



# Countdown To Baby



*Your life is our life's work.*

# We couldn't be happier for you.

This is an amazing time as you prepare to welcome a new family member. You're probably feeling a mix of emotions: excitement, joy, gratitude—and maybe a touch of anxiety. After all, giving birth is a life-changing moment, and you want the experience to be memorable for all the good it brings to your life.

From now until the birth of your baby, you'll have lots to consider and do—choosing the perfect name (or names!), installing the safest car seat and making a birth plan. Mercy will be there every step of the way, caring for you throughout your pregnancy and providing you with knowledge and skills to make your experience everything you want it to be.

All the best,

— Your Mercy Team

**The safety of our patients and caregivers has been, and always will be, our priority.** We follow strict standards for disinfecting, required masking for patients, visitors and co-workers, and social distancing.

Please do your part by following these and other CDC guidelines.



# Prenatal Visits

Your prenatal visits are scheduled according to your due date and baby's gestational age, with your first visit usually at the 6- to 8-week mark. Your "estimated due date" (EDD) will be determined by presuming a 40-week gestational period, beginning on the first day of your last menstrual period (LMP). Or, if you were tracking ovulation and know the day you conceived, your EDD will be 38 weeks from that day. The EDD will be either confirmed or changed based on your first ultrasound, but it's still always just a best guess. Your little one could arrive a week or two late, or surprise you early.

Your first prenatal visit is one of the longest ones. Your care provider will need to perform breast and cervical exams and check vitals, such as height, weight and blood pressure. He or she will also gather your medical history, so write down as much as you can before your appointment:

- Medical and/or mental health issues
- Family medical history
- List of medications, including over-the-counter
- Drug allergies
- Birth control methods, if any
- Past abortions and/or miscarriages
- Hospitalizations
- Come prepared with any questions or concerns you have to make the best use of your time.

## Visit Schedule

The chart below shows what you can expect during prenatal visits with your provider:

<b>Confirmation of pregnancy</b>	Typically done between 6-8 weeks from your last menstrual period. We perform an ultrasound which will help determine your baby's estimated due date.
<b>First pregnancy visit</b>	Review your medical, surgical, genetic, and family medical history. You will also have a physical exam and lab work drawn.
<b>12 week visit</b>	Listen to the baby's heart, review your initial prenatal labs. We will also perform a first trimester genetic screen, if desired.
<b>16 week visit</b>	Check your uterus size and baby's heart rate, offer the AFP screen for spina bifida if desired. We will also schedule a 20 to 21 week ultrasound to check the baby's development.
<b>20 week visit</b>	Check uterine size and baby's heart rate. Your ultrasound will be done around this time by our ultrasonographer.
<b>24 week visit</b>	Measure your uterine size and check baby's heart rate. We will also explain the 28 week labs and give you the glucola drink to take home with you for the next visit.
<b>28 week visit</b>	Measure uterine size, check baby's heart rate, and draw blood work to check for gestational diabetes and anemia. If you are Rh negative, we will also draw blood for antibodies and give you your Rhogam injection.
<b>30 week visit</b>	Measure uterine size, check baby's heart rate, and review your 28 week labs.
<b>32 week visit</b>	Measure uterine size and check baby's heart rate. (Medicaid requires papers to be signed at least 30 days before your due date.)
<b>34 week visit</b>	Measure uterine size and check baby's heart rate.
<b>36 week visit</b>	Measure uterine size, check baby's heart rate, and we will collect a vaginal swab to check for GBS (Group Beta Strep test).
<b>37 week visit and weekly until delivery</b>	Measure uterine size and check baby's heart rate. If you would like us to check your cervix, let us know (although this does not have to be done routinely).

During your pregnancy, your care provider will perform diagnostic studies such as lab work, cultures and pap smears to gauge your health and check for potential risks to your baby. Normal results will be discussed with you at your next visit. If the tests come back abnormal, you'll be notified of the results, as well as any additional testing or follow-up needed.

*If you're 35 or older, or have a family history of certain disorders, you may want to explore genetic testing for certain birth defects. Ask your provider about testing or learn more by visiting [mercy.net/prenatal](https://mercy.net/prenatal).*

# First trimester (weeks 1–13)

**Your body and your growing baby will go through a lot in the first trimester:** your surge of pregnancy hormones, a growing uterus and your body's changing needs.

**Morning sickness**, despite the name, can happen any time of the day during the first trimester. Rising hormone levels are at least partially to blame for the nausea and vomiting that is so common at this time. Every woman and every pregnancy is different, but for most, the condition is mild and goes away near the second trimester. Talk to your doctor if symptoms don't improve; severe nausea and vomiting can lead to weight loss and dehydration.

### Habits to help ease morning sickness:

- Eat dry toast or crackers before getting out of bed in the morning.
- Get up slowly and sit on the side of the bed for a few minutes.
- Take a deep breath of fresh air or sip herbal teas or bubbly, cold drinks.
- Eat smaller, more frequent meals and avoid an empty stomach.
- Avoid strong odors or smells that trigger your nausea.
- Eat foods that are low in fat and easy to digest: The BRATT diet (bananas, rice, applesauce, toast and tea) may be helpful.

**Indigestion and heartburn** can happen as the growing uterus presses on the stomach, forcing acid into your esophagus. Eat smaller, more frequent meals during the day and avoid eating right before lying down to reduce these symptoms.

**Constipation** during pregnancy has many causes. Pregnancy hormones slow down your intestines, and the expanding uterus can put pressure on the large intestine. Not getting enough water and fiber can make the problem

worse. You can reduce constipation by eating fiber-rich foods, and limiting fried foods, cheeses, red meat and starchy foods like white rice, under-ripe bananas, white bread and crackers. Remember to get eight to 10 glasses of water and moderate exercise to keep digestion moving.

**Breast changes** usually begin early in pregnancy as the body begins to prepare for lactation. It's common to experience swelling, tenderness or more prominent veins in the breasts. You may also notice a darkening of the nipples and the appearance of small, painless bumps around them.

**The vaginal lining** will thicken and become less sensitive. It's normal to experience vaginal discharge and spotting. If vaginal bleeding becomes heavy or painful, contact your doctor.

**Minimal weight gain** may or may not happen in the first trimester, though some women notice their waistline growing as the uterus expands. This is no time to start cutting calories, but it's a great reason to get calories from wholesome foods.

**Moodiness** is normal and common with the flood of pregnancy hormones and the excitement and stress of planning for baby. You might feel emotional or absent-minded. Make sleep a high priority so your rested mind can cope better with these changes.

**Dizziness** and lightheadedness occur as your body works to make all the extra blood it needs to nurture your baby. Good sleep and nutrition can ease your symptoms.

**Skin changes**—beyond the rosy pregnancy glow—can turn up in early pregnancy. Hormones can cause oily skin and acne flare-ups. You may notice more prominent blue veins in your torso and legs, or tiny spider veins on your arms, face and neck, thanks to an increase in blood volume.

**Urination increases** toward the end of the first trimester as the fetus grows and the uterus presses on your bladder.

In just 13 weeks, your baby goes from a single fertilized egg to a growing, wiggling fetus that is very recognizably human. Weeks 5 – 8 are when the major organs take shape. Around week 5 or 6, the heart is forming and beginning to beat. The digestive, circulatory, reproductive and urinary organs are all forming by week 8.

By the end of the 13th week, your baby is about 3 inches long and weighs between .8 and 1 ounce—about the size of lemon. At this point, he's fully formed, right down to his tiny fingers, toes and nails. He already has eyesight, the sense of touch and taste buds. The brain has been sending signals to move baby's arms and legs for several weeks, but you may just now start to feel that "flutter" known as quickening. It won't be long until your baby's gender can be determined with an ultrasound.

# Your baby



## Second trimester (weeks 13–28)

**Much of the fatigue, mood swings and morning sickness of early pregnancy should get better as hormones level out in the second trimester.** Many women discover it's a good time to "line the nest" for baby's arrival: shop for newborn supplies, prepare the baby's room and childproof the home to create a safe and comfortable environment.

**Weight gain** really starts to take off at around week 20. Your baby is growing at a good pace. Your appetite has returned and your blood volume and body fluid levels are on the rise. While you may have gained little to none in the first trimester, expect to put on 1 or 2 pounds per week for the rest of your pregnancy. By this time, you will probably graduate to a bigger bra and possibly even maternity clothes.

**Your breasts** will continue to grow as milk ducts develop and fat deposits accumulate. The bumps that may develop on the areola, called Montgomery tubercles, produce an oily substance that lubricates the nipples and supports breastfeeding. Your breasts will begin to produce colostrum, the first type of milk you'll eventually feed baby. You may experience leaking of this yellow milk in the second trimester but don't be concerned if you don't.

**More skin changes** are on their way. Stretch marks and dry, itchy skin on the breasts and belly are common as your body changes. Using rich lotion every day will reduce dryness. Keep weight gain in line with your doctor's recommendation to reduce the severity of stretch marks. Other changes you'll notice include:

- **Melasma**—patches of brown discoloration. Most of the time, it turns up on the cheeks, nose and forehead, which is why it's known as the "pregnancy mask."
- The "linea nigra." That's the dark line that runs vertically from the belly button to the pubic area.
- Sun sensitivity is common but, like other skin changes, usually improves or disappears after pregnancy.

**Aches and pains** are no fun, but they are normal. As your belly grows and puts stress on your spine, your back may ache. You may also feel pain in the pelvic bones, hips and stomach as the muscles and ligaments stretch to prepare your body for childbirth. The same hormones that loosen ligaments may also affect your teeth. Loose teeth will return to normal after delivery.

**Swelling and congestion** happen as your body retains additional fluid for the growing baby. This generally shows up as a puffy face, feet and hands. Increased blood flow to the mucus membrane in the nose and mouth may also contribute to congestion and the occasional nosebleed. You may also experience slight gum bleeding, but play it safe and see a dentist to rule out periodontal disease.

**Braxton Hicks contractions**, or false labor, can start as early as 16 weeks. These practice contractions are irregular and only last a few minutes but can be uncomfortable. If the contractions become regular, painful or persistent, contact your doctor.

## Your baby

By now, your baby's features are becoming very well defined. Bones are getting stronger and teeth are forming below the gums. The baby is instinctively sucking his or her thumb and even making faces. By the end of the second trimester, your baby weighs around 2 pounds and is about a foot long. You're probably noticing a lot more movement as the baby hiccups, kicks and stretches. Note these first movements on a calendar and let your doctor know.



# Eating for Two

## Remember your nutrition basics.

**Make a healthy eating plan** to start off on the right foot. Remember your nutrition basics and work with your doctor to make sure you know which foods offer the best benefits. Eat as many whole, unprocessed foods as you can, to make sure you get all the important vitamins and minerals your growing baby needs.

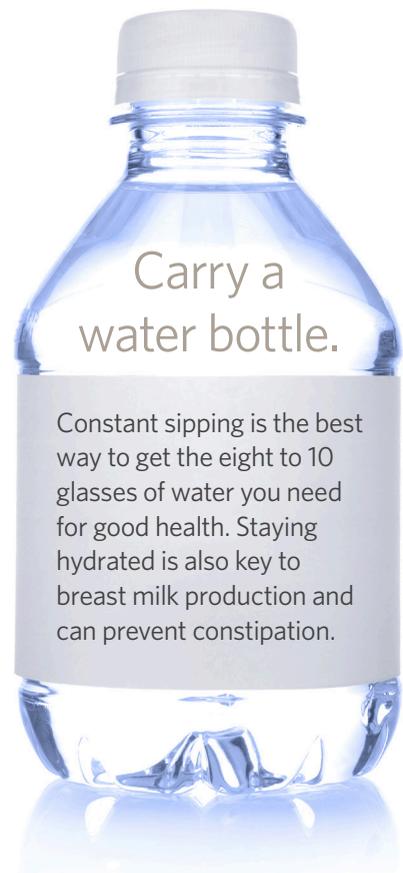
**Add about 300 calories** to your daily diet during the second and third trimesters. Women of normal weight usually gain 25-35 pounds during pregnancy (28-40 pounds if you're underweight and 15-25 pounds if you're overweight.)

**Supplements are important.** Ask your doctor to recommend a daily supplement. Think about also adding a calcium supplement if you're not getting the required 1,000 milligrams a day from your food and drink.

**To reduce the risk of illness,** avoid unheated deli meat and soft or unpasteurized cheese. Never eat raw or undercooked meat, sushi, raw seafood or eggs.

**Fish** is an important part of every healthy diet, but there are a few safety tips pregnant women need to understand. Because of possible harm to a baby's nervous system when his or her mother eats large amounts of fish containing mercury, these tips may be helpful:

- According to the EPA and FDA, pregnant women need to avoid eating large fish such as shark, swordfish, king mackerel and tilefish.
- Pregnant women may eat 12 ounces per week of fish like salmon, shrimp, canned light tuna and catfish, which are low in mercury.
- Canned light tuna has less mercury than canned albacore (white) tuna; so only eat six ounces of albacore tuna per week.



Carry a water bottle.

Constant sipping is the best way to get the eight to 10 glasses of water you need for good health. Staying hydrated is also key to breast milk production and can prevent constipation.

*For more information on mercury in fish and shellfish, visit the FDA or the EPA website.*

What/why you need it	Where to get it
<b>Calcium:</b> Helps build strong bones in you and your baby; may help prevent high blood pressure. <i>Daily dose: 1,000mg</i>	Dairy foods, dark leafy greens, calcium-fortified soy and nut milk, calcium fortified juices, cereal
<b>Carbohydrates:</b> Keeps the body from using protein for calories; is an energy source. <i>Daily dose: 25-330g</i>	Fruit, milk, yogurt, bread, rice, pasta, potatoes, cereal
<b>DHA</b> (docosahexaenoic acid:) An essential fatty acid important for brain function and development. <i>Weekly intake: about 2,000 mg</i>	Salmon (farmed), bluefin tuna, Pacific herring, rainbow trout (farmed) striped bass, tuna (white—canned in water,) beef, liver, snapper, yellowfin tuna, crab, mahi mahi
<b>Fiber:</b> Fights constipation; helps prevent hemorrhoids during pregnancy. <i>Daily dose: 25-30g</i>	Bran flakes, fruit, vegetables, whole grain bread
<b>Folate:</b> Helps protect against birth defects such as spina bifida; helps you fight off anemia. Folic acid is the man-made form added to enriched grains and dietary supplements. <i>Daily dose: 600mcg</i>	Dried beans, peas, lentils, orange juice, oranges, dark leafy greens, soy nuts, avocados, broccoli, asparagus
<b>Iron:</b> Carries oxygen to your baby; prevents anemia during pregnancy; wards off premature delivery. <i>Daily dose: 27 mcg</i>	Liver, meat, seafood, prune juice, dry beans, wheat germ, oatmeal, tofu, soy nuts, grains
<b>Protein:</b> Provides the raw material for cells, hormones and enzymes; keeps your fluid balance in check. <i>Daily dose 70g</i>	Meat, poultry, seafood, dairy foods, beans and legumes, nuts
<b>Riboflavin:</b> Necessary for energy production and protein use. <i>Daily dose 1.4mg</i>	Meat, poultry, seafood, dairy products
<b>Vitamin B6:</b> Helps the protein you eat build new cells. <i>Daily dose 1.9mg</i>	Chicken, seafood, pork, eggs, brown rice, oatmeal
<b>Vitamin B12:</b> Makes red blood cells; helps the body use fat and carbohydrates for energy. <i>Daily dose: 2.6mg</i>	Meat, fish, poultry, dairy products
<b>Vitamin C:</b> Necessary for strong bones and teeth; boosts immunity; increases iron absorption from food; keeps blood vessels strong, red blood cells healthy and soft tissues intact. <i>Daily dose: 85mg</i>	Citrus fruits and juices, strawberries, bell peppers, tomatoes, dark leafy greens, broccoli, Brussels sprouts
<b>Vitamin D:</b> Causes bones to absorb and use calcium. <i>Daily dose: 200IU</i>	Fortified milk products, fortified cereals
<b>Zinc:</b> Necessary for cell growth and repair, and for energy production. <i>Daily dose: 11mg</i>	Meat, eggs, seafood, liver

## Second-hand smoke

is just as harmful as smoking for both you and your baby. Studies suggest that being around second-hand smoke may harm your baby's development and cause low birth weight.

# Freedom from Smoking

It's time to quit. If you haven't quit smoking already, you need to do it as soon as you find out you're pregnant. Smoking is one of the most harmful things you can do to your body. It's especially dangerous during pregnancy since it increases the chance of miscarriage, smaller babies, birth defects, stillborn birth and having a baby who needs intensive care after delivery.

Children whose mothers smoked during pregnancy have more lung problems, ear infections, colic, sudden infant death syndrome (SIDS), behavioral problems, attention deficit hyperactivity disorder (ADHD), lung disease and cancer later in life.

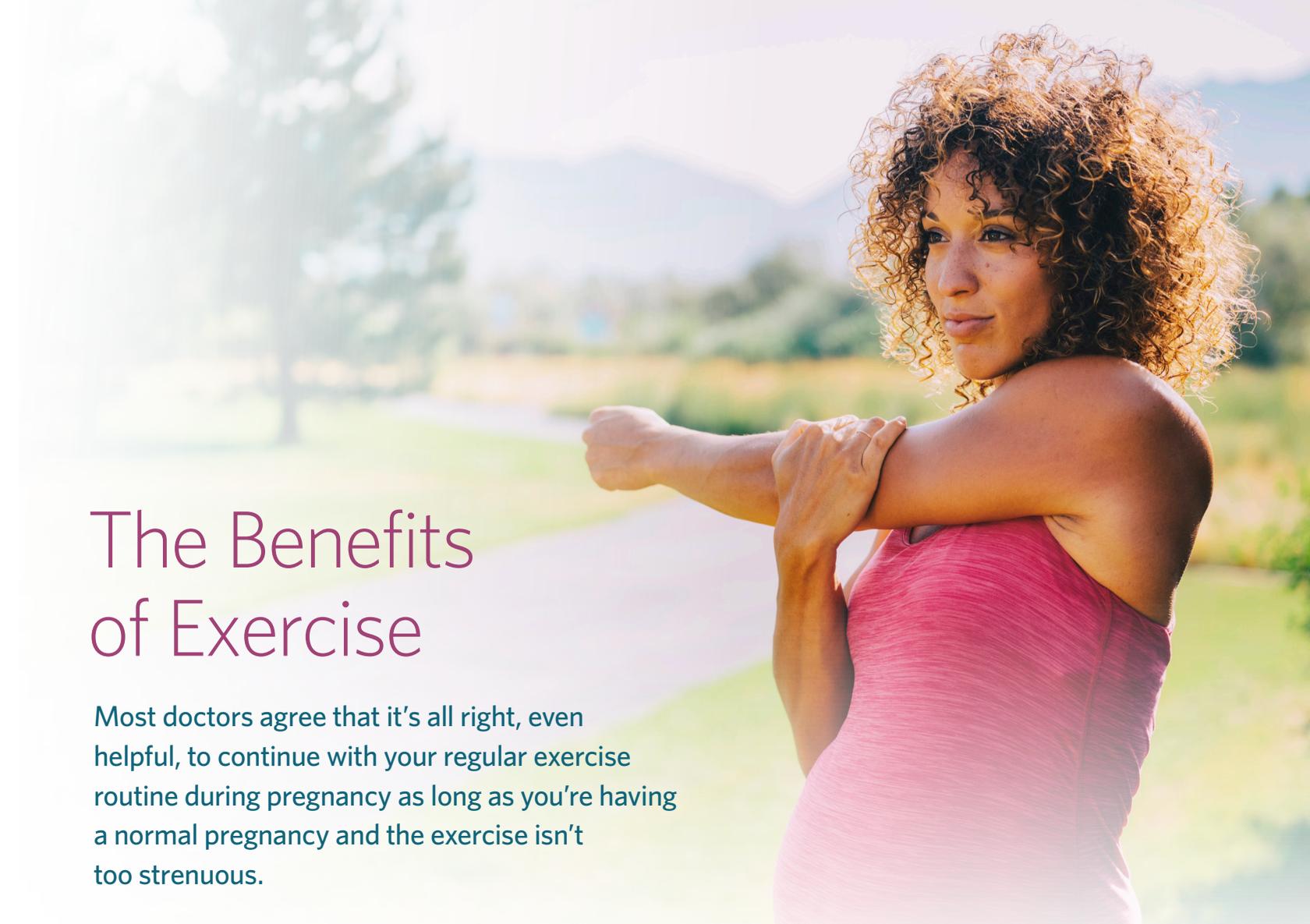
### **But there is good news if you quit.**

If a woman stops smoking by the 16th week of pregnancy, her chance of having a low birth weight or stillborn baby goes down to almost the same rate as if she had never smoked. Even if a woman hasn't been able to stop smoking until late in her pregnancy, stopping during the third trimester can still improve baby's growth.

### **Quitting smoking is the very best thing you can do for your baby.**

#### **Here are some tips to help you quit:**

- Make a plan and tell everyone you know
- Find a partner to quit with you
- Write yourself a contract
- Remove any smoking triggers around you
- Remind yourself why you're quitting
- Avoid situations and actions that will cause you to smoke
- Begin a healthy habit, like exercising



# The Benefits of Exercise

**Most doctors agree that it's all right, even helpful, to continue with your regular exercise routine during pregnancy as long as you're having a normal pregnancy and the exercise isn't too strenuous.**

Pregnancy changes your body and you'll want to understand these changes, since they can affect your ability to exercise safely. Pregnancy hormones cause joints to become more mobile and flexible, which increases your risk of injury. For this reason, avoid bouncy or high-impact exercise.

Your center of gravity changes ever so slowly during pregnancy. Not only will you gain weight, but that weight will be mostly in front of your body. This changes the muscles that help your posture. These "new" muscles, especially in the lower back and pelvis, may feel uncomfortable. Choosing a good exercise can reduce the strain on your back and keep you from losing your balance.

Walking is a wonderful way to exercise and is familiar to everyone. If you are not a regular walker, remember to start slowly and build it into your routine. It's important not to overdo it. Avoid getting overtired and be sure to drink plenty of liquid while you exercise.

Swimming and stationary biking are also good choices for exercise. As a rule of thumb, you want to be able to exercise and carry on a conversation at the same time. If you can't, then slow down. If you become uncomfortable in an unusual way, stop your activity.

Since pregnancy often leads to fatigue, weight gain and not feeling your best, exercise is a good way to relieve some of these issues. Daily exercise can also help you sleep better at night, help your posture and may even help reduce backaches, bloating and constipation.

## Potential benefits of exercise

- Increases energy
- Improves your outlook/mood
- Maintains posture
- Increases muscle strength and tone
- Helps you sleep better at night
- May help reduce backache, bloating and constipation



# Protecting Your Developing Baby

Know what's okay, what's safe in moderation and what you should avoid to help baby grow healthy and strong.

**Alcohol** during pregnancy can harm your developing baby. It can go into your bloodstream and reach your baby through the placenta. Because of your baby's small size and developing systems, alcohol affects your baby more than it does you.

**Caffeine** is a stimulant that may increase the risk of miscarriage, low birth weight and other problems. Most doctors recommend cutting down to 200 mg or less per day—about what you'd get in two morning cups of coffee. There's about a third of that in most teas and colas, though the sugar and acid in soda isn't good for you either. Chocolate also contains caffeine so it's a good idea to cut back on chocolate too, especially dark chocolate.

**Street drugs** and abused prescription drugs will affect your baby. Miscarriages and stillbirths are common among drug users. Babies are often born addicted and must go through withdrawal. Many of these babies will become sick during withdrawal and need to be hospitalized. If you use street drugs, be honest with your doctor so you can get the care you and your baby need.

**Over-the-counter medicines** are safe to use under a doctor's guidance. However, like medicines that require a prescription, over-the-counter medicine can have side effects. Some may be harmful to your unborn baby. Talk with your provider before taking any over-the-counter medicine or supplement.

**Sex** during pregnancy is one of the most common topics women discuss with their doctors. Rest assured, sexual activity during pregnancy isn't harmful; it's actually encouraged for the positive benefits to your relationship. The amount and intensity of sexual activity is a decision that you and your partner must both be comfortable with.

**Seat belt use** is a must for everyone, including expecting mothers. For them to work with your changing body, seat belts must be positioned correctly. Sit upright and place the lap belt under your belly as low on your hips as possible. Feel the lap belt pull against your hipbones, not your belly. Keep the shoulder strap across your chest between your breasts. If it cuts across your neck, you'll want to adjust the seat.

**Airbags** are designed to work with seatbelts during a crash. Keep at least 11 inches between your chest and the steering wheel (or the dashboard on the passenger side.) As your belly grows, move the seat back as much as possible between the steering wheel and your belly while still letting you reach the pedals.

**A clean environment** for you and the baby is vital for good health and safety. Environmental toxins, such as air pollution, pesticides, herbicides and heavy metals in food, can harm your developing fetus. Exposure has been linked to poor nervous system development, birth defects, premature birth, stillbirth and low birth weight.

If you've never smoked or recently quit, you've already done the best thing possible for your growing baby's environment. Remember to also **avoid secondhand smoke exposure**. Remove even more environmental dangers by taking these steps:

- Filter all the water you plan to drink or cook with.
- Use only BPA-free water bottles and food containers. Some products will state this on the packaging but if they don't, avoid using containers with the recycling numbers 3 or 7. Some aluminum food cans also contain BPA in the lining, so limit canned foods if you can't verify they're BPA-free.
- Improve indoor air quality by using air purifiers, and replace the filters in your home HVAC system regularly.
- Limit outdoor time during rush hour, smoggy days or when there is heavy smoke or seasonal allergens in the air.



## Getting the Family Involved

Unlike moms-to-be, expectant dads and older children don't experience the physical and emotional changes women do. Even with a sideline view, family members can still be present and fully invested in the pregnancy and birth.

Preparing children early helps calm anxieties by letting them know what to expect. When to tell your child about your pregnancy is your choice, but here are some things consider when you do:

- Help your child understand what an important role it is to be a big brother or sister.
- In the hospital, think about having Dad hold the baby while you see your child for the first time since the baby's arrival. Schedule this when there aren't a lot of other visitors.
- Before the birth and after the baby comes home, carve out one-on-one time with each kid.
- Have Dad participate in doctor's appointments and birthing classes. The process will help him understand the changes and challenges you're about to face and equip him to offer support.
- Future dads can get involved in helping put together the baby's nursery.
- Exercise together as a family. Exercise is a great way to relieve stress and doing it together helps you all stay healthy. It also gives you quality time together to discuss your plans and concerns.
- Plan time off. Some dads like to take time off work during the first week or two after baby's birth. Talk with your partner about how to handle maternity leave or vacation time, and discuss planned absences with your child's school or daycare.

# New Parent Organizer

## Month 3: Choosing a doctor for your baby.

**It's never too early to start looking for a good pediatrician or family doctor.**

This begins by asking close friends for recommendations. Ask them why they like a certain doctor and how long they've been with that doctor. Mercy recommends selecting your baby's doctor before you deliver.

It's important to interview a few doctors before making a choice. A good doctor is one who's not only skilled at treating disease, but also focuses on prevention. Whether you choose a pediatrician or a family specialist, the right doctor is one you feel completely comfortable with. Also, make sure your insurance covers the doctor you choose.

Pay attention to how a doctor responds to questions and emergency calls. A good doctor will listen to your concerns and won't get upset if you seek a second opinion.

### Count on Mercy Kids for Exceptional Pediatric Care

Mercy Kids is a network of care for kids across Mercy's four states. It not only represents pediatric hospitals in St. Louis and Springfield, MO, but hundreds of pediatricians, family medicine doctors and specialists focused on caring for kids. For a list of Mercy Kids physicians who specialize in pediatrics or family medicine, visit [mercy.net](http://mercy.net).

## Month 4: Don't forget the details.

**Sign up for a childbirth class.** In addition to helping you learn what to expect in labor and delivery, Mercy's classes cover a range of topics from baby safety to breastfeeding.

**Contact your dentist.** An untreated tooth or mouth condition can give you a harmful infection and it's generally considered safe to have routine dental work at any time during your pregnancy.

## Month 5: Checking things off your list.

**Talk with your religious leader** if you want your baby to be welcomed into the world with a baby dedication, baptism, Brit Milah or other ceremony. Call your place of worship to find out what's involved and how to schedule a religious ceremony.

**Get a first-aid kit.** First-aid kits aren't important until you need one in a hurry. Assemble one or buy a prepackaged kit

**Consider life insurance** if you and your spouse don't have it already. There are different plans that serve different purposes, so research policies and the companies that sell them. If you already have one, find out how to change or add children to it. You may also want to increase your coverage.

**What about a will?** It might not be a pleasant thought, but drafting a will ensures your child receives all the resources you can allocate if anything ever happens to you. If you already have one, a simple revision may be all that's needed. See your legal counsel or buy a pre-made will-writing kit to make your own document.

**Set up online banking** for your own convenience. Most banks offer this service for a small fee, and many payees will even offer discounts for automatic bill payments. After setting up a schedule of bills you want to pay, you can get bills paid each month in little or no time.

## Month 6: Planning the fun essentials.

Take care of birth announcements now. This will save time during those first weeks when your baby comes home. Endless options are available to announce your new child, from a family website or online cards to traditional birth announcements. Put together an email list now so family and friends are just a click away once your baby arrives.

**Select your support person** and review your birth plan with him or her. This is usually the baby's father, but in some cases, a mother chooses another person like her mother or a close friend. Your support person should become familiar with what to expect during labor and birth by going to childbirth classes with you, doing some reading and taking a tour of your birthing hospital's labor and delivery unit.

**Pamper yourself** with a trip to the spa or salon. You may also enjoy a massage to ease the aches and pains that come with pregnancy. Find a professionally licensed massage therapist trained in treating pregnant women. You'll be amazed at what a little pampering can do.

Mercy is here to help you get the birth experience you want. Download our **Labor and Birth Guide** for information on the third trimester and tips on preparing for childbirth. [mercy.net/FinalMonths](http://mercy.net/FinalMonths)





*Your life is our life's work.*