

The Kind of Care We Provide

by Beth Overton, LM, CPM

and Jessica Gregory, CPM From left to right: Beth Overton, Valerie and her baby (one our moms) Susan
Benskin, and Jessica Gregory Prenatal Visits The Home Visit Labor The Birth Postpartum Care Prenatal
Visits

If you have never had prenatal care by a midwife, you probably would be surprised at what a prenatal visit can be like. We would like to tell you what prenatals are like at Gentle Beginnings. You might find it quite a contrast to a typical obstetrical visit.

First of all, you rarely have to wait for your appointment. When you show up for a 10am appointment (for example), that is exactly when you will be seen. It is rare that you would have to wait for your turn to see your midwife. The reason for this is because we schedule visits at one hour intervals! That's right, you have up to a full hour for your prenatal visit, if you desire or need it. Most visits are done in about half an hour, but sometimes we just enjoy the good fellowship and use up the whole hour anyway.

The first prenatal visit is the longest. The midwife will take a complete medical history and do a risk assessment for homebirth. She will also do a brief physical exam evaluating your general well being. We do not do a vaginal exam at this time. There is really no medical benefit to this. Instead, the first vaginal exam is usually done at 36 weeks unless there is a medical reason to do so sooner. We will draw some blood for a complete prenatal lab work up. Under normal conditions, this is the only blood draw done during your pregnancy.

In the middle of the pregnancy, another blood sample is done by a finger prick to check your iron count. Occasionally, we will also do a finger stick to check your blood sugar levels. Sonograms and other testing are only done if necessary or upon request.

For the first 28 weeks your appointments are every 4 weeks. Then from the 28th through 35th weeks you are seen every 2 weeks. Beginning with the home visit at 36 weeks, you are then seen weekly until you go into labor.

The first thing you do at each visit is go to the bathroom and leave a urine sample in a small plastic cup. Your urine is checked at each visit and you are always given the results. This helps us see many things. We always discuss anything found that is not normal so we can help you turn around a small problem before it becomes a big one. Closely observing your urine helps us to do this.

Next, you will then weigh yourself and tell us what you weigh. Your weight gain is watched to make sure you are gaining as you should. However, you will not be lectured about "gaining too much weight." We are much more interested in how you are eating rather than only in how much you are gaining. Some women will have perfectly healthy pregnancies while they gain a lot of weight. Others can be unhealthy but have seemingly "ideal" weight gain. For this reason, at your first visit, you are asked to fill out a diet sheet of everything you eat for at least one week. Nutrition counseling will be done throughout your pregnancy as needed.

Your blood pressure, temperature and pulse are also taken. You will be asked questions about how you are feeling. We really listen to what you tell us! We will answer any questions you have and give you more information to take home and read as it is needed. We have a library full of books, DVDs and videos related to pregnancy, childbirth and babies. They are yours to check out as you desire.

We will also measure the growth of your uterus at each time. This helps us to evaluate the growth of your baby.. It also helps confirm your estimated due date (EDD). Occasionally, this may be the first clue to possible twins (should you be carrying them).

We always listen to the baby's heart with our doppler or fetoscope. The baby's siblings and the father of the baby are welcome to listen, too. Heart tones are reassuring to us all and help us to know what your baby's usual heart rate is. This is an important thing to know when you go into labor. Listening to the baby's heart is usually everyone's favorite part of the prenatal visit.

We will palpate your uterus. This means we will feel for the baby through your tummy and tell you where his head, back and feet are. You can learn to do this at home as well. We always take plenty of time getting to know your baby and knowing his position. If he is not in an ideal position near the end of the pregnancy, you will be taught exercises that will help him or her move into a better position. This is very important to make for an easier labor and delivery. Sometimes, it can even mean the difference between having a normal vaginal birth or cesarean. The Home Visit

When you reach your 36th week of pregnancy, you are scheduled for a home visit. This is when the entire birth team comes to your home to do another prenatal visit. The 36th week marks the time at which you can safely deliver at home. From this time forward, should you go into labor, your baby will be delivered at home.

By coming to your home, we make sure we know exactly how to get there. That sure makes things easier if it happens to be at 2 in the morning! By this time you will have ordered your birth kit and we will look at its contents together and explain it to you. We will discuss where in your home you want to birth and how to set up for the birth.

The home visit is usually when the first vaginal exam is performed. If you have never had a baby before, the midwife will also evaluate your pelvis size and shape. (Although, we have never encountered a pelvis too small to birth!) You (and your husband) will be taught how to do perineal massage. This helps prepare your perineum for the stretching of birth and can lower your risk of a tear.

We don't routinely do any more vaginal exams until you start labor. However, many women like to be checked at future visits to see if there is any change. We are willing to do additional exams if you are just curious. Sometimes we may suggest an extra exam when we believe it is beneficial to know what changes may be taking place.

At the home visit we like to meet everyone who will be at your birth (when it is possible). It is our desire to answer their questions as well as yours. After the 36 week home visit, the rest of the weekly prenatal visits are done in the office.

Labor

When you think your labor is beginning, you may call one of the midwives right away. You may call either midwife and we will help you evaluate your situation. If we determine that you should be checked in person, we will arrange for you to be checked. You will be evaluated closely until active labor is established. Once active labor is established, your birth team will be ready to remain with you throughout the remainder of your labor.

We will follow your cues on how much you want us involved in your labor. Of course, we have to do our job and check on you and your baby. But if you prefer to labor quietly alone with your husband, we will respect that. We will quietly come in to check heart tones and your vital signs and leave you alone in between time. If however, you prefer, one or more of us will stay right close to you for encouragement. We will encourage you through the contractions, suggest position changes as needed, or even massage your back.

During labor you will be encouraged to eat and drink as you desire or need. We allow you to shower or soak in a warm tub of water. In fact, we encourage the use of water because it is a wonderful comfort to a laboring woman. You may walk around, go outside or do what feels right to you.

The Birth

When it is time to deliver, you choose the position. We may suggest a birthing position if you need help. As long as you and baby are doing well, you will be encouraged to listen to your body and push as it tells you. Your perineum will be supported with counter pressure and warm compresses. This usually feels real good and helps you relax your bottom.

We never do a routine episiotomy. Instead we gently support and help to stretch the perineum. Tears rarely happen, but if they do, we are prepared to repair one. The healing of a tear is much quicker and easier than an episiotomy and most tears are smaller than a standard episiotomy.

As your baby is being born, you will be encouraged to watch, or touch. The father is allowed to help deliver if he wants. The baby is placed immediately upon your tummy at delivery. We always encourage nursing right away. If the baby needs any special attention, most of the time we can tend to his needs right there beside you. We carry emergency equipment such as oxygen and resuscitation equipment; though it is rarely needed.

We carefully watch but never rush the delivery of the placenta. Once the placenta is out, we will try to give you a moment alone for your new family to bond. We begin to prepare your herb bath, while continuing to sneak back in keeping a close eye on both you and the baby.

Once the herb bath is ready, both you and the new baby may enjoy it. Most mothers express some sigh of contentment when getting into the tub. The baby will also feel the familiar surroundings of water once again and gaze into your eyes to get acquainted with you.

While you bath, the birth assistants clean your room and remake the bed with fresh sheets. When you return to the room, we will do the newborn exam as you watch. This is when you will find out how much the baby weighs, etc. we stay around for at least 2 hours after birth or as long as we are needed. Then we leave until the next day staying in close contact by phone.

Postpartum Care

Your postpartum care actually begins the moment you give birth. We keep a close eye on everything for the first few hours after birth. But one of us will also return the second day to your home and again on the fifth day. On the fifth day, we will do the newborn screen. This is the test where baby's heel is stuck for a blood sample. This test helps to screen for very serious diseases. By the fifth day, your full milk will have come in and it's a good time to also evaluate the baby's nursing progress or answer any questions or concerns you may have about nursing.

The last postpartum visits are done in our office. The first one is in 2 weeks. The second newborn screen is also done at this time. The last postpartum visit is done 6 weeks. And we offer to schedule a pap smear which can be done around 12 weeks postpartum.