First Trimester Information
(The first 12 weeks)

Routine Testing
During your prenatal care, we recommend a number of routine tests which are suggested for all women. Whereas a pap test checks for abnormal cells on your cervix, cultures may also be taken from the vagina or urine to check for infections that could cause complications during pregnancy. Screening tests are done to see if your baby is at risk for certain problems and may be offered based on your age, history or ethnic background. Diagnostic tests are done to find problems that may occur during your pregnancy and are offered based on your medical history, family background, ethnic group, or results of other tests. A prenatal profile is a standard set of screening blood tests that include:

- Blood type and antibody screen - Your blood type can be A, B, AB, or O. It can be Rh positive or negative.
- Complete blood count to check for anemia as well as a platelet count.
- Rubella titer to test your blood for evidence of immunity to German measles (rubella).
- Hepatitis B Surface Antigen tests for exposure to hepatitis B.
- RPR tests for exposure to syphilis.
- HIV tests for exposure to HIV.
- Fasting glucose checks for diabetes which may precede pregnancy.
- Cystic fibrosis carrier screening tests if you are at risk for having a baby with cystic fibrosis.

Ultrasound
In general, an early first trimester ultrasound is scheduled to confirm that your pregnancy dating is accurate. Another ultrasound is routinely done at approximately 20 weeks. This allows us to screen for physical abnormalities such as heart defects, abnormalities of the brain, spine, kidneys or skeletal system. If you wish to determine your baby’s gender, this is possible by ultrasound. Additional ultrasounds are ordered by your caregivers based on your medical condition, age, and other test results, or after a physical exam, to evaluate a baby’s growth, position, amniotic fluid volume or placenta.

How much weight should I gain?
How much weight you should gain during pregnancy depends on your weight before pregnancy. Please refer to the chart below to determine the recommended amount of weight gain for your pregnancy. You can expect to gain about 10 pounds in the first 20 weeks of pregnancy and then about ½ to 1 pound a week until you deliver.

<table>
<thead>
<tr>
<th>Pre Pregnancy BMI</th>
<th>BMI</th>
<th>Total Weight Gain</th>
<th>Rate of Weight Gain in 2nd and 3rd Trimester Per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight &lt; 18.5</td>
<td>28 – 40 lbs</td>
<td>1 (1-1.3) lbs</td>
<td></td>
</tr>
<tr>
<td>Normal Weight 18.5 – 24.9</td>
<td>25 – 35 lbs</td>
<td>1 (0.8 – 1) lbs</td>
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</tr>
<tr>
<td>Overweight 25.0 – 29.9</td>
<td>15 – 25 lbs</td>
<td>0.6 (0.5 – 0.7) lbs</td>
<td></td>
</tr>
<tr>
<td>Obese ➢ 30.0</td>
<td>11 – 20 lbs</td>
<td>0.5 (0.4 – 0.6) lbs</td>
<td></td>
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</tbody>
</table>

(Calculate your BMI on [www.nhlbisupport.com/bmi](http://www.nhlbisupport.com/bmi) or ask us to do it for you.)
**Nutrition**
Every diet should include proteins, carbohydrates, vitamins, minerals, and fats. If of normal weight, you only need an extra 300 calories per day to fuel your baby’s growth (equivalent to a glass of skim milk and half a sandwich). Pregnant women need extra iron and folic acid. To get enough of these nutrients, prenatal vitamins are recommended. Vegetarians will likely also need extra vitamin B12 and vitamin D. The U.S. Department of Agriculture has designed an online interactive diet planning program called the “Daily Food Plan for Moms” specifically designed for women who are pregnant or breastfeeding. Please view this at [www.choosemyplate.gov/mypyramidmoms/index.html](http://www.choosemyplate.gov/mypyramidmoms/index.html).

**Exercise**
Exercise during pregnancy can provide many health benefits. It can reduce backaches, constipation, swelling and insomnia. It may make your labor and delivery easier. The hormones you produce during pregnancy can increase joint laxity, thus you need to be more careful to avoid injury. In general, you should be well hydrated during exercise and avoid any exercise that can increase your risk of injury. After the first trimester, avoid doing any exercises on your back. You will likely find your exercise tolerance decreases as your pregnancy progresses.

**Screening for Birth Defects or Genetic Abnormalities**
Screening tests can be performed in the first, second, or both trimesters. When the results of first and second trimester tests are considered together, it is called a sequential screen. If the screening test comes back “positive” or with an elevated risk, it does not mean that the baby has a birth defect. In fact, most women who have abnormal screening results will have normal healthy babies. If you screen “positive,” you will be offered counseling with a perinatologist (high risk obstetrics physician) where options for definitive diagnosis will be explained.

**First Trimester Screen**
A first trimester screen is offered between 10 and 14 weeks of pregnancy. It is a combination of a blood test and a special type of ultrasound (nuchal translucency) where the skin thickness at the back of the fetal neck is measured. These tests assess the risk of Down’s syndrome and trisomy 18.

**Second Trimester Screen**
A second trimester screen is a blood test done between 15 and 20 weeks to assess the level of several substances in your blood. This test screens for Down’s syndrome, trisomy 18, and neural tube defects (spina bifida).

**Sequential Screen**
This is a combination of the first and second trimester screening tests. It has the greatest accuracy and lowest false positive rate.
Comparison of Tests for Down’s Syndrome and Neural Tube Defects

<table>
<thead>
<tr>
<th>Screens for</th>
<th>First Trimester Screen</th>
<th>Second Trimester Screen</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Down’s Syndrome</td>
<td>Down’s Syndrome</td>
</tr>
<tr>
<td></td>
<td>Trisomy 18 and 13</td>
<td>Trisomy 18</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Neural Tube defects</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Abdominal wall defects</td>
</tr>
<tr>
<td>Test will</td>
<td>Identify about 1 out of 20 pregnancies at increased risk for Down’s Syndrome</td>
<td>Identify about 1 out of 20 pregnancies at increased risk for Down’s Syndrome</td>
</tr>
<tr>
<td></td>
<td>Detect about 4 out of 5 pregnancies with Down’s Syndrome</td>
<td>Detect about 4 out of 5 pregnancies with Down’s Syndrome</td>
</tr>
<tr>
<td></td>
<td>Not detect about 1 out of 5 pregnancies with Down’s Syndrome</td>
<td>Not detect about 1 out of 5 pregnancies with Down’s Syndrome</td>
</tr>
<tr>
<td>Type of Test</td>
<td>Blood test and early ultrasound</td>
<td>Blood test</td>
</tr>
<tr>
<td>Timing</td>
<td>9 weeks 4 days to 13 weeks 6 day for blood, and 11 weeks 4 days to 13 weeks 6 days for NT (nuchal translucency) ultrasound</td>
<td>15 to 20 weeks of pregnancy</td>
</tr>
<tr>
<td>Follow-up options for diagnosis if result is “screen positive”</td>
<td>CVS if results are available earlier</td>
<td>Detailed ultrasound and amniocentesis</td>
</tr>
<tr>
<td></td>
<td>Amniocentesis if results are available later</td>
<td></td>
</tr>
<tr>
<td>Additional Testing later in Pregnancy</td>
<td>Routine Ultrasound</td>
<td>Routine Ultrasound</td>
</tr>
</tbody>
</table>

Source: First Trimester Screening: Patient Information.

Diagnostic Tests for Evaluation of Genetic Abnormalities

**Chorionic Villus Sampling (CVS)** is a procedure that takes a small amount of tissue from the developing placenta. The tissue is sent to a lab for chromosome analysis. CVS is performed between 10 and 12 weeks of pregnancy. CVS is associated with a small risk of miscarriage.

**Amniocentesis** is a procedure that withdraws a small amount of fluid that surrounds the fetus. The fluid is sent to a lab to test for chromosome abnormalities and open neural tube defects. It is usually performed around the 16th week of pregnancy. Amniocentesis is also associated with a small risk of miscarriage; however, the risk is lower than that for CVS.

**Medications**

**Vitamins**: Prenatal vitamins should be taken daily. This does not take the place of healthy eating, instead, supplements are what you and your baby require during pregnancy. It does not matter what time of day you take your vitamins. Some women find it easier to take them after dinner or at bedtime. If you can’t take your prenatal vitamin for any reason, you may take two chewable Flintstones with iron or Centrum JR with minerals instead.

**Other medications**: As a general rule it is not recommended that you take any medications during pregnancy unless you have discussed it with your caregivers. *This includes herbal medications and supplements!* Some over the counter medications are generally safe to use during pregnancy, if needed. You can take simethicone (Mylicon, Gas-X,orPhazyme), acetaminophen, guaifenesin (Robitussin), loratadine (Claritin), Zyrtec, Mucinex, Unisom, Chloraseptic

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orPhazyme), acetaminophen, guaifenesin (Robitussin), loratadine (Claritin), Zyrtec, Mucinex, Unisom, Chloraseptic
Throat Spray, or Ocean Nasal spray, if needed. Several other medications are listed under specific topics such as heartburn and constipation.

Prescription medications you should continue taking include thyroid medications (synthroid, levoxyl, armour thyroid), asthma medications (Albuterol, Advair, Singular) and blood pressure medications (labetolol, aldomet). Many antibiotics are also safe during pregnancy. If you are taking other prescription medications or require an antibiotic, please discuss this with your caregivers.

Environmental Exposures

- There is NO safe amount of alcohol that can be consumed during pregnancy.

- Cigarette smoke, either first or second hand should be avoided. If you smoke, it is advised that you quit. Stay away from individuals while they are smoking. Please contact the New Jersey Tobacco Quitline for assistance: 1-866-NJ-STOPS (1-866-657-8677) www.njquitline.org and www.NJ.quitnet.com.

- Listeria is a bacterium that can be found in unpasteurized milk and soft cheeses, prepared and undercooked meats, poultry and shellfish. To avoid exposure, wash all fruits and vegetables before using them and do not eat the following foods:
  - Unpasteurized milk or soft cheeses (examples include Brie, Feta, Camembert, goat cheese or Mexican style cheeses such as queso blanco).
  - Raw or undercooked meat, poultry or shellfish.
  - Prepared meats such as hot dogs or deli meats, unless they are heated until steaming hot.

- Mercury can be harmful to a developing fetus. Pregnant women should not eat shark, swordfish, king mackerel or tilefish because of their high mercury content. Common types of fish that are low in mercury are shrimp, canned light tuna (not albacore), salmon, pollock, and catfish. You can safely eat up to 12 ounces (which is approximately two servings) of these fish weekly.

- Toxoplasmosis is a parasite that is excreted by cats in their feces. It can also be found in raw meats like carpaccio. To avoid exposure, do not empty a cat’s litter box, do not garden without gloves or eat raw meats. Wash all fruits and vegetables before using.

- Avoid all radiation exposure during pregnancy unless medically necessary (for example, X-rays).

When to Call

Please call the office if you have any of the following: bleeding from the vagina, a gush of fluid that wets your underwear enough to make you change them, fever over 101 degrees Fahrenheit, cramping in the lower stomach that comes and goes five or more times in an hour if you are less than 36 weeks pregnant, a decrease in your baby’s activity or any other problems that you have been instructed to call about. There is someone on call around the clock for what you consider to be an emergency.

Common Discomforts of Pregnancy

**Headaches** - Headaches are a common complaint during pregnancy. A remedy that is extremely effective is acetaminophen and a can of Coke Classic or a cup of tea or coffee. Your headache should ease within 30 minutes. You
can also try putting ice behind your neck or on your forehead. Occasionally using a neti pot may help. If your
headache persists, especially if you are in your last trimester, call the office.

**Heartburn** - This can be easily treated by avoiding acidic foods such as citrus products and products containing
tomatoes and tomato sauce, spicy foods, garlic, chocolate and peppermint. Do not eat for one hour prior to lying
down. You can also use Tums, Pепcid (famotidine), Zantac (ranitidine) or Prilosec OTC (omeprazole) in the later part of
pregnancy if diet modification alone does not help.

**Hemorrhoids** - Avoiding constipation may help to prevent this. Anusol, Preparation H, Nupercainal ointment, Tucks
and Witch Hazel are some of the effective treatments that may be used. Sitting in a sitz bath or tub with Epsom salts
may also help to ease your discomfort.

**Nausea and Vomiting** - Many pregnant women experience nausea and vomiting during pregnancy. It is most common
in the first trimester. Eating carbohydrate or bread type foods (cereal, crackers, pretzels) often helps. This is one time
when eating before drinking may help ease the nausea. Lemonade, ginger, ginger ale, Coke Classic, and fruit may also
be helpful. Medications that may be used if necessary are Unisom or Emetrol. They can be purchased without a
prescription. Taking vitamin B₆, 25 mg four times daily may also be effective. Acupressure has been effective for
many women. There is a product called “Sea-Band” which can be purchased over the counter. This is a wrist band that
utilizes the correct acupressure point in your wrist to help ease nausea. Prescription medication may occasionally be
necessary, especially if you are unable to eat or drink anything and become dehydrated.

**Difficulty Sleeping (Insomnia)** - Many pregnant women have difficulty sleeping. Drinking a glass of warm milk or taking
a warm bath before bed may help. If this doesn’t help you can try Unisom or Tylenol PM as directed on the label.

**Constipation** - Increasing fiber in your diet (fruits, vegetables, oatmeal, prunes, apricots, pears, grapes, or popcorn)
may help. Adequate fluid intake is also very important. We recommend 80 to 100 ounces of fluid daily. This should
not contain caffeine which acts like a diuretic. You can also take “bulking” products such as Citrucel, Metamucil,
Fibercon, or Konsyl. Stool softeners are also safe to use during pregnancy. Surfak or Colace are examples. Gentle
laxatives are safe when needed. These include Sennokot, Miralax, or Milk of Magnesia.

**Backaches** - These result from the pressure of the baby on your back and joints. It is not uncommon for them to
increase with each pregnancy. Sleeping with a pillow in between your legs may help. Getting on your hands and
knees and alternately arching and scooping your back may also help. You can try a maternity girdle (different
from a pregnancy belt) which will give you extra support. You may find them at J. C. Penney’s or Sears. It is safe to use
a heating pad on low or have a massage. ThermaCare heat wraps may also be used. Prenatal Cradle Inc. and Baby Bell
Band make abdominal supporters. They can be found online. Chiropractic care may also help and is considered
safe in pregnancy.

**Swelling** - Swelling may or may not be normal. If you just have swelling of your feet and legs, make sure that you
watch your salt intake. Pizza, Chinese food, canned vegetables, soy sauce, steak sauce and fast food have high salt
content. You will also swell if you are not drinking enough water. Asparagus, watermelon and parsley are all natural
diuretics. Call us if you have swelling of your hands or face or are concerned about your swelling.

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