

All About Labor & Delivery

IMPORTANT NOTE:

The office is open Monday to Friday 8:00 AM – 4:00 PM. After hours, call **1-888-724-3845** if you think you are in labor.

Thank you for allowing us to be partners in your healthcare during this special time. All of us at Tepeyac OB/GYN want to support your pregnancy and birth in any way we can. The following information pertains to childbirth and what to expect at the hospital. We are happy to accommodate your birth plan whenever possible and ask for you to work with us in respecting the limits that are medically necessary.

Preparing for Labor

Take Care of Yourself

In the third trimester, those sleepless nights, frequent bathroom breaks, and “I just can’t find a comfortable position!” complaints are normal. Here are a few suggestions to make your last weeks as pleasant as possible:

- Realize and admit your limits. If you are tired, lay down. Listen to your body, it offers good advice.
- Drink plenty of water. Avoid caffeinated beverages and diet sodas
- Avoid processed foods, pizza, Chinese food, etc. Salt causes water retention, swelling and high blood pressure
- Wear comfortable clothes and flat shoes to lessen the strain on your lower back.
- Support garments may be helpful.
- When you lie down, prop yourself up with lots of pillows!

Tdap Vaccine

Pertussis, also known as whooping cough, is a respiratory infection that causes a flu-like illness and severe cough. Though older children and adults rarely have severe complications, pertussis can be fatal in newborns. You can provide your newborn the best chance of avoiding infection by getting vaccinated yourself during the 3rd trimester. The vaccine is called “**Tdap**” and is not made from aborted fetal cells. When you get Tdap between **28-36 weeks of pregnancy** some of your antibodies against this disease are passed to the baby, providing some protection in the first few months of life. We provide the vaccine, but if we are out of stock, you may also go to your primary care doctor, pharmacy, or local health department. Encourage other family members to be vaccinated to decrease the likelihood that anyone will inadvertently expose your child to this disease.

Planning your maternity leave

Every employer has a different set of forms to approve your maternity leave. If your employer requires us to fill out a form, please complete your portion and then give the remainder to the medical assistant at an appointment. A member of our staff will complete them and obtain necessary signatures from your doctors. This process may take **up to 2 weeks** and there is a **\$25 fee for this service**.

Cord Blood Collection

The baby’s umbilical cord blood is rich with stem cells that can be used in treatment of certain medical conditions. These stem cells are **not** the controversial “embryonic stem cells.” There are several banks that store this cord blood in case your baby develops one of the conditions that can be treated using these cells.

Stem cell collection and banking is an elective procedure and is not covered by insurance. You will be charged a fee by the blood bank itself for storage. We also charge a fee of **\$200 for cord blood collection**, which is done at the time of delivery

Birth Classes

We do recommend that you consider a class to further prepare you for the birthing experience. There are many classes available based on your schedule and desires for birth. Please remember that not all organizations share our philosophy regarding life issues and they may bring up post-partum contraception as part of the course.

- **Amanda Hayle** is a trained Doula and childbirth instructor. Her class covers childbirth, breastfeeding, and newborn care. Classes are hosted here at Tepeyac OB/GYN. Please contact her to schedule: anchorandcalmdoula@gmail.com.
- **StoneSprings Hospital** offers multiple childbirth and parenting classes which are taught in person. See <https://www.hcavirginia.com/locations/stonesprings-hospital-center/calendar> for the full list and to register.
- **Lamaze International** offers childbirth classes that focus on relaxation and breathing techniques to help you get through labor. For a list of birth classes, go to www.lamaze.org.
- **The Bradley Method** is a partner-coached method of natural childbirth. While the course is quite extensive, this approach often discourages medical procedures that may be in your best interest. We do not oppose this method, but ask that you remember that Mom & baby's health ultimately dictate when intervention is needed.

Doulas

A doula (from the ancient Greek meaning "woman's servant") is a person who is prepared to provide physical, emotional and informational support to women and their partners during pregnancy, labor and birth. They are trained in coaching you through this experience but they are not medical professionals and cannot perform clinical tasks. A doula does not make decisions for you but provides guidance to help you have the birth you desire. Many women who would like unmedicated births choose doulas to help coach them through labor. They stay with you throughout labor and can be an extra layer of support in addition to your partner, family and friends.

If you are considering hiring a doula for your labor and delivery, we have a list of people that we have worked with well in the past that we can refer you to. If you wish to pick a doula that is not on our list, please schedule a separate appointment for us to meet and discuss what each of our roles will be during the delivery process.

Birth Plans

Our practice does not require a written birth plan, but it can be an excellent communication tool. Websites such as www.babycenter.com and www.birthplan.com provide a convenient printout of your preferences. Putting together a birth plan is a great opportunity for the couple to work together and discuss what is on the "wish list." Please bring a copy of your birth plan to your prenatal visits for our review and another copy to the hospital.

Induction of Labor

Your due date is the last day of the 40th week of pregnancy. Most babies are born between 37 – 42 weeks, which is considered full term. We do not typically stop labor if it begins in the 36th week. We may suggest an induction if you pass your due date. If you wish to delay induction past 40 weeks, we will need to monitor the baby's health with additional tests. If the baby is doing well you may wait for up to 2 weeks after your due date to deliver. In the case of certain medical conditions, we may advise delivery at other times.

Monitoring the Baby's Health

We will often recommend certain tests to evaluate the health of the baby and placenta prior to your delivery. These may be indicated if you are past your due date, if you have diabetes, or for various other concerns. Possible tests include the following:

- Non stress test (NST) – to monitor the baby's heart rate over time
- Amniotic fluid index (AFI) – ultrasound to assess the amount of amniotic fluid by the baby
- Biophysical profile (BPP) – includes NST, AFI and other ultrasound measurements.

Packing your Hospital Bag

Pack your bag for the hospital several weeks before your due date. Consider bringing the following:

- To relax: massage oil, scented lotion, music
- To stay connected: Cell phone with charger, camera, tablet or laptop
- Diversions: books, crosswords, Sudoku
- Toiletries: toothbrush, toothpaste, deodorant, hair ties
- Baby clothes: Onesies, socks, hat, receiving blanket, sweater or jacket, diapers and wipes
- Clothes for the hospital: nightgown, robe, slippers
- Clothes to go home: maternity or nursing bra, underwear, loose fitting maternity clothes

If you have reports from pregnancy labs or sonograms, bring them with you

During Labor

Normal vs. Abnormal Labor

Differentiating between true labor and a false alarm can be tricky, even if you have had babies before. **If you think you are in labor, call us right away.** Generally speaking, true labor consists of: ➤ Painful contractions that last 30-60 seconds each

- First-time moms: Contractions are about 5 minutes apart
- If this is your 2nd (or more) baby: Contractions are 10 minutes apart
- Your water breaks. This can feel like a sudden gush of fluid or a constant trickle. This should be CLEAR.
- If you live more than hour away, or you have a history of rapid labor, call us sooner!

The following are **NOT** normal symptoms of labor. Please **call us immediately** if they occur, as they are signing your baby may be under stress.

- If you have had a previous Cesarean section and are having labor pains
- Your water has broken and it is **green or brown**
- You are bleeding
- You have a fever
- Baby is not moving well
- You have symptoms of pre-eclampsia including: strong headaches with changes in vision, swelling of the face, vomiting with right upper abdominal pain

Laboring at Home

We do not offer home births but if you prefer to stay at home for the beginning of your labor, please discuss this with us. If you are in early labor and your GBS test is negative, you may not have to go to the hospital immediately.

Communication is essential in these situations! Please let us know if you are in labor so that the on-call physician can keep in contact with you about how you are progressing.

Water Breaking

This is also known as “rupture of membranes” and feels like a sudden gush of fluid or a constant trickle/leak. If your water breaks at home, please call us right away. Your water should be **clear**. Green or brown water means the baby had a bowel movement called meconium. Meconium can be harmful to the baby if it gets into the lungs and sometimes indicates that the baby is finding labor difficult. In this case, we must monitor the baby closely.

If you are at the hospital and your water has not broken, we will not break it without discussing it with you first.

Food & Drink

The hospital anesthesiologists do not allow you to eat solid food in labor due to the prolonged emptying time of the stomach. They do allow hard candy, gum, clear liquids (drinks that are clear & without pulp), Jell-O, and popsicles. The hospital provides many clear liquids or you can bring some from home. The intake of women planning a Trial of Labor after Cesarean (TOLAC) may be restricted, similar to patients who are having a scheduled surgery.

IV Fluids and Heplocks

Intravenous fluids are required if a woman chooses an epidural, is on Pitocin or if she or her baby has certain medical conditions. In other cases, simple access to the vein is sufficient using a small, capped-off catheter called a Heplock. Heplocks allow complete mobility. If medicine is needed, a dose can be given by briefly attaching a syringe or tubing. In case of an unexpected event or emergency, the Heplock provides an additional degree of safety, allowing immediate access for IV medications or fluids.

Electronic Fetal Monitoring

To ensure the baby is tolerating labor, we monitor his or her heart rate. This can be done externally on the abdomen (using a Doppler similar to those used at each appointment) or it can be done internally (using an electronic cord attached to the baby's skin). We do not routinely use internal monitoring. External monitoring can be done with the woman in any position such as lying in bed, sitting in a rocking chair or standing.

Electronic fetal monitoring is necessary at the time of admission, once each hour, and for any indicated reason throughout early labor. The amount of time it takes to get a good heart pattern varies; if the baby is active, it may take only 20 minutes. In the final stages of labor (while pushing) the baby's heart rate must be monitored continuously. TOLAC patients often require continuous monitoring during labor.

Walking in Labor

If the heart monitor has recorded a reassuring pattern, a woman can be free to move about in her room or on the labor and delivery floor during early labor.

Creating a Restful Environment

It is a great idea to bring a CD or mp3 player with you. It is a simple way to create an atmosphere to make you "feel at home." Most moms also appreciate a massage during some part of their labor. Remember to pack lotion or massage oil in your hospital bag.

Delivery

Episiotomies

Our practice is not eager to cut an episiotomy. If we do recommend an episiotomy, it is because we believe it will prevent excessive tearing. Episiotomies are also done if the baby needs assistance to deliver vaginally and the only alternative is Cesarean section. If you do not want an episiotomy under any circumstance, please add this to your birth plan and discuss this with us at an appointment.

Vacuum vs. Forceps

Certain circumstances may require assistive devices during vaginal delivery to avoid Cesarean section. Many couples include in their Birth Plan that they prefer a vacuum extraction over forceps delivery. Vacuums are often seen as the more "gentle" instrument; however, vacuums and forceps are not interchangeable. Forceps can help in circumstances where a vacuum might be ineffective or harmful. Our doctors are trained to use both instruments safely.

Cesarean Section

We would like to reassure you that we have no desire to do even one unnecessary C-section. Every one of us can remember a delivery where we had almost given up hope of a vaginal delivery. Then, praise God, something changed and a healthy baby was born vaginally. Unless it is a medical emergency, there is usually plenty of time to discuss the necessity of a C-section with the parents.

Post-Partum Care for You & Baby

Holding Your Newborn

Babies who are born vaginally and doing well are placed on Mom's tummy. We encourage you to continue bonding with your baby with skin-to-skin contact or nursing after birth. Babies with medical difficulties (such as meconium) who require quick attention may be handed immediately to the neonatologist or newborn nurse for evaluation.

Cutting the Cord

If your baby does not need immediate care, the umbilical cord is clamped and cut shortly after birth. If time permits, Dad or another family member may be invited to cut the cord.

Eye Ointment

Virginia state law requires hospital personnel to administer an antibiotic ointment (erythromycin) to each newborn's eyes within one hour of birth. The nurses can apply the eye ointment while the baby is in a parent's arms and are willing to wait until the baby has been breastfed. Parents who refuse the ointment must put this in writing and may have to sign additional forms. Please include this refusal in your birth plan.

Vitamin K Injection

A small Vitamin K injection is routinely given to babies in the thigh muscle shortly after birth. This protects them from internal bleeding due to insufficient blood clotting. If you plan to refuse this injection, note this in your birth plan and discuss this with the baby's future pediatrician before the 35th week of pregnancy. Please also be aware that we will not perform circumcision on boys who have not had this injection because of increased bleeding.

Circumcision

This is an optional surgical procedure that we can perform within one or two days after the birth of your baby boy.

Car Seats

Federal law requires use of a car seat for your baby. This must be installed prior to your leaving the hospital. Your local fire department or police station may be of assistance in ensuring proper installation of your car seat.

Pediatrician

During the hospital stay, your baby will be seen by either your pediatrician or a hospitalist. To ensure continuity of care from hospital to outpatient care, you must have a pediatrician selected before your baby is born. This allows communication between providers, particularly if your baby needs extra care. We are happy to provide a referral to a pediatrician if needed.