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Congratulations—you're pregnant! Now get out your calendar and pencil in those prenatal appointments. Read on to find out what will happen each time you set foot in the OB's office, so you can make the most out of every meeting.





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Now that your body is busy growing a babe, you'll be seeing a lot more of your health care providers and their nursing and office staff, so there's no need to be shy. The number of trips you'll be making to see your OB can vary

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from mom to mom, but you can expect around 15 appointments on average. As you progress through each trimester, you'll be popping in more often. For women without complications, the Office on Women's Health, U.S. Department of Health and Human Services, suggests the following appointment schedule: once each month for weeks 4 through 28; twice a month for weeks 28 through 36; weekly for weeks 36 to birth. The frequency of your appointment schedule is also largely dependent on any medical issues you may be experiencing, says Peter Ahlering, MD, OB/GYN and medical director of the Missouri Center for Reproductive Medicine. Follow your doctor's lead on this one if she asks to see you sooner rather than later.



WEEKS 1-12: First trimester

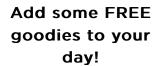
As soon as you've got a positive pregnancy test in your hands, you'll want to give your OB a ring. There's no need to rush right over, but she'll want to see you by 8 weeks along.

When the date of that first checkup rolls around, you'll be feeling equal parts anxious and excited. Take a deep breath, and don't let your nerves override any questions or concerns you wanted to bring up. If you have time beforehand, make note of anything important you want to discuss with your OB. You'll be glad to have a

reference sheet should your mind go blank in the exam room.

"Bring your husband or significant other for the first appointment, and remember to have your list of questions ready," says Christine Greves, MD, OB/GYN at Winnie Palmer Hospital for Women & Babies in Orlando.





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Your inaugural appointment will likely take the longest. Why? Because you'll have a stack of forms to fill out (be prepared to show off your best penmanship) and you will be sharing a complete medical history—for you and your family. The doctor will perform a number of lab tests to look at basic blood count, blood type and infectious diseases like HIV, says Ahlering. You can also expect to have your feet in the stirrups if you haven't had a Pap smear recently.

There's no need to worry about all the prodding and probing—it's just to make sure you and baby are in tip-top shape.

The following appointments won't stray too far from the norm. Your practitioner will perform regular tests, including checking your weight and blood pressure and baby's heart rate. The doctor will also test your urine for

sugar and protein in order to rule out pregnancy-related conditions like preeclampsia (toxemia) and gestational diabetes, says Ahlering. You'll get the hang of the routine pretty quickly and feel like a pro in no time.

At each visit, you'll discuss how you're feeling, any problems you may be experiencing and any questions you might have. Don't be afraid to speak up if there's something you're worried or wondering about. Your OB is there to guide you—whether it's picking a prenatal vitamin, making changes to your diet or finding an exercise routine that works for your baby-toting body. (Rest assured they've heard it all before, so there's nothing too silly to ask.)

At some point during the first trimester, you'll be given the option to have the nuchal translucency screening, which combines a blood test and ultrasound to check for chromosomal abnormalities such as Down syndrome, as well as heart defects. The blood test will verify your blood type and Rh status; it will also reveal any signs of anemia and diseases, such as hepatitis B and STDs. If the initial screening comes back positive, your doctor may recommend further testing (chorionic villus sampling in the first trimester or amniocentesis in the second trimester) to determine whether your babe-to-be has any birth defects.

## WEEKS 13-28: Second trimester

As you get close to the mid-point of your pregnancy, you can expect a similar routine to the checkups you now know so well. You'll be handing over a urine sample at the start of each visit—so drink up, and come prepared to relieve yourself. Once bathroom duties are over, you'll step up to the scale for your latest weigh-in. Those extra pounds are completely normal. Do your part by eating healthy foods and staying active, and leave the worrying to your OB, who will let you know if you're not within the recommended weight range.

Your doctor, Greves says, will continue to monitor your

blood pressure and your baby's uterine growth, fetal activity and heart rate. Yep, that means you'll get to hear your little one's fluttering heartbeat for the first time (and plenty of times after).

Another prenatal appointment highlight: You'll have your second trimester ultra- sound around 20 weeks. This is the moment you've been waiting for, so bring your partner and the big siblings, too. You'll all get a peek into mama's uterus to see baby's profile, fingers and toes. You might even find out the sex—but not always.

Your doctor will use ultrasounds and belly measurements to keep tabs on your due date, confirm whether you're carrying multiple babes, note how much amniotic fluid you're toting and check for problems, such as a pregnancy outside the uterus. Come prepared to answer questions about pregnancy symptoms (like swelling) and your little one's movements. Every appointment should end with a brief chat to give you a chance to share any concerns.

During this trimester, you'll also be offered a multiplemarker test, sometimes called a triple screen or quad screen depending on how many tests they perform. This screening tests for chromosomal abnormalities and neural defects. If you choose to have it, expect it to be administered between 15 and 20 weeks.

## WEEKS 29-40: Third trimester

You've made it to the final stretch, and now you get to celebrate with a glucose challenge test. To toast the start of your third trimester, a nurse will hand you a sweet, fruity drink that tastes a lot like flat orange soda. You'll be given a time limit to down your beverage and then asked to wait an hour to have your blood sugar tested. The hardest part is not being allowed to eat anything beforehand. The results will indicate whether you have gestational diabetes, a common condition that can typically be managed with adjustments to your meal plan.

You'll be visiting doc more regularly now. She'll be checking you to make sure there are no signs of preterm labor, although Ahlering points out that in low-risk patients this is not a common condition.

Now is the time to talk to your OB/GYN about labor and delivery options (and creating a birth plan if you haven't already), any mental health or depression concerns you have (dealing with this before delivery can help with possible postpartum issues later), and questions you may have on breastfeeding and postpregnancy contraception, says Greves. Once you technically hit full term at 37 weeks, any visit could very well be your last, so get your questions out on the table now.

How your appointments go depends on your pregnancy needs. If you've been dubbed a high-risk pregnancy, then you'll have additional tests and ultrasounds. "The most prevalent complication during this time is preeclampsia," Ahlering says. "This is why doctors see patients more often later in pregnancy and check things like weight, urine and blood pressure." He notes that preeclampsia (high blood pressure) often goes unnoticed to the patient in its early stages, so doctors want to ensure they don't miss any of the first warning signs.

If you have had a healthy, relatively easygoing pregnancy, you can expect to be in and out of the OB's office pretty quickly.

In the final weeks, you'll be tested for group B strep, a common infection that means you'll need antibiotics during labor to keep from passing it on to baby. (Don't worry—with proper treatment it's nothing to stress about.)

As your due date draws near, the doctor might check your cervix to look for signs of softening, effacement and dilation—all of which mean you could be well on your way to labor. She'll also try to get an idea of baby's position in the womb based on feeling the outside of your belly or

conducting a vaginal exam. If your little one has dropped lower into your pelvis, it's a sure sign she's getting ready for her grand entrance—and that you're nearing the finish line of your prenatal appointment marathon.

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