

Stirred Water Herbs

"Do you want to get well?" John 5:6

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PRENATAL FAQs

Judi Ryan, ND
Doctor of Naturopathy

Stirred Water Herbs

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Prenatal FAQs

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„Do lon mauz so Bez meyls, joju zte

Hello, I'm Dr. Judi,

I am a wife of 19 years and the mother of 7 children ages 18 to 2. I was raised knowing nothing about herbs or natural health care. As my children grew and had continual health issues I reached a point where I was going to the medical doctor at least once a week. I remember thinking there had to be a better way. I knew God had to have a purpose for the things that grew around us so I began my voyage in Naturopathy.



Naturopathy is based on the belief that God has designed the human body with the ability to heal itself, if it is given the appropriate internal and external environment.

I was certified as an herbalist in August of 2001 through Natural Solution Training Institute and became a Doctor of Naturopathy through Trinity College of Natural Health, April 19, 2004.

I can't diagnose, prescribe medication, or treat, but my education has greatly benefited my own family. We only see medical doctors in emergencies and when necessary, which is not very often any more.

I want to pass on what I've learned to help benefit as many people as possible both online and in my community. So we began Stirred Water Herbs to help you create that environment and take control of your health.

[Stirred Water Herbs](#) is a Christian owned business which strives to provide you with the best vitamins and herbs available. I look hard for great quality so you don't have to. I also strive to keep the cost down to prove that treating yourself or your family naturally doesn't have to cost an arm and a leg. My concern is your health, not our bottom line. We are dedicated to serving others as God intended.....NATURALLY!

May God bless you through our family owned business and may you come to know the Creator more fully as you experience the best health you possibly can!

If you're looking for an alternative to modern medicine or wonder if the Naturopathy way may address a need you have, you can email me at <mailto:askdrjudi@stirredwater.com>.

Dr. Judi

John 5:6

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Disclaimer

All health-related material and links contained in this document are provided for information purposes only. The information in this document does not replace medical advice. Advice on treatment or care of an individual patient should be obtained through consultation with a physician or trained health care practitioner who has examined that patient or is familiar with that patient's medical history.

The purpose of this report is to help educate. The author and publisher do not warrant that the information contained in this report is fully complete and shall not be responsible for any errors or omissions.

22 of the Most Commonly Asked Prenatal Vitamin Questions

1. Will prenatal vitamins help you get pregnant?

Herbal and vitamin supplements help correct nutrient deficiencies which help to balance hormone function, thus creating a healthier atmosphere for pregnancy.

2. Do prenatal vitamins help with hair growth?

Prenatal vitamins that have sufficient Biotin in them help with hair growth. Biotin is a nutrient required for healthy hair and helps to prevent graying and baldness.

3. Can non-pregnant women take prenatal vitamins?

Prenatal vitamins are a rich source of nutrients; therefore I would recommend them for women who are not pregnant or even menopausal.

Also, experts recommend that all women of childbearing age get 400 micrograms of folic acid every day. Even women with very little chance of getting pregnant should get their daily dose of folic acid. This is because many pregnancies are not planned. Often women don't know they are pregnant for a number of weeks. And some birth defects happen during this very early part of pregnancy.

Taking 400 mcg of folic acid every day will help prevent some birth defects that happen in early pregnancy. If a woman doesn't start taking vitamins until the second or third month of pregnancy, it may be too late to prevent birth defects. Folic acid may also have other health benefits for women.

4. When is the best time to start taking prenatal vitamins?

Prenatals are rich in nutrients needed in pregnancy. So when you are contemplating getting pregnant, it is a good time to begin taking prenatals to build proper nutrient levels need for maintaining a pregnancy.

5. Can men take prenatal vitamins?

Men do not usually need high levels of iron which are in prenatal vitamins. Too much iron can be toxic to the body so caution should be considered. There are a number of quality vitamin supplements designed specifically for men and most men are better off going that route.

6. Can kids take prenatal vitamins?

Children should not take prenatal vitamins. Since they have higher doses of vitamins and iron that could be dangerous for children, I do not recommend them for children.

7. Where can I buy prenats?

There are so many options available today that it is hard to know where to go to buy prenats or what specific prenatal to purchase. To help reduce the confusion, I've researched and checked out several different brands. The one I recommend can be purchased through our website at www.YourPrenatalVitamins.com

8. Can I take a multivitamin with prenatal vitamin?

You should not take a multivitamin with a prenatal because a good prenatal vitamin should have all the needed vitamins and minerals. Taking both would be too much.

9. Is it okay to take over the counter vitamins?

It is okay but be sure what you are getting is good quality. Check the amount of each nutrient to see if it meets the recommended amounts. Also a little test I like to do is to bake the vitamin in the oven for about 10 minutes and see what happens. If it is just vitamins it will bake like a cookie and turn brown. If it is chemically made it will turn into black goo. Which do you think your body can absorb the best?

10. Can prenatal vitamins have an effect on menstrual cycle?

High quality multivitamins are helpful with maintaining hormone balance, which in turn helps to regulate menstrual cycles.

11. Do prenatal vitamins really help? Why should I take prenatal vitamins?

Prenatal vitamins are safe to take during pregnancy and can be helpful. Women who are pregnant or trying to get pregnant should take a daily multivitamin or prenatal vitamin that contains at least 400 micrograms of folic acid. It is best to start taking these vitamins before you become pregnant or if you could become pregnant. Folic acid reduces the chance of a baby having a neural tube defect, like spina bifida, where the spine or brain does not form the right way. Iron can help prevent a low blood count (anemia). They also help maintain the nutrients being pulled from your body to supply the needs of your baby, so they are needed for preventing nutrient deficiencies.

Even women who plan carefully to eat healthy every day sometimes fail to get important nutrients. Taking a daily prenatal vitamin will guarantee your daily dose of needed nutrients.

12. Can taking prenatal vitamins help prevent miscarriages?

Nutrient deficiency can be one of many causes of miscarriages. Therefore, prenatal vitamins are helpful in preventing miscarriages and maintaining the pregnancy.

13. Will prenatal vitamins help acne?

Prenatal vitamins may be very helpful with acne. Prenatals are rich in zinc, vitamin A, vitamin E, and B6 which are important nutrients in the prevention and healing of acne.

14. Can you take prenatal vitamins when on birth control?

Oral contraceptives have been shown to affect a number of metabolic and nutritional processes. They cause nutrient deficiencies creating the need for nutritional supplementation.

15. Can you take prenatal vitamins while breast feeding?

Yes, and you should take them while nursing. Your body actually needs them more when you are nursing than when you were pregnant. The amount of nutrients pulled from your body for the baby is even more while nursing than when pregnant. Maintaining your nutrient levels for you and that precious little one are very important.

16. How long should you take prenatal vitamins?

Through all your child bearing years from the first thought of it until you're done nursing your last one.

17. Can I eat total fortified cereal and take prenatal vitamins?

Yes, but remember, cereal does not have all the required nutrients needed for your prenatal care so prenatal vitamins are still recommended.

18. What is the best time of day to take prenatal vitamins?

You should take your vitamins with a meal. That will help prevent nausea and help you to get the most out of them as your body will be in the process of absorbing the nutrients it needs.

19. What if I forget to take my prenatal vitamins?

It is okay, nothing major will happen. Just continue the next time as usual.

20. Will throwing up affect my prenatal vitamins?

If you throw up immediately following the taking of your vitamins it will be affected since your vitamins will also be coming up. Taking with a meal is best to help with that.

21. Is it dangerous to take prenatal vitamins and vitamin B12?

No, B12 is water soluble. That means that your body will eliminate what it does not need. So it is okay to take extra vitamin B12 because it helps with the absorption of folic acid.

22. Will not taking prenatal vitamins affect my baby?

Lack of proper nutrient levels can affect the development of the baby. It has been proven that not enough folic acid can cause some serious issues.

Prenatal Care Frequently Asked Questions

What is prenatal care?

Prenatal care is the health care you get while you are pregnant. Take care of yourself and your baby by:

- Getting **early** prenatal care. If you know you're pregnant, or think you might be, call your doctor or midwife to schedule a visit.
- Getting **regular** prenatal care. Your doctor or midwife will schedule you for many appointments over the course of your pregnancy. Don't miss any—they are all important.
- Following your doctor's or midwife's advice.

Why do I need prenatal care?

Prenatal care can help keep you and your baby healthy. Babies of mothers who do not get prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care.

Doctors and midwives can spot health problems early when they see mothers regularly. This allows for early treatment which can cure many problems and prevent others. Regular health care is best for you and your baby.

I am thinking about getting pregnant. How can I take care of myself?

You should start taking care of yourself *before* you start trying to get pregnant. By staying active, eating right, and taking a multivitamin, you can help keep yourself and your baby healthy even before it is conceived. This will help you have a healthy pregnancy and lower your chances of having a baby born with a birth defect.

Here are some ways to take care of yourself before you get pregnant:

- Eat healthy foods, exercise regularly (30 minutes per day most days of the week is best), and get enough rest and sleep. Talk to your doctor or midwife about what kinds of food and exercise are best for you.
- Get 400 micrograms (mcg) of folic acid (one of the B vitamins) every day. The best way to do this is to take a daily multivitamin with this amount of folic acid. Getting enough folic acid every day before you get pregnant and during early pregnancy can help prevent certain birth defects. Many breakfast cereals and other grain products are enriched with folic acid. But only some products contain 400 mcg of folic acid per serving. Always check the labels to be sure you're getting your daily dose. See your doctor or midwife for a complete check up. Make sure that you've had all your shots, especially for *rubella* (German measles). Rubella can cause serious birth defects. Chickenpox can also be dangerous during pregnancy. If you've had chickenpox and rubella in the past, you should be immune to them. If not, talk to your doctor or midwife about the vaccines.

- Tell your doctor or midwife about any prescription or over-the-counter medicines (including herbal remedies) you are taking. Some medicines are not safe to take during pregnancy.
- Stop smoking cigarettes, drinking alcohol, or taking drugs. Ask your doctor or midwife for help. Members of your faith community, counselors, or friends can also give support.

I'm pregnant. What should I do or avoid for a healthy baby?

Some things you can do to take care of yourself and the precious life growing inside you include:

- Take a multivitamin or prenatal vitamin with 400 micrograms (mcg) of folic acid every day. (See www.YourPrenatalVitamins.com for our recommendation.)
- Get early and regular prenatal care. Whether this is your first pregnancy or third, health care is extremely important. Your doctor or midwife will check to make sure you and the baby are healthy at each visit. If there are any problems, early action will help you and the baby.
- Eat a healthy diet that includes fruits, vegetables, grains, and calcium - rich foods. Choose foods low in saturated fat.
- Unless your doctor or midwife tells you not to, try to be active for 30 minutes, most days of the week. If you don't have much time, get your exercise in 10 minute segments, three times a day.
- If you smoke, drink alcohol, or use drugs, STOP! These can cause long-term harm to your baby. Ask your doctor or midwife for help.
- Ask your doctor or midwife before taking any medicine. Some are not safe during pregnancy. Remember that even over-the-counter medicines and herbal products may cause side effects or other problems. So ask your doctor or midwife before taking these products too.
- Avoid hot tubs, saunas, and x-rays.
- If you have a cat, ask your doctor or midwife about toxoplasmosis. This infection is caused by a parasite sometimes found in cat feces. When left untreated toxoplasmosis can cause birth defects. Your doctor may suggest avoiding cat litter and working in garden areas used by cats.
- Don't eat uncooked or undercooked meats or fish.
- Stay away from chemicals like insecticides, solvents (like some cleaners or paint thinners), lead, and mercury. Not all products have pregnancy warnings on their labels. If you're unsure if a product is safe, ask your doctor or midwife before using it.
- Avoid or control caffeine in your diet. Pregnant women should have no more than two servings of caffeine per day. Remember that teas, sodas, and chocolate may contain caffeine.

- Stay active. Most women continue working through pregnancy. Few jobs are unsafe for pregnant women. But if you're worried about the safety of your job, talk with your doctor or midwife.
- Get informed. Read books, watch videos, go to a childbirth class, and talk with experienced moms.
- Ask your doctor or midwife about childbirth education classes for you and your partner. Classes can help you prepare for the birth of your baby.

Check out our more detailed tips on pregnancy dos and don'ts at the end of this report.

Is smoking bad for my baby?

A pregnant smoker is at a higher risk for problems in your pregnancy. Babies born to mothers who smoke have a lower average birth weight, an increased rate of premature birth, and are at greater risk of death from sudden infant death syndrome (SIDS), than babies of nonsmokers.

Studies show that women who quit smoking early in their pregnancies can reduce the risk of damage to their babies. Even quitting in the last month of pregnancy can help your baby by increasing the amount of oxygen available to him/her during delivery.

Will alcohol harm my baby?

There is no guaranteed safe level of alcohol consumption if you are pregnant. Any alcohol you drink enters both yours and your baby's bloodstream. Alcohol use during pregnancy may cause fetal alcohol syndrome (FAS). FAS babies may suffer from physical, behavioral, and mental problems.

I don't want to get pregnant right now. But should I still take folic acid every day?

Experts recommend that all women of childbearing age get 400 micrograms (mcg) of folic acid every day. Even women with very little chance of getting pregnant should get their daily dose of folic acid. This is because many pregnancies are not planned. Often women don't know they are pregnant for a number of weeks. And some birth defects happen during this very early part of pregnancy.

Taking 400 mcg of folic acid every day will help prevent some birth defects that happen in early pregnancy. If a woman doesn't start taking vitamins until the second or third month of pregnancy, it may be too late to prevent birth defects. Folic acid may also have other health benefits for women.

Questions Related to Doctor/Midwife Visits

How often should I see my doctor or midwife during pregnancy?

Your doctor or midwife will give you a schedule of all the visits you should have while pregnant. As your pregnancy progresses, you'll see the doctor or midwife more often. Most experts suggest you see your doctor or midwife:

- about once each month for the first six months of pregnancy
- every two weeks for the seventh and eighth months of pregnancy
- every week until the baby is born

If you are over 35 or your pregnancy is high risk because of health problems (like diabetes or high blood pressure), you'll probably see your doctor or midwife more often.

What should I talk to my doctor or midwife or midwife about?

Waiting in your doctor's office can make you feel nervous, impatient, or even scared. You might feel annoyed because you're not getting other things done. Then when you see your doctor or midwife, the visit seems to be so short. You might have only a few minutes to explain your progress and concerns. Later that day, you might remember something you forgot to ask. You wonder if your question and its answer matters. Knowing how to talk to your doctor, midwife, nurse, or other members of your health care team will help you get the information you need.

- List your questions and concerns. Before your appointment, make a list of what you want to ask. When you're in the waiting room, review your list and organize your thoughts. You can share the list with your doctor or midwife.
- Give your doctor or midwife a list of your medications. Tell what prescription drugs and over-the-counter medicines, vitamins, herbal products, and other supplements you're taking.
- Be honest about your diet, physical activity, smoking, alcohol or drug use, and sexual history. Not sharing information with your doctor or midwife can be harmful!
- Describe any allergies to drugs, foods, pollen, or other things. Don't forget to mention if you are being treated by other doctors, including mental health professionals.
- Ask questions about any tests and your test results. Get instructions on what you need to do to get ready for the test(s). Ask if there are any dangers or side effects. Ask how you can learn the test results. Ask how long it will take to get the results.
- Ask more questions if you don't understand something. If you're not clear about what your doctor or midwife is asking you to do or why, ask to have it explained again.

What happens during prenatal visits?

During the first prenatal visit, you can expect your doctor or midwife to do the following:

- ask about your health history including diseases, operations, or prior pregnancies
- ask about your family's health history
- do a complete physical exam
- do a pelvic exam with a Pap test
- order tests of your blood and urine
- check your blood pressure, urine, height, and weight
- figure out your expected due date
- answer your questions

At the first visit, you should ask questions and discuss any issues related to your pregnancy. (See previous question.) Find out all you can about how to stay healthy.

Later prenatal visits will probably be shorter. Your doctor or midwife will check on your health and make sure the baby is growing as expected. Most prenatal visits will include:

- checking the baby's heart rate
- checking your blood pressure
- checking your urine for signs of diabetes
- measuring your weight gain

While you're pregnant your doctor or midwife may suggest a number of laboratory tests, ultrasound exams, and other screening tests.

I am in my late 30s and I want to get pregnant. Should I do anything special?

As you age, you have an increasing chance of having a baby born with a birth defect. Yet most women in their late 30s and early 40s have healthy babies. See your doctor or midwife regularly before you even start trying to get pregnant. She will be able to help you prepare your body for pregnancy. She will also be able to tell you about how age can affect pregnancy.

During your pregnancy, seeing your doctor or midwife regularly is very important. Because of your age, they will probably suggest some additional tests to check on your baby's health.

More and more women are waiting until they are in their 30s and 40s to have children. While many women of this age have no problems getting pregnant, fertility does decline with age. Women over 40 who don't get pregnant after six months of trying should see their doctors for a fertility evaluation.

What are some symptoms where I should call the doctor or midwife?

When you are pregnant you should not hesitate to call your doctor or midwife if something is bothering or worrying you. Sometimes physical changes can be signs of a problem.

Call your doctor or midwife as soon as you can if you:

- are bleeding or leaking fluid from the vagina
- have sudden or severe swelling in the face, hands, or fingers.
- get severe or long-lasting headaches
- have discomfort, pain or cramping in the lower abdomen
- have a fever or chills
- are vomiting or have persistent nausea
- feel discomfort, pain or burning with urination
- have problems seeing or blurred vision
- feel dizzy
- sense a change in your baby's movement
- suspect your baby is moving less than normally after 28 weeks of pregnancy (if you count less than 10 movements in 2 hours or less)

What do I do if I think I'm having premature labor?

Premature or preterm labor is when you go into labor before the 37th week of your pregnancy, or three weeks before your due date. The earlier pre-term labor is spotted and treated, the better chance of stopping it. When symptoms go untreated, the cervix may open and cause an early birth of the baby. Premature babies need intensive care in the hospital to help with breathing, feeding, and regulation of body temperature.

Any woman can have pre-term labor, but some women have a higher risk. Problems with the uterus or placenta and a history of pre-term birth with another pregnancy increase the risk of preterm labor. Dehydration also boosts the chances of pre-term labor. So drink plenty of water especially in warm weather and after exercise to keep from becoming dehydrated.

Call your doctor or midwife right away if you have any these signs of premature labor:

- **Contractions** — You may or may not feel pain, but your abdomen or stomach will get very hard (feel like it is tightening) and then relax, on and off.
- **Menstrual-like cramping** — You may or may not be uncomfortable with these cramps that feel like menstrual cramps.
- **Gas-type pains** — Sharp pains in your stomach, diarrhea or nausea may be a sign of trouble.
- **Low pelvic pressure** — You may feel like the baby is putting a lot of pressure down very low inside.

- **Low backache** — You may have a very strong ache in your lower back or could just feel a dull ache in that area.
- **Blood from your vagina** — Light spotting or a significant amount of blood should be reported to the doctor right away. Blood can be red or brown in color.
- **Increased discharge from your vagina** — Much more discharge than what you are used to during your pregnancy can be a sign of preterm labor. A sudden gush of a lot of water, or a small trickle that is continuous should also be reported to the doctor or midwife. Discharge can be watery, pinkish, or brownish in color.

Questions about Pregnancy and Travel

Can I travel during my pregnancy?

According to the American College of Obstetrics and Gynecology, the safest time for a pregnant woman to travel is during the second trimester (18-24 weeks), when you usually feel the best and are in least danger of spontaneous abortion or premature labor.

A woman in the third trimester should be advised to stay within 300 miles of home because of concerns about access to medical care in case of problems such as hypertension, phlebitis, or premature labor.

Pregnant women should be advised to consult with their health-care providers before making any travel decisions. Collaboration between travel health experts and obstetricians is helpful in weighing benefits and risks based on destination and recommended preventive and treatment measures.

In general, pregnant women with serious underlying illnesses should not travel to developing countries.

What preparations should I take if I travel during my pregnancy?

Once you decided to travel during your pregnancy, a number of issues need to be considered before your departure.

- An intrauterine pregnancy should be confirmed by a clinician and ectopic pregnancy excluded before beginning any travel.
- Health insurance should provide coverage while abroad and during pregnancy. In addition, a supplemental travel insurance policy and a prepaid medical evacuation insurance policy should be obtained, although most may not cover pregnancy-related problems.
- Check medical facilities at the destination. For a woman in the last trimester, medical facilities should be able to manage complications of pregnancy, toxemia, and cesarean sections.
- Determine beforehand whether prenatal care will be required abroad and, if so, who will provide it. The pregnant traveler should also make sure prenatal visits requiring specific timing are not missed.
- Determine, before traveling, whether blood is screened for HIV and hepatitis B at the destination. You should also know your blood type.

What are some general recommendations if I choose to travel?

When pregnant, it is advisable to travel with at least one companion.

During your pregnancy, your level of comfort may be adversely affected by traveling. Typical problems of pregnant travelers are the same as those experienced by any pregnant woman: fatigue, heartburn, indigestion, constipation, vaginal discharge, leg cramps, increased frequency of urination, and hemorrhoids.

During travel, you can take preventive measures including avoidance of gas-producing food or drinks before scheduled flights (entrapped gases can expand at higher altitudes) and periodic movement of the legs (to decrease venous stasis)

Pregnant women should always use seatbelts while seated, as air turbulence is not predictable and may cause significant trauma.

Signs and symptoms that indicate the need for immediate medical attention are vaginal bleeding, passing tissue or clots, abdominal pain or cramps, contractions, ruptured membranes, excessive leg swelling or pain, headaches, or visual problems.

What are the risks if I choose to travel while pregnant?

Motor vehicle accidents are a major cause of morbidity and mortality for pregnant women. When available, safety belts should be fastened at the pelvic area. Lap and shoulder restraints are best; in most accidents, the baby recovers quickly from the safety belt pressure. However, even after seemingly mild blunt trauma, a physician should be consulted.

Questions Concerning Pregnancy Tests

How do pregnancy tests work?

Pregnancy tests look for a special hormone in the urine or blood that is only there when a woman is pregnant. This hormone, human chorionic gonadotropin (hCG), can also be called the pregnancy hormone.

The pregnancy hormone, hCG, is made in your body when a fertilized egg implants in the uterus. This usually happens about 6 days after conception. But studies show that the embryo doesn't implant until later in some women. The amount of hCG increases drastically with each passing day you are pregnant.

Many home pregnancy tests claim they can tell if you're pregnant on the day you expect your period. But a recent study shows that most don't give accurate results this early in pregnancy. Waiting one week after a missed period will usually give a more accurate answer.

What's the difference between pregnancy tests that check urine and those that test blood? Which one is better?

There are two types of pregnancy tests. One tests the blood for the pregnancy hormone, hCG. The other checks the urine for this hormone. You can do a urine test at home with a home pregnancy test. You need to see a doctor to have blood tests.

These days, most women first use home pregnancy tests (HPT) to find out if they are pregnant. HPTs are inexpensive, private, and easy to use. Urine tests will be able to tell if you're pregnant about 2 weeks after ovulation. Some more sensitive urine tests claim that they can tell if you are pregnant as early as one day after a missed period.

If a HPT says you are pregnant, you should call your doctor or midwife right away. Your doctor can use a more sensitive test along with a pelvic exam to tell for sure if you're pregnant. Seeing your doctor or midwife early on in your pregnancy will help you and your baby stay healthy.

Doctors use two types of blood tests to check for pregnancy. Blood tests can pick up hCG earlier in a pregnancy than urine tests can. Blood tests can tell if you are pregnant about 6 to 8 days after you ovulate (or release an egg from an ovary). A quantitative blood test (or the beta hCG test) measures the exact amount of hCG in your blood. So it can find even tiny amounts of hCG. This makes it very accurate. Qualitative hCG blood tests just check to see if the pregnancy hormone is present or not. So it gives a yes or no answer. The qualitative hCG blood test is about as accurate as a urine test.

How do you do a home pregnancy test?

There are many different types of home pregnancy tests, or HPTs. Most drugstores sell HPTs over-the-counter. They cost between \$8 and \$20 depending on the brand and how many tests come in the box.

Most popular HPTs work in a similar way. The majority tell the user to hold a stick in the urine stream. Others involve collecting urine in a cup and then dipping the stick into it.

At least one brand tells the woman to collect urine in a cup and then put a few drops into a special container with a dropper. ***Testing the urine first thing in the morning may help boost accuracy.***

Then the woman needs to wait a few minutes. Different brands instruct the woman to wait different amounts of time. Once the time has passed, the user should inspect the “result window.” If a line or plus symbol appears, you are pregnant. It does not matter how faint the line is. A line, whether bold or faint, means the result is positive.

Most tests also have a “control indicator” in the result window. This line or symbol shows whether the test is working or not. If the control indicator does not appear, the test is not working properly. You shouldn’t rely on results from a HPT that may be faulty.

Most brands tell users to repeat the test in a few days, no matter what the results. One negative result (especially soon after a missed period) does not always mean you’re not pregnant. All HPTs come with written instructions. Most tests also have toll-free phone numbers to call in case of questions about use or results.

How accurate are home pregnancy tests?

Home pregnancy tests (HPTs) can be quite accurate. But the accuracy depends on many things. These include:

- How you use them - Be sure to follow the directions and check the expiration date.
- When you use them - The amount of hCG or pregnancy hormone in your urine increases with time. So, the earlier after a missed period you take the test the harder it is to spot the hCG. If you wait one week after a missed period to test, you are more apt to have an accurate result. Also, testing your urine first thing in the morning may boost the accuracy.
- Who uses them - The amount of hCG in the urine is different for every pregnant woman. So, some women will have accurate results on the day of the missed period while others will need to wait longer.
- The brand of test - Some home pregnancy tests are more sensitive than others. So, some tests are better than others at spotting hCG early on.

Many HPTs claim to be 99% accurate on the day you miss your period. But research suggests that most HPTs do not consistently spot pregnancy that early. And when they do, the results are often very faint. Most tests accurately confirm pregnancies one week after the missed period.

How soon after a missed period can I take a home pregnancy test and get accurate results?

Many home pregnancy tests (HPTs) claim to be 99% accurate on the day you miss your period. But research suggests that most HPTs do not consistently spot pregnancy that early. And when they do, the results are often so faint they are misunderstood. If you can wait one week after your missed period, most home pregnancy tests will give you an accurate answer. Ask your doctor or midwife for a more sensitive test if you need to know earlier.

When a home pregnancy test will give an accurate result depends on many things. These include:

- **How long it takes for the fertilized egg to implant** in the uterus after ovulation. Pregnancy tests look for the hormone human chorionic gonadotropin (hCG) that is only produced once the fertilized egg has implanted in the uterine wall. In most cases, this happens about 6 days after conception. But studies show that in up to 10 percent of women, the embryo doesn't implant until much later, after the first day of the missed period. So, home pregnancy tests will be accurate as soon as one day after a missed period for some women but not for others.
- **How you use them** - Be sure to follow the directions and check the expiration date.
- **When you use them** - The amount of hCG in a pregnant woman's urine increases with time. So, the earlier after a missed period you take a HPT, the harder it is to spot the hCG. If you wait one week after a missed period to test, you are more apt to have an accurate result. Also, testing your urine first thing in the morning may boost the accuracy.
- **Who uses them** - The amount of hCG in the urine at different points in early pregnancy is different for every woman. So, some women will have accurate results on the day of the missed period while others will need to wait longer.
- **The brand of test** - Some home pregnancy tests are more sensitive than others. So, some tests are better than others at spotting hCG early on.

I got a negative result on a home pregnancy test, could I still be pregnant?

Yes. So, most HPTs suggest women take the test again in a few days or a week.

Every woman ovulates at different times in her menstrual cycle. Plus, embryos implant in the uterus at different times. So, the accuracy of HPT results varies from woman to woman. Other things can also affect the accuracy.

Sometimes women get false negative results (when the test says you are not pregnant and you are) when they test too early in the pregnancy. Other times, problems with the pregnancy can affect the amount of hCG in the urine.

If your HPT is negative, test yourself again in a few days or 1 week. If you keep getting a negative result but think you are pregnant, talk with your doctor or midwife right away.

Can anything interfere with home pregnancy test results?

Most medicines, over-the-counter and prescription, including birth control pills and antibiotics, should not affect the results of a home pregnancy test. Only medicines that have the pregnancy hormone hCG in them can give a false positive test result. A false positive is when a test says you are pregnant when you're not.

Pregnancy Tips Dos and Don'ts

Pregnancy Dos

Follow these helpful hints for a healthy pregnancy.

- **Get all essential vitamins and minerals every day.** Women need a lot more iron when pregnant. And sometimes it's hard to get enough by eating alone. Ask your doctor or midwife if you should be taking a daily prenatal vitamin.
- **Get 400 micrograms (or 0.4 mg) of folic acid daily.** Getting enough folic acid (or folate) reduces the chances of some birth defects. Some women eat lots of certain foods and others take multivitamins to get enough folic acid during pregnancy.
- **Eat a healthy diet.** Load up on fruits, vegetables, and whole-grains (such as whole-wheat breads or crackers). Eat plenty of calcium-rich foods (such as non-fat or low-fat yogurt, milk, and broccoli) that your baby needs for strong bones and teeth. If you live in areas where fruits and vegetables aren't in season, frozen vegetables are a good option. Avoid eating a lot of fatty foods (such as butter and fatty meats). Choose leaner foods when you can (such as skim milk, chicken and turkey without the skin, and fish).
- **Gain a healthy, not excessive amount of weight.** Research shows that women who gain more than the recommended amount during pregnancy have an elevated risk of obesity. On average, 25 to 30 pounds is a healthy weight gain over the 40 weeks of pregnancy. Check with your doctor or midwife to find out how much weight you should gain during pregnancy.
- **Get enough sleep** (try to get seven to nine hours every night). Aches, pains, anxiety and bathroom runs keep many pregnant women awake at night. To get some zzzzs, eat any large meals at least three hours before going to bed, get some easy exercise (like walking) and avoid long naps during the day. Sleep on your left side and use pillows between your legs and under your belly to help you get comfortable.
- **De-stress.** If you can, control the stress in your life. When it comes to work and family, figure out what you can really do. Set limits with yourself and others. Don't be afraid to say NO to requests for your time and energy.
- **Get Moving!** Getting regular, low-impact exercise is good for you and your baby. Talk to your doctor or midwife about what is safe.
- **Get a handle on health problems.** Talk to your doctor or midwife about how your health problems can affect you and your baby. If you have diabetes, control your blood sugar levels. If you have high blood pressure, monitor it closely. If you are overweight, talk to your doctor or midwife about whether you should lose weight.

- **Ask your doctor or midwife before taking any medicines** . Prescription, over-the-counter, and herbal medicine all can harm your baby. Find out if should continue taking prescription medicines.
- **See your doctor or midwife regularly.** Prenatal care can help keep you and your baby healthy, spot problems if they occur and prevent difficulties during delivery.
- **Consider getting a flu shot.** The flu can be dangerous for some moms-to-be. The Centers for Disease Control and Prevention (CDC) suggests vaccinations for all women who are at least 14 weeks pregnant during the flu season. Ask your doctor or midwife if you should get a flu shot.
- **Wear your seat-belt correctly.** Seat belts used correctly protect you and your unborn baby during a crash. The American Academy of Family Physicians recommends that pregnant women use seat belts that have a lap belt and a shoulder strap (3-point restraint). Seat belt straps should never go across your belly. The lap strap should go under the belly, across the hips. The shoulder strap should go off to the side of your belly and between your breasts. If you are not driving, the back seat is the safest place to sit.

Pregnancy Don'ts

Steer clear of these pregnancy no-nos to help keep you and your baby safe and healthy.

- Don't eat fish with lots of mercury.
- Don't disregard food borne illness. Eat, cook, handle and clean food safely! For both mother and baby, food borne illness can cause serious health problems - or even death. Follow these simple food safety tips to keep yourself and your baby safe.

There are 3 main dangers lurking in the food pregnant women eat that can cause serious illness or even death to you or your unborn baby. They are:

- ☑ Listeria – a dangerous bacterium that can grow even in cold refrigerators.
- ☑ Mercury – a harmful metal found in high levels in some fish.
- ☑ Toxoplasma – a risky parasite found in undercooked meat and unwashed fruits and vegetables.

Follow these food facts to help keep you and your baby healthy:

- ☑ DON'T eat raw or undercooked meat, poultry, fish, or shellfish (sushi or sashimi).
- ☑ DON'T eat swordfish, tilefish, king mackerel, and shark.
- ☑ DON'T eat refrigerated smoked seafood like whitefish, salmon and mackerel. These products are usually labeled “Nova-style,” lox, kippered or jerky.
- ☑ DON'T eat refrigerated pâtés or meat spreads.
- ☑ DON'T eat hot dogs and luncheon meats—unless they're reheated until steaming hot.

- ☑ DON'T eat soft cheeses like feta, brie, camembert, "blue-veined cheeses," "queso blanco," "queso fresco," and Panela unless the label says they are pasteurized or made from pasteurized milk.
- ☑ DON'T eat unwashed fruits and vegetables.
- **Don't use chemicals.** Products including herbicides, pesticides, paint, stains, and some cleaning solutions may be harmful to your baby. If you must use these things, wear gloves, a mask, and keep the room well-ventilated.
- **Don't clean or change a cat's litter box.** This could put you at risk for an infection called toxoplasmosis. Toxoplasmosis is caused by a parasite that cats can carry in their feces. Toxoplasmosis can harm a developing baby.
- **Don't take very hot baths, hot tubs, or saunas.** High temperatures can be harmful to the unborn baby, or cause you to faint.
- **Don't use scented feminine hygiene products.** Pregnant women should avoid scented sprays, sanitary napkins, and bubble bath. These products might irritate your vaginal area, and increase your risk of a urinary tract infection or yeast infection.
- **Don't douche.** Douching can irritate the vagina, force air into the birth canal and increase the increase the risk of infection.
- **Don't have optional x-rays.** X-rays are a form of radiation that is linked to a very small risk of cancer for an unborn baby. But x-rays are usually safe during pregnancy. So if your doctor or midwife says you need x-rays for a health problem you should follow her advice. But sometimes doctor or midwife can use other tests in place of x-rays. And other times, x-rays can wait until after the baby is born.
- **Don't smoke tobacco.** Tell your doctor or midwife if you smoke. Quitting is hard, but you can do it. Ask your doctor or midwife for help. Smoking during pregnancy passes nicotine and cancer-causing drugs to your baby. Smoke also keeps your baby from getting needed nourishment and raises the risk of stillbirth and premature birth (a small baby born too early).
- **Don't drink alcohol.** Stop drinking alcohol if you drink it regularly. Experts are still unsure of the exact amount of alcohol needed to cause problems in your baby. But, both drinking every day and drinking a lot of alcohol once in a while during pregnancy can harm the baby.
- **Don't use illegal drugs.** Tell your doctor or midwife if you are using drugs. Marijuana, cocaine, heroin, speed (amphetamines), barbiturates, and LSD are very dangerous for you and your baby.