

Women's Health
What You Need to Know



Women's Health Checklist

Please take a few minutes to complete this checklist. (The numbers and colors on the checklist match up with the information on the following pages.) Then review the following information with your health care provider.

Check all that apply:

- African American
- SE Asian
- Mediterranean
- Eastern European
- American Indian
- Hispanic
- White
- Arab
- Asian

FAMILY HISTORY

Do you, your family, or sexual partner have...

- 1. High blood pressure
- 2. Cancer
- 3. Diabetes
- 4. Hemophilia
- 5. Thalassemia or Sickle Cell disease or trait
- 6. Tay Sachs
- 7. Cystic Fibrosis
- 8. Intellectual disability or mental retardation
- 9. A spinal defect (such as spina bifida or neural tube defect)
- 10. A cleft lip or palate
- 11. Down syndrome or other chromosomal abnormality

LIFESTYLE HISTORY

Do you...

- 1. Smoke or use tobacco products or live with someone who does
- 2. Drink any type of alcohol (beer, wine, or liquor)
- 3. Use lead or chemicals at work, in hobbies, or at home
- 4. Plan to get pregnant in the future
- 5. Use or plan to use a method of birth control
- 6. Take any prescription or over-the-counter drugs
- 7. Exercise less than 2 times a week

Have you or your sexual partner...

- 8. Had more than one sexual partner in the last 12 months or had sex with a bisexual partner
- 9. Used or presently use street drugs

NUTRITION HISTORY

Do you...

- 1. Eat less than three meals some days, or practice fasting (not eating for 24 hours or longer)
- 2. Eat few or no meats, only vegetables, or avoid certain foods, or eat a special diet
- 3. Have more than 2 drinks with caffeine a day (coffee/tea/soda)
- 4. Think you are underweight or overweight
- 5. Vomit more than 3 times a month after eating or use laxatives or water pills for weight loss
- 6. Have you had weight loss surgery (gastric bypass, stomach stapling surgery, or banding surgery)
- 7. Take a multivitamin with folic acid daily
- 8. Eat more than 6 ounces of tuna or shrimp weekly
- 9. Need information about breastfeeding a baby

MEDICAL HISTORY

Have you now or ever had...

- 1. Epilepsy (seizures or spells)
- 2. Diabetes/Gestational Diabetes
- 3. High blood pressure
- 4. Heart disease
- 5. Sexually transmitted diseases (Chlamydia, Gonorrhea, Syphilis, Herpes, Genital Warts, Trichomonas, Bacterial Vaginosis)
- 6. Abnormal pap smear
- 7. Hepatitis B or C
- 8. Acne treatment (Accutane)
- 9. Dental problems or less than 2 dental check-ups per year
- 10. PKU or were you on a special diet in childhood
- 11. Blood clots in the legs or lungs (Deep Vein Thrombosis)

Mark here if you have not had...

- 12. Rubella (German measles) or Rubella Immunizations

PSYCHOSOCIAL HISTORY

Do you have...

- 1. Any specific fears about being pregnant or having a baby
- 2. Any fears or concerns about how a baby will affect your relationship with your partner
- 3. A child/children who are living with someone else (relative, adoptive parent, foster parent)
- 4. Any questions or concerns about current or past physical, emotional or sexual abuse, or concerns for your safety
- 5. No one you can count on to talk to or help you with problems
- 6. A history of depression
- 7. A history of depression with medical intervention
- 8. Increased stress in the last year (changes in work, home, or marital status, death of a loved one, feelings of being overwhelmed, anxious, depressed, sad, or angry, changes in sleep pattern)

REPRODUCTIVE HISTORY

Have you ever had...

- 1. A history of "female" surgery (ovaries, tubes, uterus and/or cervix)
- 2. History of an abnormal uterus or cervix
- 3. An abortion
- 4. A miscarriage/miscarriages
- 5. Four or more pregnancies
- 6. Less than 12 months between pregnancies
- 7. An infant weighing more than 9 lbs. at birth
- 8. An infant weighing less than 5 lbs. 8oz. at birth
- 9. A stillbirth
- 10. A baby that died before one year of age
- 11. An infant with a birth defect and/or genetic disorder
- 12. An infant stay in an intensive care nursery

Are you...

- 13. Age 16 years or less
- 14. Age 34 years or greater



Family History

Certain health problems run in ethnic groups and cultures. If you have a family history of health problems or birth defects, your future children may be at risk.

Talk with your physician, a social worker, or other mental health professional if you have any of these concerns.

1. Women who have a family history of high blood pressure are at increased risk of developing high blood pressure during pregnancy.
2. Cancer can run in families. Consult a genetic counselor to discuss your risk.
3. A family history of diabetes can increase a woman's risk for developing diabetes during pregnancy. Talk to your doctor about ways to decrease your risk.
4. Hemophilia is a genetic disease in which the blood fails to clot normally.
5. Thalassemia and Sickle Cell disease are inherited and are found more often in people of Mediterranean, African American, Hispanic, and South Asian (Arabs, Indians, Southeast Asians) descent.
6. Tay Sachs is an inherited disease in the Ashkenazi Jewish population.
7. Cystic Fibrosis (CF) is an inherited disease that causes abnormal secretions in the lungs. It is more common among whites.
8. There are many causes of mental retardation. If you have a family history of mental retardation you may want to talk to a genetic counselor.
9. If you have had a child with spina bifida, you are at greater risk of having another child with spina bifida. Take 4 mg. of folic acid for at least one month prior to becoming pregnant and the first three months of your pregnancy. The 4 mg. level can only be obtained through a doctor's prescription. Do not try to get this dose of folic acid from multivitamins as you will get too much of the other vitamins that can harm you and your unborn baby.
10. The risk of having a child with a cleft lip and/or palate is increased if you have a family history of these conditions. All women of childbearing age should take 400 mcg. of folic acid daily.
11. If you have a family history of Down syndrome or any other chromosomal or genetic abnormality you should consult a genetic counselor to determine your risk.

If you would like more information, please call the Oklahoma State Department of Health at 1-800-522-0203, for genetics questions call 405-271-6617 or visit www.health.ok.gov.

Lifestyle History



Talk to your health care provider if you have any of these concerns.

1. Be tobacco-free and live a healthier life. Having a healthy baby is more likely if you are tobacco free. Smoking during pregnancy increases the risk of a miscarriage, stillbirth, or infant death. Smoking during and after pregnancy may contribute to Sudden Infant Death Syndrome (SIDS). Pregnant women should avoid exposure to secondhand smoke.
2. Alcohol can affect a woman's health. If a woman is pregnant or wants to become pregnant, she should not drink alcohol. Alcohol can harm an unborn baby at any time, even before a woman knows she is pregnant. Drinking alcohol while pregnant is the leading cause of birth defects and disabilities; these disorders are known as fetal alcohol spectrum disorders (FASDs). Effects of FASDs last a lifetime.
3. A woman should avoid exposure to some chemicals before she stops using birth control and during pregnancy. Some chemical mixtures can be harmful to an unborn baby. A pregnant woman can breathe, eat, drink, or absorb chemicals through the skin. Hobbies such as stained glass, ceramics, and jewelry making can expose her to lead. Lead poses health risks to young children and unborn babies. Furniture refinishing and oil painting can expose her to organic solvents. Owning pets or working in a garden may expose her to pesticides.
4. A reproductive life plan is a set of goals that a woman and her partner can make about having or not having children. Women should consider how many children they want and when they want to have them. Most women have at least one baby sometime in their life, even if they do not plan on it. One of the best things a woman can do to have a healthy baby is to lead a healthy life long before getting pregnant. To prevent an unplanned or mistimed pregnancy, your health care provider or county health department can assist you with getting birth control.
5. Women who take birth control pills should be sure to choose a variety of foods and take a multivitamin with 400 mcg. of folic acid daily. Birth control pills and other methods may cause a loss of B vitamins and folic acid.
6. Some prescribed medicines can cause birth defects or affect a pregnancy. Before you stop using birth control, you should schedule an appointment with your health care provider to review all medicines and ask if you should stop or reduce the dosage. If you are sexually active, you should also think about the non-prescription drugs you are taking. Some over-the-counter (OTC) drugs may affect an unborn baby.



7. Become active for at least 30 minutes on most, if not all, days of the week. Physical activity improves your health by increasing your energy, improving your mood, building muscle tone, strength and endurance, reaching/staying at a healthy weight, and helping you sleep better. There is no proof that gentle exercise has any bad effects on pregnancy. Always check with your health care provider before starting an exercise program.
8. If you or your partner has had more than one sexual partner or have had sex with a partner who is bisexual (a person who has had sex with both men and women), you should be tested for HIV (the AIDS virus) and sexually transmitted diseases (STDs). Many infected people do not know they are infected because some people with STDs and HIV show no symptoms. A person may have HIV for many years with no AIDS symptoms, but can still pass the virus on to others including an unborn baby. The surest way to avoid spreading STDs and HIV is to: 1) not have sex, or 2) be in a long-term relationship with one sexual partner who has been tested and is not infected. Your health care provider or county health department can assist you with testing.
9. When pregnant, anything you eat, drink, or smoke affects you and your baby. Street drugs can cause many problems in an unborn baby. Using needles to inject drugs increases the chances of contracting HIV or hepatitis B or C. Stop the use of all street drugs before you stop your birth control method. If IV drugs have been used at any time, you should be tested for HIV and hepatitis B and C before stopping your birth control method.

If you would like more information, call or visit these websites:

The Oklahoma Tobacco Helpline at 1-800-QUIT-NOW (784-8669), Reach Out Hotline (Emergency Mental Health Crisis Intervention, Alcohol & Drug Referral, Suicide Prevention) at 1-800-522-9054, Oklahoma Poison Control Hotline at 1-800-222-1222, AIDS Hotline at 1-800-535-2437, March of Dimes www.marchofdimes.com, Centers for Disease Control & Prevention www.cdc.gov, Center for Substance Abuse Prevention <http://www.samhsa.gov/>, National Center on Birth Defects & Developmental Disabilities www.cdc.gov/ncbddd, National Heart, Lung & Blood Institute www.nhlbi.nih.gov. To locate the nearest health department, call 1-800-522-0203 or visit the Oklahoma State Department of Health at www.health.ok.gov.



Talk with a nutritionist (Registered Dietitian, RD) or your health care provider if you have any of these concerns.

1. If you skip meals a lot, you may not be getting enough calories, vitamins, and minerals. It is important to learn and practice good eating habits before and during pregnancy. Fasting can harm a growing baby. Stop fasting before stopping your method of birth control. Be sure to eat a variety of foods every day.
2. Healthy food choices are important before and during pregnancy. Make sure your meals and snacks have enough calories, protein, and important nutrients. Restricted or special diets may be low in some foods needed for good health and important to a baby's growth and development.
3. Coffee, tea, sodas, and colas are common sources of caffeine. These drinks are low in nutrients and often replace healthier choices such as milk and fruit juice. High caffeine intake may delay conception. It's wise to limit caffeine intake to less than 200 mg. a day during pregnancy (about 12 ounces of coffee or other drinks with caffeine).
4. Try to get to a healthy weight before you get pregnant. Underweight women have a risk of having a small, sick baby, getting a disease, or taking longer to recover from an illness. Overweight and obese women have a higher risk of developing health problems and having a baby with birth defects. A RD or health care provider can help you reach your healthy weight safely, before you stop taking your method of birth control.
5. Repeated vomiting and over using laxatives and water pills can keep you from getting the nutrition you and your baby need and cause life threatening health problems. Be sure to stop these practices before stopping your method of birth control, and talk with a RD or health care provider if you need help.
6. Women who have had weight loss surgeries need to avoid getting pregnant for 12-18 months after surgery and talk with a RD or health care provider before getting pregnant. These operations can result in low levels of iron, folic acid, vitamin B12, and calcium. All are needed for good health and for a healthy pregnancy.
7. All women of childbearing age should take a multivitamin with 400 mcg. of folic acid or a prenatal vitamin every day. If you get pregnant, folic acid helps to keep your baby from having birth defects of the brain and spine. Be sure to tell your health care provider about any additional supplements or herbs that you take, because some can be harmful. If taken while pregnant, supplements high in vitamins A and D could cause birth defects and severe mental retardation in infants.
8. Eating fish has many health benefits but be sure to limit albacore, "white tuna", and tuna steak to less than 6 ounces per week because they have higher levels of mercury. Shark, swordfish, king mackerel, and tilefish should be avoided. These fish have high levels of mercury and can harm your unborn baby or young child. Adults can safely eat up to 12 ounces a week of fish and shellfish that are lower in mercury (shrimp, canned light tuna, salmon, pollock, and catfish). Check with the Oklahoma Department of Environmental Quality for state specific guidelines on the safety of locally caught or store bought fish at <http://www.deq.state.ok.us/csdnew/fish/index.htm>.
9. Breastfeeding is one of the best things you can do for you and your baby. It can help you lose your pregnancy weight faster and creates a special time for you and your baby to bond. Breastfeeding can reduce your risk of having breast and ovarian cancers. Human milk is easy to digest and changes as your baby grows to meet your baby's specific needs. Breastfed babies have better immunity, fewer allergies and infections (including ear infections), less constipation or diarrhea, less risk of Sudden Infant Death Syndrome (SIDS), and less trips to the hospital for serious illnesses. If you decide to feed formula, talk with your health care provider for options and follow the manufacturer's directions for mixing.

If you would like more information, visit: www.choosemyplate.gov, Academy of Nutrition and Dietetics (AND) www.eatright.org, March of Dimes Get Ready for Pregnancy www.marchofdimes.com/pregnancy/get-ready-for-pregnancy.aspx, Health & Nutrition Information for Pregnant & Breastfeeding Women www.choosemyplate.gov/pregnancy-breastfeeding.html.

Medical History



Talk with your health care provider if you have any of these concerns.

1. Seizure medication can cause birth defects. You should see your doctor before you stop your method of birth control to make sure you are taking the right medication.
2. Birth defects are more common in women who have diabetes. Frequent doctor visits during your pregnancy will help you to keep good control of your blood sugar.
3. Women with high blood pressure before pregnancy are at risk for pre-eclampsia during pregnancy.
4. Heart disease can be a risk to both the mother and the baby. Medications for heart disease may cause birth defects.
5. A woman with an untreated STD may not be able to have babies or can pass the disease to her baby.
6. Pap smears can detect early stages of cervical cancer. Have pap tests to ensure early detection and treatment of cervical cancer. Treatment should occur before stopping birth control.
7. Hepatitis B and C are serious diseases of the liver that can be passed to the unborn baby.
8. Accutane (isotretinoin) can cause birth defects of the face and heart. You should use a condom and another method of birth control every time you have sex, and do not attempt to get pregnant until you have been off Accutane for at least three months.
9. Pregnant women with gum disease are at risk of delivering a premature baby. You should visit your dentist regularly before becoming pregnant and continue having check-ups during your pregnancy.
10. A woman with PKU is at risk for having a baby with birth defects. You need to be on a low phenylalanine diet for at least three months before you become pregnant and during the entire pregnancy.
11. Medications such as blood thinners can cause complications with your pregnancy. Talk with your doctor before you stop your method of birth control.
12. Rubella can be passed to your baby and cause birth defects or fetal death. It's important to be current on your vaccinations before becoming pregnant.



Psychosocial History

Talk with your physician, a social worker, or other mental health professional if you have any of these concerns.

1. Fears and concerns grow from not knowing what to expect from pregnancy or how pregnancy might affect your relationship with a partner. Having questions answered and planning the best time for a pregnancy are often helpful in reducing or eliminating fears.
2. Having a baby can be a very enriching experience and can bring a couple closer together. However, having a baby never solves any problems that exist in a relationship and can make existing problems more stressful. Parents need support from each other to be loving, caring parents.
3. If you have a child who is living with someone else (relative, adoptive parent, foster parent), you may want to talk with a counselor about your feelings for wanting another pregnancy.
4. One in four women is in an abusive relationship; you are not alone. Abuse can be physical, sexual, verbal, or emotional. Abuse can lead to a low birth weight baby.
5. Having family and friends that you can depend on are important before, during, and after pregnancy. Stress can increase the risk of an early birth. Making time to take care of yourself, spend time with your partner, and socialize with your friends reduces the risk of a preterm birth.
6. Women who are not happy about their pregnancy, or think their partner or family is unhappy about the pregnancy, are more likely to be depressed. Depression may lead to poor nutrition and preterm and low birth weight babies.
7. For women with depression, counseling before becoming pregnant helps plan for a safer pregnancy. Some medications for depression are not safe to take during pregnancy. Talk with your physician about any medications that you are currently taking.
8. Stress is related to preterm birth and low birth weight. To reduce stress, take a walk, breathe deeply, take a bubble bath, or talk to a friend.

If you would like more information, please call or visit: the Oklahoma Domestic Violence Hotline at 1-800-522-SAFE (7233), Postpartum Depression Hotline at 1-800-944-4PPD (1-800-944-4773) or visit <http://postpartum.net>, First Candle, an agency that works to stop

SIDS and stillbirth, at 1-800-221-7437 or visit www.firstcandle.org.

Reproductive History



Talk with your health care provider if you have any of these concerns.

1. Surgery on the reproductive organs increases the chances of miscarriage or premature delivery.
2. Abnormally shaped reproductive organs can contribute to miscarriage or premature birth. Early identification of a cervix that opens too easily may be helpful to prevent problems leading to preterm birth. Pelvic exams prior to pregnancy are recommended.
3. A history of repeated abortions could increase the risk of miscarriage.
4. Physical abnormalities as well as medical and hereditary conditions may cause miscarriages. If you have had more than two miscarriages, talk with a genetic counselor and visit your health care provider to have a medical evaluation performed.
5. A history of four or more pregnancies increases the risk for chronic diseases and complications in future pregnancies.
6. Medical conditions such as anemia, low birth weight, and premature delivery are more common in closely spaced pregnancies. Spacing pregnancies 2 years apart is recommended to replace nutritional stores.
7. Women who have given birth to babies weighing more than 9 pounds are at risk of having gestational diabetes in future pregnancies. High birth weight increases the risk for birth injuries.
8. Infants weighing less than 5 pounds 8 ounces are at greater risk for health problems. Women who have had a low birth weight baby should take a multivitamin with 400 mcg. of folic acid and have a preconception appointment.
9. Women who have a history of stillbirths are advised to continue routine exams, take a multivitamin with 400 mcg. of folic acid, eat a balanced diet, and avoid alcohol, drugs, and tobacco.
10. Deaths of infants prior to one year of age are commonly caused by prematurity or birth defects. Knowing the exact cause of a baby's death is helpful in providing medical care for future pregnancies.
11. About 4 percent of the general population has a birth defect. The risk is greater in women who have previously given birth to a baby with a birth defect.
12. A woman who has a history of having an infant who required a stay in a neonatal intensive care unit (NICU) is advised to visit with her physician and the child's pediatrician to identify a plan for future pregnancies.
13. Women age 16 or less are at risk for delivering prematurely, having low birth weight babies, or developing anemia during pregnancy.
14. Infants of women age 34 or greater are at increased risk of medical and genetic conditions such as Down syndrome. The mother is at an increased risk of developing gestational diabetes, hypertension, anemia, and postpartum bleeding.

For more information, please call: The Oklahoma State Department of Health at 1-800-522-0203 or visit www.health.ok.gov, the March of Dimes at 405-943-1025 or visit www.marchofdimes.com.



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Preparing
for a
Lifetime
It's Everyone's Responsibility



Oklahoma Maternal and Child Health

