



The Third Trimester

Weeks 28-40



Weeks 33 To 36

During this period of time, the baby's brain continues to grow rapidly. The bones of the head, however, remain soft and flexible to make it easier for the baby to fit through the birth canal. The baby is too big to move around very much, but can kick strongly. You may even notice the shape of an elbow or heel against your abdomen. The fetus should now be about 18 inches long and weigh about five pounds.

You may have noticed a little shortness of breath as the baby crowds your lungs. The baby may also be crowding your stomach, so try eating five or six smaller meals during the day.

Breastfeeding: Considering Your Options
Whether or not you breastfeed is up to you. Some medical authorities encourage breastfeeding, but not every mother finds it to be a beneficial experience. You may be concerned that you won't be able to nurse or may consider it too confining. Before you make a decision, talk with healthcare professionals and learn all that you can about the options. Breastfeeding is a natural process but it's also a learned skill. Guidance can be obtained when you deliver your baby. Just ask your nurse.

Some Good Reasons to Breastfeed

- Your early breast milk helps give your baby protection against disease.
- Breast milk helps your baby grow strong and healthy because it contains the correct amounts of nutrients.
- Breast milk is gentle on your baby's stomach.
- Your baby may have less colic, constipation and diarrhea.
- Breastfed babies may have fewer earaches, colds, cases of asthma, eczema and food allergies.
- Breastfeeding helps you return to your pre-pregnancy physical condition more quickly. Weight loss is easier, and your uterus returns to normal size more quickly.
- Your breast milk is always ready. It doesn't require any mixing, measuring, heating, sterilization or refrigeration except when using a breast pump and storing milk for later feedings.
- Nighttime feedings are quick and easy.
- Breastfeeding can save money because there's no formula to buy.
- Nursing can help you feel closer to your baby.

How to Breastfeed

- When it is time to nurse, remember these steps:
- Get into a comfortable position.
 - Make sure your arms and back are well supported.
 - Place a pillow under your baby.
 - Put your thumb on top and other fingers beneath your breast for support.
 - Bring your baby's head up with his or her nose in front of your nipple.
 - Tickle your baby's lips with your nipple.
 - When your baby opens his or her mouth, pull him or her up and onto your breast.
 - Check that your baby's lips are rolled outward and his or her tongue is under your nipple.

Fetal Movement Chart

One easy way to evaluate your baby's well-being during the third trimester is to keep track of how much it is moving. Every baby is different with its own frequency of movement. Babies often sleep 20 to 40 minutes at a time during the third trimester. So you may need to wait to count movements. After all, babies can be very heavy sleepers.

Healthy babies generally move three to five times per hour. The best time to chart fetal movements is after a meal, when your baby tends to be

at a heightened state of activity. To count movements, lie on your left side and place your hands on the largest part of your abdomen. Record the number of movements you feel over the next hour, up to five movements. If you feel the baby move five times in less than an hour, you can stop counting. If the baby does not move five times per hour, try eating or drinking something and then count for another hour.

You may want to check with your physician before filling out this chart. There are several ways of counting

fetal movement (using varying numbers of kicks over different periods of time), and you'll want to make sure the method you use corresponds with your physician's standard practice. This will ensure that this exercise is not just fun but useful, too.

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Week of Pregnancy:

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After what meal _____

Tally of movements _____

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Week of Pregnancy:

Day _____

Time _____

After what meal _____

Tally of movements _____

Weeks 37 to 40

Between 37 and 40 weeks, your baby should be full term, weigh six to nine pounds and measure between 19 and 21 inches in length. Its lungs should be mature and ready to function on their own. The fetus fills all the space in your uterus, and will begin to drop into a head-down position that rests lower in your abdomen. This is called “lightening.”

You may notice your belly button is sticking out and your cervix begins to dilate. Your breathing should be easier once the baby drops, and the pressure on your lungs is relieved. However, you may find that you’ll have to urinate more often, as the baby presses on your bladder.

Getting Ready to Give Birth

By now, your due date is approaching and you should be seeing your caregiver every week to check for signs of labor. Just remember that your due date is a target, not a guarantee. In 85 percent of pregnancies, babies are born within a two week window around their due date, while only five percent are born on their actual due date.

What is Labor?

Labor is the interaction of your uterus, cervix and hormones. It begins when your body releases hormones that help soften the cervix and tighten the muscles of the uterus. This experience feels different to every pregnant woman.

Stages of Labor

There are three stages of labor.

- 1. The onset of true labor contractions until the cervix is fully dilated.
- 2. Continued full dilation of the cervix until the baby is born.
- 3. Expulsion of placenta or afterbirth.

Signs of Labor

Here are some of the signs that will tell you that you are going into labor. Call your physician when you begin to experience any of these signs:

- Contractions. These are a tightening and shortening of your uterine muscles. Your physician will instruct you in advance when to call, but it is usually when the contractions become regular. You can use the chart on page 46 to help you record your contractions.
- Ruptured Membrane. You’ll usually know when your water ruptures. That happens when your membrane breaks and allows almost two pints of fluid to gush out or form a slow steady trickle of warm fluid. Call your physician when this happens. Whether true labor has begun yet or not, you will probably be asked to go to the hospital for monitoring.
- Bloody Show. Pregnant women have a mucus plug which seals off the cervical canal, helping to prevent germs and bacteria from entering the uterus. This plug loosens and passes just before or during labor. It appears as a pink-tinged mucus discharge, as tiny blood vessels in your cervix bleed into the mucus causing this “bloody show.” Call your healthcare provider when this occurs.



True vs. False Labor

You may begin to experience false labor up to a month before the end of your pregnancy. False labor can include insufficient contractions of the uterus or painful spasms of the intestines, bladder and abdomen wall muscles. Here are some ways you can tell the difference between false labor and true labor. Remember, this is only a guide, so be sure to talk with your physician to decide what you should do.

- True Labor. You will know you are experiencing true labor if your contractions become regular, longer, closer together and stronger. In addition, when you walk, the contractions should feel strong and they should not go away when you lie down. The pain you feel should start in your lower back and radiate to the front.
- False Labor. Contractions are irregular and short, they do not get closer together and they do not grow stronger. Walking may not make false labor contractions feel stronger and they may go away if you lie down. You will probably feel the pain in the upper uterus and groin.

When It’s Time

When it comes time to go to The BirthPlace at St. Mary’s, make sure you have all your bags prepacked and ready to go. At the hospital, you will be given a private room or suite and a nurse from The BirthPlace will be assigned to you.

The nurse will ask you some questions about your health and your pregnancy. An initial vaginal exam will most likely be done to check your progression through labor.

As labor becomes more active, your nurse will be there to support you and answer questions. Your physician and nurse will do pelvic exams to check the progress of your cervical effacement and dilation, as well as check the baby’s position.

This is your special day, and we want to help make it is as comfortable as possible. Please let us know how we can best help you.

Packing List

Staying organized as you get closer to your delivery date will not only minimize confusion, it will help you enjoy the experience more. Here’s a checklist you can use to pack the things you’ll need at the hospital.

Mom’s Hospital Suitcase

- ☐ Support bra
 - ☐ Robe
 - ☐ Socks
 - ☐ Shampoo/conditioner
 - ☐ Toothbrush and toothpaste
 - ☐ Cosmetics and deodorant
 - ☐ Nightgowns
 - ☐ Slippers
 - ☐ Hairbrush and/or comb
 - ☐ Loose clothing for Mom to wear home
 - ☐ Reading materials
 - ☐ Your own pillow for comfort
- Please leave jewelry and other valuables at home.

Labor Coach’s Bag

- ☐ Camera with film or memory card/camcorder
- ☐ Address book with family and friends’ phone numbers
- ☐ Long distance calling card or mobile device
- ☐ CD player and tapes or CDs
- ☐ Snacks for coach (and change for vending machines)
- ☐ Massage and comfort aids
- ☐ Focal point object

Baby’s Hospital Suitcase

- ☐ Gown/sleeper
- ☐ Undershirt
- ☐ Receiving blankets
- ☐ Sweater or jacket, if needed
- ☐ Car seat (This is required by law. Your baby may not leave the hospital without one.)

Important phone numbers

OB/GYN _____

Pediatrician _____

Pharmacy _____

My prenatal appointments

Date _____ Time (am/pm) _____

My weight (pounds) _____ Fetal heart rate _____

Questions and answers _____

Date _____ Time (am/pm) _____

My weight (pounds) _____ Fetal heart rate _____

Questions and answers _____

Date _____ Time (am/pm) _____

My weight (pounds) _____ Fetal heart rate _____

Questions and answers _____



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