

Obstetrics & Gynecology

Office Hours: 8am-5pm, M-F

(360) 882-2778 (TVC-APPT)

tvc.org/specialties/ob-gyn



6 sites to serve you:

87th Avenue	700 NE 87 th Ave., Vancouver, WA 98664
Salmon Creek	2525 NE 139 th St., Vancouver, WA 98686
Columbia Tech Center	501 SE 172 nd Ave., Vancouver, WA 98684
Battle Ground	2005 W. Main St, Battle Ground, WA 98604
Washougal	291 C. St, Washougal, WA 98671
Centering Care	8614 E. Mill Plain Blvd, Vancouver, WA 98664 Mill Plain Medical Building Suite 210

The Vancouver Clinic OB/GYN after hours phone number for non-life threatening urgent issues: (360) 397-3500.

For life threatening emergencies, call 911.

During your pregnancy, please call (360) 882-2778 for appointments, questions or concerns, routine lab work or prescription refills.

Doctors		MFM
Anna Bell-Hibbs, MD	Jennifer Mahnke, MD	Sally Segel, MD
Carol Bunten, MD	Katlyn Masarie, MD	
Jacob Calvert, MD	Elizabeth Morgan, MD	Certified Nurse Midwives
Wendy Draper, MD	Keren Rosenblum, MD	Lauren Andronici, CNM
Allison Duncan, MD	Miriam Ruth, MD	Irene Beach, CNM
Anna Eckhardt, MD	Alfred Seekamp, MD	Kate Fields, CNM
William Herzig, MD	Stacey Trueworthy, MD	Noelle Lefitz, CNM
Flynn La Rochelle, MD		Melissa Mack, CNM
Robyn Lew, MD		Christine Weinmeister, CNM
		Jasmin Whalen, CNM

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Nausea During Pregnancy

Morning sickness is actually the result of the influence of increased amounts of estrogen and progesterone produced by the ovaries early in pregnancy. Because of the increasing levels of these hormones, the stomach increases the production of gastric juices. At the same time, the bowel slows down in its ability to empty the contents of the stomach. This then causes a feeling of nausea, and in some cases, vomiting.

Nausea and vomiting often occur during the early months of pregnancy. Although it's frequently referred to as "morning sickness" it can occur any time of the day or night. Usually it disappears after the third month.

To help prevent nausea:

- Eat toast or crackers before getting out of bed or when symptoms develop
- Eat small amounts of food frequently throughout the day - especially high protein food such as yogurt, cottage cheese, eggs, lean protein, cheese, nuts, meat, fruit and vegetables
- Carry a small packet of protein with you (i.e. cheese and crackers)
- Avoid spicy or fatty foods
- Eliminate pills with iron
- Stay hydrated; drinking mainly between meals rather than with your meals
- Try taking your prenatal vitamin with meals or at bedtime. If unable to tolerate the prenatal vitamin, you can substitute with a children's chewable vitamin and/or plain folic acid 400mcg daily until the nausea subsides.

Remedies to try if nausea persists:

- Doxylamine (active ingredient found in some sleep aids) 1/2 tablet along with a Vitamin B6 50mg tablet every 6 hours.
- Carbonated ginger ale or ginger capsules
- Papaya juice or papaya enzyme tablets
- Spearmint, raspberry, or peppermint tea
- "Sea bands", an acupuncture wrist band used for motion sickness, found in pharmacies

If symptoms continue, please contact your OB provider's office at (360) 882-2778 for further triage and a possible prescription for Phenergan or Reglan. Zofran is an additional option if the above remedies are tried and fail.

Please contact your OB provider's office, (360) 882-2778, if you develop the following symptoms of concern:

- Unable to keep food or fluids down for 24 hours
- Not urinating at least every 4 hours
- Develop significantly chapped lip
- Feel light headed or dizzy

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Common Discomforts In Pregnancy

The changes that occur in a woman's body during pregnancy are often accompanied by minor discomforts. With proper diet, prenatal exercise and rest, many of these discomforts can be minimized or prevented. You may have some or all of these discomforts. If you do, try to deal with them without using medications by following the suggestions listed under "self help."

Do not take any medication that is not on this list unless approved by your provider. Contact the nurse at 360-882-2778 if you feel you need medical advice or if the condition does not improve after 2-3 days.

See the following chart for help and advice.

Symptoms	Possible Cause	Self Help	Avoid
Nausea and/or Vomiting	Hormonal changes, possible low blood sugar.	Eat six small meals daily. Try crackers before rising. Avoid spicy foods. Increased carbohydrates and protein. Try half a Doxylamine tablet (active ingredient found in some sleep aids) and 50mg of vitamin B6 every six hours.	Don't skip meals or use over-the-counter medication.
Pelvic congestion	Increased circulation to the pelvic area.	Pelvic floor exercises or pelvic rocking.	No creams or douches.
Stuffy and/or drippy nose	Hormonal changes or cold/virus symptoms.	Rest, increase fluids. Use steam or a cool mist vaporizer. Saline nose drops. You may try Afrin nasal spray for no more than 3 days. Plain Robitussin (DM) for cough. Sudafed (after 14wks gestation), Benadryl, Dimetapp or Chlorpheniramine Maleate	No other nasal sprays or drugs. Do not use Afrin if any history of high blood pressure.
Breast tenderness	Hormones preparing breasts for lactation.	Good support bra 24 hours a day.	
Minor pain or fever		Plain Tylenol, 1 or 2 tablets, every 4 to 6 hours.	No aspirin, Aleve or ibuprofen (Advil, Nuprin).
Headache	Low blood sugar, dehydration or hormonal changes	Raise blood sugar with food. Drink plenty of fluids. Take a nap. You may try Tylenol (acetaminophen)	
Diarrhea	Hormonal changes.	Change diet to include white bread, bananas, and apples. Delete dairy products during acute diarrhea.	No other medication. Ask your provider's office.
Groin pains	Stretching of round ligaments by enlarging uterus.	Avoid turning sharply at the waist or stretching legs. Stroke groin upwards and pull knees up. Take a warm bath.	
Increased skin pigmentation	Hormonal changes.	Changes are temporary. Minimize increase by avoiding excessive exposure to the sun. Use sun block.	No fade creams.

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Stretchmarks	Skin stretching beyond elasticity.	Hand cream or body lotion to help ease itching.	
Heartburn and indigestion	Hormonal changes and slowed down digestion. Uterus pushing stomach up into smaller space.	Small, frequent meals. Do not lie down after eating. Before eating do knee chest position and extended reach. Sleep with head elevated. You may try Maalox Plus, Mylanta, Riopan, Tums, Rolaids, Calcitrel, Gaviscon.	No baking soda, avoid spicy foods, no caffeine (coffee, tea, chocolate, colas). No smoking.
Constipation	Hormonal changes and slowed down digestion, pressure on bowels from uterus.	Increase liquids, bulk, and fiber in diet (bran, fresh fruits and vegetables). Next try 1 tablespoon a day of Metamucil, Colace or Fibercon to increase fiber intake. Call 360-882-2778 if persistent.	No laxative or enemas, no mineral or castor oils.
Varicose Veins	Pressure of uterus on veins in groin. Increased blood volume.	Wear maternity support hose. Elevate legs and take warm bath to ease aching. Use plain Tylenol. Discuss with provider at prenatal visit.	No standing or sitting for long periods. No knee-hi stockings.
Hemorrhoids	Pressure of uterus on veins in groin.	Prevent constipation- see above. Do Kegels exercises, try warm bath, Procto-foam, Anusol, Tucks or Preparation H.	
Leg cramps	Calcium deficiency and decreased circulation to legs.	Prevent poor body mechanics and posture. Don't lift heavy objects. Pelvic tilt and bridging, counter-pressure massage. Plain Tylenol is okay. Call 360-882-2778 if persistent.	
Shortness of Breath	Enlarged uterus interferes with diaphragm breathing.	Elevate rib cage by sitting or lying with arms up. Use two pillows when sleeping.	Avoid lying flat.

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Signs for Concern

- Severe, continuous headache
- Sudden, increased swelling of the face, fingers or feet, with sudden weight gain
- Visual disturbances (floaters, sparkles, spots in vision)
- Vaginal bleeding or vaginal discharge which causes itching, soreness or a foul odor
- Temperature above 100 degrees, chills
- A gush or leak of fluid from the vagina
- Decreased, absence or marked increase in fetal movements over a 12 hour period
- Regular uterine contractions or a nagging backache before 37 weeks
- Abdominal pain which does not go away
- Decreased urine output, despite adequate fluid intake
- Persistent vomiting or diarrhea
- Pain or burning when passing urine
- Painful, hard veins in legs or elsewhere

Warning Signs of Premature Labor

- Four or more uterine contractions in one hour
- A feeling as though the baby is “pushing down”
- Menstrual-like cramps, or low, dull backache that comes and goes, or is constant
- Loose or watery bowel movements

If you have any signs of premature labor, drink a quart of water, lie quietly on your left side. If contractions do not stop, call your physician or midwife.

**After hours paging service for non-life threatening urgent/emergent issues:
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Safety Issues in Pregnancy

Seat Belts Pregnant women should wear both the lap and shoulder parts of the seat belt. The lap belt should fit snug and rest low and under the belly.

Safe Gun Storage is a must for all households. All guns should be unloaded, locked in storage away from ammunition and out of the reach of children.

Cats should have litter boxes cleaned by someone other than a pregnant woman. Toxoplasmosis is an infection, a spore that can be found in litter boxes. You can get infected and pass this on to your baby during pregnancy. It's not easy to get toxoplasmosis, but you should be cautious. Wear rubber gloves if you are the only one who can change the litter box, wear garden gloves when working in flower beds and change the litter box daily, since it takes more than one day for the disease to become contagious. Wash your hands after yard work and litter duty.

Fish and Seafood may increase exposure to mercury which has contaminated our rivers and bodies of water. Mercury is not good for your growing baby. The EPA recommends no more than twelve total ounces of fish per week. Regular tuna is low in mercury. White albacore tuna and fresh tuna or fish caught in a river should be limited to six ounces per week with no other fish that week. Do not eat **Shark, Tilefish, Swordfish or King Mackerel**. At this time, we do not have specific information on shrimp, lobster, crab or clams.

Listeria is a bacteria which can make you and your baby ill. It is found in raw meat, non-pasteurized milk and non-pasteurized cheese (usually soft cheese like Mexican style cheese or feta or brie). Uncooked lunch meat, deli meat or hot dogs may also have the bacteria in them, but are okay to eat if cooked.

Overheating is like running a fever. Work environments, exercise, hot tubs or baths can raise your body temperature excessively. Be sure you are well hydrated and avoid prolonged heat exposure.

Exercising can be a healthy activity during pregnancy, but it is not the time to start a new exercise regimen without consulting your provider first. Certain exercises such as sit-ups or contact sports should be avoided. Your target heart rate should not exceed 140 beats per minute.

Dental Care is safe during pregnancy when your dentist is aware you are pregnant. If your dentist would like a letter from our office outlining what is and is not preferred during pregnancy, please have your dentist contact our office and we can fax a dental letter to them.

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Knowing How Weight Gain Can Affect Your Pregnancy

Many people have sensitivity about their weight and what it means in regard to their health. During your pregnancy this information is important to track. As part of your care, each visit you will be asked to get your current weight. We use this information to track and compare it to your goal that is set. Here is how we will figure out how much weight you should gain during your pregnancy. *Please note this is only in relation to a single pregnancy. If carrying more than one baby, your preferred weight will be determined by your provider.*

The first step is calculating your **Body Mass Index (BMI)**. This calculates your body frame and the amount of muscle mass you have. Once you have your BMI, you will be able to understand if your weight is healthy for your height and build.

Your BMI is _____.

In your pregnancy, if you have a BMI of less than 19 this means that you should gain more than usual for this pregnancy. This will help to make sure that your baby is a normal weight and not too small.

If you have a BMI of more than 25 this usually means that you should gain less weight during this pregnancy than average.

The Institute of Medicine has recommendations about how much weight women should gain during their pregnancies. The following is a basic summary.

- BMI less than 19 should gain about 28-40 pounds
- BMI between 19-25 should gain about 25-35 pounds
- BMI between 26-29 should gain about 15-25 pounds
- BMI between 30-39 should gain less than 20 pounds
- BMI above 40 should gain between 10-20 pounds

This information is important to you. If you gain the recommended amount of weight during your pregnancy, you have fewer complications during your pregnancy and birth. You will have less of a chance that your baby will not be too big or too small.

Recent studies show that women who gain too much weight during their pregnancy have larger babies which can require them to have a cesarean section (surgical birth).

In addition, these women have a more difficult time losing weight and have an even higher BMI than before pregnancy.

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Risks During Pregnancy With A BMI Over 25

If you start your pregnancy higher than normal (especially if it is over 30), here is a list of complications that can occur in your pregnancy:

- Miscarriage
- Congenital birth defects
- Preterm labor, larger than normal baby
- High blood pressure
- Diabetes
- Stillbirth
- Complications from anesthesia, Cesarean section
- Poor healing of wounds

What You Can Do Towards A Healthy Pregnancy and Baby

Meet with the dietician early in pregnancy if your BMI is high

Maintain a healthy style of eating.

Keep track of your weight gain at each visit-this will be graphed in your Electronic Health Medical Record.

Keep your weight gain within the normal range for your BMI

Exercise several times a week. Simply walking briskly 30-60 minutes per day makes a difference to your health. This also helps to keep your blood sugar in the normal range.

Keep a daily log of all the food that you eat and your exercise.

Make sure you talk to your provider if you have any questions or concerns.

Your Provider will discuss your delivery plan with you.

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Circumcisions

The Vancouver Clinic's 2016 surgical fee for circumcision is \$309.00. This is the doctor's charge and does not include any hospital charges.

Please contact Southwest Washington Medical Center at (360) 514-2122 or Legacy Salmon Creek at (360) 487-1080 for their current charges and payment policy.

State insurance and some private insurance policies do not cover this elective procedure. If not covered by your insurance, you will need to pay this surgical fee of \$309.00 in full **PRIOR** to delivery or the procedure will not be done in the hospital.

If you are not sure if this is a covered benefit or if your insurance company covers this charge, please feel free to contact one of our financial counselors:

- Tia Matthews (360) 397-3604
- Hope Lawrence (360) 397-3605

Tia or Hope can assist you with questions about your coverage and/or making payment arrangements.

If you have any questions regarding this procedure, please ask our nursing staff, your doctor or midwife.

The Vancouver Clinic also has three doctors who perform circumcision in the clinic:

- Michael Dansie, MD (SC Family Medicine)
- Kevin Hatcher-Ross, MD (87th Pediatrics)
- Tetyana Odarich, MD (87th Pediatrics)

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Pediatric and Family Practice Providers

Appointments and Advice: (360) 882-2778

***Please contact your insurance carrier to confirm in-network providers under your plan.**

<p style="text-align: center;">87th Avenue 700 NE 87th Ave Vancouver, WA 98664</p> <p style="text-align: center;">Pediatrics, Suite 130</p> <p>Jennifer Austin, MD Andrew Friedman, MD Peter Eisenfeld, MD Elbieta Zdandowicz, MD Allison Meade, PNP Valerie Weiss, MD Laurie Metzger, MD Phillip McGuinness, MD Katherine Vaughn, MD Rachel Hart, PA-C Christina Padden, PNP Kevin Hatcher-Ross, MD</p> <p style="text-align: center;">Family Medicine, Suite 260</p> <p>Ileana Bembenek, MD Michael Paull, MD Cameron Coffee, PA-C Yoon Park, MD Erik Sasovetz, DO Tetyana Odarich, MD</p>	<p style="text-align: center;">Columbia Tech Center 501 SE 172nd Ave Vancouver, WA 98684</p> <p style="text-align: center;">Pediatrics, Suite 150</p> <p>Megan Baker, MD David McWherter, NP Devon Ebbing, MD Jennifer Lyons, MD Stephen Miller, MD</p> <p style="text-align: center;">Family Medicine, Suite 130</p> <p>Rica Paull, MD Steven Koh, MD Emily Brooks, PA-C Kimberly Drynan, FNP George (Bill) Supplitt, MD Jessica Holzman, MD (<i>CTC & Washougal</i>) Heather Nash, FNP (<i>Washougal only</i>) Elizabeth Walton, FNP (<i>Washougal only</i>) Katherine Pearson, DO (<i>Washougal only</i>)</p>
<p style="text-align: center;">Salmon Creek 2525 NE 139th Street Vancouver, WA 98686</p> <p style="text-align: center;">Pediatrics, Suite 110</p> <p>Megan Spohr, MD Calvin Chen, MD Monica Lucht, MD Tracy Williams, MD Natalya Nadal, MD Josephine Wang, MD</p> <p style="text-align: center;">Family Medicine, Suite 130</p> <p>Michael Dansie, MD Cynthia Ashbaugh, FNP Stephen Greaney, MD Duy Tran, MD Inna Velychko, MD Siyavash Mohandessi, MD</p>	<p style="text-align: center;">Battle Ground 2005 W Main Street Battle Ground, WA 98604</p> <p style="text-align: center;">Pediatrics, Suite 120</p> <p>Juan Rivera, MD Courtney White, MD</p> <p style="text-align: center;">Family Medicine, Suite 110</p> <p>Eric Doerfler, MD Ron Holmes, PA-C Sandy Niehm, FNP Andrea Velat, FNP Mark Weed, DO</p>