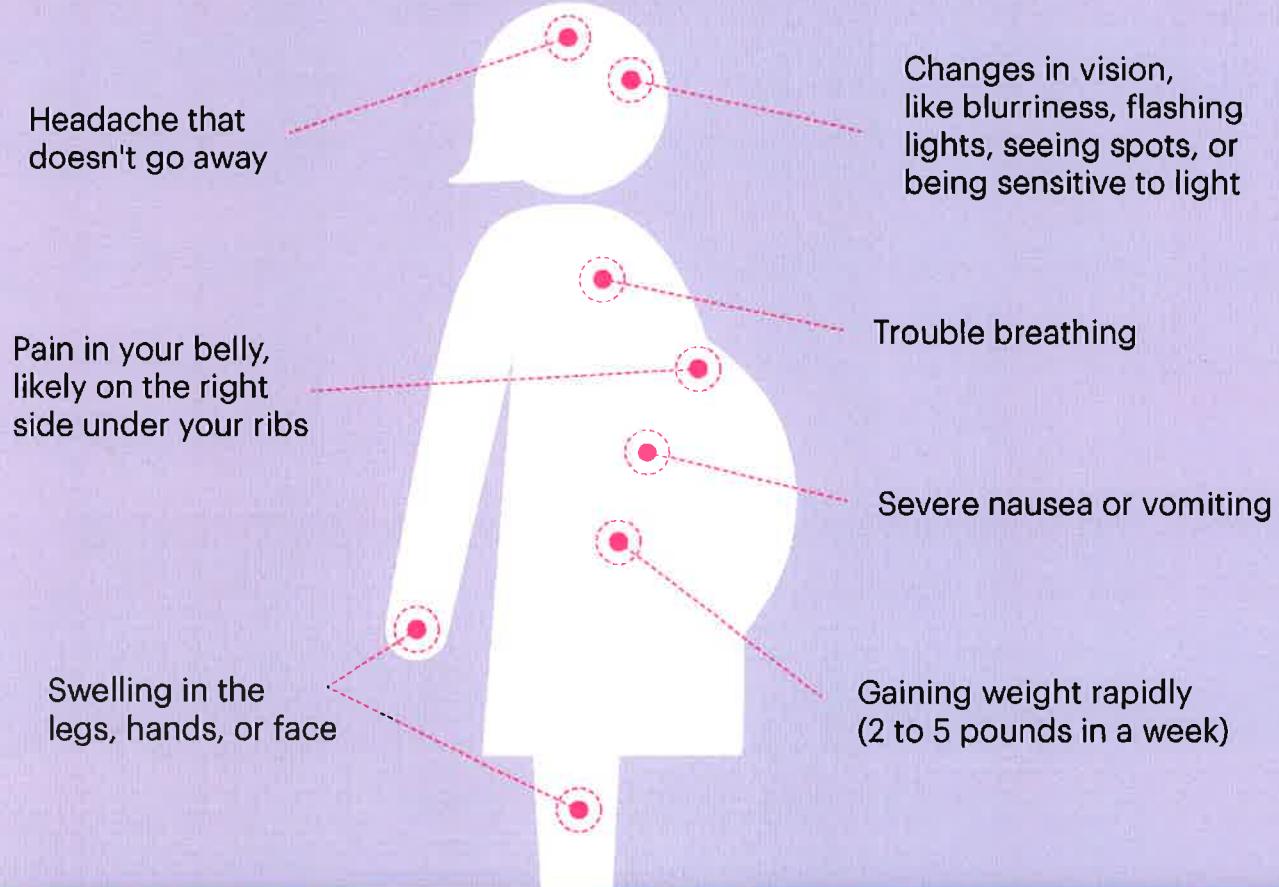
- You have had preeclampsia before
- This is your first pregnancy
- You are <20 or >35 years old
- You are very overweight
- Your female relative had preeclampsia
- You have a chronic condition like high blood pressure, diabetes, kidney disease, or lupus
- You are pregnant with multiples

You can help prevent preeclampsia by checking to see if you have any of the risk factors listed above and taking steps to address them, if possible. For example, if you have a medical condition, you can talk with your health care provider about how to manage it before and during pregnancy.



Signs and symptoms of preeclampsia

Preeclampsia is a serious condition that can happen after the 20th week of pregnancy or after giving birth (called postpartum preeclampsia). In addition to causing high blood pressure, it can cause organs, like the kidneys and liver, to not work normally.



Contact your healthcare provider if you are experiencing any of these symptoms or believe you have preeclampsia.

Visit <https://www.marchofdimes.org/preeclampsia> for more information.

January 2023



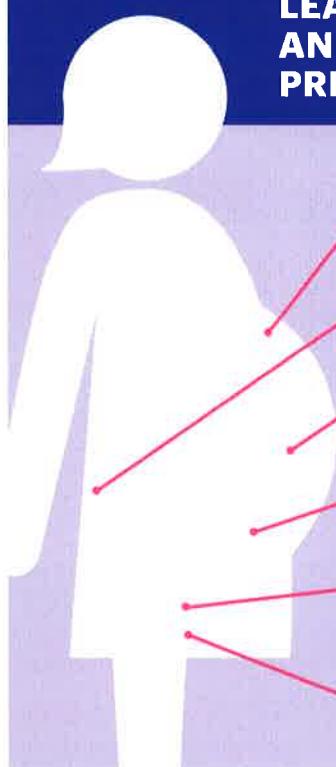
SIGNS AND SYMPTOMS OF PRETERM LABOR



Preterm labor is labor that happens too early, before 37 weeks of pregnancy.

Your baby could be born too soon and have serious health problems.

LEARN THE SIGNS AND SYMPTOMS OF PRETERM LABOR:



Regular or frequent contractions that may or may not be painful

Constant low, dull backache

Belly cramps with or without diarrhea

The feeling that your baby is pushing down

Change in your vaginal discharge or more vaginal discharge than usual

Your water breaks

WHAT YOU CAN DO:

If you have even one sign or symptom of preterm labor, call your health care provider right away.



When you see your provider, she may check your cervix to see if you're in labor. If you are, she may give you treatment to help stop labor or to improve your baby's health before birth.

MARCHOFDIMES.ORG/PRETERMLABOR

**A baby's brain at 35 weeks weighs
only two-thirds of what it will
weigh at 39 to 40 weeks.**



35 WEEKS

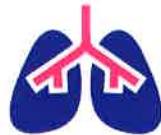


39 TO 40 WEEKS

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**OTHER IMPORTANT ORGANS ARE STILL
DEVELOPING AND GROWING, TOO:**

LUNGS AND LIVER



Babies born too early may have breathing problems and jaundice after birth.

EYES AND EARS



Babies born too early are more likely to have vision and hearing problems.



Your baby also is still learning to **SUCK AND SWALLOW**. Babies born early sometimes can't do these things.

**IF YOUR PREGNANCY IS
HEALTHY, WAIT FOR LABOR
TO BEGIN ON ITS OWN.**



MARCHOFDIMES.ORG/39WEEKS

Activity Restriction for Pregnancy Complications

Sometimes complications arise during pregnancy. Depending on the situation, this may lead your health care provider to recommend you adjust your usual activity to ensure a healthy pregnancy and delivery. Here are some examples.



- **ACTIVITY RESTRICTION** might involve changing your work schedule to have shorter shifts or work duties to have less physical exertion. It also might involve doing less strenuous exercise or lifting no more than 20 pounds. Activity restriction may be recommended for preterm labor or for those at high risk of delivering prematurely.
- **PELVIC REST** means avoiding sexual stimulation and not inserting anything in the vagina. Pelvic rest may be recommended if there is a hernia, concerns with the cervix, or placenta previa where the placenta is positioned down by the cervix instead of on the side of the uterus.
- **BED REST** involves lying down as much as possible and being up on a limited basis, mainly for eating and using the bathroom. This might be recommended when blood pressure is high, contractions are occurring early, or if the amniotic sac/water breaks earlier than expected.

If your health care provider suggests any of these, ask questions about their reasons for the recommendation. Recent research shows activity restriction does not always improve outcomes for pregnant individuals or their babies. Some risks to activity restriction could include blood clots, stress, depression, and loss of bone or muscle mass. Discuss any concerns you have with your health care provider!

NICU – Neonatal Intensive Care Unit

What to Expect in the NICU

A baby in the NICU might need help staying warm .	<p>A warmer or <i>isolette</i> may be used.</p> <ul style="list-style-type: none"> <i>A warmer is a flat bed with heating lights above.</i> <i>An isolette is a clear box that is heated inside.</i>
A baby in the NICU might need help breathing .	<p>A ventilator or <i>cannula</i> may be used.</p> <ul style="list-style-type: none"> <i>A ventilator is a machine. It helps baby breathe. A tube is placed in baby's mouth or nose. The tube is connected to the ventilator.</i> <i>A cannula is a tube placed in baby's nose. It blows oxygen into baby's nose.</i>
A baby in the NICU might need help eating .	<p>A feeding tube may be used.</p> <ul style="list-style-type: none"> <i>The feeding tube is placed in baby's mouth or nose.</i> <i>The tube drips breast milk or formula into baby's stomach.</i>
A baby in the NICU might need fluids .	<p>An IV may be used.</p> <ul style="list-style-type: none"> <i>An IV is a small tube. It is placed in a vein on baby's hand, arm, foot, or scalp.</i> <i>Fluid drips into the tube. It goes into baby's vein. This keeps baby hydrated.</i>
A baby in the NICU will be watched closely .	<p>NICU staff watches baby's vital signs.</p> <ul style="list-style-type: none"> <i>Small patches may be placed on baby's chest.</i> <i>The patches are hooked to a monitor.</i> <i>The monitor shows baby's heart rate, breathing rate, and oxygen level.</i>
NICU babies need their parents .	<p>The NICU staff can help parents care for their baby. If baby is stable, the parents can:</p> <ul style="list-style-type: none"> <i>Help change diapers</i> <i>Help with feeding</i> <i>Hold baby</i> <i>Talk softly to baby</i>

