

Joint Base Elmendorf-Richardson Guide to Pregnancy and Obstetrical Care

Women's Health Clinic

Presentation Prepared by:
LT Chris Johnson, DNP-FNP/WHNP Student
Capt Stephanie Doane, DNP-FNP/WHNP Student
Uniformed Services University of the Health Sciences

General Obstetrical Care at JBER

- Routine Appointments at the following weeks of your pregnancy:
 - Weeks: 10-12 16-18 24 28 32 36 38 39 40
- Scheduling your appointment:
 - After each appointment, you will receive an appointment slip. Take this to the front desk and your next appointment will be scheduled
- Pharmacy Information:
 - Prescriptions ordered by your provider can be picked up shortly after your appointment.
 - Check in at the main pharmacy across from the pediatric clinic
 - Near the “Bear Area” of the hospital
 - Refills can be called in to the refill hotline @ 907-580-1170.
 - Refills can be picked up in the hospital or at the pharmacy located in the BX shopping center.

Nursing Intake at 6-8 weeks

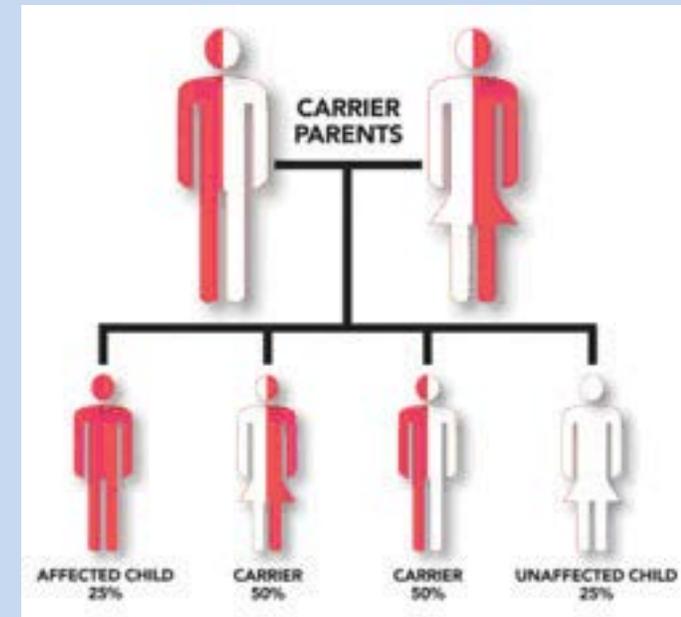
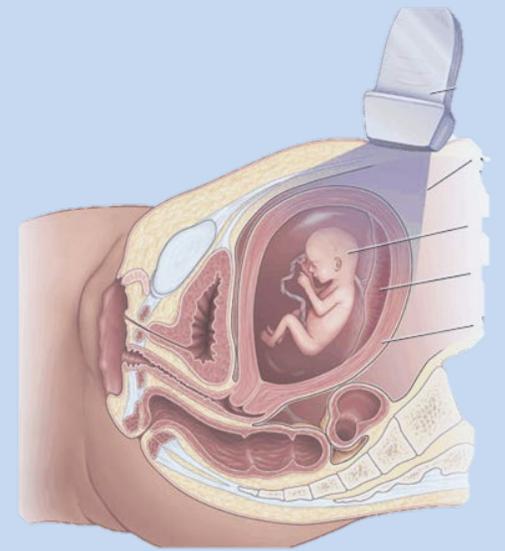
- The nurse will screen for potential risk factors such as:
 - Alcohol, drugs, tobacco, domestic violence
 - Assess history, family history of specific diseases, current health status, sexually transmitted infections, prior pregnancies and risk for preterm labor
 - Weight & dietary intake
- Discuss initial information for options for prenatal screening
- Assess immunization status identify immunizations needed
- Order labs including blood work and urine screen

Maternal Screening Tests

- What is a screening test?
 - A Maternal Serum Screening Test may be offered to you from your provider. The decision is up to you!
 - Tests can give information about a pregnant woman's risk of having a baby with certain defects
 - For instance Down Syndrome or Spina Bifida
 - These are tests done when no symptoms or known risk factors are present
 - It is not diagnostic meaning that it does not give a definite answer

Types of Tests: Basics

- 1st Trimester Screen
 - Looks for 3 chromosomal abnormalities.
 - Performed off base at Advanced Sonograms or Alaska Family Sonograms
 - At 10-13 weeks in your pregnancy
- Cystic Fibrosis Screen
 - This is done at JBER anytime during the pregnancy
 - Looks to see if you are a carrier for CF.
 - If you test positive, we will screen your partner and/or father of the baby
- 2nd Trimester Screen: Alpha-Fetoprotein (AFP) Test
- at 15-18 weeks
- A protein produced by a growing fetus that is present in Amniotic fluid, Fetal blood and, in small amounts, the woman's blood
 - Approximately 80% of women carrying a child with open fetal defects will have a higher than normal level of protein
- Additional Multiple Marker Screening (MMS) Tests can be added to this test to give more information about your risk of Down Syndrome



Down Syndrome

- Instead of two #21 chromosomes, those with Down Syndrome carry 3, also known as Trisomy 21
 - This causes changes in mental abilities and certain physical characteristics to varying degrees
- The risk increases with age and family history does not increase risk.
 - A 20yo has a 1 in 1,667 chance vs a 35yo who has a 1 in 378 chance
 - One of the most common with chromosomes of the fetus
 - Approximately 1 in 800 births
- If your AFP levels are lower than normal, you are at an increased risk
- If you have Multiple Marker Screening done and
 - 1) Your AFP and Estriol levels are lower than normal and
 - 2) HCG levels are higher than normal, you may also be at increased risk



What is an Open Fetal Defect?

- Part of the baby's body has not developed a skin covering.
 - These most often occur in the abdominal wall or around the spine
- Most common is an Open Neural Tube Defect (ONTD)
 - The fetus's brain, spinal cord or their coverings do not form like they should
 - SPINA BIFIDA- “open spine”
 - ANENCEPHALY- The brain and head do not develop normally
 - 1-2/1,000 births

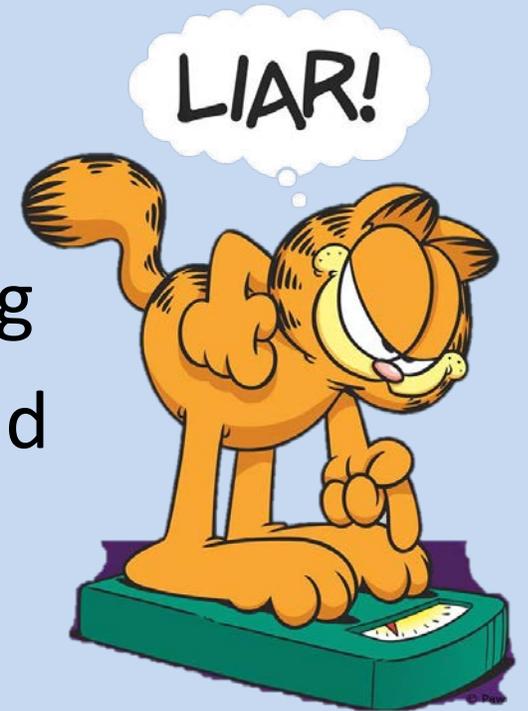


What do the Results Mean?

- AFP and MMS Screening Tests
 - If levels are normal: your risk for Open Fetal Defect or Down Syndrome is low
- Open Fetal Defects ↑ AFP
 - Diagnostic tests may be offered to find the reason
 - First test = Ultrasound
 - Second test = Amniocentesis which measures AFP in the amniotic fluid
- False Results
 - No test is perfect and not every abnormal test means your baby has a birth defect.
 - An abnormal may mean that the fetus was older or younger than thought or
 - there is more than one fetus.
 - Sometimes there is no reason for an abnormal, and amniocentesis will show your baby does not have the birth defect
 - There is always a chance that the risk was not detected by the screening test

10-12 week Visit

- Complete head-to-toe physical including pelvic exam
 - may include a Pap test and sexual transmitted infection screening
- Vital signs including blood pressure, height and weight
 - This is determine your appropriate weight gain during pregnancy
- Fetal heart tones by Doppler
- Review and discuss initial lab results
- Discuss any information regarding genetic screening
- Ensure accurate due date by transvaginal ultrasound



Arctic Mommas Group



Research shows that mothers who participate in group care have lower rates of preterm birth, higher rates of breastfeeding success and greater total satisfaction!

- Combines Individual visits with educational/group sessions
- 6-10 couples with similar due dates
- Starts after 10-12 wk apt

BENEFITS

- Meet other JBER moms
- More time for pregnancy and childbirth education
- *1st time mothers will automatically be enrolled in Arctic Mommas
- Others may register by calling Women's Health: 907-580-5808

<http://www.jber.af.mil/Services-Resources/Medical/obgyn/arcticmommas.aspx>

Community Resources: La Leche League

- Anchorage

- Last Friday of the month 12-2pm and First Wednesday of the month 5:30-7:30pm
- Located at the Maternity Education Center at Providence Hospital
- Entrance 5, where cuddlers and cruisers meet. Mothers and breastfeeding young ones only please.

- Eagle River

- 3rd Monday of each month at 10-12pm
- Eagle River Church of the Nazarene 11050 Cross Drive. Meet in the nursery through front doors. Babies and siblings are welcome.

- Palmer/ Wasilla

- 2nd Monday of each month at 10:30am at Matsu Regional Medical Center in Family Birthing Center Lobby near entrance at the back of the hospital. Babies and siblings are welcome.



Community Resources

- Car Seat Checks: free service that takes 30 minutes per seat
 - Alaska Injury Prevention Center
 - 4241 B Street, Suite 100 Anchorage, AK 99503 (907) 929-3939



- Anchorage Fire Department
 - Fire Stations Across Town Anchorage AK (907) 267-5045
- For more information including certified locations near you

<http://carseatsak.org>

<http://alaskainjurypreventioncenter.org>

JBER WIC CLINIC

Women, Infants, and Children (WIC)

- Nutritional program that helps families eat well and stay healthy
- Promotes breastfeeding and has services to help you be successful!

Who Qualifies?

- Pregnant women & postpartum up to 6 months
- Breastfeeding up to 1yr.
- Infants and children up to 5yrs
- Must live in Alaska
- Income based
 - All household income, Base pay, Flight pay, BAS, special duty pay, child support, GI bill



Arctic Oasis Building-2nd Floor

907-343-4430

Childbirth Class

Where: Perinatal Conference Room

When: 1st & 3rd Friday 1600-1800

The Rules:

- Must be at least 28wks
- Children may NOT be present during classes
- And classes are limited to 10 couples
- Bring Water and Snack

THE BENEFITS OF THE CLASS

signs & stages of labor

delivery & what to expect

fetal monitoring

breastfeeding & pumping

How do you get in: Pre-Registration Required: Call: 907-580-1401 or Email: tammy.neff.1@us.af.mil



Educational Opportunities in Anchorage

Providence Medical Center

907-212-8474

Sat Mornings with Dad

Postpartum Support AK

Child Birth 5wk &/or 4 nights

NICU

Breastfeeding Support

Baby Basics

Mama's Support Group

Military Discount Offered

One Family Birth Center

907-770-6655

Breastfeeding class

Diet/Nutrition

2nd Trimester Nutrition

Birth Class: 6wk series

Birth Class: 1 day classes

Partner and Sibling Classes

Alaska Regional
Hospital

907-264-1722

<http://Alaska.providence.org/locations/pamc/services/childrens/maternity/Pages/parenting.aspx>

<http://www.onefamilybirthcenter.com/classes.html>

http://alaskaregional.com/service/childbirth_family-education



Educational Opportunities in Matsu

Matsu Regional
Hospital

907-861-6351

Childbirth Education

Lactation Consultation

Heart Reach
Pregnancy Center

FREE SERVICES

907-373-3456

Heritage Birth Center
907-746-6644

Postpartum care
In first 48hrs

Intro to Breastfeeding

Mat-Su Midwifery
and Family Health
907-947-7722

Childbirth classes

Birth Art Classes

Private Classes also
available



<http://heartreachalaska.com/services.html>

www.matsupregnancy.com

<http://heritagebirthcenter.com>

<http://serenitygrows.com>

Daddy Workshop: For Great Dads That Want to Be Even Better

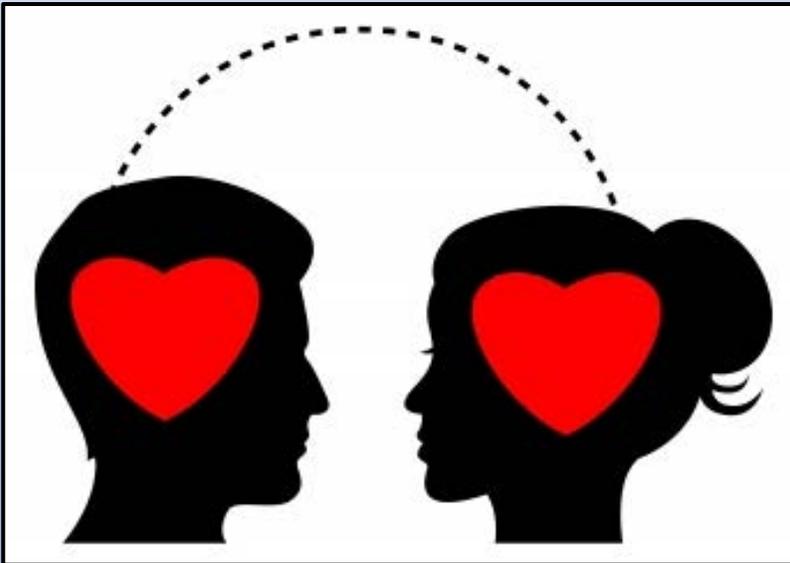
- Dad's The Basics: Taught by men for men
 - Lessons on bathing, dressing, and which end the diaper goes on
 - Providing lesson's learned on how to best support Mom
 - Classes are from 1300-1500hrs September 14, 21, and 28th BLDG 600 Rm A37
- Home Improvement: Anger Workshop
 - Techniques and lessons on addressing conflicts, reducing impact of stress, and promoting assertiveness instead of aggression.
 - Workshop is from 1300-1500hrs September 6, 13, 20, & 27th JBER Education Center
- Additional classes are available for individuals, squadrons/ Units

To register or get more information please call 580-5858

Jennifer Frysz 384-2999, Sarah Blanning 384-6181, and Suzette O'Donnell 384-2932

- Parenting with Love & Logic

- Interactive & strengths based approach to parenting
 - Methods for overcoming the daily frustrations children
- Best suited for children ages 2-12.
- Next classes: 09:30-11:30am August 3 at JBER Education Center



- Couple's Communication

- Focused on relationship building through improved communication and managing conflict
- Classes and locations vary, please ask.
- Additional classes are available for individuals, squadrons/ Units

To register or get more information please call 580-5858

Jennifer Frysz 384-2999, Sarah Blanning 384-6181, and Suzette O'Donnell 384-2932

Family Support



- **Active Parenting of Teens**

- Increase cooperation, provide clear guidance, improve confidence, grades, and self-esteem, & reduce risky behaviors.
- Classes vary, please call 580-5858 for more information.

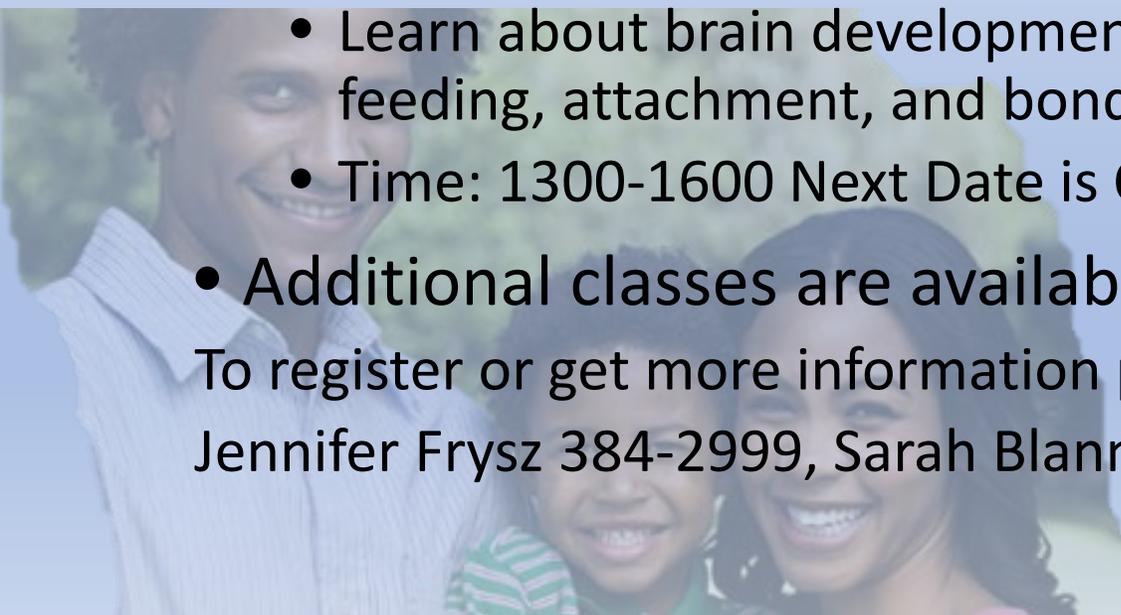
- **All About Babies**

- For Mom's and Dad's expecting a baby soon. Ideal for women in the 3rd trimester
- Facilitated by experienced Parent Support Nurses
- Learn about brain development, calming & soothing, SIDS & safe sleep, nutrition, feeding, attachment, and bonding
- Time: 1300-1600 Next Date is October 10th

- **Additional classes are available for individuals, squadrons/ Units**

To register or get more information please call 580-5858

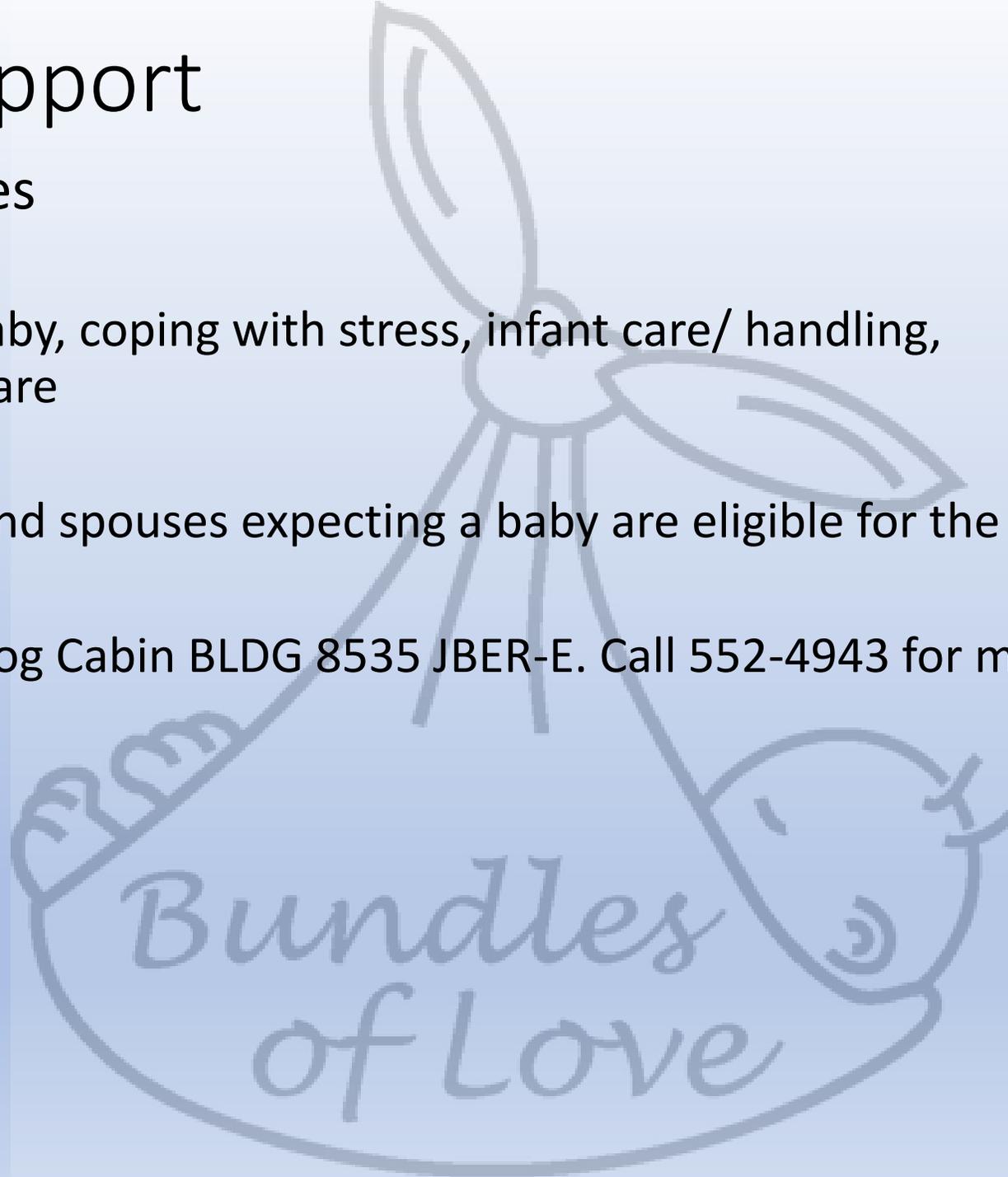
Jennifer Frysz 384-2999, Sarah Blanning 384-6181, and Suzette O'Donnell 384-2932



Family Support

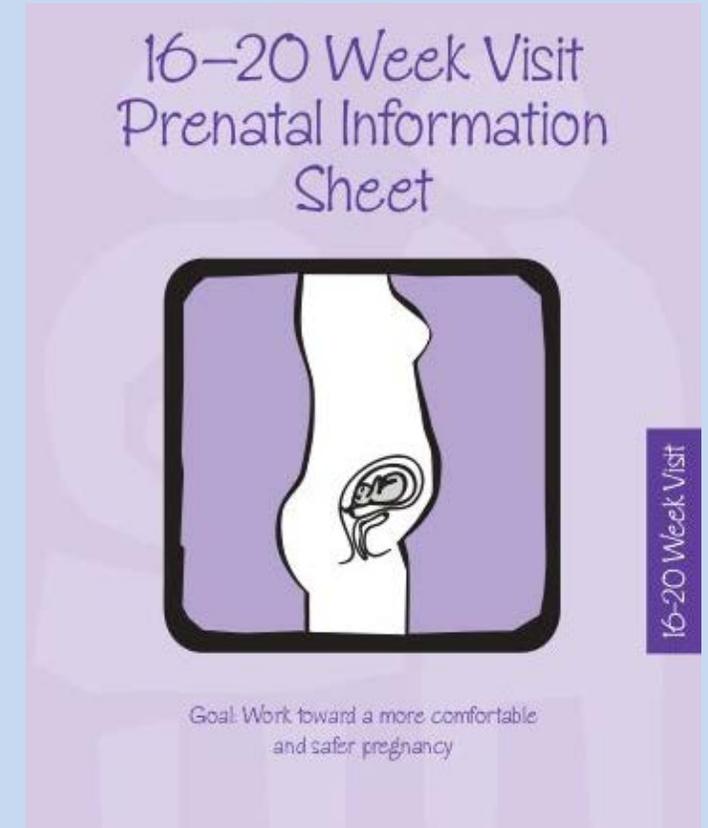
- Bundles for Babies

- Budgeting for baby, coping with stress, infant care/ handling, selecting child care
- All active duty and spouses expecting a baby are eligible for the class
- Located at the Log Cabin BLDG 8535 JBER-E. Call 552-4943 for more information.



16-20 Week Visit

- Blood pressure, weight check, fetal heart tones by Doppler
- Measure Uterine growth (Fundal Height)
- Review any screening lab results
- Schedule 20-22 week anatomy ultrasound in radiology



Any complications after 20 weeks can go to Labor and Delivery for evaluation

24 Week Visit

- Measure uterine growth, blood pressure, weight, fetal heart tones & discuss any concerns
- Order 28 week labs: CBC and 1 hour Glucola test (to look for Gestational Diabetes)
- Discuss with provider Birth plans and Birth control options after delivery
- Schedule breastfeeding and prenatal classes
- Discuss signs of preterm labor
 - Low, dull backache
 - Four or more “rhythmic” contractions per hour
 - Increased pelvic pressure



28 Week Visit

- Measure uterine growth, blood pressure, weight, fetal heart tones
- Discuss ordered labs (CBC, Rh, ABO screen and 1 hour glucose test)
- If Rh negative, (RhoGam) will be administered
- Sign up for childbirth classes
- Ensure breast pump ordered for pick up at Geneva Woods or ProCare

32 Week Visit

- Measure uterine growth, blood pressure, weight, fetal heart tones
- Check fetal presentation and discuss fetal movement
- Review fetal kick counts and preterm labor precautions
- Discuss birth control options for after delivery
- Check for preterm labor

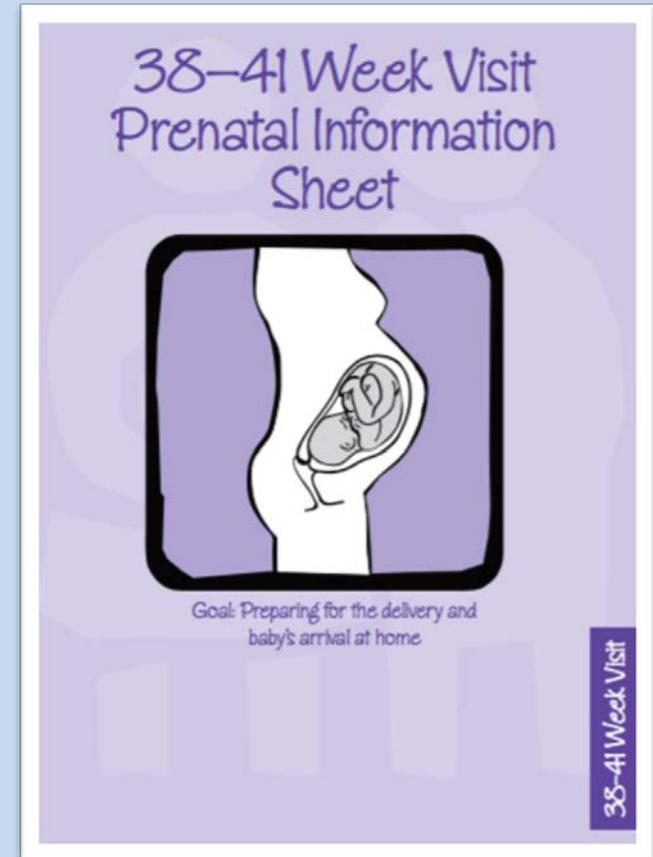
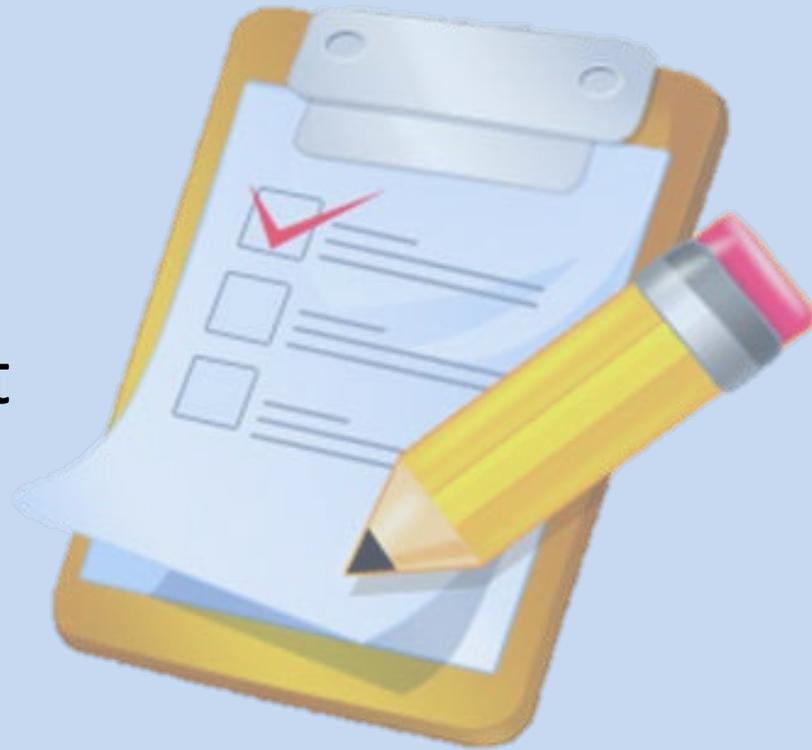
36 Week Visit

- Measure uterine growth, blood pressure, weight, fetal heart tones
- Group B Streptococcal (GBS) culture performed
- Review birth plans
- Review signs of Labor
- Complete necessary forms from healthcare provider and Admission paperwork



38-41 Weeks Visits

- Measure uterine growth, blood pressure, weight, fetal heart tones
- Vaginal exam performed for any cervical opening or thinning
- Discuss GBS results
- Check fetal movement
- Labor precautions
- Make sure all necessary paperwork is completed



Let's Look at Your Baby!!

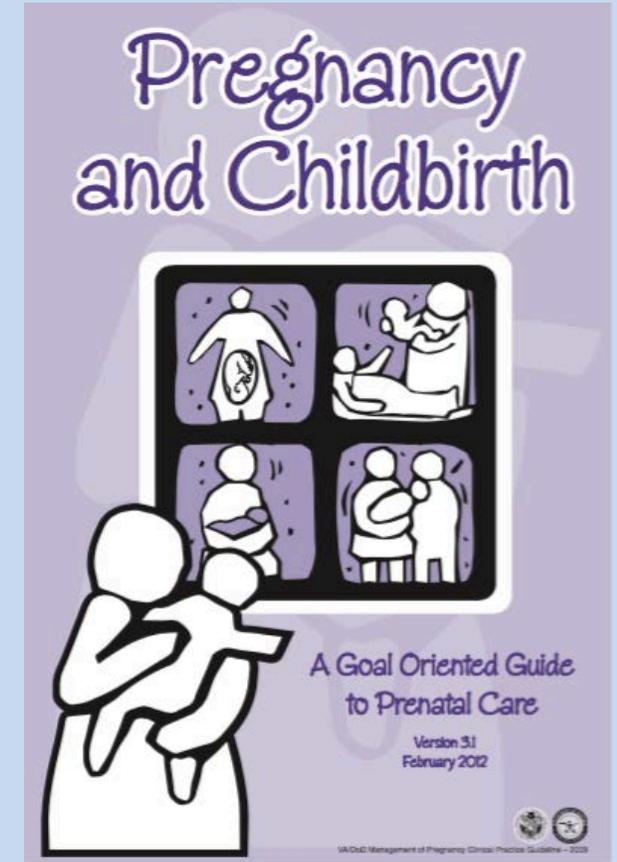
- Radiology for Fetal Anatomy Scan:
 - Done between 18-20 wks.
 - It is a detailed exam of baby
 - Looks at vital organs and structures to ensure your baby is developing normally.
 - May find out if it is a boy or girl
 - This is not guaranteed as sometimes they are shy



****Please call radiology (907-580-2515) 2-3 weeks early to schedule your appointment****

Important References for your Pregnancy

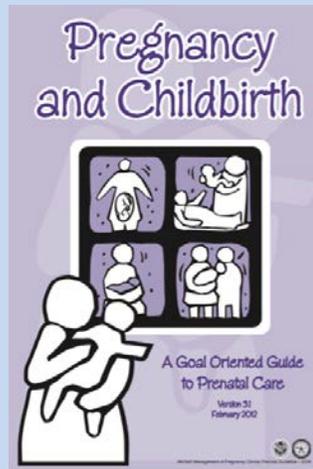
- Reasons to notify the clinic:
 - Cannot Keep down any liquids or food >24hrs
 - Have >3-5lbs of weight loss since becoming pregnant
 - Have vomiting that is blood tinged multiple times per day
 - Have flu-like symptoms or fever >**100.5**
 - No urine output for 12 hours
 - Onset of severe abdominal pain or bloody diarrhea
 - Feeling faint



****Pg. 7 Over the Counter Medication List Safe for Common Discomforts****

The Purple Book is your guide through pregnancy and put out by the DoD
https://www.qmo.amedd.army.mil/pregnancy/patient_binder.pdf

Common Discomforts



- **Pg. 107-114** Common Discomforts of Pregnancy

Backache	Breast tenderness	Constipation	Edema (swelling)	Fatigue
Headache	Hemorrhoids	Leg Cramps	Groin Discomfort	Vaginal Discharge
Heartburn	Pelvis Discomfort	Nausea	Vomiting	Varicose Veins

- **Pg. 113** Nausea and Vomiting

- Discontinue prenatal vitamins and change to children’s chewable or Flintstones vitamins
- Eat 6-8 small frequent meals and don’t drink fluids while eating
- eat crackers or toast before rising in the morning
- Avoid spicy, fatty, or fried food.
- Try Ginger tea or sea band
- First medication intervention: Vitamin B6 25mg tab (4 times per day) + Unisom 12.5mg tab at bedtime



Nutrition and Exercise

- **Pg. 115 Exercise**

- Talk to your provider prior to exercising if you have a medical condition or complications in pregnancy
- Make sure to drink a full glass of water for every 30min you exercise
- Mild to moderate exercise 30min per day 3 or more times per week
- Avoid jarring or abrupt motions
 - box jumps, jumping, lunges, jump squats, etc.
- High-altitude or impact (10,000ft) activities are NOT recommended
 - Such as mountain climbing, scuba diving, or contact sports

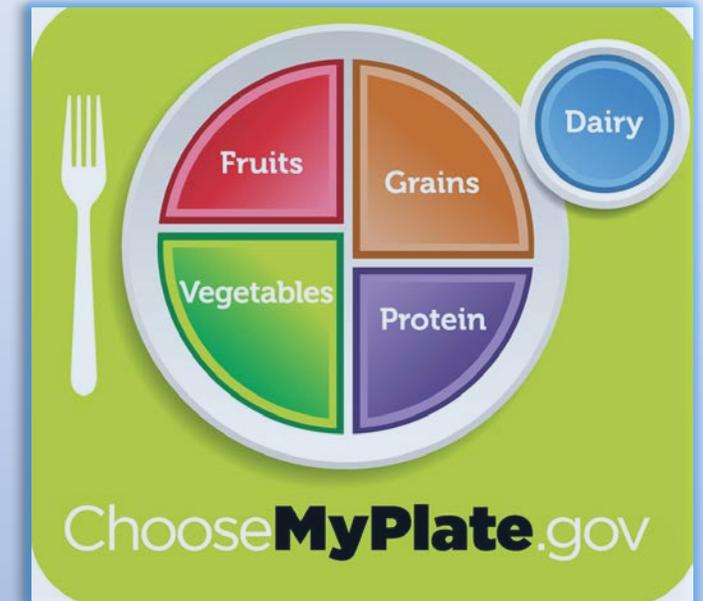
- **Pg. 125 Nutrition in Pregnancy**

- Ensure you are fully cooking foods such as foods made with eggs, meat, poultry or seafood as high levels of bacteria or contaminants can harm your baby
- See slide with Health and Nutrition education for more guidance



Healthy Start, Healthy and Safe Eating

- FOLIC ACID: Take a prenatal vitamin. Products fortified with folic acid
 - Proven to reduce the chances of birth defects in your growing baby
- 3-5 meals and snacks a day, plenty of fluids, limit caffeine, and adequate rest.
 - Quit the use of tobacco products and consumption of alcohol
- Healthy Diet (Grains 7-10oz/ day)
 - 1cup breakfast cereal, ½cup cooked rice, 1 slice bread.
- Vegetables (3-3½cups per day) Green and orange vegetables every day.
 - Broccoli, spinach, tomato, red peppers, carrots, sweet potatoes
- Fruits (2-2½cups per day)
 - strawberries, watermelon, oranges, cantaloupe, kiwi, blueberries
- Milk or other calcium rich products (3cups milk per day)
 - 1cup yogurt, 1½oz of natural cheese, 2oz processed cheese
- Meat & Beans (6-7ounces per day)
 - 1 egg, 1T peanut butter, ¼cup cooked beans, ½ounce nuts or seeds
- Oils: Fat intake kept to 6-8tsp per day. Mono/Poly unsaturated fats such as those found in nuts, avocado, canola/ olive oils, and fish.



Healthy Start, Healthy and Safe Eating

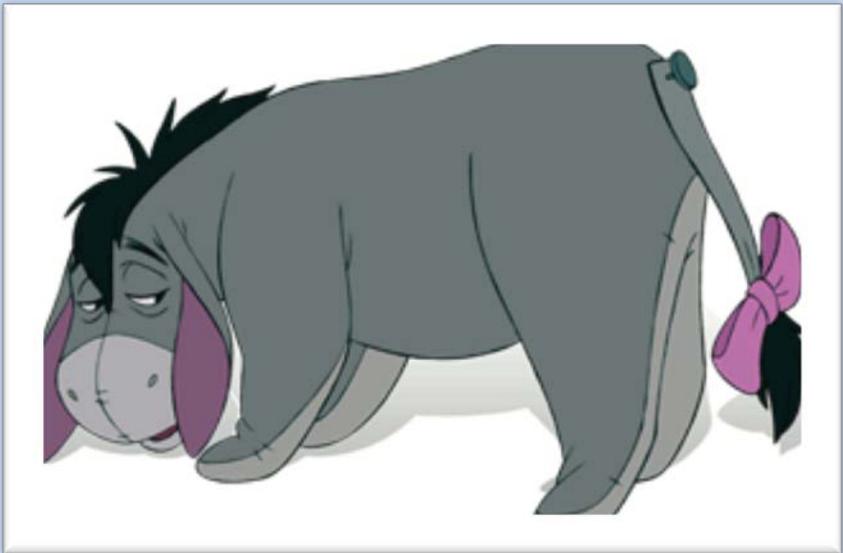
- Foods that are unsafe:
 - Raw fish, unpasteurized (milk, juice, soft cheeses), raw sprouts (alfalfa), most herbal supplements and teas
 - Fish high in mercury: swordfish, tilefish, mackerel, shark.
- 12 ounces per week of salmon, canned light tuna, cod, & catfish are safe.
- Thoroughly cook eggs, meat, poultry, or seafood.
 - Heat deli meats until steaming hot
- 300 extra calories per day during your second and third trimester
 - Weight gain is gradual: 2- 3lbs in first 3 months, 2- 4lbs each month thereafter.
 - Weight gain recommendation is based on your weight before pregnancy
Normal weight: 25-35lbs Underweight: 28-40lbs Overweight: 15-25lbs Overweight+: 11-20lbs
 - After birth you will lose 10-14lbs. The rest will come off with diet and exercise.
 - Breastfeeding mothers: 600 extra calories a day.



Depression is real and it's ok to ask

Pregnancy is stressful!

You have different hormones and changes in hormones that will affect your mood.



If you feel down, depressed or have any thoughts of harming yourself or others you must notify the nearest healthcare provider **right away!!**

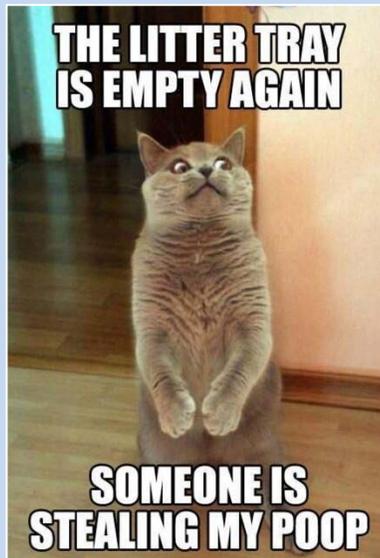
Toxoplasma

- About 85% of pregnant women are at risk!
- Toxoplasma is a parasite found in raw undercooked meat, unwashed fruit and vegetables, contaminated water, and cat feces
- Babies who are affected may suffer hearing loss, mental disabilities, and blindness
- Reduce your risks by

Wash fruits & vegetables thoroughly

Cover outdoor sandboxes

Keep indoor cats INDOORS!



Cook all meat thoroughly

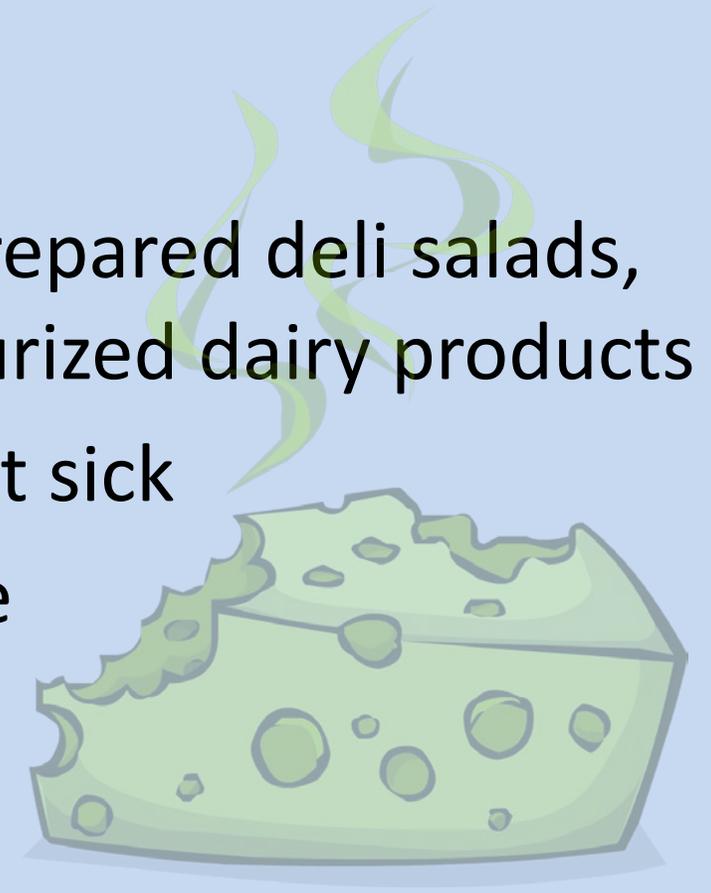
Avoid stray cats

Change cat litter daily (Preferably not you)



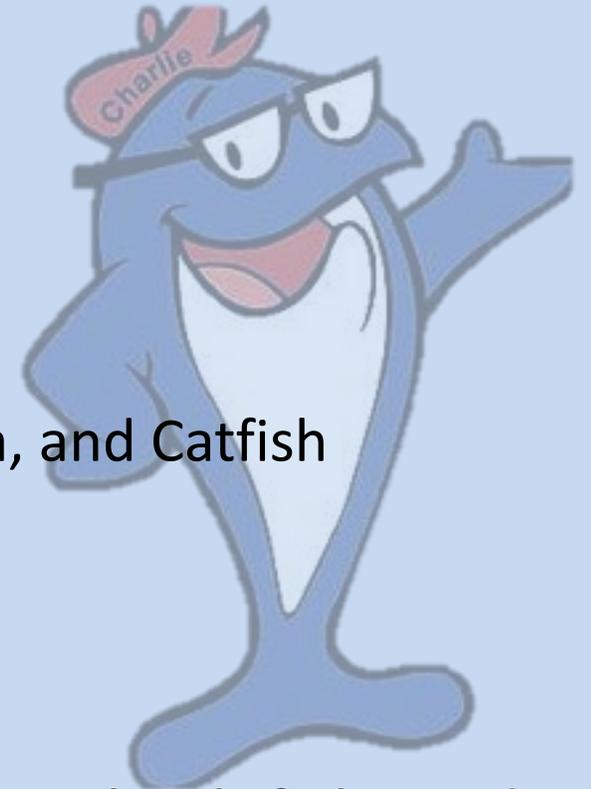
Listeriosis

- A harmful bacteria that found in refrigerated prepared deli salads, ready to eat meat, seafood, poultry & unpasteurized dairy products
- Pregnant women are 20 times more likely to get sick
- One of the most common causes of miscarriage
- Can be harmful to the fetus
- What you can do to reduce risk:
 - Refrigerate or freeze perishable foods within 2 hours or discard
 - Eat ready-to-eat perishables as soon as possible
 - Make sure deli/luncheon meats and hot dogs are cooked thoroughly
 - grilled, toasted, fried, or steaming hot in the microwave



Methyl Mercury

- High levels can be harmful to unborn babies developing nervous system
- Mercury is a metal that can be found in fish and shellfish
- IT'S OKAY to EAT
 - Cooked fish/shellfish twice a week-total of 12 ounces
 - Shrimp, canned light Tuna, Salmon, Pollock, Cod, Halibut, Tilapia, and Catfish
 - Limit albacore tuna to 6 oz. per week
 - Pasteurized milk or cheeses made from pasteurized milk
- Fish that contain large amounts include: Shark, King Mackerel, Tilefish, and Swordfish **Please do not eat these during pregnancy**



Foods to Avoid...

- Refrigerated smoked meats unless they have been cooked or heated until steaming hot
- Raw milk cheeses like brie, feta, camembert, Queso
- Foods containing raw or unpasteurized milk
- Shark, King Mackerel, Tilefish or Swordfish
- Raw seafood/fish ****No sushi!****
- Raw eggs
- Rare steak (At most: a least pink in the middle)
- Hamburgers or ground meat that is pink or red in the center



Soft Cheese



Uncooked Egg



Sword Fish



Raw Shell Fish



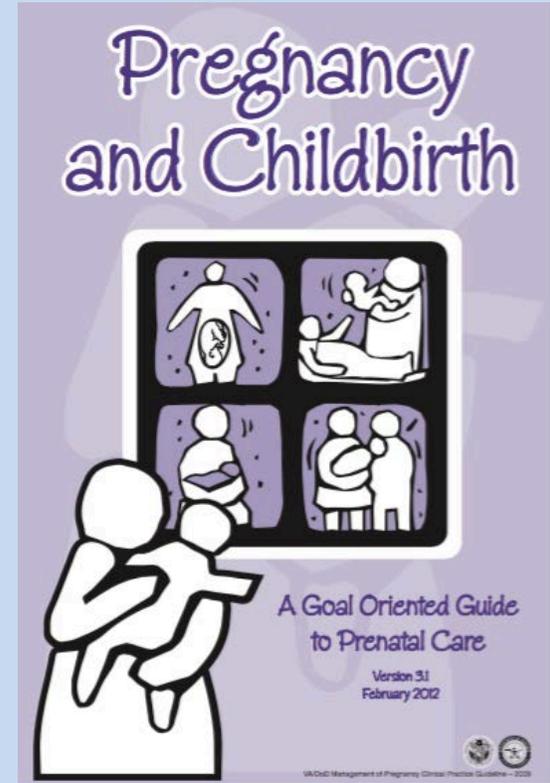
Coffee



Cured Meat

Additional Information

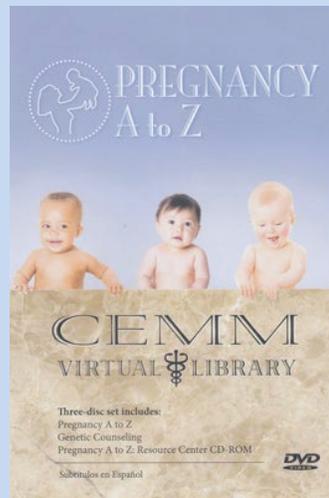
- **Pg. 116 Travel**
 - You may safely travel **up to 36 weeks** unless advised otherwise
 - Be sure that during long plane or car rides you get up!
 - Stretch and move about as this will
 - minimize the amount of swelling
 - decrease the risk of developing a blood clot
 - If traveling or leaving the area for longer than 3 weeks
 - Change your Tricare service area while away.
 - Ensure that you take your Pregnancy Passport with you at all times!
 - If necessary, you can request your OB records to carry with you.



Additional Information

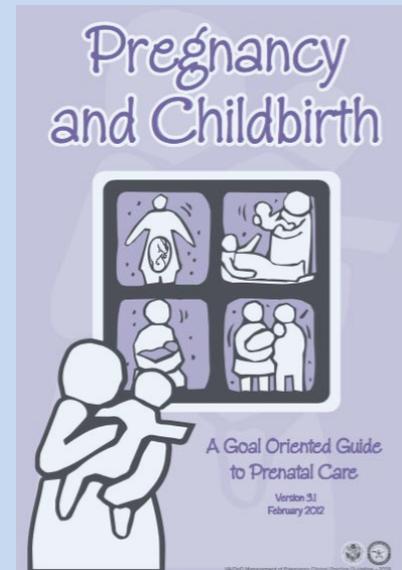
- **Pg. 123** Immunizations

- The Flu vaccine is recommended during pregnancy during influenza season
 - Intramuscular injections only. You may not use the mist during pregnancy.
- Tdap recommended in the 3rd Trimester of pregnancy



- **Pg. 136** Dental Center

- Tricare authorizes an additional cleaning during pregnancy due to “pregnancy gingivitis”
- Use a soft tooth brush and brush with warm water
 - It is normal to have tender gums during pregnancy
- Dental X-Rays are considered safe if you shield your abdomen and pelvis with a lead gown or drape



Risk Avoidance pg. 137

- Tobacco Use

- In pregnancy increases the risk to the unborn baby
- premature birth, low birth weight, and still births
- and other pregnancy complications

* Infants exposed to second hand smoke are more likely to die of Sudden Infant Death Syndrome (SID)

* higher risk for developing bronchitis, pneumonia, ear infections, severe asthma, respiratory symptoms and slowed lung growth

- Alcohol use

- There is no known amount of alcohol that is safe to consume
- Drinking can cause a baby to be born with birth defects and disabilities
- The effects of alcohol can cause problems in how a person grows, learns, looks, and acts
- Alcohol during pregnancy can cause defects of the heart, brain, and other major organs.
- These problems can last a lifetime and are preventable!

If you're interested in quitting-let us know. We have resources to help

Sexual Activity

- During pregnancy you undergo changes both physically and emotionally
- Sexual intercourse is safe during pregnancy
- The amniotic sac normally protects and cushions the baby
- Orgasms may cause contractions
- You may experience **SPOTTING** after intercourse.
 - If you have **BLEEDING** like a period, notify the Women's Health Clinic
- IF you have a history of MISCARRIAGE or other HIGH RISK concerns
 - Check with your provider to be reassured



Intimacy

- It is important to remain physically close as a couple



- Touching, snuggling, caressing and massaging are important ways to express love
- Keep lines of communication open and share feelings

When To Seek Medical Attention

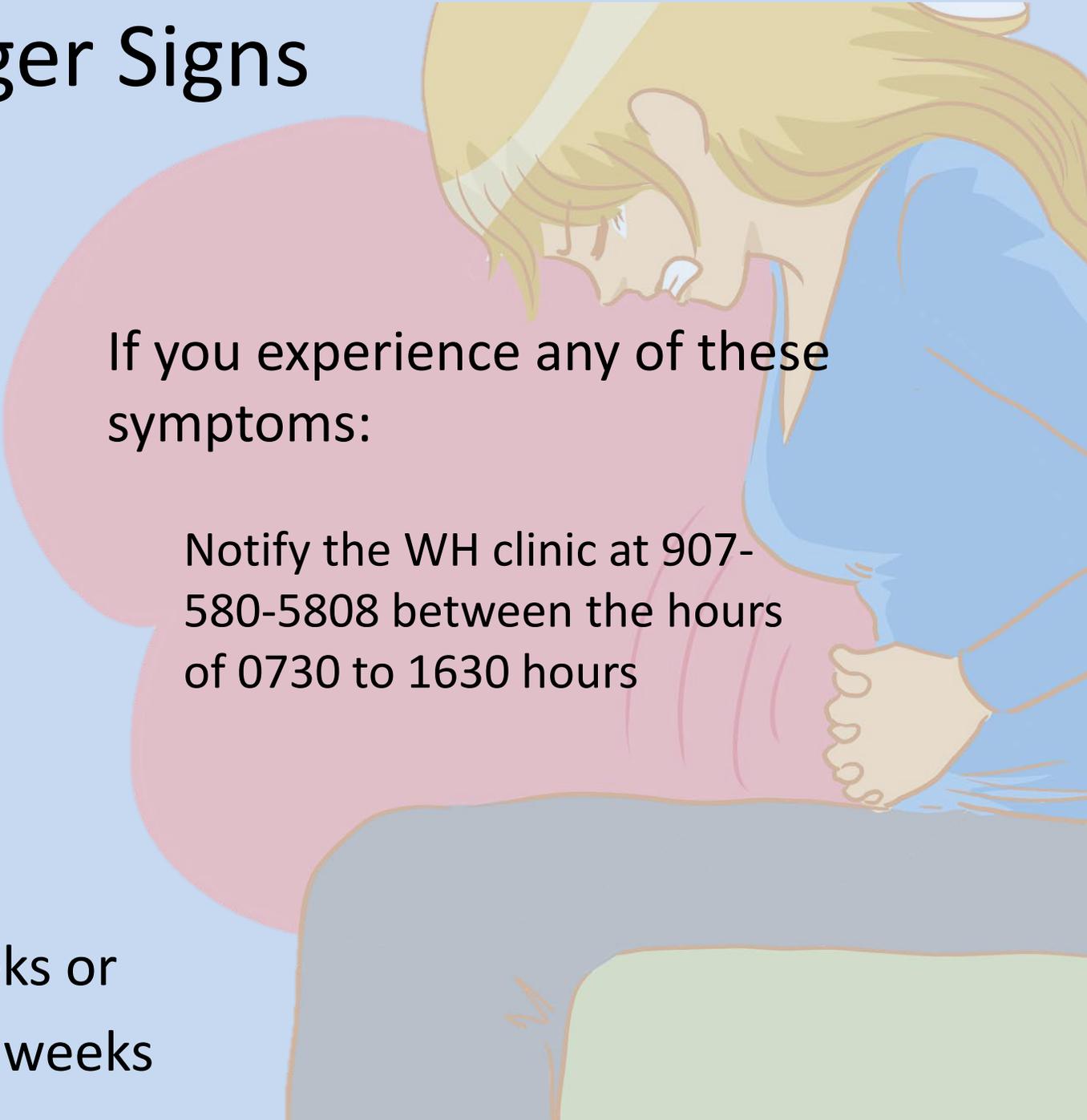
- Headache that is severe and does not go away with rest and Tylenol
- Visual changes, blurred vision, spots or floaters before your eyes
- Severe vomiting that persists more than 24 hours
- SUDDEN swelling of the face, hands and feet
- Pain and/or burning on urination
- Fever >100.4
- If you fall on your abdomen, have abdominal trauma, or Motor Vehicle Accident



Danger Signs

- Vaginal Bleeding
 - Remember this is different than spotting such as after intercourse
- Severe Abdominal Pain
- Leaking of fluid from the Vagina

After working hours: Report to
Emergency Room if less than 20 weeks or
Labor and Delivery if greater than 20 weeks



If you experience any of these symptoms:

Notify the WH clinic at 907-580-5808 between the hours of 0730 to 1630 hours

Flu Vaccination Frequently Asked Questions

Q: How Dangerous is influenza (the flu) in pregnant women?

A: Pregnant women who get the flu can be sicker than non-pregnant women. Pregnant women with flu have more medical visits, hospitalizations, and longer stays

Q: Should I get the vaccine?

A: YES! Flu vaccine protects you and your baby. If administered during pregnancy it can protect your baby during their first six months until they are able to get the vaccine on their own.

Q: When should I get the Flu vaccine?

A: Anytime. Women who are pregnant should get the vaccine as early as possible so that they and their baby are protected.

Q: I am pregnant. Which Flu vaccine do I get?

A: The one that is an injection- needle in the arm. This vaccine is inactivated meaning there is no live virus. There are two types which are both safe: the Trivalent or the Quadrivalent.

Q: Is there a type of flu vaccine I shouldn't get?

A: YES. Pregnant women should not get the nasal flu vaccination. This one uses a live virus. It is safe for use once you are no longer pregnant; even if you are breastfeeding.

Q: Will the flu vaccine give me the flu? I hate the flu!

A: NO. You may still get cold symptoms, which is different than the flu. The flu vaccine does not protect you against the "common cold".



Flu Vaccination Frequently Asked Questions

Q: I heard the preservatives are dangerous. Are they?

A: They are SAFE. Thimerosal is a mercury-containing preservative BUT it is in very small amounts and there are no studies that show it has led to problems for women or their growing baby.

Q: What else can I do to protect my baby against the flu?

A: The flu vaccine is the most important step. After your baby is born, breastfeeding and having other members of the family vaccinated is best. Breastfeeding mothers pass on immunity to their baby

Q: What should I do if I get the flu?

A: Seek care and inform them you are pregnant. Flu symptoms are fever (Temp greater than 100°)F, chills, and exhaustion. Severe symptoms can be trouble breathing, dizziness when standing, or pain in your chest; Seek emergency care for these symptoms

Q: What about the other vaccines I need. Can I get them with the flu vaccine?

A: Yes. Tdap is another important vaccination and is safe to get at the same time as the flu vaccine. Speak with your provider if you have any questions about other vaccines with the flu.

Q: Where can I get reliable information about all of this?

A: Reliable information is important when making decision for you and your baby. Here are a few good resources:

- ACOG: Immunization for women: Overview for patients.
- www.immunizationsforwomen.org
- CDC: Seasonal influenza: pregnant women and flu
- www.cdc.gov/flu/protect/vaccine/pregnant.html
- Department Health and Human Services: Pregnant Women.
- www.flu.gov/at-risk/pregnant/index.html



Zika Virus: I Want to Know More



- Zika virus is transmitted through mosquito bites
 - Aedes species- these mosquitos are aggressive daytime biters.
 - Spread when a mosquito bites an infected person and then bites other people.
- Rarely transmitted from mother to child
 - A mother can pass the virus onto her child at the time of delivery.
 - It is possible for a mother to pass it through the placenta to her child.
 - Thought to be associated with microcephaly and possible neurologic abnormalities.
 - There are no reports of transmission through breastfeeding
- Travel
 - There is no known safe time for travel if you are pregnant or may become pregnant
 - Consider postponing travel if it is a known or suspected Zika area.
 - If you must travel, meet with your provider and public health at the hospital.
 - Prevention with insect repellent (DEET, picaridin, IR3535, oil of lemon eucalyptus, and para-menthane-diol products).
 - Wear long sleeve shirts and pants. Close windows and doors.

Zika Virus: I Want to Know More

- Sex

- Men that have travelled in areas where Zika is suspected may carry the virus and pass it on to their partner.
- Partners who are pregnant or thinking of becoming pregnant should use barrier protection (condoms) or abstain from all forms of sex (oral, vaginal, anal, & toys).
- How long?
 - Men with a confirmed Zika infection: at least 6 months.
 - Men without symptoms but suspected: at least 8 weeks.
 - Although they may be in the clear it can persist in semen longer than what blood levels can detect.

- Blood

- Blood donations is deferred for 4 weeks if there is history of infection.
- At least 3 months if there has been recent travel or sexual contact with someone who has traveled to a suspected Zika area.

Zika Virus: How do I know I have it?

- Symptoms

- 1 in 5 people infected with Zika will become ill.
- Fever, rash, joint pain conjunctivitis (red eyes), muscle pain, headaches.
 - May last several days to a week with full recovery.
 - Death or hospitalization is rare but infections after Zika has occurred may lead to other complications.

- Treatment

- Rest, drink plenty of fluids, avoid mosquito bites for at least 4 weeks.
- Take acetaminophen (Tylenol) for headaches, muscle pains, and fever. Avoid aspirin or other NSAIDS- ibuprofen (Motrin) and naproxen (Aleve).
- There are no vaccinations or anti-viral medications available for Zika.

- More information

- www.cdc.gov/zika/geo/index.html
- <http://www.who.int/topics/zika/en/>



Resources

Air Force Center of Excellence for Medical Multimedia. (2009). Retrieved August 1, 2016
<https://www.pregnancyatoz.org/Resource-Center/The-Purple-Book>

Alaska Injury Prevention Center. (2015, June 15). Retrieved July 31, 2016 <http://carseatsak.org>

American Congress of Obstetricians and Gynecologists. (2014, April). Retrieved July 31, 2016,
<http://www.acog.org/Patients/FAQs/Screening-Tests-for-Birth-Defects>

Choose Myplate. (2016, July). Retrieved July 31, 2016, <http://www.choosemyplate.gov>

Health topics: Zika virus. (2016, July 18). Retrieved July 31, 2016,
<http://www.who.int/topics/zika/en/>

Immunization for women. (2016, July 6). Retrieved July 31, 2016,
<http://immunizationforwomen.org/providers/pregnancy-3/Flu-Pregnancy>

Pregnant women and influenza. (2016, July 26). Retrieved July 31, 2016,
<http://www.cdc.gov/flu/protect/vaccine/pregnant.htm>

Zika virus: For pregnant women. (2016, July 29). Retrieved July 31, 2016,
<http://www.cdc.gov/zika/pregnancy/index.html>