NORTHSIDE WOMEN'S SPECIALISTS
Affiliated with Northside Hospital

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Congratulations on your new adventure!

Our goal for your pregnancy is to ensure that you and your baby go home happy and healthy. Our physicians and staff are available 24/7 to ensure we make this happen. We want you most of all to feel comfortable with us and trust that we will do everything in our power to ease your fears and provide you with the best prenatal care possible.

This letter will outline some basic things for you to know:

Physicians Who Deliver at the Hospital (the on call physician each day does all deliveries):

Dr. Amy Wetter	Dr. Jill Purdie	Dr. Ariel Star Thomas
Dr. Chandrika Rao	Dr. Aaron Doctor	Dr. Jennifer Gold

Gyn Only Physician:
Dr. Manjeeri Sangvai (GYN only)

Office locations:

980 Johnson Ferry Road
Suite 620
Atlanta, GA 30342
(404) 255-2057
(404) 256-4238 (fax)

3400 Old Milton Parkway
Suite 300
Alpharetta, GA 30005
(404) 255-2057
(404) 256-4238 (fax)

Hospital:
Northside Hospital Atlanta
1000 Johnson Ferry Road NE
Atlanta, GA 30342

Contact Info:

1. Portal – you can message us any time day or night for NON-URGENT matters, and we usually will get back to you within 24-48 hours
2. If it's urgent, please don't hesitate to call the office at the numbers above
3. For after hours emergencies, call the office number, and the answering service will page the doctor on call

Please read through all the pages of this folder and let us know if you have questions or concerns. We are here to answer your questions, and we take all of your concerns seriously. Remember, every pregnancy is different. We want to know your concerns even if they have been addressed in a previous pregnancy.

We look forward to supporting you through this pregnancy and all of your future Obstetrics & Gynecology needs!

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General Information

Insurance

PLEASE NOTIFY US IF YOUR INSURANCE CHANGES DURING YOUR PREGNANCY. If you fail to notify us, you will be responsible for all service received during your pregnancy.

Office Visits

Routine office visits are scheduled every 4 weeks until 28 weeks, every 2 weeks until 36 weeks, and weekly until delivery. Pregnancies that go beyond 40 weeks are monitored more closely with a non-stress test and/or biophysical profile ultrasound. We typically offer induction of labor for low-risk pregnancies after 39 weeks. If you are high risk or develop a problem during your pregnancy, more frequent appointments may be necessary.

Each visit will include: urinalysis, blood pressure check, weight, fetal heart tones (>12 weeks), and fundal height measurement (>24 weeks). This is also a time to get to know one another and answer any questions you may have.

Delivery

The on call provider for the day will deliver you so we would like you to meet all delivering providers in the group. The best way to make your delivery experience the best possible is for you to get to know all of us and feel confident and comfortable when you come in to deliver your baby.

Ultrasounds

It is *not* routine to have an ultrasound done at each prenatal appointment. You should plan on having your initial ultrasound to give your due date, and your anatomy scan at 18-20 weeks. This is what insurance usually covers. Any other ultrasounds are done on a case-by-case basis. Your anatomy scan will be done with ultrasound/high-risk specialists, typically with a practice called Georgia Perinatal Consultants. There is also an optional 12-13 week ultrasound (which screens for genetic anomalies) done through Georgia Perinatal Consultants as well.

Prenatal Genetic Testing

As with any medical test or procedure, it is not guaranteed that genetic testing will be a covered benefit by all health plans under all circumstances. The best way to determine if the test will be covered is to contact your insurance plan directly. Below are the CPT Codes, which are the codes the insurance companies need to identify the type of services you are requesting:

1. Carrier Testing - a blood test to evaluate if you have any silent genes for severe disease that could be passed down to the baby. If your testing is positive, your partner will also need to be tested.
    a. CPT 81443, 81243, 81329
2. Cell-Free DNA/ Non-Invasive Prenatal Testing - a blood test that evaluates pieces of the baby's DNA in your blood. This test evaluates for Trisomy 13, Trisomy 18, and Trisomy 21 as well as the sex chromosomes. You must be at least 10 weeks pregnant to have this test.
    a. CPT 81420
3. Nuchal Translucency (NT) Ultrasound – an ultrasound done between 11-13 weeks that evaluates the presence of abnormalities in the brain, spine, heart, face, and abdominal wall
    a. Ultrasound Codes - 76813, 76801
4. Maternal Serum Alpha Fetoprotein - a blood test done between 15-22 weeks to evaluate the risk of abnormalities of the brain and spinal cord
    a. CPT 82105

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5. Anatomy Scan - an ultrasound between 18-22 weeks to evaluate for any structural abnormalities of the fetus
    a. Ultrasound Code - 76811

Tips for Easing Nausea and Vomiting During Pregnancy

1. Try to eat small meals frequently throughout the day every 2-3 hours
2. Eat carbohydrate-rich foods such as cereal, crackers, and potatoes, as they can help ease nausea, and tend to digest easily
3. Avoid eating food when it is either very warm or very cold
4. Try to avoid greasy, fatty foods such as fast food
5. Try eating small amounts of one food, then add more items as you feel comfortable
6. Avoid eating spicy or highly seasoned foods
7. Drink weak tea, carbonated beverages, or fruit juice to ease and prevent nausea. Instead, you may eat crushed ice or ice-pops – they may be gentler on your stomach.
8. Avoid eating and drinking in the same sitting. Instead, drink your fluids slowly between meals.
9. Try to sit upright after meals
10. Over the Counter Medications: Vitamin B6 25mg every 6 hours + Unisom ½ to 1 tablet every night

Medications Safe in Pregnancy: https://my.clevelandclinic.org/health/drugs/4396-medicine-guidelines-during-pregnancy

Allergies - Diphenhydramine (Benadryl®), Loratidine (Claritin®), Cetirizine (Zyrtec®)

Cold and Flu - Diphenhydramine (Benadryl)*, Dextromethorphan (Robitussin®)*, Guaifenesin (Mucinex® [plain]) *, Vicks Vapor Rub® mentholated cream, Mentholated or non-mentholated cough drops, (Sugar-free cough drops for gestational diabetes should not contain blends of herbs or aspartame), Pseudoephedrine ([Sudafed®] after 1st trimester), Acetaminophen (Tylenol®)*, Saline nasal drops or spray, Warm salt/water gargle *Note: Do not take the "SA" (Sustained Action) form of these drugs or the "Multi-Symptom" form of these drugs. Do not use Nyquil® due to its high alcohol content.

Diarrhea - Loperamide ([Imodium®] after 1st trimester, for 24 hours only)

Constipation - Methylcellulose fiber (Citrucel®), Docusate (Colace®), psyllium (Fiberall®, Metamucil®), polycarbophil (FiberCon®), Polyethylene glycol (MiraLAX®)* *Occasional use only

First Aid Ointment - Bacitracin, Neomycin/polymyxin B/bacitracin (Neosporin®)

Headache - Acetaminophen (Tylenol)

Heartburn - Aluminum hydroxide/magnesium carbonate (Gaviscon®)*, Famotidine (Pepcid AC®), Aluminum hydroxide/magnesium hydroxide (Maalox®), Calcium carbonate/magnesium carbonate (Mylanta®), Calcium carbonate (Titralac®, Tums®), Ranitidine (Zantac®) *Occasional use only

Hemorrhoids - Phenylephrine/mineral oil/petrolatum (Preparation H®), Witch hazel (Tucks® pads or ointment)

Insect repellant - N,N-diethyl-meta-toluamide (DEET®)

Nausea and Vomiting - Diphenhydramine (Benadryl), Vitamin B6, Unisom

Rashes - Diphenhydramine cream (Benadryl), Hydrocortisone cream or ointment, Oatmeal bath (Aveeno®)

Sleep - Diphenhydramine (Benadryl), Unisom SleepGels®

Yeast Infection - Miconazole (Monistat®)

Please note: No drug can be considered 100% safe to use during pregnancy

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