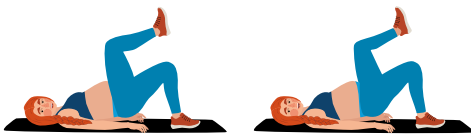


What to know during your pregnancy

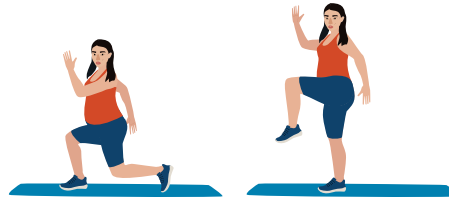
Second trimester 14-28 weeks of pregnancy

Safe exercise during pregnancy

Talk to your doctor to make sure it is safe for you to exercise during pregnancy. A healthy pregnant woman should try to get about 2.5 hours exercise each week.



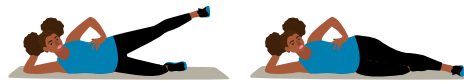
Glute Bridge March



Balance Lunge



Squat and Press



Lying Leg Raise



Backward Lunge

At 18 weeks

Changes during the second trimester

- You might eat more and urinate less often.
- You might feel pain in the stomach from digestion issues.
- You might have hard, dry bowel movements or pass a stool less than three times a week. If this happens, tell your doctor—they might give you medicine to help.
- You may start to feel the baby move (this can feel like butterflies or gas bubbles).
- Your belly will start to grow.
- You might still have nausea or vomiting (morning sickness), feel very tired, but your breast pain might lessen.
- Your belly skin might itch, and you might get stretch marks, varicose veins, and hemorrhoids.
- Any pregnancy-related worries you had around week 14 of pregnancy might start to lessen.

Second trimester discomforts

- You may experience a burning sensation in your chest (heartburn), back pain, dizziness, weakness or unsteadiness, nasal congestion, and nosebleeds.
- You might feel sharp or pulling pain in the stomach area near the hips, and leg pain. This is called round ligament pain.
- You may notice blood in your gums.
- You might have a white or off-white discharge from your vagina (called leukorrhea).

At 20 weeks

20-week ultrasound

At your 20-week appointment, your doctor will do an ultrasound. This is a safe test that takes pictures of your baby. The appointment may take about 45 minutes. During the ultrasound your doctor will:

- Let you know your baby's gender if you wish to know.
- Check how the baby's organs and body parts are growing.
- Check the baby's heartbeat.
- Check the umbilical cord (the tube that connect you to the baby).
- Check the amount of amniotic fluid around the baby.
- Find out if there are potential issues that might affect the birth or the baby's health after birth.



If you need a follow-up appointment with a doctor after the ultrasound, the appointment might last longer.

At 24-28 weeks

What is gestational diabetes?

Gestational diabetes is when your body has trouble controlling blood sugar (glucose) levels during pregnancy, causing the sugar levels to get too high. It is a type of diabetes that only happens while you are pregnant.

What to expect?

Between 24 to 28 weeks of pregnancy, you will have a blood test to check for high blood sugar (gestational diabetes). Here is what might happen during your appointment:

Glucose challenge test (or glucose screening test)

- You will drink a sweet drink with glucose.
- You will have a blood draw after you drink the sweet drink.

If your blood sugar is 140 or higher, you will need another test called the oral glucose tolerance test to confirm if you have gestational diabetes. If your blood sugar is 200 or higher, it may mean type 2 diabetes. Don't worry your doctor will explain the numbers to you.

Oral glucose tolerance test: Before the test, don't eat or drink anything except water for at least 8 hours.

- Your blood will be drawn first.
- Then you will drink the sweet drink with glucose.
- Your blood will be drawn every hour for 2-3 hours.

If two or more of your test results are too high, you will be diagnosed with gestational diabetes.

Treatment for gestational diabetes

- Eat healthy foods in the right amounts and at the right times.
- Do exercises that raise your heart rate. For example, fast walking.
- Attend additional appointments with a health care professional who will help you navigate the best way to treat your gestational diabetes.

If eating healthy and exercise are not enough to control your blood sugar, your doctor might give you medicine to help lower it.

At 27-36 weeks

Vaccines

Pregnant women are advised to get certain vaccines to keep both themselves and their baby safe. Here are the important ones:

- **Tdap vaccine:** Tdap (tetanus, diphtheria, and acellular pertussis) vaccine protects you and your baby from whooping cough (pertussis). Babies are at high-risk for serious complications, including hospitalization, due to pertussis. Tdap will be given between 27 and 36 weeks of pregnancy.
- **Flu vaccine:** Flu vaccine protects you from the flu. Pregnant women are more likely to get very sick from the flu and require hospital care compared to non-pregnant women. The flu vaccine also protects your baby during the first months of life.





- **COVID-19 vaccine:** COVID-19 vaccine is important because pregnant women are at higher risk of severe illness from COVID-19, which can lead to preterm birth or stillbirth. COVID-19 vaccine also protects your baby during the first months of life.
- **RSV vaccine:** There are two ways to protect your baby from getting very sick with respiratory syncytial virus (RSV). You can choose to get RSV vaccine during weeks 32 through 36 of your pregnancy during September through January, or your baby aged 8 months or younger can get RSV immunization during their first RSV season (October through March). RSV is the most common cause of hospitalization in children younger than age two.

Vaccines not recommended while pregnant:

- HPV (Human Papillomavirus)
- MMR (Measles, Mumps, Rubella)
- Live flu vaccine (the intranasal version with live virus)
- Chickenpox (varicella)

Ask your doctor which vaccines you should get while you are pregnant.