Your Birth Experience: First Trimester

Women’s Hospital
At Women’s Hospital of Greenville Health System (GHS), we know that pregnancy and birth are key events in the life of any family.

That’s why the doctors and staff at GHS Women’s Hospital are privileged to be part of your birthing experience. That’s also why we strive to provide you with high-quality care in a comfortable, nurturing environment.

Our philosophy is one of family-centered maternity care, which recognizes the importance of new relationships and responsibilities that come with having a child. The goal of this philosophy is to achieve the best possible outcomes for all family members. Thus, our approach to maternity care revolves around you and your family’s needs during this special occasion. Each baby is unique—and your experience should be as well.

This exciting time is filled with great expectations. We are dedicated to meeting your expectations with our advanced facilities and our experienced, committed and compassionate staff. Because pregnancy is a challenging time both physically and emotionally, we also know that you have many questions. This material—along with childbirth classes and education from your provider—tells you much of what you need to know about pregnancy and your hospital stay.

In addition, you will receive two packets from your provider and the Women’s Hospital: one during your second trimester and another during your third trimester. The information in each packet will help you plan for the birth of your baby and for your stay with us. You also will receive a “fourth trimester” packet during your hospital stay that will cover information about caring for yourself and your baby.

As you prepare for your baby’s arrival, please be assured that we are committed to making your experience a positive one, and we join you in welcoming your new baby into your family—and ours.

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Choosing the right environment to welcome a new baby is an important decision for expectant parents. For many years, women have relied on the expertise and compassion of GHS Women’s Hospital to help deliver and care for their babies. We treat every birth experience as unique.

From normal to high-risk pregnancies, we have the technology and medical expertise to provide exceptional care that meets each patient’s needs. A board-certified OB/GYN is in the hospital at all times—just in case. Anesthesiologists and neonatologists are here around the clock as well.

At Women’s Hospital, our goal is to provide family-centered maternity care (FCMC). FCMC integrates pregnancy, childbirth, and postpartum and infant care in the continuum of the family life cycle as a normal, healthy event. This care is tailored for each woman and her family and recognizes the importance of family support, participation and choice.

**FCMC is based on 10 principles:**

1. Childbirth is viewed as wellness, not illness. Care is directed to maintaining labor, birth, and postpartum and newborn care as a normal life event involving dynamic emotional, social and physical changes.
2. Prenatal care is personalized according to the psychosocial, educational, physical, spiritual, and cultural needs of each woman and her family.
3. A comprehensive program of perinatal education prepares families for active participation throughout the evolving process of preconception, pregnancy, childbirth and parenting.
4. The hospital team assists the family in making informed choices for care during pregnancy, labor, birth, and postpartum and newborn care and strives to provide the family with the desired experience.
5. The father and/or other support person(s) of the mother’s choice is actively involved in the educational process, labor, birth, and postpartum and newborn care.
6. Whenever the mother wishes, family and friends are encouraged to be present during the entire hospital stay, including labor and birth.
7. Each woman’s labor and birth care are provided in the same location unless a cesarean birth is needed. When possible, postpartum and newborn care are given in the same location and by the same caregiver.
8. Mothers (not nurses) are the preferred care providers for their infants. When mothers are caring for their babies, the nursing role changes from performing direct patient care to facilitating the care given to the mother or family members.
9. When mother-baby care occurs, the same nurse cares for the mother and baby couplet as a single family unit, even when they are briefly separated.
10. Parents have access to their high-risk newborns at all times and are included in their care as much as possible.
Our innovative laboring options and leading technology have made us a leader in obstetric care, and we will strive to make the birth of your baby memorable.
Maternal-Fetal Medicine

Expectant mothers who face pregnancy complications and other health risks receive the region’s highest level of care at the GHS Division of Maternal-Fetal Medicine.

Working closely together with Women’s Hospital, our practice’s physicians bring exceptional skill to caring for women experiencing the challenges of carrying multiple fetuses, being pregnant at an advanced age or having premature labor. They also specialize in the latest treatments for patients with diabetes, high blood pressure and other health issues before, during and after pregnancy.

Our doctors are obstetricians-gynecologists with two to three years of additional training in treating complex pregnancies. They provide preconception counseling for women with medical problems and previous pregnancy complications. In conjunction with GHS reproductive, endocrinology and fertility specialists, they also help patients with recurrent pregnancy loss.

The Division of Maternal-Fetal Medicine was the first perinatal diagnostic ultrasound center in South Carolina to receive national certification by the American Institute of Ultrasound in Medicine.

Diabetes Program

We accept referrals for pregestational and gestational diabetes. Preconception counseling is encouraged for patients with diabetes so that they can proactively prepare for a healthy pregnancy and delivery.

Our diabetes care program emphasizes patient education and active participation in optimizing blood-sugar control. Women receive care from our doctors, diabetes educators and nutritionists. Goals are customized, with the woman being contacted by phone each week to assess the need for therapy adjustments. Most can have their condition co-managed by their obstetric care provider.

Here are some of the Division of Maternal-Fetal Medicine services:

• Genetic counseling and testing
• 3-D and 4-D ultrasound evaluation and treatment
• Amniocentesis
• Chorionic villus sampling (CVS)
• Critical care obstetrics
• Separate unit for high-risk pregnant women staffed by nurses skilled in obstetric critical care
• Quick access to the region’s largest, most advanced Neonatal Intensive Care Unit (NICU)
• Genetic sonograms
• Screening for chromosomal abnormalities
• Fetal echocardiography
• Preconception counseling
• Antepartum testing
Nurse-Midwifery Services

A woman’s choice of health care is a very personal decision. The midwifery model of care is based on the belief that pregnancy and childbirth are normal life processes.

At GHS, we have certified nurse-midwives. All are registered nurses who have graduated from a program accredited by the Accreditation Commission for Midwifery Education (ACME), hold master’s degrees and have passed a national certification examination to receive the professional designation “certified nurse-midwife.”

GHS midwives provide individualized, family-centered care with a strong emphasis on patient education. Each prenatal visit is tailored to meet the physical, emotional and informational needs of the woman and her family. Midwives perform comprehensive physical exams, prescribe medications including epidural anesthesia and pain medication during labor if needed, order laboratory and other diagnostic tests, and provide health and wellness education and counseling.

The midwives at GHS specialize in keeping birth normal. They offer high-touch, low-tech care during labor and birth. In addition to providing continuous physical, emotional and psychological support, they encourage walking, massage, aromatherapy, music, and the use of birthing balls, showers and birth pools according to each woman’s specific needs and desires.

Although it is unlikely, there may be times when the midwife feels it is necessary to consult with or refer a woman for care to an OB/GYN physician during labor or birth. In the event that this should occur, you can rest assured that the midwife will stay with you throughout the remainder of your care and continue to provide the emotional, physical and psychological support that is the hallmark of midwifery care.

Greenville Midwifery Care currently is constructing a birth center to be opened in 2015. This facility will give low-risk patients of Greenville Midwifery Care the option to deliver in a homelike setting.

OB Triage

When it is time for you to deliver, your first stop will be OB Triage on the sixth floor (exit the elevators to the left and go through the frosted doors; OB Triage is then on the left) of Greenville Memorial Hospital (GMH). There, you will be asked to share some information about yourself such as your name and your provider’s name. Our staff will work quickly to get you into one of our seven OB Triage rooms and notify your provider (or one of your provider’s partners or your midwife) of your arrival.

If you are scheduled for a C-section or an induction, you will go straight to the Maternity Business Office on the sixth floor (exit the elevators to the left; this office is on the right before the frosted doors). From there, you will be admitted to The Family Birthplace or Women’s Specialty at GMH.
Care Partner

Because of the length of time you may be in the OB Triage area, we ask that you have one person with you. This person is called your Care Partner.

Upon admission, you are issued a Care Partner badge to give to the person of your choice. A Care Partner is a family member or close friend, at least 18 years old, chosen by you to help provide emotional, physical, educational and spiritual support.

The Care Partner may be with you anytime. Care Partners provide comfort and social support, and they participate in providing you with a safe, meaningful healthcare experience. They also may visit the Healing Garden and enjoy other benefits while at the hospital.

The Family Birthplace

Women's Hospital has 15 Family Birthplace suites—here is where you will remain during your labor, vaginal delivery and first hour or two of recovery. Everything needed for a safe, comfortable labor experience—fetal monitoring, anesthesia equipment and a bed that pulls apart for delivery—is in this room. Our experienced nurses are specially trained in low- and high-risk deliveries. Whether you are interested in natural childbirth or in pain-relief options, we can help you through your labor and delivery. Our department is equipped with wireless fetal monitoring for patients who are interested in natural childbirth. (The wireless monitoring allows you to walk during labor.) We also have anesthesia available at all times.

As labor progresses, you can take advantage of some of the innovative birthing options available to you, such as hydrotherapy and birthing balls. All of our nurses have special training in labor support so that they can assist you. Other options available to you during your childbirth experience include walking during labor, squatting bars, breathing techniques, massage and music.

You are encouraged to bring CDs and other items that remind you of home so that you can be as comfortable as possible. If you wish, you may bring a doula with you to offer support during labor. At Women’s Hospital, we are doula friendly. Once your baby is born (and if you and your baby are healthy), the newborn will be placed on your chest skin-to-skin. Ideally, your baby will remain skin-to-skin for at least an hour after delivery.

Skin-to-skin contact helps both mothers and babies. Babies who are placed skin-to-skin are more content and cry less, maintain body temperature better, latch easier without assistance and are more likely to breastfeed exclusively and breastfeed longer. Although we encourage skin-to-skin contact immediately after delivery, skin-to-skin continues to provide benefits during your stay with us and once you go home.
Birth Plan

As part of our FCMC philosophy, we want to honor your wishes. To help your nurses, doctors and midwives meet your wishes for labor and delivery, we urge you to complete a birth plan. (A birth plan will be discussed at greater length in the materials you receive during your second trimester.)

A birth plan is a list of preferences about how you would like your birth experience to be. A plan helps your doctor or midwife know your preferences on pain management, delivery and immediate infant care. It also serves as a starting point to open the communication lines with your healthcare team.

Please remember that labor can be unpredictable, so good communication throughout the birth experience is vital to a positive and joyful outcome.

Here are some items generally covered in a birth plan:

- What are your wishes during a normal labor and delivery?
- How do you prefer your baby to be treated immediately after delivery and in the first few days of life?
- What are your wishes in case of unexpected events?
Operating Room
The Family Birthplace area has three OB operating rooms (OR) and seven recovery beds. Although we have a core staff of nurses and surgical technicians who work primarily in the OR and recovery room, every nurse in The Family Birthplace is specially trained to work in the OR and recovery area so that we can provide continuity of care whenever possible. We make every effort to keep babies and moms together throughout their stay—including OR and recovery—unless the mother or baby is not stable and needs to be watched more closely.

Family Beginnings
Family Beginnings consists of private rooms where you and your family can get to know your new arrival. Our nurses specialize in mother-baby care, which means they will provide care to you and to your newborn—also known as couplet care.

At GHS Women’s Hospital, we encourage mothers and babies to stay together to promote breastfeeding and bonding—this is called “rooming-in.” Research shows that moms sleep better when their babies stay in the hospital room with them.

Babies startle less and cry less when they stay with their mothers. In addition, with your baby in your room, you can see all of the baby’s firsts and will come to understand your infant’s personality and needs. These so-called teachable moments include everything from the baby’s first bath to the initial checkup and what to do when your baby cries. (If you are concerned about your baby crying, our nurses teach new parents ways to calm a fussy baby.)

Rooming-in also allows the family to supervise everything happening to your newborn, from birth to discharge, providing an additional layer of patient safety. Our current nursery space now is reserved for limited situations, such as physician-ordered medical observation, IV antibiotics, isolation to prevent flu exposure or if the mother requires ICU care or surgery.

If you have another child or other children, we like to recognize them as the Big Brother or Big Sister. This birth is a big event in their lives as well!

At GHS Women’s Hospital, we encourage mothers and babies to stay together to promote breastfeeding and bonding—this is called “rooming-in.”
**Women’s Specialty Unit**

The Women's Hospital specializes in high-risk prenatal care. Our Women's Specialty unit is a comprehensive area where women who must spend part of their pregnancy on bed rest receive special attention. Each mother-to-be is made to feel as comfortable as possible during this stressful time. Please remember that we are your partner through your high-risk pregnancy. We also will help prepare your family for the upcoming transition from pregnancy to childbirth and then to parenthood.

Pre-existing health issues such as diabetes, high blood pressure and pulmonary problems can result in a high-risk pregnancy. Other risk factors include women expecting more than one baby and those who have not been able to carry a pregnancy to term.

Our Maternal-Fetal Medicine doctors specialize in caring for high-risk pregnancies, so their top priority is keeping you and your baby healthy. Our Women's Specialty unit has 23 beds with central fetal monitoring. If an early delivery is needed, we are near The Family Birthplace, operating rooms and the state's largest NICU.

**Bryan Neonatal Intensive Care Unit**

Should the need arise, GHS Children's Hospital has a Level III (most advanced) NICU for premature or critically ill infants. As one of the state’s premier perinatal centers, we’re ready around the clock with the latest technology and monitoring equipment for tiny babies.

In addition, on-site neonatal doctors are available at all times and are backed by the area's largest number of pediatric specialists to serve the 750 babies treated here annually. And when it’s time to bring babies home, our Children’s Hospital is one of the few nationwide with a program to teach parents how to care for children with special needs.

*The Bryan NICU offers high-quality, high-tech care with these features:*

- Sophisticated ventilators essential for lung development in premature infants
- On-site neonatologist for supervision and consultation anytime
- Pediatric specialists in areas ranging from pediatric cardiology and surgery to urology

Special volunteers rock and hold infants when parents cannot be with their babies. The Family Learning Center offers homelike suites where parents can stay for a few days and learn to care for their babies before being discharged from the Bryan NICU. This center helps provide a comfort level for parents with babies who might need monitors or special medications after going home.
Baby Friendly

GMH is Baby-Friendly designated. The Baby-Friendly Hospital Initiative is a global program sponsored by the World Health Organization (WHO) and United Nations Children’s Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer optimal level of care for infant feeding.

Baby-Friendly designation is a gold standard that many hospitals across the country are trying to achieve. Not only does Baby-Friendly designation promote and support breastfeeding, but it also promotes and supports skin-to-skin contact and rooming-in.

We recommend breastfeeding as the best feeding method because it provides optimal nutrition for your baby! It is the best way to feed your baby because it can protect your baby’s health, help you recover from pregnancy, save your family money and provide a lifetime of health benefits for you both. Please keep in mind that breastfeeding will take practice for you and your baby to learn.

Breastfed babies typically are healthier kids. Breastmilk naturally changes to meet the growing needs of your baby. You pass antibodies to your newborn through breastmilk. Breastfeeding is convenient. Breastmilk needs no mixing, is always the right temperature and costs nothing. And breastmilk is made for human babies.

This initiative helps hospitals give mothers the information, confidence and skills needed to successfully initiate (and continue) breastfeeding their babies—and bestows special recognition to hospitals that have done so. The Baby-Friendly Hospital Initiative promotes, protects and supports breastfeeding through these 10 steps:

1. Have a written breastfeeding policy routinely communicated to all healthcare staff.
2. Train all healthcare staff in the skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within an hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation, even if separated from their infant.
6. Give infants no food or drink other than breastmilk unless medically indicated.
7. Practice rooming-in. Allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.
10. Foster the establishment for breastfeeding support groups and refer moms to them after discharge.
Why Breastfeed?
The American Academy of Pediatrics recommends that babies be breastfed exclusively for the first six months, that breastfeeding continue for at least 12 months, and thereafter for as long as mother and baby mutually desire. Medical research has given us many good reasons to breastfeed. It has a positive impact on the baby’s health and benefits for the mother.

Getting Started with Breastfeeding
Breastfeed as early as possible. We recommend that you hold your baby immediately after birth and place your baby skin-to-skin on your chest. Your baby can find the breast on his own after being skin-to-skin. In addition, the earlier you start to breastfeed, the easier it is!

Your baby should breastfeed within an hour of being born and then any time he seems hungry or awake. Babies don’t have a set feeding schedule for the first two weeks. Be patient while learning and expect that your baby won’t be predictable at first. It is normal for your baby to sleep and not seem to eat much on the first day. He will act hungrier and eat more often on the second and third days. Your baby should breastfeed as often and for as long as he wants during the first two weeks. This is called “baby-led feeding.”

What You Should Expect
Your nipples may feel sensitive or tender as you get started, but breastfeeding should not be painful. Your breasts start making milk (colostrum) while you are pregnant so you have just the right amounts for your newborn baby—and that is amazing.

Babies normally will lose weight the first few days after birth and are back to their birth weight within two weeks. Your baby has a small stomach at first, and you will feed at least eight to 12 times every 24 hours for the first few weeks.

Keeping track of how often he eats and the amount of wet and dirty diapers will help you know if he is getting enough to eat.

We encourage you to wait to introduce bottles and pacifiers until breastfeeding is well established. We recommend approximately one month.

Breastfeeding is the best feeding method because it provides optimal nutrition for your baby!
Benefits for Baby

• Breastfed infants tend to be healthier than non-breastfed babies. Babies breastfed for one year are half as likely to have any illness and are less likely to be hospitalized for any bacterial infection. They can be four times less likely to have diarrheal diseases. They have a decreased risk for ear infections and a decrease in risk for lower respiratory infections.

• Breastfed infants are at a reduced risk for developing insulin-dependent diabetes.

• There are fewer incidences of childhood cancers with breastfed babies.

• Breastmilk provides your baby with all the nutrients needed in the right amounts. It is easy to digest and gentle on your baby’s stomach.

• Breastfed babies rarely are constipated.

• Breastfed infants and children have a significantly reduced rate of food allergies. They often are protected from asthma and allergies because of immunologic properties of breastmilk.

• Breastfeeding has been shown to contribute to lower incidence of SIDS (sudden infant death syndrome).

Benefits for Mother

• Breastfeeding helps to quickly reduce the uterus to its normal size and also helps to prevent excessive bleeding following birth.

• Breastfeeding contributes to lower incidence of uterine, ovarian and breast cancer.

• Breastfeeding relaxes mom. The hormone that produces milk has a relaxing effect on mom while the infant is at her breast, and the baby loves the closeness.

• Breastfeeding decreases blood pressure.

• Breastfeeding will increase the effect of pain medication.

• Breastfeeding will help mom lose the weight she gained during pregnancy. It burns about 400 or more calories each day.

Breastfeeding is the best way to feed your baby because it can protect your baby’s health, help you recover from pregnancy, save your family money and provide a lifetime of health benefits for you both.
Benefits for the Family

- Breastmilk is always ready. There is nothing to buy, carry, heat or measure.
- Nighttime feedings are easier when you breastfeed. You do not have to sterilize bottles, warm formula, etc.
- Because breastfed babies generally are sick less often, working parents may miss fewer days on the job because of infant illness.
- Breastfed babies smell good. Their stools do not smell bad, and they do not spit up often. When they do spit up, it does not have a strong smell and will not stain clothes.
- Breastfeeding is cost effective: 1) You won’t need to buy bottles, nipples or formula. In the first year, formula can cost $2,000 or more if the infant is allergic to certain formulas. 2) You will likely have fewer sick visits to the baby’s doctor.
- Breastfeeding is environmentally friendly. There is less use of natural resources (e.g., electricity for heat) and fewer cans in landfills.

Breastfeeding Support

As you make your decision to breastfeed your baby, know that community resources are available. GHS offers a Breastfeeding Helpline that you can call once you are at home: 455-BABY (2229).

In addition, lactation consultants offer outpatient visits for people who need hands-on help. Many insurance companies cover the cost of these visits—check with your insurance company for more information.

Each month, we offer breastfeeding support groups on the first and third Thursdays at St. Michael Lutheran Church (on Augusta Street) from noon-3 p.m. and the second Thursday at Greenville Midwifery Care (35 Medical Ridge Drive, Greenville) from noon-3 p.m. We also offer a breastfeeding support group on the fourth Thursday at GHS OB/GYN Center (1120 Grove Road) from noon-3 p.m.

For any of these resources, please call 455-BABY for more information.

In addition to GHS resources, La Leche League (call 455-BABY for a referral to a group near you) and Greenville County Health Department (372-3257 or 372-3258) provide breastfeeding support.