31 weeks - 32 weeks

During this time, your baby's weight will grow from 3½ pound (the weight of a coconut) to 3¾ pounds (the weight of a large jicama). By 32 weeks, your baby will be nearing 17 inches in length.



Baby at 32 weeks

All five senses are now working so baby can feel, hear, smell, taste, and see!

Back pain/hip pain

Pregnancy hormones loosen ligaments and tendons that support our joints and muscles. This is good for the pelvis when it's time to give birth but not so good for your back.

Tips for managing back pain include maintaining good posture, placing a pillow between your knees when sleeping, lifting carefully, and exercising to build core muscles.

- Take Tylenol or use a heating pad on your back (never on your belly).
- Consider prenatal yoga to help strengthen your back muscles:

The Cat – get down on all fours and arch your back toward the ceiling

The Cow – get down on all fours and curl your back toward the floor

Tailor sit – sit on the floor with your feet together and back straight, then carefully lean forward

Premature labor signs

During the last month or two of pregnancy, many women have practice contractions called Braxton Hicks contractions. These are usually irregular, weak, and stop within an hour after lying down or drinking water.

Premature labor is any labor that occurs at less than 37 weeks.

Warning signs of premature labor:

- Four or more contractions in an hour after lying down and drinking two full glasses of water.
- Contractions can feel similar to menstrual cramps in your lower abdomen that come and go, or a dull backache that can't be relieved by changing position. Remember, if you experience any pre-term labor signs, call OB triage at (573) 499-6110. OB triage is located on the third floor of Women's and Children's Hospital.

What can I expect when I go to the hospital for delivery?

All patients who have received prenatal care through the University of Missouri are already pre-registered. When you arrive at the hospital, you will be evaluated by our team of health care providers. If it is time for you to have your baby, you will be admitted to the hospital.

- Your nurse will confirm your medical history.
- You will have an IV placed. Some women want to be able to walk around during labor and are concerned that an IV will not allow this. If you do not need medications or fluids, your nurse can "cap off" your IV so that you can freely move around.
- You will meet your health care team which include a head physician (attending physician), a resident physician team and sometimes a medical student and/or nursing student. You may also meet someone from our anesthesia team.

What can I expect when my baby is born?

If your baby is born vaginally, a second nurse will be there to care just for your baby. She will warm and dry your baby - making sure that the baby is breathing well and is medically stable. After this, your baby will be placed directly onto your bare chest for skin-to-skin time.

If you have a cesarean section, your baby will be taken into the resuscitation room next to the operating room where a health care team will ensure that the baby is breathing well and is stable. After this, your baby will be brought back into the operating room and placed skinto-skin.

While your baby is skin-to-skin, a small amount of antibiotic eye ointment will be placed into your baby's eyes.* This ointment prevents a severe eye infection which can cause decreased vision or blindness. Since babies do not have very clear vision for weeks after birth, this will not interfere with their ability to see.

Your baby will also receive an injection of vitamin K. Vitamin K prevents bleeding and stroke for the first several months after birth. This injection is also given while your baby is skin-to-skin, which greatly reduces discomfort that your baby will experience.

*This is a mandatory state law that this ointment is placed into the eyes.

What happens after delivery?

Your baby will remain skin-to-skin for at least one hour (longer if that baby hasn't eaten or if you desire more time to bond with your baby). After a couple of hours, your baby will be examined, measured, and weighed. After both you and your baby are stable, you will be moved to a postpartum room. Both you and your baby will have the same nurse.

Your baby will be given a bath some time over the next day. The bath is delayed for at least four hours so that the baby can adjust to his new environment.

This is a great time to go through the birth preferences in the back of this binder. Our routine care is described in detail. If there are ways that you wish something different for your delivery, you and your partner can write down your requests and discuss it with your health care provider.

33 weeks - 36 weeks

During this time, your baby's weight will grow from a little over 4 pounds to 6 pounds. The length will also grow from 17 inches (the length of a pineapple) to 18½ inches (the length of a head of romaine lettuce).



Baby at 33 weeks

Your baby's hearing is developing and studies

have shown that baby can recognize songs you sing now after birth. Talk to your baby, read books, sing songs, or dance to bond with your baby. Encourage your partner to talk and read to the baby too!

Group B strep

Around 35 to 36 weeks your health care provider will test for Group B strep. This is a bacteria that lives around the vagina and rectum. Testing is performed with a vaginal/rectal swab.

This is a normal test for bacteria that approximately 1 in 5 women carry.

- Group B strep is not harmful to mothers, but can make their babies sick as they travel through the birth canal.
- If you test positive, we will use Penicillin during labor and delivery to protect your baby.
- If you are Group B strep positive, your infant's health care provider may want to keep you in the hospital for 48 hours after delivery.

Flu vaccine

A flu shot is important to protect you from the flu during flu season because influenza can be more severe in pregnant women. The flu shot can be given anytime during pregnancy.

Labor signs to watch for:

- Severe abdominal pain
- Vaginal bleeding or fluid leaking from the vagina
- Severe lower back pain
- Decreased or no fetal movement
- Fever higher than 100.4 degrees

Watch for these warning signs. If they occur, call your health care provider or OB triage at (573) 499-6110. OB triage is located on the third floor of Women's and Children's Hospital.

Questions for my provider						



University of Missouri Health System

Custom

WHEN AND WHERE TO GO

When you deliver at the University of Missouri Women's and Children's Hospital, you might notice that we do things that might seem unique. We believe that families should stay together during and after their delivery whenever possible. We know that we have something very special at our hospital and we are excited to share it with you.

When should you go to the hospital?

- If you think your water broke (leaking fluid)
- If you think you are in labor (regular, painful contractions)
- If you have vaginal bleeding
- If you have decreased fetal movement
- If you feel unwell (have a headache, cannot keep fluids or food down, have a fever)

If you are uncertain if you should be evaluated, call your doctor's office and speak with a nurse on the phone. If it is the weekend or evening, call labor and delivery directly. The number for labor and delivery is 573 499-6110. Program this number into your phone so that you have it when you need it.

If you are going to the hospital, it is always helpful to call and let them know you are on the way. This helps us ensure that you will have a room and a nurse available to care for you.

Where should you go?

Go to Women's and Children's Hospital located at

404 Keene Street Columbia, Missouri 65201

573 875-9000

Labor and Delivery is located on the third floor. You can check in through the Emergency Room.

COMMON QUESTIONS THAT PATIENTS ASK

What happens in triage?

OB Triage is a place similar to the Emergency Room where we evaluate patients for problems during pregnancy. This is where you will go if you think you are in labor.

What happens when I get admitted to the hospital?

If it is determined that you need to be admitted to the hospital, here is what you can expect:

- 1 You will be moved to a different room.
- 2 Your healthcare team will review your medical history for accuracy and you will get your blood drawn. You will meet your healthcare team, which will include your nurse, a head attending doctor, a resident physician care team, and a medical student.
- 3 Most people will need an IV placed. If you need fluids or medications, this IV will be used. In the event of an emergency, an IV is necessary.

How long will I stay in the hospital?

- If everything goes as planned, women who have had a vaginal delivery will stay approximately 24 hours. Women who have had a cesarean section will stay a day or two longer.

Will there be help if I have problems once I go home?

- We will send you home with a list of breastfeeding resources that are available through the University and the surrounding communities.
- We will set you up to see your healthcare provider six weeks after you deliver. If you have any problems before six weeks, you can call your

healthcare provider or return to Women's and Children's Hospital for care.

What if I want something different than the routine care at Women's and Children's Hospital?

- If there are aspects of our "routine" that you do not want for your delivery, a birth plan can be helpful. There is a birth plan in the back of your prenatal care binder that goes through each step of your hospital stay.
- If you plan on making a birth plan, it is helpful to bring it to a prenatal visit and review it with your provider.

There is a birth plan guide in the back of your prenatal education binder. It discusses our routine and explains how and why we care for patients the way we do. If you wish something different for your delivery, this is a great place to communicate this with your care team.