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Second Trimester

Preterm Labor Signs and Symptoms: The definition of labor is contractions that cause the cervix to open or thin out. **Preterm labor** is labor before 37 weeks. You should call the office if you notice any of the following:

- Change in type or amount of vaginal discharge (watery, mucus, or bloody)
- Pelvic or lower abdominal pressure
- Constant low, dull backache
- Regular or frequent contractions or uterine tightening
- Ruptured membranes (your water breaks with a gush or a trickle of fluid)
- Decreased fetal movements

Labs:

Quad Screen: The Quad screen is a blood draw performed between 15-21 weeks of gestation to help determine the risk of genetic disorders such as trisomy 13, 18, and 21 (please see “Optional Prenatal Testing Information” sheet given to you in the first trimester. However, it can also screen for the structural disorder, spina bifida. Some of the information can also be used to indicate if the pregnancy is at a higher risk for problems with the growth of the baby. This is not a diagnostic test and only gives a risk of these conditions. Please let us know if you would like this test performed.

24-28 weeks: 1 hour glucola and screen for anemia: You will be given an order to do a 1 hour glucose tolerance test which is a screening test for diabetes and a CBC which screens for anemia (low iron), both of which are caused by pregnancy.

28 weeks: If your blood type was found to be RH negative on your prenatal panel, you will be given an order to get a Rhogam injection. Usually, during pregnancy, blood between the mother and baby does not mix. But sometimes it does, especially right after the baby is born. If a small amount of the baby's blood gets into the mother's blood vessels during delivery, the mother's immune (infection-fighting) system makes proteins called "antibodies." In the woman's next pregnancy, these antibodies can cross the placenta and damage some of the next baby's red blood cells. This can cause a condition called anemia, which is when a person has too few red blood cells. If this happens, the baby can make more red blood cells, but sometimes not enough to prevent anemia.

Vaccines: Pregnant women who have been previously immunized with a full three-dose series of Td vaccine should receive a single dose of Tdap, ideally during the early part of the 27 to 36 week gestational age range. Tdap is indicated in **each** pregnancy, even if the woman has a previous history of pertussis or vaccination, and even if consecutive pregnancies occur within 12 months. Tdap is also recommended for individuals (such as family members and childcare providers) who are expected to have close contact with a newborn or infant younger than 12 months and have not received Tdap previously. If you are pregnant during the influenza season, it is strongly recommended you receive the flu vaccine. It has been documented as being safe in pregnancy and can be given in any trimester. The risks to an expecting mother and her baby with an influenza infection can be life-threatening.

Pediatrician: At this point, you should select a pediatrician. Some offices offer consultations during which you can meet the pediatrician and ask any questions. Please let our office and the labor nurses know your choice.

Birth Control: You should begin to consider your options for birth control after the postpartum time frame. If breast feeding, it is recommended to stick to progesterone only methods such as a “mini” pill, Depo-Provera shot, or an

intrauterine device. If formula-feeding, you have the choice of a birth control pill, Nuvaring, Depo-Provera shot, Nexplanon, or an intrauterine device. Please talk to your provider about your options.

Tubal Ligation: If you are planning for a tubal ligation, please talk to your provider. If you have Medicaid insurance such as Buckeye or Caresource, you will have to sign a consent form AT LEAST 30 days in advance of your delivery for it to be covered by your insurance.

Patient Portal: This is for non-emergency questions or concerns. Please do not send portal messages regarding decrease fetal movement, concerns of water breaking or being in labor. Please call our office or report to Labor & Delivery.