

The Joint Base Elmendorf-Richardson Hospital OB/GYN department provides a broad range of obstetric and gynecologic services for our active duty members and their families. The hospital delivers over 700 babies a year, caring for both low and high-risk patients. We also offer a full spectrum of gynecologic surgeries and procedures in both an inpatient and outpatient setting. The provider group at JBER Women's Health Clinic is comprised of Physicians, Midwives, and Women's Health Nurse Practitioners, who adhere to the American College of Obstetrics and Gynecology (ACOG) and the Department of Defense evidence-based guidelines. Our clinicians meet weekly to review evidence based guidelines to ensure our patients are receiving superior healthcare. The team also meets monthly with the maternal fetal medicine consultants at Alaska Native Medical Center to ensure continuity of care of our high-risk OB patient population. We are excited to care for you during this special life event!

## Frequently Asked Questions

**Have a positive home pregnancy test?** You will need to go to your Primary Care Provider to place an order to have an official blood pregnancy test completed at lab to confirm pregnancy. Once you have a positive pregnancy test on file, proceed to Women's Health Clinic to initiate care.

**How do I to initiate OB care?** Once a positive pregnancy test is confirmed by our administrative technicians, they will have you complete prenatal paperwork to include information on pregnancy and health history. You will then proceed to lab to complete required prenatal screening tests that include several blood tests and a urine sample.

**When is my first appointment?** All patients will meet with a clinic nurse for your "RN Intake" appointment between 8-10 weeks gestation to review your labs and the paperwork you filled out. This visit optimizes pregnancy screening and helps ensure that you get the most benefit out of your first visit with your provider. At this appointment you will also receive education about prenatal care and will be provided resources to help you get through your pregnancy.

**When will I have my first ultrasound?** Your first ultrasound will be at your Initial OB appointment with a provider in the clinic which will be between 10-12 weeks gestation. This ultrasound will provide a more exact estimated due date (usually within a day or two). At this appointment, the provider will also complete a well women's exam, a pap smear if you are due, and collect a complete OB and health history.

**When will I know if it is a boy or a girl?** You will have a fetal anatomy ultrasound when you are 18-23 weeks pregnant, in our radiology department. The main purpose of this ultrasound is to ensure all of your baby's organs are developing appropriately. If the baby is cooperative, you will find out if it's a boy or a girl! Let your sonographer know if you desire not to know. Please remember that the sole purpose of this ultrasound is to assess the health of your baby – there may be times when the sex cannot be determined due to the baby's position. You should call radiology at least 3-4 weeks in advance to schedule this appointment. Radiology department number is 580-6741.

**How often will I be seen through my pregnancy?** The schedule breakdown is: at 8-10 weeks RN Intake, 10-12 weeks Initial OB with a provider; then you should be seen every 4-6 weeks (whichever your

provider indicates) for routine check-up. When you are you are 36 weeks you will be seen every 1-2 weeks until you deliver.

**What is the First Trimester Screen?** This is an optional screening test consists of bloodwork and an ultrasound that screens for several of the most common chromosomal abnormalities (such as Down syndrome). The ultrasound looks for anatomic abnormalities such as abnormal thickness of the baby's neck. If you opt for this screening, it must be completed between 10-14 weeks of pregnancy. This screening does not provide a definitive diagnosis, but if there are any abnormalities, additional testing will be recommended.

**Can I still exercise?** We recommend you continue whatever exercise regimen that you have been doing before becoming pregnant. Listen to your body; you may be restricted from doing certain activities (such as sit-ups) as you get further along in pregnancy. We do not recommend activities that cause a jarring motion or abrupt motions such as jumping lunges, or box jumps. Refer to p. 115 in the "Purple Book" for more information, or you may contact the Women's Health Clinic for specific activity questions.

**What can I do for morning sickness?** Try the following:

- Take prenatal vitamin just before going to bed or avoid prenatal vitamins until the nausea resolves. Try 1 tablet of a children's vitamin supplement per day until the nausea is gone.
- Eat small amounts but eat frequently
- Do not allow the stomach to become too empty.
- Carry a source of complex carbohydrate (a protein source plus a carbohydrate), such as cheese and crackers, while at work or away from home.
- Consume crackers or dry toast before arising.
- Avoid fried, spicy, or fatty foods.
- Drink liquids between meals.
- May try vitamin B6/unisom that you may have prescribed by your provider, or motion sickness bands that you can obtain over the counter.

Call Women's Health Clinic or go to Emergency Department for evaluation if you have:

- The inability to keep food or liquids down for 24 hours or more;
- The vomiting of bile or blood;
- Unable to urinate for 12 or more hours;
- The onset of severe abdominal pain; or
- Bloody diarrhea.

**What if I am having bleeding?** Call Women's Health Clinic if during duty hours. If outside duty hours, you may go to the Emergency Department.