

Fort Sanders OBGYN

Welcome to your 3rd Trimester!

TDAP Vaccine

The American College of OBGYN and the CDC recommend the TDAP booster for all pregnant women. It is recommended in the 3rd trimester to give passive immunity to the newborn. It is also recommended that family members that will have significant contact with baby get this vaccine. Please check with your insurance provider regarding coverage. This will be administered around 32 weeks. If you have any questions, please discuss with your provider. You may also refer to the handout in this folder.

Kick Counts

Start counting your baby's movements! Fetal activity should be felt throughout the 3rd trimester. The quality of movement may change as the pregnancy progresses. Your baby will have their own typical "routine" that they will go through most days. There is not specific guideline for kick counts. We follow 10 fetal movements over 2 hours when mother is at rest and focused on counting. If you notice a drastic or persistent reduction in fetal movement, contact our office immediately! Count the Kicks handouts are also included in this folder.

Iron Enriched Foods

Be sure to include iron enriched foods in your diet!

These include:
Lean Red Meats
Liver
Canned Corn Beef
Whole Grain Breads
Whole Grain Cereals
Peanut Butter
Dark Green Vegetables
Beans
Dried Fruits
Eggs
Converted Brown Rice
Enriched spaghetti & macaroni
You can also refer to the handout in this folder for a list of easy ways to get more iron.

Preterm Labor (PTL)

Preterm labor includes back pain, cramping, pressure or baby "balling up" more than 6 times in 1 hour earlier than 37 weeks. The preterm labor handout in this folder will give you instructions on what to do and guidelines on actual labor.

When to call the doctor:

6 or more contractions or pain described above in 1 hour after trying all instructions on the handout.

Vaginal bleeding, sudden gush or persistent trickle of fluid from the vagina.

Temperature greater than 101 degrees.

Decreased fetal movement.

If you are concerned about your symptoms.



Please contact the office if you have questions or concerns!



1501 19th St, Suite
509 Knoxville, TN
37916



865-524-3208



www.fsobgyn.com



Counting Kicks is What You Should Do. It's Important and Easy Too!

Here's How: Starting at the 3rd trimester, begin counting.



Monitor your baby's movements with the FREE *Count the Kicks* app or web counter. Or, visit CountTheKicks.org to download a paper movement monitoring chart.



Count your baby's movements every day – preferably at the same time. Try to pick a time when your baby is normally active.



Time how long it takes your baby to get to 10 movements, and rate the strength of your baby's movements.



After a few days, you will begin to see an average length of time it takes to reach 10 movements.



Call your provider right away if you notice a change in strength of movements or how long it takes your baby to get to 10 movements.



Don't Delay!

Download the FREE *Count the Kicks* app in the app store today!

- Helps you monitor baby's movement patterns and strength of movement
- Empowers you to **SPEAK UP** if you notice a change in your baby's normal movement patterns
- Promotes early bonding
- Helps reduce anxiety
- Available in 20+ languages
- CountTheKicks.org



Start at 28 weeks!

- 1 Count baby's movements every day, once a day, near the same time each day.
- 2 Time how long it takes your baby to get to 10 movements. After a few days, you will know what is normal for your baby.
- 3 Call your provider right away if there is a change in what is normal for your baby.



Get ready to count!

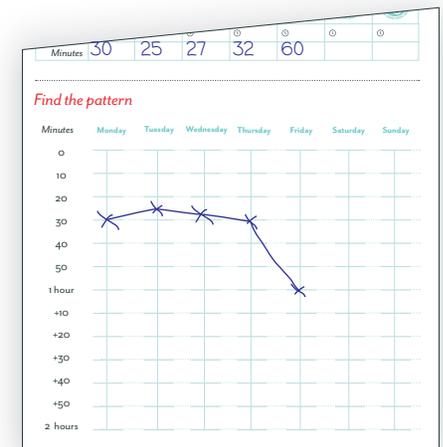
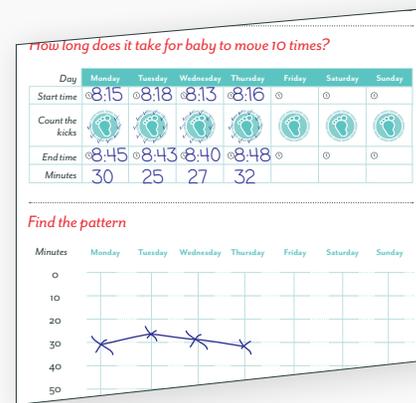
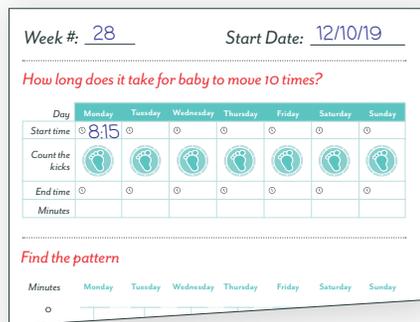


- Make sure to have a clock or watch near you.
- Have a pencil or pen near you, too.
- Lie on your side or sit with your feet up.
- Have your chart ready to mark.

Counting kicks is easy

Use one chart each week

1. Write the week of your pregnancy and the date at the start of the week at the top.
2. When you feel your baby move one time, write down the time.
3. Kicks, rolls and jabs count. *Hiccups do not count.*
4. Tick each time you feel your baby move.
5. Write down the time at the 10th movement.
6. Write how many minutes it took for your baby to move 10 times.
7. Put an X on the number of minutes it took for baby to move 10 times.
8. Draw a line between each X to help you see a pattern.
9. If the line changes, call your healthcare provider. **Call right away!**



Week #: _____

Start Date: _____

How long does it take for baby to move 10 times?

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start time	🕒	🕒	🕒	🕒	🕒	🕒	🕒
Count the kicks							
End time	🕒	🕒	🕒	🕒	🕒	🕒	🕒
Minutes							

Week #: _____

Start Date: _____

How long does it take for baby to move 10 times?

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start time	🕒	🕒	🕒	🕒	🕒	🕒	🕒
Count the kicks							
End time	🕒	🕒	🕒	🕒	🕒	🕒	🕒
Minutes							

Find the pattern

Minutes	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0							
10							
20							
30							
40							
50							
1 hour							
+10							
+20							
+30							
+40							
+50							
2 hours							

Find the pattern

Minutes	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0							
10							
20							
30							
40							
50							
1 hour							
+10							
+20							
+30							
+40							
+50							
2 hours							



Office: 865-524-3208

Start Counting Your Baby's Movements

Fetal activity should be felt throughout the third trimester of a pregnancy; however, the quality of the movement may change as the pregnancy progresses. Fetal quiet cycles or sleep cycles become longer with advancing gestational age. Also fetal movements tend to increase throughout the day with peak activity at night.

There is no consensus among obstetric authorities as to exactly how to define abnormal or decreased fetal movement. One reason for this is because of the wide variation of normal movement among healthy fetuses. Various methods of counting fetal kicks have been proposed. We as a group use the following criteria.

At least 10 fetal movements over two consecutive hours when the mother is at rest and focused on counting

It may not take two hours for you to feel 10 movements and the length of time to complete this exercise can vary each day. Oftentimes you will feel more movement after eating. Also each fetus tends to have their own typical 'routine' that they go through most days.

Your perception to fetal movement is a significant indicator of your baby's well being. If you perceive a drastic or persistent reduction in fetal movement or if you do not feel 10 movements in two hours after eating and lying down to focus on counting movements you will need to contact our office. Please plan to come in to the office or the hospital for further evaluation.

1 * 2 * 3 * 4 * 5 * 6 * 7 * 8 * 9 * 10

Pediatrician List

Black & Benton Pediatrics *Dr. Monica Black, Dr David Teaster & Dr. Nancy Phillips*

Located in Fountain City Phone: 865-687-1940

Blackmon Pediatrics *Dr. Greg Blackmon & Dr. Abigail Blackmon*

Located in Powell Phone: 865-212-6350

Boys & Girls Pediatrics *Several Doctors & locations*

Locations – Knoxville Office – Ashville Hwy Phone: 865-522-8114
Sevierville Office – Blanton Dr. Phone: 865-453-4434

Children's Faith Pediatrics *Dr. R. Glover & Dr. D. Perry*

Located in West Knoxville Phone: 865-690-8778

Children's Primary Care Center *Dr. M. Sparrow, Dr. Salwa Al- Khoury & Dr. K. Boggan*

(These Dr's must see your baby while in hospital at delivery to accept you as a patient)

Locations – Ft. Sanders area – 865-522-4153 Dutch Valley - 865-689-1122

Family Care Specialists *Several Doctors (Family Care Clinic & Emergency Care)*

1300 Old Weisgarber Rd, Knoxville, TN 37909 Phone: 865-524-2146

Farragut Pediatrics *Dr. Dennis Laug*

11220 West Point Drive Knoxville, TN 37934 Phone: 865-966-4975

Knoxville Pediatric Associates *Several Doctors & locations*

Clinch Ave: 865-525-0228 Weisgarber: 865-588-3525 Cross Park: 865-690-116
Farragut: 865-671-2595 Alcoa: 865-982-7396

Pediatric Clinic *Several Doctors & locations*

Karns, Seymour & West Knoxville Phone: 865-470-8844

Pediatric Consultants North *Several Doctors*

Tech Center off Central Ave & Merchants And 1930 Alcoa Hwy #145 Phone: 865-687-2000

Knoxville Neonatal Associates – Children's Hospital

These Doctors will see an infant while in hospital if your pediatrician does not come to Ft. Sanders Regional. The nursery nurse will contact the group to let them know that your baby needs to be seen.



Easy ways of getting more iron

Lean Red Meats – Hamburgers, Beef stew, Meatballs, Spaghetti w/meat sauce, Chili.

Liver – Pork, Beef, Chicken or Liverwurst

Canned corn beef – sandwiches or hash

Whole Grain Breads – Whole wheat, Rye, Oatmeal, multigrain, Bran or Oat muffins

Whole Grain Cereals – Instant oatmeal, Whole Wheat Cereals, Raisin Bran

Peanut Butter – Sandwiches, crackers, on toast or celery sticks

Dark Green Vegetables – Broccoli, green beans, romaine lettuce, collards & mustard greens, peas, spinach, kale Bok Choy

Beans – Baked, kidney, refried, black, split pea or bean soup & tofu

Dried Fruits – Raisins as a snack or in muffins or cereal. Prunes stewed or as a snack

Eggs – Hard or soft boiled. Egg salad or potato salad

Converted Brown Rice – This has more iron than plain rice

Enriched spaghetti & macaroni – check label to make sure iron is added



From the American College of Obstetricians & Gynecologists

A button with a light blue border and a dark blue speech bubble icon containing three white dots, followed by the text 'Ask ACOG' in a dark blue, sans-serif font.

Ask ACOG

Should I get the RSV vaccine during pregnancy?

RSV, or respiratory syncytial virus, is a virus that spreads in the fall and winter. RSV can be [dangerous for babies and young children](#). It is the leading cause of hospitalization among infants in the United States.

ACOG recommends the Pfizer RSV vaccine if you are 32 to 36 weeks pregnant from September to January. The vaccine creates antibodies that pass to your fetus. This means the baby will have some antibodies to protect them from RSV for the first 6 months after birth.

There are multiple RSV vaccines approved by the U.S. Food and Drug Administration (FDA). The only RSV vaccine approved by the FDA for use in pregnancy is the one made by Pfizer. It is called Abrysvo.

The RSV vaccine is one of two new options for protecting babies during RSV season. There is also an option to give babies an injection called nirsevimab. Nirsevimab contains lab-made antibodies that protect against RSV. It is not a vaccine.

If this is your first pregnancy, you should get the RSV vaccine. If you got the RSV vaccine during your last pregnancy, this time you won't need one. But your baby should get nirsevimab.

You can get the Pfizer RSV vaccine at the same time as other vaccines recommended during pregnancy. Common side effects of the RSV vaccine include arm pain, headache, muscle pain, and nausea, similar to other vaccine side effects. Side effects are normal and not a cause for concern.

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About ACOG

Disclaimer

Contact Us

How to Find an Ob-Gyn



Tdap (Tetanus, Diphtheria, Pertussis) Vaccine: *What You Need to Know*

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1. Why get vaccinated?

Tdap vaccine can prevent **tetanus, diphtheria, and pertussis**.

Diphtheria and pertussis spread from person to person. Tetanus enters the body through cuts or wounds.

- **TETANUS (T)** causes painful stiffening of the muscles. Tetanus can lead to serious health problems, including being unable to open the mouth, having trouble swallowing and breathing, or death.
- **DIPHTHERIA (D)** can lead to difficulty breathing, heart failure, paralysis, or death.
- **PERTUSSIS (aP)**, also known as “whooping cough,” can cause uncontrollable, violent coughing that makes it hard to breathe, eat, or drink. Pertussis can be extremely serious especially in babies and young children, causing pneumonia, convulsions, brain damage, or death. In teens and adults, it can cause weight loss, loss of bladder control, passing out, and rib fractures from severe coughing.

2. Tdap vaccine

Tdap is only for children 7 years and older, adolescents, and adults.

Adolescents should receive a single dose of Tdap, preferably at age 11 or 12 years.

Pregnant women should get a dose of Tdap during every pregnancy, preferably during the early part of the third trimester, to help protect the newborn from pertussis. Infants are most at risk for severe, life-threatening complications from pertussis.

Adults who have never received Tdap should get a dose of Tdap.

Also, **adults should receive a booster dose of either Tdap or Td** (a different vaccine that protects against tetanus and diphtheria but not pertussis) **every 10 years**, or after 5 years in the case of a severe or dirty wound or burn.

Tdap may be given at the same time as other vaccines.

3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of any vaccine that protects against tetanus, diphtheria, or pertussis**, or has any **severe, life-threatening allergies**
- Has had a **coma, decreased level of consciousness, or prolonged seizures within 7 days after a previous dose of any pertussis vaccine (DTP, DTaP, or Tdap)**
- Has **seizures or another nervous system problem**
- Has ever had **Guillain-Barré Syndrome** (also called “GBS”)
- Has had **severe pain or swelling after a previous dose of any vaccine that protects against tetanus or diphtheria**

In some cases, your health care provider may decide to postpone Tdap vaccination until a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting Tdap vaccine.

Your health care provider can give you more information.



U.S. CENTERS FOR DISEASE
CONTROL AND PREVENTION

4. Risks of a vaccine reaction

- Pain, redness, or swelling where the shot was given, mild fever, headache, feeling tired, and nausea, vomiting, diarrhea, or stomachache sometimes happen after Tdap vaccination.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

5. What if there is a serious problem?

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call **9-1-1** and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

6. The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at www.hrsa.gov/vaccinecompensation or call **1-800-338-2382** to learn about the program and about filing a claim.

7. How can I learn more?

- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at www.fda.gov/vaccines-blood-biologics/vaccines.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vaccines.



What is COVID-19?

COVID-19 is an illness that affects the lungs and breathing. It is caused by a type of virus called coronavirus. Symptoms include fever, cough, sore throat, and trouble breathing. COVID-19 may also cause stomach problems, such as nausea and diarrhea, and a loss of your sense of smell or taste. Symptoms may appear 2 to 14 days after you are exposed to the virus. Some people with COVID-19 may have no symptoms or only mild symptoms.

I'm pregnant. How can COVID-19 affect me?

Reports and research show that you have a higher risk of more severe illness from COVID-19 than people who are not pregnant. You may have an even higher risk of severe illness if you

- have certain health conditions, such as obesity and gestational diabetes
- are Black or Hispanic, because women of color are more likely to face social, health, and economic inequities that put them at greater risk of illness

Reports also show that, compared to pregnant women without COVID-19, you

- may be more likely to have pregnancy complications related to high blood pressure, heavy postpartum bleeding, and infections
- may have an increased risk of coagulopathy (a blood clotting disorder)

How can COVID-19 affect my fetus?

Reports of COVID-19 infection during pregnancy have shown the following:

- There is an increased risk of preterm birth.
- There may be an increased risk of stillbirth.

How can COVID-19 affect my newborn?

Reports have shown the following:

- In babies born to women who had COVID-19 during pregnancy, there is an increased risk that the newborn will need care in a neonatal intensive care unit (NICU).
- A newborn can get the virus if they are exposed to it.

Should I get a COVID-19 vaccine?

Yes, you should get a COVID-19 vaccine. The American College of Obstetricians and Gynecologists (ACOG) strongly recommends vaccination if you are pregnant, breastfeeding, or planning to get pregnant. The vaccines are effective at preventing infection, severe illness, and death from COVID-19, including from new variants.

Getting a vaccine during pregnancy could also help your newborn. When you get vaccinated, the antibodies made by your body may be passed to your fetus. These antibodies may help protect your baby from the virus after birth.

Are COVID-19 vaccines safe?

Yes, studies have shown that COVID-19 vaccines are safe before, during, and after pregnancy. Scientists have compared pregnancies with and without COVID-19 vaccines. The studies show that the two groups have similar pregnancy outcomes. Data do not show any safety concerns.

Data also show that breastfeeding after vaccination is safe for the baby. And COVID-19 vaccines do not affect your fertility.

How else can I protect myself from the virus and stay healthy?

The best way to protect yourself is to get a COVID-19 vaccine. You should also

- follow guidelines from health officials for when to wear a mask and take other steps to prevent infection
- keep your prenatal and postpartum care appointments
- talk with an ob-gyn or other health care professional if you have any questions about your health or COVID-19
- call 911 or go to the hospital right away if you need emergency health care

What should I do if I'm pregnant and have COVID-19?

If you think you may have been exposed to COVID-19 or if you have symptoms, you should take a COVID-19 test. You can also call your ob-gyn for advice.

If you have COVID-19, talk with your ob-gyn. Your ob-gyn may recommend medication to help treat COVID-19, depending on your symptoms and your risk for severe illness.

If you have any of these symptoms, call 911 or go to the hospital right away:

- Trouble breathing or shortness of breath (more than what has been normal for you during pregnancy)
- Ongoing pain or pressure in the chest
- Sudden confusion
- Being unable to respond to others
- Blue lips or face

What will happen during labor and delivery if I have COVID-19?

While you are in the hospital or birth center, you should wear a mask if you have COVID-19. But when you are pushing during labor, wearing a mask may be difficult. For this reason, your health care team should wear masks or other protective breathing equipment. They may also take other steps to reduce the risk of spreading the virus, including wearing goggles or face shields.

Surgical Dressing Application Instructions

The surgical dressings delivered to you have been prescribed by your physician. These were chosen to maximize your healing potential. It is important that you use each product as instructed.

You have received collagen dressings to be applied to your wound as your primary dressing. Also provided are secondary dressings to apply as a cover over your primary dressing. Be sure to follow your physician's instructions on the frequency of dressing changes.

APPLICATION PROCESS:

- 1 Remove prior dressings entirely and discard.**
Each dressing is designed for one-time use only. Do not reuse any dressing.
- 2 Rinse the wound. Sterile saline solution or water is recommended, but warm water may be used in its place.**
- 3 Pat the wound with a clean towel to remove excess fluids/water.**
- 4 Apply the collagen dressing or powder as a primary dressing.**
If you have received collagen dressings, you may cut them to best fit your wound. Both sides of the dressing are designed for coverage, so you may apply either side. If you have received collagen powder, use one packet per wound.
- 5 Cover the primary (collagen) dressing with the silicone secondary dressing.**
If the silicone secondary dressing has an adhesive edge, peel back a corner of the folded release paper and center the contact layer (gauze pad) over the primary (collagen) dressing. Anchor the exposed adhesive edge to your skin while removing the remaining release paper. Gently smooth all edges onto your skin.
- 6 Repeat the application process each subsequent day until the wound dressings are exhausted, or your wound has healed.**

Our priority is to ensure you are supported every step of the way.



INSTRUCTIONAL VIDEOS

Visit femmeGen.health/how-to-use to view instructional videos of how to apply your surgical dressings.

CUSTOMER CARE

If you have any questions, please call FemmeGen's dedicated customer service department at 937-452-6115.



PRECAUTIONS:

Do not use if you have any collagen or bovine sensitivities