



## Prenatal Care: Your First Doctor's Visit

As soon as you suspect you're pregnant, schedule an appointment with your primary care provider or your obstetrician. Even if you've confirmed your suspicion with a home pregnancy test, it's still wise to follow-up with a doctor appointment. This will ensure that you and your baby get off to a good start.

### Why Is Prenatal Care Important?

Regular appointments with your health care provider throughout your pregnancy are important to ensure the health of you and your baby. In addition to medical care, prenatal care includes education on pregnancy and childbirth, plus counseling and support.

Frequent visits with your healthcare provider allow you to follow the progress of your baby's development. Visits also give you the opportunity to ask questions.

### What Happens at My First Medical Visit?

The first visit is designed to confirm your pregnancy and to determine your general health. In addition, the visit will give your healthcare provider clues to any risk factors that may affect your pregnancy. It will typically be longer than future visits. The purpose of the initial visit is to:

- Determine your due date.
- Find out your health history.
- Explore the medical history of family members.
- Determine if you have any pregnancy risk factors based on your age, health and/or personal and family history.

You will be asked about previous pregnancies and surgeries, medical conditions and exposure to any contagious diseases. Also, notify your healthcare provider about any medications (prescription or over-the-counter) you have taken or are currently taking. Do not hesitate to ask your provider any question you may have. Here are some questions you may want to ask. Print or write them down, add to them, and take them to your appointment.

- What is my due date?
- Do I need prenatal vitamins?
- Are the symptoms I'm experiencing normal?
- Is it normal not to experience certain symptoms?
- Is there anything I can take for morning sickness?
- What are the specific recommendations regarding weight gain, exercise and nutrition?

- What activities, foods, substances (for example, medicine, caffeine and alternative sweeteners like Equal) should I avoid?
- Can I have sex while I am pregnant?
- For what symptoms should I call you?
- What is the definition of a high-risk pregnancy? Am I considered to be high risk?

## What Tests Will I Be Given?

During the first visit, your health care provider will perform several tests, including:

**Physical exam:** You are weighed and your blood pressure, heart, lungs and breasts are checked.

**Pelvic exam:** During the pelvic exam, a Pap smear is taken to screen for cervical cancer and cultures are taken to detect sexually transmitted diseases (such as gonorrhea and chlamydia). In addition, a bimanual internal exam (with two fingers inside the vagina and one hand on the abdomen) will be performed to determine the size of your uterus and pelvis. This exam will also check for any abnormalities of the uterus, ovaries or fallopian tubes.

Your health care provider may listen for the baby's heartbeat with a special instrument called a doppler, which uses ultrasound waves (high frequency sound waves). A doppler usually cannot detect a baby's heartbeat before ten to twelve weeks of pregnancy. The provider may perform an ultrasound (a device using those sound waves to look at pictures of the baby on a screen) during this visit to verify your due date and check the baby's heartbeat.

Your provider will also order several laboratory tests, including:

**Complete Blood Count (CBC):** to screen for blood problems such as anemia (usually due to low levels of iron).

**HIV test :** This test is optional, but recommended.

**RPR:** This test screens for syphilis (a sexually transmitted disease) that can be transmitted to your unborn child. If left untreated, it can cause a dangerous condition called congenital syphilis in the baby that leads to bone and tooth deformity, nerve damage, or brain damage. Also, the baby may not be breathing when he or she is born (stillborn).

**Rubella:** This test screens for immunity (protection) against German measles. Most Americans received vaccinations against rubella as children and are immune. If you aren't you will need to avoid people with the disease (which is rare in the U.S.) as it can have serious consequences for your developing baby.

**Varicella:** This test screens for immunity (protection) against chickenpox. It is usually done only if you don't have a history of the disease, since an initial exposure during pregnancy can be harmful to the developing baby.

**HBsAg:** This test screens for hepatitis B (a liver infection) that is transmitted through contaminated needles or blood, or through saliva, semen or vaginal fluid. Infected mothers can transmit this disease to their baby during childbirth. You could have this disease and not know it.

**Urinalysis:** During this test you will urinate in a cup and the urine will be tested for kidney disease or bladder infections and high levels of sugar that might indicate diabetes. These infections are very common in pregnant women and are easily treated. If left untreated, bladder infections can quickly progress to kidney infections, which can cause problems for the baby or premature labor.

**Type and screen blood test:** This test determines your blood type and Rh factor (a protein on the surface of blood cells that causes an immune system response). Everyone is either Rh negative (your blood doesn't contain Rh factor) or Rh positive (your blood contains Rh factor; 85% of us are). Having either is fine, but if the mother's blood is Rh negative and your partner's blood is Rh positive, your baby's blood type may not match yours (it may be Rh positive). This can be a problem during delivery, or even during miscarriage because your body may produce antibodies to protect itself from this "foreign" substance. This phenomenon is called Rh incompatibility and it occurs in about 15% of all pregnancies. If your partner's blood is Rh+ (and yours is Rh-), you will be given an injection of Rh immune globulin (called Rhogam) during the 28th week of your pregnancy to prevent the development of antibodies that could be harmful to your baby. You will also receive this injection during invasive procedures and if you have any significant bleeding during your pregnancy. Additionally, an injection of Rhogam is given after delivery if your baby has Rh+ blood.

**Genetic Tests:** Depending on your ethnic background and medical history, you may also be tested for sickle-cell anemia, Tay-Sachs disease and thalassemia. Blacks, Jews, French Canadians and people of Mediterranean descent are most at risk for these illnesses. All of these diseases can be passed onto the baby because of defective genes that the parents may carry (even if they don't have the disease.) Your provider may offer you a test for cystic fibrosis, an inherited disease that can affect breathing and digestion in your baby if you and your partner are carriers.

The first prenatal visit can be exciting yet stressful. With all the poking and prodding and the uncertainty of test results, it is bound to get any mom-to-be nervous. Keep in mind, all of these tests are routine. If you have any questions about these tests or what the test results may mean, talk to your healthcare provider.