

Delisa Skeete Henry, M.D., LLC.

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Phone # 954-581-8706 Fax # 954-581-8705

Appointments

All appointments are given to meet the medical needs of the patient. If you are cancelling or changing appointments, inform us 24 hours in advance to avoid cancellation fee.

Come 10 minutes early for the appointments. We schedule patients every 15 minutes. **If you are more than 15 minutes late; your appointment will be rescheduled for another date.** If you miss an appointment, please make another one immediately.

Your first visit will be with Nurse Practitioner / Midwife. Subsequent visits will be with the MD as well as Nurse Practitioner / Midwife.

Delivery

Dr. Skeete would like to delivery all of her patients; However, it is not humanly possible; therefore, cross coverage is with Dr. Coe, Dr. Fahey, Dr. Noel and Dr. Pouliot.

C-Section: / Induction:

Labor / delivery department will contact you with the scheduled time and instructions. If you don't get a call timely; please contact them at 954-355-5829.

Calling the office for Medications / Refills

Please listen to the prompt to select the right extension. Leave a brief message with the following information.

- o Your name
- o Date of birth
- o # of weeks in pregnancy
- o Describe your specific problem
- o Pharmacy phone number
- o You contact phone number

Answering Service

Our phone number 954-581-8706 is linked to after hour answering service. We have an on-call physician available after hours. One of our on-call physicians will return your call. If you don't get a call back from a physician within two hours; please call the number again

Demographic / insurance information

You will be asked to sign your superbill to make sure the information in our computer is accurate

Insurance must be accurate for claims to be paid.

Phone numbers and address must be current.

Chiropractic Care

Take advantage of the Chiropractic services provided at our Broward office for all obstetric patients. Natural Chiropractic Care has state of the art equipments as well as a group of friendly staff that will make you feel right at home.

Check with your provider on how you can benefit from these services.

Physician Commitment fee

Water Birth \$1500.00
VBAC \$1500.00
Special birth plans \$500.00

- must be approved by the physician. Please Check with the front desk for more information.

Hypnobirthing classes are available upon request.

Medical Leave / short term disability:

FMLA's can be completed for your medical leave. We require **five business days** to complete the paperwork.

Patient Financial responsibility

Contact your insurance company to obtain your maternity benefit.

Copays are collected at the time service is rendered:

Initial Obstetrical visit
Sick /problem visit
Ultrasound

Deductible and Co-Insurance: It is our office policy to collect patient responsibility by the 28th week of pregnancy. Patients will be

placed on a payment plan to pay towards patient responsibility.

All accounts will be reconciled after the delivery, once all the claims are paid.

Labs / injections

*Labs and genetic testing's is based on the medical need of the patient. **Deductible and co-insurance may be applied.** Patients can refuse standard test and sign consents, prior to the test being performed.*

Injections: deductible / co-insurance may be applied. Please contact your insurance company if you have any questions.

Circumcision:

Commercial Insurance: Deductible is applied.

Straight Medicaid does not cover circumcision.

HMO Medicaid will pay with baby's identification number.

When to go to the hospital

GO TO THE EMERGENCY ROOM

If you are **less than 20 weeks** pregnant

- o If you have bleeding / spotting
- o Severe Cramps
- o Severe Nausea / Vomiting
- o Feeling weak or unable to eat

GO TO THE LABOR / DELIVERY

If you are **over 20 weeks** pregnant

- o If you are bleeding and spotting
- o If you are having contractions
- o If the baby is not moving
- o If your water broke
- o Fever 100.4 or greater

Your Prenatal Visits

Your First Visit

We have a lot of information to give you in this first appointment. Please come prepared with all your medical history the day of your appointment; Medical Assistant will collect your information through an interview and enter it into your chart. The physician and/or nurse practitioner will discuss your pregnancy and address your specific questions. It helps to write down your questions ahead of time. Your due date will be calculated. You will also have a physical exam where we will test for infections and perform a pap smear.

Blood Work/Test

At your appointment, you will be given an order for prenatal labs which will test your blood type, a blood count and for infections such as syphilis, hepatitis B, HIV, and Rubella. We will review the results at your next appointment. You may decline the HIV testing, but recommend all pregnant women have the test done to provide the best care for you and your baby.

- Around 24-28 weeks, we will be performing a diabetes and anemia test.
- At 36 weeks we obtain a vaginal culture for group B beta strep.

Optional Testing

- Additional testing's includes but not limited to a hemoglobin electrophoresis, and other genetic testing.
- Cystic fibrosis screening- This is a swab performed in the office which determines if you are a gene carrier. Further testing is then required if the test is positive to find out if your baby has the disease.

The Rh factor

If your blood type is Rh negative then you may be at risk for Rh disease. About 10% of people have this blood type and you will be tested for it in the blood work at your first visit. Rh disease is pregnancy complication in which your immune

system attacks the baby's blood and can result in a life threatening situation for the baby. Fortunately, we can prevent the problem with a shot called Rhogam which is given at 28 weeks or anytime if any vaginal bleeding occurs. If you are Rh negative, always call the doctor immediately if you develop bleeding or trauma to your belly. You may need an extra Rhogam shot.

Frequency of Pregnancy Visits

We would schedule your visits every 4 weeks for the beginning of your pregnancy. Around 28 weeks, we will increase the visits to every 2 weeks and then every week after 36 weeks. If you are high risk or having problems, then we may see you more frequently.

28th week of Pregnancy

One hour Glucose tolerance test instructions:

- Keep the Glucose drink refrigerated.
- Do not eat or drink anything three hours prior to drinking the Glucola.
- Drink ½ of the bottle one hour before coming into the office for your appointment.
- Do not eat or drink anything including water until after your blood has been drawn in the office.

Ultrasounds

Minimum of two ultrasounds are done during your pregnancy. Additional ultrasounds are performed based on medical necessity.

Perinatologist: High risk pregnancies are referred to Perinatology physicians, who closely monitor the well being of the patient and the unborn child

Birth Plan - your birth preferences are unique to each individual. Please speak with your provider regarding your birth preferences.

Fetal Movement

You may start feeling the baby move around 16-22 weeks. Initially, movements will be small and infrequent. As your baby

grows, you will feel him or her move more often. After 28 weeks, we recommend counting your baby's movement once daily until you get 10 within 2 hours. You should do this once a day and call your doctor if you notice a decrease in movements. If you have difficulty feeling your baby, try lying on your side, press your hands on your belly and eat a snack. Many babies are more active in the evening when tired moms are resting and have eaten dinner, making this an ideal time to check on your baby.

Prenatal Vitamins / Nutrients

Prenatal vitamins

We recommend a daily prenatal vitamin to help provide the best balance of nutrition for you and your baby. Either over the counter or prescription vitamins is fine. If you cannot tolerate a prenatal vitamin, we recommend (2) children's chewable vitamins a day instead. If vitamins are causing nausea, try raking them at nighttime with a snack. If constipation is an issue, increase the fiber in your diet, drink more fluids and increase activity. An over the counter softener may be added if needed.

Key Nutrient during Pregnancy

<i>Nutrient</i>	<i>Reason for Importance</i>	<i>Sources</i>
Calcium (1000 mg)	Helps build strong bones and teeth	Milk, Cheese, Yogurt, Sardines
Iron (27 mg)	Helps create the red blood cells that deliver oxygen to the baby and also prevents fatigue	Lean Red Meat, Dried Beans and Peas, Iron-Fortified Cereals
Vitamin A (770 mcg)	Forms healthy skin and helps eyesight, helps with bone growth	Carrots, Dark Leafy Greens, Sweet Potatoes
Vitamin C (85 mg)	Promotes healthy gums, teeth, and bones. Helps	

	your body absorb iron.	
Vitamin B6	Helps form red blood cells, helps body use protein, fat and carbohydrates	Beef, Liver, Pork, Ham, Whole Grain Cereals, Bananas
Vitamin B12 (2.6 mcg)	Maintain nervous system needed to form red blood cells	Liver, Meat, Fish, Poultry, Milk (only found in animal foods, vegetarians should take a supplement)
Folate (600 mcg)	Needed to produce blood and protein, helps some enzymes	Green Leafy Vegetables, Liver, Orange Juice, Legumes and Nuts

Recommendations for Weight Gain during Pregnancy

Underweight women with a low weight gain during pregnancy appear to have an increased risk of having a low birth weight infant and preterm birth. On the other hand, obese women have an increased risk for having a large for gestational age infant, post term birth, and other pregnancy complications.

There is an increased risk of small for gestational age births in women who gain less than the recommended weight, based on pre-pregnancy weight. Women who exceed the weight gain recommendations double their risk of having a very large infant. It may also increase the risk of childhood obesity and makes weight loss more difficult after delivery.

- Recommendations for weight gain during a singleton pregnancy are as follows:

Underweight women (BMI less than 20): 30-40 lb

Normal weight women (BMI 20-25): 25-35 lb

Overweight women (BMI 26-29): 15-25 lb

Obese women (BMI>29): up to 15 lb

Healthy Diet

The first step toward healthy eating is to look at the foods in your daily diet. Having healthy snacks that you eat during the day is a good way to get the nutrients and extra calories that you need. You may find it easier to eat snacks and small meals throughout the day rather than three big meals a day.

Meal Planning

Pregnant women need to eat an additional 100-300 calories per day. This is not a lot of food. It is equivalent to a small snack such as one half of a peanut butter and jelly sandwich and a glass of low fat milk.

Extra Nutrients

Pregnant women need extra iron and folic acid and these are usually prescribed in a pill form as prenatal vitamins. Taking folic acid for 1 month prior to pregnancy and during the first three months of pregnancy can reduce the risk of certain birth defects such as spinal bifida.

Check with your doctor before taking any vitamins, herbs or other supplements that are not prescribed for you. Just because a product is natural does not mean it is safe to use during pregnancy.

Food Groups

As much as possible, you should incorporate a balance of healthy foods in your diet. The best way to do this is by following the food pyramid listed below.

Food Group	Servings	Examples
Grains	6 Ounces	1 cup of cereal, 1 slice

		of bread, or ½ a cup of cooked rice or pasta can be considered as 1 ounce
Vegetables	2 ½ cups	1 cup of raw or cooked vegetables or vegetable juice, or 2 cups of raw leafy greens can be considered as 1 cup
Fruits	1 ½-2 cups	1 cup of fruit or 100% fruit juice, or ½ cup of dried fruit can be considered as 1 cup
Meat and Beans	5-5 ½ ounces	2-3 ounces of meat, poultry, or fish, ½ cup cooked dried beans, 1 egg, 2 tablespoons peanut butter, or ½ cup nuts or seeds equals 1 ounce
Milk	3 cups	1 cup of milk or yogurt, 1 ½ oz. of natural cheese, or ounces of processed cheese can be considered as 1 cup

You can eat while pregnant as long as it is cooked and in moderate amount

- Shrimp
- Pollock
- Salmon
- Crab
- Halibut
- Catfish

Artificial Sweeteners

These are okay to use but we would recommend limiting it to 1-2 servings per day. If you have diabetes, the artificial sweeteners are better than sugar to help control your blood sugars.

Foods to Avoid in Pregnancy

Fish that you should not eat while pregnant

- Sword Fish
- Shark
- Tilefish
- Mackerel
- Albacore Tuna
- Raw Fish of any kind
- Sushi

- Raw Meat: Avoid uncooked seafood and undercooked beef or poultry due to risk of bacterial contamination, toxoplasmosis and salmonella.
- Deli Meat: In rare cases, may contain bacteria called listeria that can lead to pregnancy complications and miscarriage. If eating deli meat, reheat until steaming to kill any bacteria.
- Fish with mercury: **Avoid** fish with high levels of mercury including shark, swordfish, king, mackerel and tilefish. For other fish, limit consumption to two servings per week.
- Smoked seafood: Refrigerated, smoked seafood should be avoided due to risk of listeria contamination.
- Raw shellfish: including clams, oysters, and mussels can cause bacterial infections. Cooked shrimp is safe.
- Raw eggs: Raw eggs or any foods containing raw eggs can be contaminated with salmonella.

This includes some homemade Caesar dressings, mayonnaise, and homemade ice cream.

- Soft cheeses: imported soft cheeses may contain listeria. Soft cheeses made with pasteurized milk are safe.
- Unpasteurized milk: May contain listeria which can lead to miscarriage.
- Pate: Refrigerated pate or meat spreads should be avoided due to risks of listeria.
- Caffeine: Avoid caffeine during the 1st trimester to reduce the risk of miscarriage. After the first trimester limit caffeine intake equivalent of 1 cup of coffee a day or less. Excess caffeine may be associated with miscarriage, premature birth, low birth weight, and withdrawal symptoms in infants.
- Alcohol: There is NO amount of alcohol that is known to be safe during pregnancy and therefore it should be avoided. Continue to avoid alcohol while breastfeeding.
- Unwashed vegetables: Wash all vegetables well to avoid exposure to toxoplasmosis which may contaminate the soil where vegetables are grown.

Special Concerns

- Vegetarian Diet
 - Be sure you are getting enough protein. You will probably need to take supplements, especially

iron, B12, and vitamin D.

- Lactose Intolerance

During pregnancy, symptoms of lactose intolerance often improve. If you are still having problems after eating or drinking dairy products, talk with your doctor. We may prescribe calcium supplements if you cannot get enough calcium from other foods. Remember, calcium can also be found in cheese, yogurt, sardines, and certain types of salmon, spinach, and fortified orange juice.

Smoking

If you smoke, SO DOES YOUR BABY!!! This is very important fact of pregnancy. The placenta (afterbirth) is the organ that connects the developing baby to you. It consists mostly of blood vessels and is attached to your uterus on one side and to your baby on the other side by the way the umbilical cord. Its job is to allow the passage of nutrients, oxygen, vitamins and other substances to pass from your blood to the baby allowing it to grow and develop. It also carries away your baby's waste products to your kidneys, liver, and lungs act for the baby until his/her organs are mature enough to do well on their own outside the womb (37-42 weeks of pregnancy).

Cigarette smoke contains more than 2,500 chemicals. It is not known or certain which of these chemicals are harmful to developing the baby. However, both nicotine and carbon monoxide (the same gas released from car's exhaust) are believed to play a role in causing bad pregnancy outcomes. These chemicals are taken directly from your lungs, to your blood, to your baby's blood. Imagine how these chemicals affect the fragile tissues of your developing baby.

Here are some known complications from smoking during pregnancy:

Low birth weight baby: Low birth weight can be caused by prematurity (birth less than 37 weeks), poor growth or combination of both. Prematurity is increased in pregnancy smokers and is the number one cause of neonatal death and chronic illness in babies. Problems such as cerebral palsy, life-long lung, kidney, or other organ problems, mental retardation and learning disabilities are much more common in premature and low birth weight babies.

- Placenta previa: Low-lying placenta that covers part or all of the opening to the uterus. Placenta previa blocks the exit of the baby from the uterus causing the baby and mother to bleed.
- Placental abruption: The placenta tears away from the uterus causing the mother and baby to bleed.
- Stillbirth
- Preterm premature rupture of membranes: The water breaks before 37 weeks of pregnancy, which is associated with an increase of preterm and low birth weight births.

The effects smoking has on your baby continue when you take him/her home. Children exposed to smoke in the home have higher levels of lung problems such as asthma, pneumonia, or bronchitis. They also suffer from more ear infections than children not exposed to smoke. Even more troubling is the increased incidence of Sudden Infant Death Syndrome (SIDS) found in children exposed to smoking in the home. A child exposed to smoking in the home during the first few years of life are at an increased risk of developing asthma. The more a pregnant woman smoke the greater the risk to her baby. However, if a woman stops smoking by the end of her first trimester (first three months), she is no

more likely to have a low birth weight baby than a woman who never smoked. Even if a woman is not able to stop smoking during her first or second trimester, stopping during the third trimester (the last three months) can improve her baby's growth.

Ways to Quit Smoking

Talk to your doctor. No matter what your approach to quitting, a conversation with your doctor can make the difference between success and failure. Quitting cold turkey is a great way. If you want to try a quitting aid such as a nicotine patch, gum, or the medication Zyban or Wellbutrin, your doctor can help you choose a method right for you. The use of a nicotine patch and/or gum has not been adequately studied; therefore, they should only be considered during pregnancy when non-medical treatments, such as counseling, are not successful. Because potential benefits seem to outweigh potential risks, research to determine the safety and efficacy of medications is underway. Some tobacco control experts have reported that if nicotine replacement therapy is used during pregnancy, products with intermittent dosages, such as gum or inhaler, should be tried first. If the nicotine patch is used, it should be removed at night to reduce fetal nicotine exposure. Great Start (1-866-66-START) is a national pregnancy specific smoker's quit line operated by the American Legacy foundation.

Alcohol

There is no safe amount of alcohol so we recommend avoiding all alcohol during pregnancy. Drinking alcohol can cause birth defects, mental retardation and abnormal brain development.

Extracurricular Activities

Exercise and Sex

In an uncomplicated pregnancy, we recommend 30 minutes or more of exercise daily which includes aerobic activities (walking, jogging, biking, aerobic classes, yoga, swimming, tennis, etc). Weight training and toning are fine. You can continue your usual workouts but may need to reduce intensity or shorten them. It is a good idea to listen to your body during exercise and drink plenty of fluids. After 20 weeks you should avoid lying flat on your back during exercise. Your target heart is calculated by your age. Basically, if you're breathing hard, slow down. Avoid activities with high risk of falling or trauma to your belly.

Sex, you bet! You can have sex during pregnancy unless you are having complications or you are too uncomfortable. If there is any concern for sexually transmitted diseases, then use condoms or don't have sex.

Exercise and sex should be avoided at times. This includes:

- Vaginal bleeding
- Leaking amniotic fluid
- Preterm Labor
- Chest pain
- Regular uterine contractions
- Decreased fetal movement
- Growth restricted baby
- Headache/Dizziness/Weakness

Sleep

It's normal to feel more tired when you are pregnant. You may also notice you need more sleep than usual. Try to get at least 8-10 hours of sleep per night. Sometimes you will require significantly more so listen to your body and plan extra sleep time when you are tired.

It is safe for women experiencing a normal pregnancy to lie on their back for sleep. However, sometimes lying on your back can cause your blood pressure to drop. Hot or cold sweats and nausea may occur. If this happens, don't worry, you did not hurt the baby. Many women find it helpful to put a pillow behind them to support the back and hips. As your pregnancy progresses, it may require more pillows and frequent position changes during the night to keep comfortable.

Sauna and Hot Tubs

It's okay! You deserve the muscle soothing and relaxation of a warm tub or sauna, but keep the thermostat no warmer than 102 degrees Fahrenheit.

If you feel overheated, always listen to your body and remove yourself from the source. Try to keep the upper half of your body out of the water to help prevent overheating.

Travel

Traveling is safe during pregnancy for most women. The best time to travel is between weeks 14-18 as most common emergencies usually happen in the first and third trimester. If you are planning a trip out of the country, discuss this with your doctor and check with the CDC to see if any specific vaccines are needed

For flights, or cruises, find out whether your airline or cruise line have any travel restrictions during pregnancy. Have a prenatal checkup before you leave on your trip and take a copy of your health records with you. If long trips are planned, drink plenty of fluids and walk every few hours. This can reduce the risk of developing blood clots in the legs.

Working/ School

A woman usually continues working or attending school until she goes into labor. We may want to restrict your work if you are

having pregnancy complications depending on your job activities. Also, women who have strenuous jobs may be at risk for early delivery or smaller babies. Please discuss this with your doctor.

Getting Ready for Delivery

Delivery/Classes

We deliver babies exclusively at Broward General Medical Center. A doctor from our call group; Dr. Skeete, Dr. Noel, Dr. Coe, Dr. Fahey and Dr. Pouliot will be available at all times. The "on-call doctor" will take care of you in labor, delivery and after delivery of your baby and will also return your emergency calls after office hours.

You will be provided a registration packet for Broward General Medical Center. Make sure you take the time and register before you are in labor as this will make admitting you to the hospital much easier. There is also information on birthing, breastfeeding, and baby care classes which are provided by the hospital. Please call the hospital. We especially encourage you to consider these if you are a first time parent!

Pain Relief in Labor

There are many options to provide pain relief while you are in labor. We are supportive of whatever you choose. Common options include"

- Nubain: This is a narcotic given with an injection or IV and helps take the edge off the strong contractions. It usually makes you sleepy. It can be given in early labor. We avoid giving this near delivery time as your baby could be born extra sleepy and not cry well.
- Epidural: This is a safe and popular option available any time of day at Broward general medical Center. A specialist called a nurse anesthetist stays in the hospital 24 hours per day to provide these

for you. It requires a fine, thin catheter or tube to be placed in your back when you are in active labor. Medicine slowly drips through the tubing to provide excellent pain relief throughout labor. It is removed after delivery.

- Local: Many of our patients deliver without pain medication. Sometimes we need to give you a small injection of numbing medicine for stitches called lidocaine. It feels like a small pinprick when we inject the medicine.

In general, we encourage you to see how you do during your contractions. The pain relieving options are available to you at any time.

Episiotomy

We plan to help you deliver your baby with the least amount of trauma. Episiotomies are not routinely needed and many of our patients deliver without the need for any stitches. Sometimes we need to make a small incision at the vaginal opening to help the baby deliver. We make sure you are numb and then will stitch the area after delivery. The stitches dissolve over time and do not need to be removed. We provide you with medicine to keep you comfortable after delivery.

Forceps/ Vacuum

Obstetrics is our name and obstetrics is our game. We are highly skilled in the use of vacuum and forceps for deliveries. We will recommend using them only if medically indicated. Our goal is to deliver your baby in the safest manner. There are definitely times when this safest way to help your baby into this world.

Cesarean Section

We are highly skilled in this area and will perform when needed. For more information on the procedure.

Vaginal Birth after Cesarean (VBAC)

Our practice is ideally set up for those interested in VBAC. A physician on-call will always be present in the hospital with you immediately available for emergencies. More information is available at: lcan.com?

Breastfeeding

Human milk is a perfectly designed nutrition for babies. Babies who are breastfed get fewer infections and are hospitalized less. Mothers that breast feed burn 500 calories a day which can help lose extra weight. Breastfeeding also reduces a women's risk of developing breast cancer. Broward General Medical Center provides classes we recommend especially for first timers. After delivery, the nurses and a lactation specialist (upon request) are there to help moms and babies learn the art of breastfeeding.

Circumcision

A circumcision is the removal of excess foreskin from the penis in baby boys. We can perform this procedure for you while you and your baby are still in the hospital or in the office. All babies receive local numbing medication and are soothed by suckling during the procedure. It takes a few minutes to perform and babies heal in 1-2 weeks. We recommend applying Vaseline to the baby's penis with each diaper change to prevent sticking to his diaper while he heals.

This is an optional procedure. It may help reduce infections and penis cancer in males. Many parents decide to not have their baby circumcised. We respect your choice in this matter.

Choosing a doctor for Baby

You will need to decide on a doctor for your baby's care by the time you deliver. This is usually a pediatrician or a family practice doctor. The hospital will send your baby's information and test results to your chosen doctor. Your baby is commonly seen within

1 week after birth by his/her doctor. There are many excellent doctors in our area to choose from. You will need to contact the doctor's office prior to delivery and make sure they are accepting your insurance and are taking new patients. We can provide you with a list of doctors if you have trouble locating one.

Umbilical Cord Banking

Your baby's blood is valuable source of cells that could be used by your baby or another family member to treat nearly 80 life-threatening diseases. New treatments with cord blood for diseases such as cerebral palsy, diabetes, and heart disease are currently being studied. Umbilical cord blood can easily and safely be obtained immediately after delivery. Parents can choose to have their baby's blood saved. Insurance does not generally cover this.

If you are interested in saving your baby's cord blood, you can order a kit and bring it with you to delivery. Recommended web site for more information: www.viacord.com

Seat Belts

Please wear your seat belts at all times while in the car or on a plane. The proper placement is cross your lap below the belly for the lower belt and across the chest between the breasts for the upper belt. If you are involved even in a minor accident, this may save the life of you and your baby. If you are involved in a car accident, call our office immediately. You may need to be monitored.

Frequently Asked Questions regarding

Medication

Acne Benzoyl Peroxide Clindamycin Topical Erythromycin Salicylic Acid	Antibiotics Ceclor Cephalosporin's E-mycins Keflex Macrodantin Penicillin Zithromax	Colds/Allergies Benadryl, Claratin,Zyrtec Claritin-D** Chlor-Trimeton, Dimetapp Drixoral-Non Drowsy Mucinex (guaifenasin) Sudafed**/Sudafed 12-hr** Sudafed PE Pseudoephedrine** Tylenol Cold & Sinus Vicks Vapor Rub **AVOID if problems with your blood pressure.
Constipation Colace,Miralax,Senakot Dulcolax Suppository Fibercon, Metmucil Perdium	Cough Cough Drops Phenergan w/ Codeine if prescribed Robitussin (plain & DM)	Crab/Lice RID Avoid: Kwell
Gas Gas-X Mylicon Phazyme	Headaches Cold Compress	Heartburn (avoid lying down for at least 1 hour

	Tylenol (regular or Extra Strength) Acetaminophen	after meals) Aciphex, Maalox,Mylanta, Pepcid, Milk of Magnesia Pepcid Complete Prevacid,Prilosec,Roloids Zantac Tums (limit 4/day)
Hemorrhoids Anusol/Anusol H.C. (RX: Analapram 2.5%) Hydrocortisone OTC Preparation H, Tucks Vaseline lotion applied to tissue	Herpes Acyclovir Famir Valtrex	Leg Cramps Benadryl
Nasal Spray Saline Nasal Spray	Nausea Vitamin B6 25 mg 3 times daily Unisom ¼ or ½ tablet at bedtime Vitamin B6 and Unisom at bedtime Dramamine, Emetrol Ginger Root 250 mg 4 times Daily High Complex Carbs @ Bedtime See Bands-Acupressure	Pain Tylenol, Darvocet** Lortab**, Percocet** Tramadol**, Tylenol 3** Ultram**, Vicodin** ** Narcotic medications should only be used when prescribed for a legitimate medical problem by a doctor for a short period of time.
Rash Benadryl 1% Hydrocortisone Cream	Sleep Aids Ambien, Benadryl Chamomile Tea Unisom,	Throat Cepacol Cepastat Salt water gargle w/ warm water

	Tylenol PM Warm Milk-add vanilla or sugar for flavor	Throat Lozenges
Tooth Pain Oragel	Yeast Infection Gyne-Lotrimin,Monistat-3 Terazol-3 Avoid 1 Day Creams	

Influenza Vaccine

Seasonal flu vaccines are recommended during pregnancy to reduce the risk of serious infections in moms and their babies. Pregnancy causes the immune system to weaken so pregnant women are higher risk. The best way to protect your newborn baby is to be vaccinated and breastfeed. If you are planning to become pregnant or are currently pregnant, talk with your doctor about getting vaccinated.

Dental Care

Cavities and gum disease are common during pregnancy due to the hormonal changes. You may notice your gums bleed easily. To prevent this, we recommend brushing your teeth twice a day and flossing every day. Also visit your dentist on a regular basis for check-ups and teeth cleaning. Cavities and dental problems should be treated. Bad teeth can lead to infections in the uterus or premature delivery of your baby so take care of your pearly whites.

10 Tips for Dad's

There are many things that dads can do build their own relationship with their baby (and mom too):

1. Remember that the only thing Dads can't do is breastfeed. Dads can soothe a crying baby, change diapers, carry the baby and play- all of which can be very rewarding for the baby, fun and satisfying for dad, and a great help to mom.
2. Whenever possible, get up with the baby and bring the baby to mom for feedings- especially those in the middle of the night!
3. Take a walk with the baby and suggest your partner relax, nap or do something for herself like take a relaxing bath.
4. After the baby has been fed, offer to rock, burp or sing the baby back to sleep.
5. One of the best ways to keep baby happy is to keep mommy happy. Help pick up around the house or run errands so mom can concentrate on breastfeeding and the baby. Continue helping to keep your relationship balanced, too, since the birth of a baby can be overwhelming to many couples.
6. Guard you partner against well-meaning but intrusive visitors who come bearing unsolicited advice. Many friends and relatives suddenly become experts about breastfeeding and parenting when a new baby arrives. Although these 'words of wisdom' may come with good intentions, they can sometimes be hurtful or even harmful.
7. When there are other children involved, a new baby can shake things up a bit. If possible, take a short leave to help with the older children during the first few weeks the baby is born. Go to the playground or schedule other

outside activities so your partner can focus on the baby and rest.

8. It's important to spend time together with your new baby, as well as alone as a couple when the baby is sleeping.
9. Keep an eye on mom for signs of postpartum depression. This is the most critical job dad takes on after the new baby arrives. If you notice your partner is restless or irritable, feeling sad, or crying a lot, lacks energy, is experiencing headaches, chest pains, heart palpitations, numbness, or hyperventilation (fast and shallow breathing), talk with her and seek advice of a medical professional.
10. While feeding can be a special time to bond, it's important not to pressure mom to express her milk or supplement with formula so you can help feed the baby before she's ready. It's important for her and the baby to have breastfeeding firmly established (4 weeks or so) before introducing a bottle. Doing this too early could affect her supply and could possibly derail breastfeeding success.

Adding a new baby to the mix is always going to stir your life up a bit, even if it's not your first baby. Give yourself a break if you need it and always keep the lines of communication open with your partner.

Fathers of breastfed infants soon learn the many unique and meaningful ways, apart from feeding, that they can bond with their new baby and partner.