



Prenatal Care in Chatham-Kent

Regular prenatal care is directly related to having a healthy baby. During prenatal appointments, your health and the health of your growing baby are followed closely.

Health Care Providers

Prenatal health care can be provided by:

- a family doctor (provides care to all family members as well as new babies).
- a nurse practitioner (provides care in early pregnancy and then refers you to an obstetrician).
- a midwife (a health care professional who provides care for women throughout a low risk pregnancy, labour, birth and six weeks after birth).

Not all family doctors provide care during labour and birth. Your prenatal care may begin with your family doctor who may then refer you before your third trimester to either a family doctor who provides care during labour and birth or an obstetrician.

If You Don't Have a Health Care Provider

Contact your local area [hospital](#) for a list of doctors accepting new clients. You can also contact [Health Care Connect](#) at 1.800.445.1822.

Walk-in Clinics provide health care if you do not have a family doctor or are unable to reach your family doctor. Generally, appointments are not needed. It is best to call before you go to check clinic hours as they are subject to change. Some clinics are open on weekends and holidays.

To locate a walk-in clinic near you, look in the yellow pages of your telephone book under “clinics – medical” or your hospital website. Some walk-in clinics also provide ongoing family care with booked appointments.

Hospitals in Chatham-Kent:

[Chatham-Kent Health Alliance](#)

- Chatham Campus 519.352.6400
- Sydenham Campus 519.627.1461



What are my rights as a pregnant woman?

In Ontario, women are legally protected from discrimination and harassment because of pregnancy and breastfeeding.

Ontario Human Rights Commission

How to Find a Midwife

If you would prefer to see a midwife during your pregnancy, contact [Midwives of Chatham-Kent](#) at 519.358.1888 early in your pregnancy.

How to Find a Doula

Doulas are trained women who provide emotional support during pregnancy. They can provide physical and emotional support during childbirth and after your baby is born. If you are interested in hiring a doula, contact [Ontario Doulas](#) or [Doulas of North America](#) or [Doula Training](#).

How to Find Additional Prenatal Education

The Chatham-Kent Public Health Unit can link you with variety of [prenatal and parenting](#) programs.

What to Expect During Prenatal Appointments

During your pregnancy, you will see your health care provider:

- every month during the first 30 weeks of pregnancy.
- every two weeks from week 30-36.
- every week (or more frequently if needed) from week 36 until you have your baby.

During your first prenatal check up, your health care provider will:

- take your medical history.
- discuss your medication use.
- talk to you about how to be healthy during your pregnancy.

At each visit your health care provider will:

- test your urine.
- check your blood pressure.
- check your weight and your baby's growth.

During these regular visits, your health care provider will discuss any prenatal tests that may be required or recommended.

Be sure you ask your health care provider any questions you have about your health, pregnancy and baby.

Being involved in your own care helps to achieve the best health outcomes for you and your family.



Preparing for Prenatal Appointments

- Write down your questions prior to your appointment.
- Bring a support person to appointments as needed.
- At the beginning of your appointment, let your health care provider know that you have a few questions, particularly if you think they may take some time to answer.
- Let your health care provider know your level of knowledge on the issues discussed.
- Be friendly but firm. Make requests, not demands.
- Summarize what you understand from the conversation at the end of the appointment.
- If unsure about new information you have received, such as a diagnosis or test result, it's a good idea to ask to have the information written down.

Birth Plan

After you have learned about the options for labour and birth, you may want to write a birth plan.

Completing a birth plan is a good way to discuss your options with your partner prior to the birth of your baby and helps communicate to your health care team what you want for your birth.

Sample birth plans can be found online at [CK Public Health](#) or at [Mother's Advocate](#).

Prenatal Tests

Prenatal tests are offered to all pregnant women to help to monitor your health and the health of your baby.

If you are in your second or third trimester of your pregnancy, you have probably already been referred for prenatal tests such as blood work and ultrasound.

- Did you receive information about the prenatal tests before having them?
- Did your health care provider outline pros and cons of prenatal testing?

It's important to know your own health history and share it with your health care provider. It's also important to be well informed about the prenatal tests you are offered in order to make the best decisions during your pregnancy.

Examples of screening tests are certain blood tests (e.g. maternal serum), ultrasound and swab for Group B Strep.

An example of a diagnostic test is amniocentesis.



Types of Prenatal Tests

SCREENING TESTS are offered to all women to check general health and baby's growth and development.

- Assess your baby and its position in your uterus.
- Assess the risk or chance that your baby may have certain conditions without giving a definite diagnosis.
- Provide information to help your health care provider know if more diagnostic testing is recommended.

DIAGNOSTIC TESTS determine if a specific condition is present.

- May involve some risk.
- Your health care provider should explain the risks and benefits of any diagnostic test to help you decide if you want to have the test.

No test is 100 % accurate and no single test covers all conditions.

More information:

Prenatal Screening: [Prenatal Screening Ontario](#)

Multiple Births

An ultrasound will identify if you are pregnant with more than one baby. Multiples have an impact on pregnancy, labour, birth and parenting and require specialized health care.

More information:

[Society of Obstetricians and Gynaecologists of Canada](#)

Local Chapter of Multiple Births Association: [Multiple Births Canada](#)

What can you do yourself to check that your baby is “doing well”?

- Note any contractions you are having especially before 37 weeks in your pregnancy.
- Be aware of your baby's daily movements.
- Report your concerns to your health care provider.

Women and their partners should try to ensure that they are healthy, free of infection and that their immunizations are up to date before becoming pregnant.

Infections and Pregnancy

Infections are typically caused by organisms (bacteria and viruses) that invade the body and reproduce. Infections are often easily spread and if left untreated can cause harmful effects to both mother and baby. Regular prenatal care will help identify infections early. When treated promptly, complications from infections may be prevented or minimized.

Infectious diseases that can cause serious health risks to unborn babies:

- Rubella
- HIV & Aids
- Group B Streptococcus (GBS)
- Sexually Transmitted Infections
- Toxoplasmosis

RUBELLA (GERMAN MEASLES) can cause serious birth defects when a woman is exposed early in pregnancy.

- Most women have either been immunized against rubella or have antibodies to protect against it.
- A vaccination is available, but should not be given during pregnancy.
- It is best to receive this vaccine at least three months before becoming pregnant.

GROUP B STREPTOCOCCUS (GBS) is a bacteria that many women carry in their bodies, commonly in their vagina or rectum and sometimes in their bladder, kidneys or uterus. Many women who have this bacteria have no symptoms. But if left untreated, GBS could pass to the unborn baby and cause serious illness.

To screen for GBS, health care providers swab the vagina and rectum, and/or take a urine sample at around the 36th week of pregnancy.

If the screening is positive, women are treated with antibiotics during labour.

TOXOPLASMOSIS is an infection caused by a common parasite found in raw or undercooked meat, cat feces and garden soil. To prevent this infection:

- Cook meat well.
- Wash hands and cooking utensils well after handling raw meat.
- Have someone else clean the cat litter box.
- Use garden gloves when working out in the garden.

HUMAN IMMUNODEFICIENCY VIRUS (HIV) causes infections that can harm a person's immune system. As people become sicker with HIV infections, they are diagnosed with Acquired Immune Deficiency Syndrome (AIDS), a very serious, life-threatening illness.

- HIV testing is voluntary and highly recommended when pregnant.
- An infected mother can pass the virus on to her baby during pregnancy, birth or while breastfeeding.

If a pregnant woman is found to be HIV positive, there are a number of ways that the risk of giving the infection to her baby can be reduced.

Sexually Transmitted Infections:

- Gonorrhea
- Chlamydia
- Syphilis
- Herpes
- HIV & AIDS
- Yeast Infections
- Human Papillomavirus (HPV)
- Hepatitis B
- Hepatitis C



Pregnancy is an important time to share your thoughts, feelings and attitudes with your partner/ support person.

Open communication will help you identify your concerns, present or future, so you can plan ahead and problem-solve together.

SEXUALLY TRANSMITTED INFECTIONS (STI'S) are routinely screened for during pregnancy.

It is very important that pregnant women continue to practise safer sex and to tell your health care provider if you think you may have been exposed to an STI while pregnant.

More information:

Other exposures during pregnancy: [Mother to Baby](#)
[Motherisk](#)

Emotional Changes

Pregnancy is a time of enormous change. The hormonal changes within your body during pregnancy can trigger different emotions. Emotional changes such as joy, excitement or even fear and panic are all common during pregnancy.

- These emotions may be related to the anticipation of parenthood and changing roles and priorities.
- Fathers-to-be often experience similar kinds of emotions.

After giving birth, it is also normal for your emotions to be affected by your body's changing hormonal levels. One moment you may be very happy and the next you find yourself in tears. You may find it difficult to cope with these sudden changes and new stresses in your life but remember to give yourself time to recover and to adjust to your new role.

Four in five new mothers will experience the postpartum blues.

- The blues usually begin on the third or fourth day after the birth of a baby.
- A new mother may feel sad and tearful, irritable, exhausted or overwhelmed.
- She may have changes in her sleeping or eating patterns.
- These signs are often temporary, disappearing in about one to two weeks without treatment.
- For some women, however, the symptoms may last longer and develop into a more serious condition.

One in five mothers will suffer from some degree of perinatal depression and anxiety.

- Perinatal Mood and Anxiety Disorders (PMAD) can affect any woman during pregnancy and the first year after giving birth.
- The cause of PMAD is not fully understood - hormonal changes, lack of support, stress, and the demands of the new role as a mom may all have an impact.
- Consult with your health care provider if you are experiencing any symptoms.
- Do not wait! There is help available for you and your family.

Emotional changes during and after pregnancy are easier to manage when you take care of yourself by:

- getting enough sleep.
- eating well-balanced meals.
- exercising.
- talking to friends and family for support.
- attending programs before and after the birth of your baby.
- discussing signs and symptoms listed in the resource [Pregnancy Is Not Always What You Expect](#).

One in 10 dads may experience postpartum depression and anxiety.

- That number increases to up to one in two dads if the partner is coping with postpartum depression and anxiety as well.
- The depression can begin while your partner is still pregnant, but usually happens 3–6 months after birth.
- It is important to ask for help if you are experiencing any of the signs and symptoms which may be different from your partner's symptoms.

More Information:

[Life with a New Baby: Dealing with Postpartum Mood Disorders brochure](#)

[Life with a New Baby: Dealing with Postpartum Mood Disorders video](#)

[Postpartum Support International](#)

[Pacific Postpartum Support Society](#)

[Perinatal Depression screening tool](#)