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### Advice for the Third Trimester

As the final weeks of pregnancy approach, your thoughts and preparations turn toward delivery. During this last month, you will have weekly office appointments. You should make a “dry run” to the hospital and taking a tour of the facilities.

Please make sure that you have completed the pre-admission form online at [www.inova.org/obprereg](http://www.inova.org/obprereg).

Please call if ANY of the following happens:

- **SEVERE PROLONGED PAIN:** Although unlikely, acute and unrelated pain anywhere in the abdomen or chest should not be ignored.
- **BRIGHT RED OR HEAVY BLEEDING:** A small amount of “bloody show”, dark blood or blood mixed mucus is not unusual. Profuse bleeding should be reported.
- **RUPTURED MEMBRANES (BROKEN “BAG OF WATER”):** Amniotic fluid is thin, like urine, but does not have the same odor. It may be clear with flecks of white material or various shades of green or brown. Frequently it is blood tinged. If you are uncertain about rupture of membranes, PLEASE CALL. Once the membranes have ruptured, labor should be started. *This is especially important if your GBS (strep) culture is positive.*
- **LABOR:** You may be having Braxton-Hicks contractions. These are usually mild and irregular. Labor pains are usually stronger and have a shorter duration. Gradually true labor will become stronger, longer and closer together.

Please call if any of these four instances occur. Do not go to the hospital without talking to the doctor at the office or on call. Always call us yourself rather than your husband or another person.

TRUE LABOR	FALSE LABOR
Pains at regular intervals	Irregularly timed intervals
Contraction intervals that gradually shorten	No change or elongate
Increased duration and severity	No change or decreased severity and duration
Pain starts in the back and move toward center of body	Pain mainly in the front
Walking increases the intensity	No effect or minimizes pain
Increasing uterine hardness as pain increases	No association
Often but not always associates with blood show	No bloody show
Sedation does not stop or slow down true labor	Effective sedation will stop false labor

**You should call us at the office or page the after-hours physician when your labor pains are coming every 5 minutes and are lasting 45 seconds to 1 minute. They should be strong enough that you have to use a breathing technique to get through them.**

With any phone call to us, please be prepared with the following information.

- Is this your first baby
- Are you a scheduled C-section
- Have you had a previous C-section
- When was the last time you ate?
- Have there been any complications during pregnancy
- Do you have a positive GBS (strep) culture during this pregnancy
- Do you have: twins, breech, diabetes, high blood pressure
- Has your water broken?

After we have spoken to you and determines that it is time for you to go to the hospital, we will call ahead to the hospital. You should have someone else drive. Go directly to the registration desk on the first floor of the Women’s and Children’s building at INOVA Fairfax hospital.

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