

Prenatal Health Care Visits: What to Expect

How Many Visits?

How often will you need to see your **prenatal** health care provider? That depends on:

- ❑ Your medical history and needs
- ❑ How your pregnancy is going
- ❑ The provider's advice

Call your health care provider when you think or know you are pregnant. Ask to be seen. A common schedule for prenatal visits is:

- ❑ A first visit. (See next column.)
- ❑ About once a month for the first six months
- ❑ Every 2 weeks for the 7th and 8th months
- ❑ Every week after that until the baby is born

You and your provider will schedule the exact dates of all of your visits.

The First Visit

Facts about the first **prenatal** visit:

- ❑ It confirms whether or not you are pregnant.

- ❑ It gives you a “due date.” That’s the date your baby is likely to be born.
- ❑ It takes longer than the rest of the visits.
- ❑ It gives you and your health care provider a lot of information.

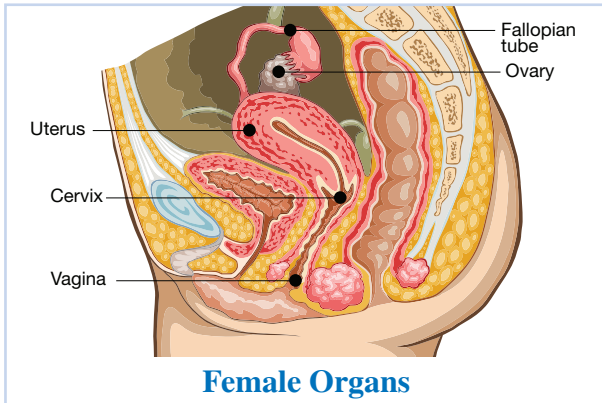
At the first visit, your health care provider will probably:

- ❑ Do a urine test or a blood test to make sure that you are pregnant.
- ❑ Ask questions about your medical history and your family’s medical history. (Read “Talking with Your Health Care Provider” at www.HealthyLearn.com.)
- ❑ Talk about depression, physical abuse, and safety concerns.
- ❑ Do a complete physical exam to check:
 - Your height and weight. These are used to get your body mass index (BMI) number. This tells if your weight is okay or too high or too low.
 - Your blood pressure
 - Your heart and lungs
 - Your ears, nose, and throat
 - Your breasts
 - Your **abdomen**



Do a **pelvic exam** to check:

- Your **pelvis, vagina, uterus, and cervix**. These are checked for size, shape, and structure. The size of your uterus tells how many weeks pregnant you are.



- Your **ovaries**. These are checked to make sure that they are healthy.
- The age of the **embryo** or **fetus**. Embryo is the term used for the baby the first 4 to 8 weeks of its growth. Fetus is the term used for the baby after you are 8 weeks pregnant.

Do some other tests:

- Blood tests. A sample of blood is taken from your arm to test for:
 - Blood type (A, B, AB, or O)
 - A positive or negative D blood type (this used to be called **Rh factor**)
 - **Anemia**
 - Immunity to **German measles** and chickenpox

- **STDs** (sexually transmitted diseases). All pregnant women are advised to be tested for **HIV**, hepatitis B, syphilis, and chlamydia. Testing for other STDs may also be done.

- Urine tests. A urine sample is tested for protein, sugar, and a **UTI**. This stands for **urinary tract infection**.
- **Pap test**. Cells are taken from your cervix. These are tested for cancer and types of cells that can turn into cancer.
- Bacterial culture tests:
 - Cell cultures are taken from your cervix, vagina, and **rectum**.
 - These are tested for certain **STDs** and for **group B strep**.

The Rest of the Visits

At later visits, you can expect your health care provider to:

- Weigh you.
- Feel your **abdomen**. This checks for the height of the uterus and the position of the baby.
- Take your blood pressure.
- Test your urine for protein and sugar.
- Test your blood for anemia.
- Give you a vaccine to help protect you from the flu. Your health care provider decides if vaccines are needed.



- ❑ Check for signs of swelling in your ankles, hands, face, and feet.
- ❑ Listen for your baby’s heartbeat (after the 10th week).
- ❑ Take a blood sample for a “quad marker screen.” This tests for four substances in the blood. High or low levels of the four substances can screen for certain birth defects. Other tests would need to be done to confirm a birth defect. Birth defects happen in only a very small number of babies, though. This test is done between weeks 15 and 20. You may be able to choose if you have this test or not.
- ❑ Ask you if you have started to feel your baby move.
- ❑ Test you for **gestational diabetes** (see at www.HealthyLearn.com). A test is done for this between weeks 24 and 28. It is done even when urine tests don’t show sugar. But it may be done earlier if a routine urine test shows sugar. It also may be done earlier if you are at high risk for diabetes.
- ❑ Do a second blood test from your arm.
- ❑ Test a second cell culture from your **vagina** and **rectum** (between weeks 35 and 37). This checks for **group B strep**. A cell culture test may also be done as early as week 32 if you have a lot of vaginal discharge or if you have a history of **preterm labor**. That’s when labor happens 3 or more weeks before your due date.

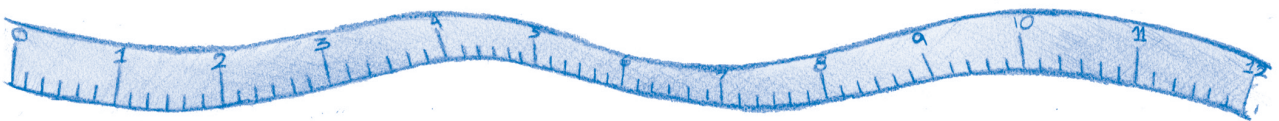
What actually happens at each visit will depend on your needs at the time.

Special Tests

Your health care provider may do one or more special tests during your pregnancy. Some of these are:

- ❑ **Ultrasound.** This test shows the baby’s position. It shows how the baby is growing. Your bladder should be full for this test. Here is what happens during an ultrasound:
 - A gel is rubbed on your belly.
 - A hand-held device is passed over your belly. It doesn’t hurt at all.
 - The test usually lasts 5 to 10 minutes. It can take up to 45 minutes. This will depend on the baby’s position and movement.
 - Sound waves and a TV-like screen give a picture, which you can see, of your baby.

You may be given a video or printed copy of the picture. If so, ask your health care provider to explain it. The picture may show if your baby is a girl or boy. Would you rather keep the baby’s sex a surprise? If so, tell your provider before you have your ultrasound. That way, no one will let the secret slip. You see the picture only if it doesn’t show the baby’s sex.



An **ultrasound** may be done to:

- Find an **IUD** that was in place at **conception**
- Tell the age of the **fetus**
- Show how the fetus is lying before **amniocentesis** and **CVS** tests. (These are described below and on next page.)
- See if you are carrying more than one baby
- Diagnose some birth defects (if done around 19 weeks by a doctor certified in OB ultrasound)
- Identify the source of any problems

Ultrasound is thought to be safe for both mother and baby. It is usually done between weeks 18 and 20 of the pregnancy. It may be done between weeks 10 and 14 if the baby is at high risk for **Down's syndrome**.

☐ **Amniocentesis**. This is a test for certain birth defects. It can also show how mature the fetus's lungs are. The test takes about an hour. It is usually done between weeks 15 and 20. It can, though, be done at any time up to delivery, if needed. Here is what happens during amniocentesis:

- An ultrasound test locates the fetus and placenta.
- A needle is put into the uterus. The needle enters through the wall of the mother's abdomen.

- The doctor uses **ultrasound** to guide the needle. The needle is put in an area away from the developing baby.
- Only two-thirds of an ounce of **amniotic fluid** is taken out. The fluid is sent to a lab.

Amniocentesis will show the baby's sex. But it is never done for that purpose alone. That's because there is about 1 chance in 100 to 1 chance in 200 that the mother may miscarry. This could happen within 3 weeks after the test.

Amniocentesis is not a routine test. It tests for **genetic** problems if:

- The mother is over age 35 or asks to have genetic testing.
- The mother or her partner has a parent, brother, sister, or child with a **genetic** or **metabolic** problem.
- The mother has had a baby with a defect in the past.
- The mother has a family history of special problems, such as hemophilia (a bleeding disorder) or **spina bifida**.
- Both mother and father are Ashkenazi Jews. These Jewish people are from Eastern European descent. A person of this ethnic group has a 1 in 4 chance of carrying the gene for **Tay-Sachs** disease. If both parents carry this gene, there is a 1 in 4 chance that their baby will get Tay-Sachs disease.



It may feel scary to read about **amniocentesis**. Even if you have the test, it doesn't mean your baby will have a birth defect. In fact, most tests give normal results.

Amniocentesis may be done later in a pregnancy to find out if the baby's lungs are mature enough for the baby to be able to breathe on its own after birth.

☐ **CVS**. CVS stands for **chorionic villus sampling**. It shows birth defects early in a pregnancy. It is usually done during weeks 10 to 12. In CVS, **ultrasound** is used to help take a sample of the fetal membrane. The sample is taken from the **uterus** through the **vagina** and **cervix**.

Or the fetal membrane sample can be taken from the wall of the mother's **abdomen** in the same way as with amniocentesis. The sample is sent to the lab. Like amniocentesis, cells can be grown to look for genetic problems. But CVS can find these sooner, because it is done earlier in the pregnancy.

CVS can't show how mature the fetus's lungs are. It does not test **AFP**. This is a protein in the blood. It is one of the four substances in the "quad marker screen." The risk that the mother may miscarry is small. A CVS test should be done at centers that do a lot of CVS tests. A Maternal Fetal Medicine Specialist is skilled in doing this test.

