



Let's talk motherhood

A guide to your first trimester

Adapted from the American College of
Obstetricians and Gynecologists.

GEHA[®]

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Maternity resources

There is a wealth of knowledge available to guide you throughout your pregnancy. There are numerous books, websites and even apps. It can be easy to get lost (or misinformed) in this deluge of information. We encourage you to speak to your doctor for reference materials that have worked for other patients. Customer reviews for books and apps can be another guidepost. Visit [healthline.com/Health/Best-Pregnancy-Apps](https://www.healthline.com/Health/Best-Pregnancy-Apps) for a good overview of pregnancy apps. Trust your instincts, see what others have said and talk with your doctor.

Your first prenatal care appointment



You should **schedule** your first prenatal care appointment **as soon as possible** after becoming pregnant.

Get rewarded for your first doctor visit

A first-trimester doctor visit is the foundation for effective prenatal care and can help ensure you and your baby are in good health in the important early stages of pregnancy. Not only does this visit lay the groundwork for a healthy pregnancy, but you'll automatically earn **\$150** in Wellness Pays rewards for visiting your physician during the first trimester.

Wellness Pays is our Elevate and Elevate Plus rewards program, designed to be simple by rewarding you for activities you're probably already doing. When you complete a healthy behavior like your annual physical or flu shot, you'll automatically receive a Wellness Pays rewards card in the mail.

This card can be used during checkout for qualified medical expenses such as copays and medical, dental and vision expenses at many major retailers. As you continue completing rewardable activities, funds will be loaded onto your rewards card. For more information on Wellness Pays, visit geha.com/WellnessPays

Our digital platform powered by Rally® gives you even more ways to earn rewards, including health surveys, coaching and missions. If you haven't already registered with our digital health platform, powered by Rally, get started by visiting geha.com/RallyRegister

YOUR PREGNANCY, WEEK BY WEEK

- WEEK 01** Egg and sperm unite to form a single-cell zygote. The zygote is fertilized and divides into two cells, which continue to divide.
- WEEK 02** A cluster of rapidly dividing cells, called a blastocyst, enters the uterus and implants in the uterine lining.
- WEEK 03** Your body's increased levels of estrogen and progesterone stop your period and trigger growth of the placenta.
- WEEK 04** Some blastocyst cells develop into the embryo, while others develop into the placenta, the baby's life support system.
- WEEK 05** The neural tube, heart and lungs are developing. The baby looks like a curled tube and is about a quarter of an inch long.
- WEEK 06** The baby's heartbeat can be heard via ultrasound exam. Nose, mouth, ears, and webbed fingers and toes begin to form.
- WEEK 07** Bones are forming, but not yet hardened. Genitals and eyelids begin to develop.
- WEEK 08** The baby is about half an inch long. This week marks the end of embryonic development. After this, the baby is a fetus.
- WEEK 09** Intestines and tooth buds begin to form. The backbone is soft and can flex.
- WEEK 10** Fingers and toes continue to grow and start to develop nails.
- WEEK 11** Bones start to harden and muscles develop. The baby's skin is still thin.
- WEEK 12** The baby is about two inches long and can move on his or her own, but you will not be able to feel it yet.
- WEEK 13** Organs are fully formed. Hormones are being made. Ultrasound exams may show the baby making breath-like motions, swallowing amniotic fluid.

Managing physical discomforts

Morning sickness

Despite the name, morning sickness can occur at any time of day. For most women, nausea and vomiting begins between weeks four and nine and generally resolves by week 16 of pregnancy. Unfortunately, for some women morning sickness can last throughout pregnancy. Around 15% of pregnant woman do not experience nausea and vomiting. If this is you, don't worry! Not having morning sickness is also normal.

Finding relief

- ▶ Keep crackers by your bed. When you wake in the morning, avoid moving around on an empty stomach.
- ▶ Avoid strong or bothersome smells. They can trigger nausea.
- ▶ Drink plenty of water. During the first few months of pregnancy, your body needs even more water than usual. Plus, dehydration can worsen nausea.
- ▶ Eat small meals frequently to avoid an empty stomach.
- ▶ Don't forget your multivitamin. It can help ward off severe nausea and vomiting.
- ▶ Eat bland foods like bananas, rice, applesauce, toast and tea. These foods are easy to digest and are less likely to upset your stomach. Try to add a source of protein to each of your meals, for example, dairy foods like yogurt, nuts or protein powders.
- ▶ Eat (or drink) some ginger. Ginger tea, ginger candies and freshly grated ginger can offer some relief for a queasy stomach.

Is your nausea extreme?

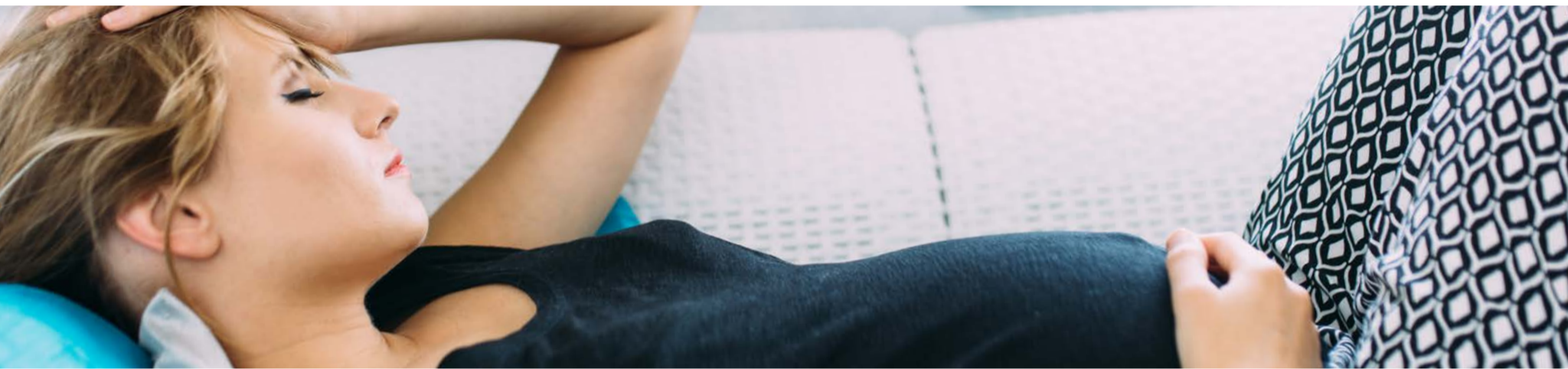
Up to 2% of pregnant women suffer from **hyperemesis gravidarum**, a form of severe nausea and vomiting. This condition can be serious if not promptly and properly treated.

Contact your doctor if you experience these symptoms:

- ▶ Urinating less than three times a day, or if you have urine that is dark and odorous
- ▶ Not gaining weight or you have lost five or more pounds over a one to two week period
- ▶ Unable to keep down food or fluid for 24 hours

Fatigue

Pregnancy puts a significant strain on your body and causes increased hormone levels and increased metabolism. As a result, you might feel completely exhausted, especially during your first trimester. It's important to slow down, take naps or go to bed earlier than usual to help alleviate your fatigue. Maintaining a healthy diet and exercise regimen can also help pump up your energy levels. For most women, extreme fatigue begins to go away by the fourth month of pregnancy.



Acne and skin changes

Pregnancy often brings on acne breakouts, even if you have never experienced acne before. To protect and treat your skin:

- ▶ Wash your face twice a day with a mild cleanser
- ▶ Choose oil-free cosmetics
- ▶ Avoid picking or squeezing your skin

If you use either prescription or over-the-counter oral or topical acne medications, be sure to check with your doctor to ensure that they are safe for use during pregnancy.

During pregnancy, your skin produces more melanin than usual. **Melanin** is what gives color to your skin. Increased melanin levels can cause chloasma in pregnant women.

Chloasma causes brown patches to appear on your skin around your nose, cheeks and forehead. Sun exposure can worsen the effects, so it is important to wear sunscreen and limit your time in direct sunlight. Increased melanin levels can also cause the appearance of the linea nigra, a dark line that runs from the navel to the pubic region. Both chloasma and linea nigra usually fade on their own after you have your baby.

Your skin might also develop stretch marks as your pregnancy progresses. **Stretch marks** are caused by changes to the elastic supportive tissue in your skin. Keep your skin well-moisturized as your stomach grows to reduce discomfort. Some stretch marks will fade on their own after the baby is born.

Breast changes

Your breasts will begin changing early in your pregnancy to prepare for feeding an infant. These changes might include:

- ▶ Darkening and enlargement of your nipples and areolas
- ▶ An increase in the number of milk glands in your breasts
- ▶ Increased breast size and weight
- ▶ Soreness

It's more important than ever to drink lots of water and eat plenty of dietary fiber.

Constipation

Your digestive system will function slower during pregnancy as a result of your body's increased hormone levels. This slow digestive function, as well as the iron in prenatal vitamins, may result in constipation. To relieve your symptoms, drink lots of water and eat plenty of dietary fiber in the form of fruits, vegetables and whole grains.



Nutrition, weight gain and exercise

Iron

Iron helps your body make the extra blood that you and your growing baby require during pregnancy. Pregnant women need 27 mg of iron daily. Prenatal vitamins usually contain the necessary level of iron, but you can also absorb iron from food sources like red meat, poultry and fish, or vegetables and legumes.

Calories

The old adage that pregnant women are “eating for two” isn’t true. If you are a normal weight before pregnancy and are carrying only one child, you only need to eat about 300 extra calories each day to provide your baby with necessary nutrients.

Consider the healthy snack options below, which put into perspective what approximately 300 calories really look like.

The old adage that pregnant women are eating for two isn’t true.



A medium banana with two tablespoons of peanut butter



1/2 cup of dried fruits and nuts



1/2 an avocado on a slice of whole-grain toast



Two hard-boiled eggs with a serving of whole-grain crackers



2 ounces hummus, one pita and 1 cup of raw vegetables



1 1/2 cups cottage cheese with a cup of berries

Source: thebump.com



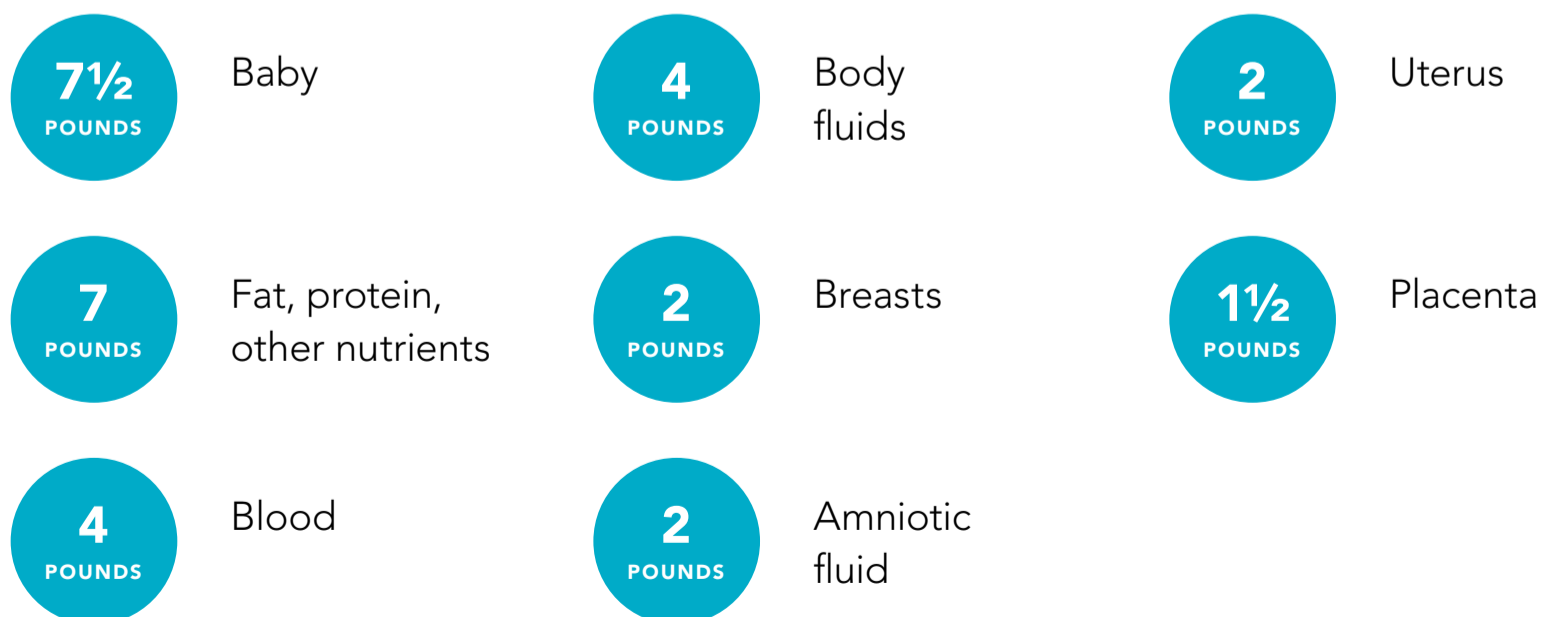
Weight gain

Gaining weight is normal during pregnancy. You should be aware and speak with your doctor if you are gaining too little or too much weight. How much weight you should gain depends on your body mass index (BMI) before you become pregnant.

Healthy weight gain guidelines

BMI before pregnancy	Recommended total weight gain
Less than 18.5 (underweight)	28 - 40 pounds
18.5 - 24.9 (normal weight)	25 - 35 pounds
25 - 29.9 (overweight)	15 - 25 pounds
More than 30 (obese)	11 - 20 pounds

Where does your baby weight come from?



Exercise

When you're feeling fatigued in your first months of pregnancy, it can be hard to find the motivation to get moving and exercising. But staying active during pregnancy can have lots of positive impacts on your overall health, including elevating your mood; reducing backache, constipation and swelling; helping you sleep better; and improving your muscle tone and strength.

Talk to your doctor before you begin an exercise routine. The changes in your body will affect the type of exercise you do. Pregnancy can make your joints more prone to injury, affect your balance and increase your heart rate.

It is important to pay attention to your body's signals when exercising during pregnancy. However, unless your doctor recommends otherwise, you should aim to exercise for 30 minutes or more, most days, or every day, throughout your pregnancy.

Walking is a great exercise during pregnancy, and it is generally safe for beginners. The walking schedule below can help you start a walking program. It is cheap and easy: all you need is a pair of comfortable shoes. Remember to take it slow, and add more time to your workout as you become more comfortable with exercise.

Beginner's walking schedule

Week	Walks per week	Minutes per walk	Steps per walk
1	3	15	1,000 - 1,500
2	3	20	1,500 - 2,000
3	3	20+	2,000 - 2,500
4	3 - 4	25	2,500 - 3,000
5	3 - 4	25+	3,000 - 3,500
6	3 - 4	25	3,500 - 4,000
7	3 - 4	25+	4,000 - 4,500
8-12	4	30	4,500 - 5,000

First trimester considerations

There are several types of health care practitioners to help deliver your baby. Find an in-network provider online at geha.com/Search

- ▶ **Obstetrician-gynecologist (OB-GYN).** These doctors have completed four years of specialized training in obstetrics and gynecology post-medical school. Certified OB-GYNs have also passed written and oral tests to demonstrate their proficiency.
- ▶ **Family physician.** Beyond medical school, these doctors complete three years of specialized training in family medicine, which includes obstetrics training. They pass an exam for certification.
- ▶ **Certified nurse midwife (CNM).** These are certified registered nurses who have completed an accredited nursing program as well as a graduate degree in midwifery. They also pass a written examination for certification.
- ▶ **Certified midwife (CM).** These practitioners have graduated from an accredited midwifery education program. They have also passed a national certification exam, and abide by the same professional standards as CNMs. Both CMs and CNMs often work with a doctor who acts as backup support.
- ▶ **Perinatologist (maternal fetal medicine specialist).** These doctors deal with high-risk pregnancies. They have completed an additional two to three years of training in high-risk obstetrics after medical school and four years of regular obstetrics and gynecology training. They must also pass written and oral exams for certification.

Medications

Talk to your doctor about any over-the-counter or prescription medications you currently take or would like to begin taking. Your doctor will review your medications with you, consider the risks and benefits and make recommendations based on your personal health history.

Lifestyle changes to help you and your baby

Avoid alcohol and cigarettes. If you smoke, vape, use e-cigarettes or drink alcohol, it is best to stop as soon as you learn you are pregnant.

- ▶ Cigarettes contain lead, tar, nicotine, carbon dioxide and other toxins that go directly to the baby and increase the risk of preterm birth, low birth weight, stillbirth and sudden infant death syndrome.
- ▶ E-cigarettes and vaping may seem like a safe alternative to cigarettes, but they still pose health risks to you and your baby. It is not always possible to know the contents or concentration levels of the liquid you are inhaling.
- ▶ Second-hand smoke can be just as harmful to the baby as if the mother were smoking, so it is best to remain in a smoke-free environment at all times.
- ▶ Alcohol cannot be broken down by the baby's still-forming liver and can lead to a spectrum of fetal alcohol disorders.

Get help from others. It is typically easier to stop smoking and/or drinking with help from others.

- ▶ Tell your doctor so he or she can help you find some appropriate tools.

- ▶ GEHA offers **100% coverage** to help you quit smoking. For more on this benefit and other helpful resources, visit geha.com/QuitSmoking

Beware of opioid use. A 2011 survey revealed that 5% of pregnant women admitted to taking at least one illegal substance in the last 30 days.

- ▶ Researchers have discovered that use of illegal substances may cause preterm birth, interfere with the baby's growth and development, or cause birth defects, learning and/or behavioral problems.

Tell your doctor if you are addicted.

While not all opioid use is illegal, it can still be harmful to you and the baby to take regularly and to stop suddenly. Trying to quit an opioid cold turkey can result in preterm labor and fetal death.

- ▶ If you are addicted to an opioid like oxycodone or heroin, it is best to tell your doctor, who will help you find a substance abuse treatment program. You should also tell your OB-GYN if you take methadone.
- ▶ GEHA medical members are eligible for virtual substance-use disorder counseling via MDLIVE. For more on this benefit, visit geha.com/MDLIVE

What to expect at your prenatal care appointment

At each regular appointment throughout your pregnancy, your doctor will check on your health and the health of your baby. During your early prenatal care visits, your provider will ask you several questions about your health history and the baby's father's health history, your family health histories, and medications that you take.

Your provider will also conduct a physical, including blood and urine analysis; perform a pelvic exam; and determine the baby's due date.

You should schedule your first prenatal care appointment as soon as possible after becoming pregnant.

Ultrasound. Ultrasounds make an image of your baby using sound waves. Your doctor might perform an ultrasound in your first trimester for several reasons, including:

- ▶ To confirm your pregnancy
- ▶ To check on your baby's heartbeat or to determine if you are having more than one baby
- ▶ To screen for birth defects
- ▶ To examine your uterus and ovaries

Flu shot. Pregnant women should get an annual flu vaccination as soon as it is available during flu season (usually early October). Flu shots are considered safe for women during all stages of pregnancy.

Prenatal screening tests. These tests are offered to all pregnant women to determine whether they have an increased risk of having a child with a particular birth defect. Screening tests are done using a special ultrasound exam and/or a sample of the mother's blood and carry no risks to the fetus.

Prenatal diagnostic tests. These tests are available to all pregnant women to determine whether their fetus actually has a certain birth defect. Diagnostic tests are conducted by taking a sample of amniotic fluid or tissue from the placenta. There is a small risk to the fetus when these procedures are performed. There is approximately one pregnancy loss for every 300 to 500 procedures performed.

Ask your doctor to help you understand your testing options and determine which tests are right for you and your pregnancy.



geha.com/Maternity

800.821.6136



This is a summary of the features of Government Employees Health Association, Inc.'s medical plans. Please read the plan's federal brochure RI 71-018 (Elevate and Elevate Plus) at geha.com/PlanBrochure. All benefits are subject to the definitions, limitations and exclusions set forth in the federal brochure. The information contained herein is for informational and educational purposes only. This information is not a substitute for professional medical advice, and if you have questions regarding a medical condition, regimen or treatment, you should always seek the advice of a qualified health care provider. Never disregard or delay seeking medical advice from a qualified medical professional because of information you have read herein.