



Welcome to Rio Pecos Medical Associates!

Congratulations on your pregnancy! We are thrilled to join you on this remarkable journey. For over 65 years, we've proudly served the Roswell community, offering compassionate and expert care to expectant mothers like you.

At Rio Pecos Medical Associates, we know every pregnancy is unique. Our dedicated team is committed to supporting you every step of the way, ensuring you and your baby receive the highest quality care in a warm, welcoming environment.

From your first prenatal visit to delivery and beyond, we are honored to be part of this special time in your life. Thank you for trusting us with your care - we look forward to getting to know you and your growing family!

Warm regards, The Rio Pecos Medical Associates Team



OUR TEAM

At Rio Pecos Medical Associates our team of skilled and compassionate physicians bring decades of combined experience in obstetrics and gynecology. We are dedicated to providing the highest quality care, ensuring you and your baby are in expert hands every step of the way.

Throughout your prenatal care, you may have the opportunity to meet all the physicians in our practice. This is a great chance to get to know each provider, ask questions, and build a sense of trust and familiarity. We encourage you to take advantage of this opportunity so you can feel confident and comfortable with the doctor who will be there for your delivery.



DR. ERIC Y.
PETERSON, MD



DR. JOHN B. DACANAY, MD



DR. RICHARD MOONEY, MD



FALLON MOODY, FNP



DR. TREVOR MILLER, DO



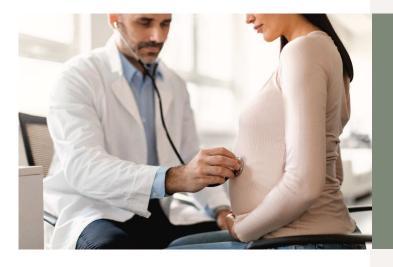
NANCY WALKER, FNP-C



KATRINA KELLY, CNM



DR. MONA HOMAFAR, MD



YOUR CARE SCHEDULE

Below is the routine schedule for pregnancy visits, however, because every pregnancy is different, you and your physician will determine what is best for you and your baby.

CONFIRMATION OF PREGNANCY VISIT

- Scheduled 8-10 weeks after your last menstrual period, (LMP)
- Complete physical examination, including pap smear (if due) and vaginal cultures

INITIAL OB VISIT

- Scheduled 2-4 weeks after confirmation visit
- Complete medical and pregnancy history
- Your physician will find Fetal Heart Tones using a Doppler on your lower abdomen or perform an ultrasound
- Be prepared with any questions you have about the pregnancy

FOLLOW-UP OB VISITS

- Scheduled every 4 weeks until the third trimester
- Then scheduled closer together depending on your risk factors
- Typically, the last month's visits are scheduled weekly until delivery
- At each OB visit, we will check: urinalysis, weight, blood pressure and fetal heart tones

PREGNANCY MILESTONES & IMPORTANT TESTS

Between 19 and 21 weeks:

Ultrasound - Fetal Survey or Anatomy Scan to assess the baby's anatomy, growth, development, and identify gender

Between 24 and 28 weeks:

Glucola test to screen for Gestational Diabetes. Please refer to the insert in this packet for more details

At 35 weeks:

GBS test (Group B Strep), a vaginal and rectal swab to check for GBS bacteria

Third trimester:

Tdap vaccine (Tetanus, Diphtheria, and Pertussis) will be offered to help protect your baby. Your physician will discuss this with you

After 35 weeks (or as needed):

Pelvic exam to check your cervix. Mild spotting after the exam is not uncommon, but please call our office if you have any concerns



STAYING HEALTHY

NUTRITION

Eating a balanced diet is especially important during your pregnancy.

The foods you consume provide the nutrients that you and your baby need.

SUGGESTIONS FOR EATING RIGHT DURING PREGNANCY

- A diet well-balanced in proteins, complex carbohydrates, fruits, and vegetables is recommended
- Five to six small meals daily are ideal to help minimize nausea and keep your blood sugar at a consistent level.
 Remember, moderation is key
- You should drink at least 8-12 cups of water daily
- It is recommended that you eat 3 sources of calcium daily such as: milk and other dairy products, broccoli, almonds, dark leafy vegetables, and fortified foods such as cereals, breads and juices
- Adequate fiber intake of 25 to 30 grams a day can promote healthy digestion, supports appropriate weight gain in pregnancy, helps regulate blood sugar levels and prevents constipation
- For healthy meal planning visit https://www.myplate.gov/ or speak with your assigned Care Coordinator if you participate in Rio Pecos Care Coordination

DIETARY RESTRICTIONS IN PREGNANCY

- Tobacco, marijuana, alcohol, and drugs are to be strictly avoided during pregnancy
- Excess caffeine should be avoided in pregnancy
- If you cannot avoid caffeine, it is recommended you have no more than two, eight ounce caffeinated beverages daily. Drinks that have caffeine include coffee, soda, tea, and energy drinks
- Avoid unpasteurized products such as soft cheeses, raw milk or products made with raw milk. If products are labeled as pasteurized they are safe to eat in moderation
- Avoid Saccharin. Sucralose and Acesulfame-K are likely safe in pregnancy; Aspartame is likely safe in pregnancy but has the theoretical risk of exposing an undiagnosed fetus with PKU to phenylalanine
- Certain types of fish should be avoided, particularly those containing a high level of mercury. Buy as close to fresh, local, and wild-caught as possible. Visit https://www.fda.gov/food
- Eat no more than 2 to 3 servings of fish a week
- If possible, avoid meats with nitrates (such as hot dogs and deli meats). If you do eat these, they should be cooked to steaming to lessen the risk of contamination from a bacteria called Listeria
- Red raspberry leaf and hibiscus teas should be avoided throughout pregnancy

PRENATAL VITAMINS

Take a daily prenatal vitamin with at least 800 mcg of folic acid and 27 mg of iron throughout your pregnancy. Any brand is fine, and no prescription is needed. If you feel nauseous, try taking it with food or at bedtime

EXERCISE

Exercise is encouraged during pregnancy. Most types of exercise are safe, but you should avoid activities that increase your risk of falls or injury. Walking, swimming, and yoga are great forms of exercise during pregnancy

SEX DURING PREGNANCY

Unless you have been recommended pelvic rest due to bleeding, cramping or other complications, sex is perfectly safe during pregnancy

TRAVEL

As long as there are no identified complications or concerns with your pregnancy, it is generally safe to travel at all times during your pregnancy. You may not want to travel too far from home when you are close to your due date. Ask your provider for his/her recommendations





THINGS TO AVOID DURING PREGNANCY

TOBACCO, ALCOHOL AND DRUGS

- Avoid all forms of tobacco. Smoking and secondhand smoke increase the risk of pregnancy complications, preterm birth, and birth defects
- No amount of alcohol is considered safe during pregnancy. Alcohol consumption can lead to fetal alcohol spectrum disorders
- Avoid recreational drugs. If you're taking prescription medications, discuss them with your healthcare provider to determine safety

If you have questions about things to avoid during pregnancy, please call us:

575-622-6322

ENVIRONMENTAL & ACTIVITY RISKS

- Avoid cleaning cat litter boxes. Cats can carry a parasite that causes toxoplasmosis, an infection that can harm your developing baby
- Avoid hot tubs and saunas. High temperatures, especially in the first trimester, may increase the risk of certain birth defects
- Avoid heavy weightlifting. Straining can increase the risk of injury and potentially lead to complications during pregnancy
- Limit hair treatments and chemical processes. Some hair dyes and chemicals may be absorbed through the scalp
- Avoid scuba diving during pregnancy.
 Pressure changes can cause gas bubbles in your baby's bloodstream (decompression sickness)

WHEN TO CALL YOUR PROVIDER

- Any persistent bleeding or spotting
- Persistent one-sided abdominal pain
- Large gush or persistent leak of fluid from vagina
- Persistent Headache (that does not go away with Tylenol)
- Severe vomiting, unable to keep anything down
- Painful urination that is persistent
- Persistent uterine cramping or tightening / possible labor
- Increased swelling in one leg that does not improve after rest and elevation
- Decrease or change in fetal movement
- Feeling of "something's just not right"

If you have any concerning symptoms or are not sure about something, please call our office and speak with our medical staff.

If our office is closed, we always have a doctor on-call for emergencies. Please call us and the answering service will connect you with a provider.



OVER THE COUNTER (OTC) MEDICATIONS



HEADACHES

- To prevent headaches, take magnesium oxide 400/500mg, two times per day and Riboflavin (b2) 200mg, two times per day
- Tylenol or Extra Strength Tylenol

HEAD COLD/ALLERGIES

- Increase fluids
- Saline nose drops/irrigation
- Humidifier
- Mucinex, Benadryl, Zyrtec, or Claritin

COUGH/DRAINAGE

- Cough drops
- Fluids (stay well-hydrated)
- Robitussin DM or Robitussin PE
- Dayquil, Mucinex DM, Chloraseptic throat spray keep the other bullets as they are

NAUSEA/VOMITING

- Emetrol, Vitamin B6, ginger, or Unisom
- Call for a prescription if ineffective

HEMORRHOIDS

- Hot sitz baths
- OTC options: Anusol, Tucks pads, Preparation-H

CONSTIPATION

- Increase fluids and fiber
- Use bulk-forming laxatives like Citracel, Metamucil, Colace, or Dialose
- It needed, try Peri-Colace, milk of magnesia, Miralax, or Fleet enema

INDIGESTION

- Tums up to 4 per day
- Pepcid 20mg twice a day or Prilosec OTC once a day
- Keep upright for one hour after eating

DIARRHEA

- Hydrate with sports drinks like Gatorade or Powerade (120 oz/24 hrs)
- Use Imodium A-D if symptoms persist beyond 24 hours

MISC

- Benadryl (for itching, rash, or sleep)
- Probiotics (okay to use)
- Gas X (for gas)
- Contact us if you experience yeast or discharge symptoms

FOR ADDITIONAL CONCERNS, DON'T HESITATE TO REACH OUT TO OUR OFFICE!

PREPARING FOR LABOR AND DELIVERY

PRE-REGISTER WITH HOSPITAL

Rio Pecos physicians deliver at both Eastern New Mexico Medical Center and Lovelace Regional Hospital Roswell. Please refer to the attached pamphlets for more information.

WHEN WILL I KNOW I'M IN LABOR?

The chart below will help determine if you are in labor.

If you have signs of true labor or if your water breaks, notify the doctor right away.

TRUE LABOR

Contractions are regular, get closer together

.

Contractions continue despite movement

•

Pain/discomfort is usually felt in the back and moves around to the front

•

Contractions steadily increase in strength

•

Cervix dilates

•

Bloody show may be present

FALSE LABOR

Contractions are irregular, do not get closer together, and last 20 to 40 seconds

•

Contractions may stop when you walk or rest or may change with change of position

•

Pain/discomfort is often felt in the abdomen

•

Contractions usually are weak and do not get much stronger

•

Cervix does not dilate

Usually, no bloody show is present



INDUCTION

Your due date is based on 40 weeks of pregnancy, and delivery typically occurs around that time. We recommend additional testing for your baby between 40 and 41 weeks. If concerns arise, or if labor has not started naturally, we may discuss inducing labor.

Induction involves using medication to stimulate contractions. This process can take more than 24 hours to be effective and may increase the likelihood of a cesarean delivery, especially for first-time mothers. It is important to allow your baby to fully grow and develop before scheduling a delivery.

CESAREAN BIRTH AND RECOVERY

A cesarean birth may be planned or unplanned. During the procedure, nurses, anesthesia staff, and your physician will be in the operating room with you. If needed, a team of neonatal healthcare providers will also be present.

Your blood pressure, heart rate, and rhythm will be monitored, and a nurse will monitor your baby's heart rate. Once surgery begins, your baby will be delivered within minutes. The remainder of the procedure, including closing the incision with staples or sutures, typically takes 45–60 minutes.

After surgery, you will be moved to the Recovery Room for monitoring and initial postpartum care.

EPISIOTOMY/VACUUM

We aim to help you deliver your baby with as little trauma as possible. Episiotomies are not routinely needed, and many women give birth without requiring stitches. However, in some cases, a small incision at the vaginal opening may be necessary to assist with delivery. If this is needed, we ensure you are numb, even if you do not have an epidural, and the area will be stitched after delivery. The stitches dissolve over time and do not need to be removed. We will also provide medication to keep you comfortable after delivery.

Our team is highly skilled in neonatal vacuum-assisted deliveries when medically necessary. We will only recommend this method if it is the safest option for you and your baby. In certain situations, vacuum assistance is the best way to ensure a safe and smooth delivery.



POSTPARTUM

CONGRATULATIONS ON YOUR NEW ARRIVAL!

Welcome to motherhood! We are thrilled to support you on this incredible journey. As you adjust to life with your new baby, we want to ensure you have the resources and care you need during this postpartum period.

WHAT TO EXPECT AT YOUR POSTPARTUM VISITS

2-WEEK VISIT

• Healing Check:

We will assess how your body is healing, including any stitches or incision sites if you had a C-section

• Breastfeeding Support:

Let us know about any challenges you may be experiencing with nursing or feeding

• Emotional Well-being:

We'll check in on how you're feeling physically and emotionally as you adapt to motherhood

• Baby Check:

While this visit focuses on you, we can answer any questions about your baby's care or feeding schedule

4-WEEK VISIT

• Recovery Assessment:

We will evaluate your overall recovery and address any lingering discomfort or concerns

• Physical Activity:

Discussion about when and how to safely resume exercise and other activities

• Family Planning:

We can talk about contraception and your plans for future pregnancies if you wish

Mental Health Screening:

We will ask questions about your mood and energy levels to screen for postpartum depression

POSTPARTUM DEPRESSION: KNOW THE SIGNS

It's normal to feel overwhelmed, tired, or emotional after giving birth. However, if you experience persistent sadness, lack of interest in your baby, feelings of hopelessness, or thoughts of harming yourself or others, it's crucial to seek help. Postpartum depression is common and treatable. You are not alone, and we are here for you.

REACH OUT IMMEDIATELY IF YOU NOTICE

- Severe mood swings or anxiety
- Difficulty bonding with your baby
- Changes in sleep or appetite that feel extreme

Call us if you need support or guidance. Your mental health is just as important as your physical health.

TIPS FOR RECOVERY

- Rest as much as possible: Sleep when your baby sleeps, and don't hesitate to ask for help
- Stay hydrated and eat well: Your body is healing and may still need extra nutrients, especially if you're breastfeeding
- Be gentle with yourself: Recovery takes time, and it's okay to prioritize your physical and emotional well-being

WE'RE HERE FOR YOU

Congratulations again on your new baby! You're doing an amazing job.

Remember, you are never alone, our team is here to guide and support you every step of the way.

For questions or concerns, call us anytime. We look forward to seeing you at your postpartum visits!

