

<p>Date:</p> <p>1. Initial Gestational Diabetes Class (2 hours group class, 1-hour individual appointment)</p> <hr/> <ul style="list-style-type: none"> • Normal metabolism • GDM/diagnosis • Maternal risks • Exercise • Medication management • Self-monitoring of blood sugar • Basic nutrition for pregnancy • Meal planning 	<p>Date:</p> <p>4. Preparing for Birth Class (1 hour)</p> <hr/> <p><i>Scheduled at week 35-36 of pregnancy</i></p> <ul style="list-style-type: none"> • Review food and blood sugar records • Diagnosing diabetes after delivery • Risk factors • Post-partum testing guidelines • Post-partum nutrition guidelines • Breastfeeding • Bring meter and logs
<p>Date:</p> <p>2. Carbohydrate Counting (1 hour)</p> <hr/> <p><i>2 weeks after initial class</i></p> <ul style="list-style-type: none"> • Review food and blood sugar records • Food labels • Dining out • Carbohydrate counting • Bedtime snacks • Bring meter and logs • Additional meal planning 	<p>Date:</p> <p>5. Post-Partum Appointment (2 hours)</p> <hr/> <p><i>Scheduled 4-10 weeks after baby is born</i></p> <ul style="list-style-type: none"> • Breastfeeding guidelines • Meal plan adjustments as necessary • Blood sugar review as needed • Edinburgh depression scale • Review of OGTT • Reducing risk factors • Exercise • Pre-conception care • Follow up care
<p>Date:</p> <p>3. Follow Up (30 minutes)</p> <hr/> <p>All individual</p> <p><i>These will be scheduled as needed throughout pregnancy based on your individual needs</i></p> <ul style="list-style-type: none"> • Review food and blood sugar records • Meal plan adjustments as necessary • Bring meter and logs 	





Mary & Dick Allen
Diabetes Center

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How did the Doctor know I have Gestational Diabetes (GDM)?

Between the 24th and 28th week of gestation (pregnancy), there is an increase in the circulating female hormones of pregnancy. During this time, the body may begin to show some insulin resistance and carbohydrate intolerance.

Laboratory Tests

Women at risk may have a **1-hour GTT** (glucose tolerance test). If the result is ≥ 200 , you are diagnosed with GDM. If the result is ≥ 140 , the doctor may then schedule a 3-hour GTT to be done. This is a test where you drink a carbohydrate loaded liquid and then your blood is drawn at one hour, two hour, and at three hour intervals. During the **3-hour GTT** there are four glucose results; only two of the results need to be high (above normal) to have a diagnosis of gestational diabetes. If one value is high, per Sweet Success guidelines, the MD may consider having patient follow the Sweet Success guidelines. At the first prenatal visit, if a woman is at risk, she should receive a **Hemoglobin A1c (blood test)**. If this is $\geq 5.7\%$, she should be referred to Sweet Success. If this number is less than 5.7%, the woman should then take a **2-hour, 75-gram GTT at 24-28 weeks**. She needs only to have one high number out of three to be referred to Sweet Success.

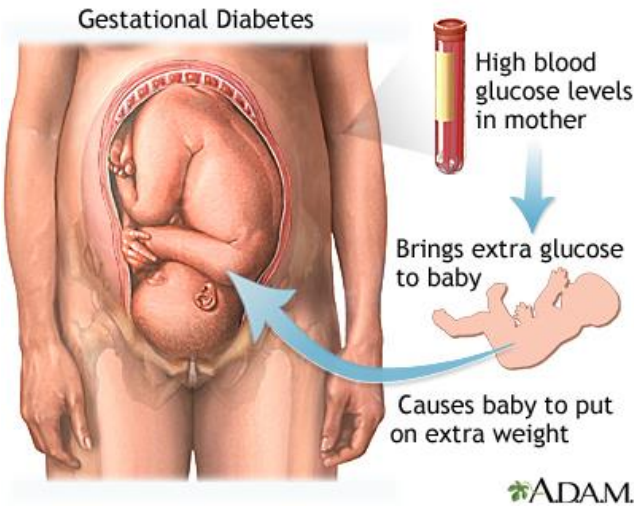
The following are the Sweet Success guidelines for diagnosis:

A1c	$\geq 5.7\%$			
My Result				
75 g 2-hr	Fasting $\geq 92\text{mg/dL}$	1 hour $\geq 180\text{mg/dL}$	2 hour $\geq 153\text{mg/dL}$	
My Results				
50 g 1-hr GTT		1 hour $\geq 140\text{mg/dL}$		
My Result				
100 g 3-hr GTT	Fasting $\geq 95 \text{ mg/dL}$	1 hour $\geq 180 \text{ mg/dL}$	2 hour $\geq 155 \text{ mg/dL}$	3 hour $\geq 140 \text{ mg/dL}$
My Results				

Will I need Medication Management?

For some women, diet and/or exercise may not be enough to control blood sugars. If you need medication management, it does not mean you have not tried hard enough or that you have failed. **Approximately 1 out of 10 women will need medication management.** Your doctor will determine if you need to start insulin or oral medications. If you do, your Sweet Success educator will provide education on an individual basis. Our goal is a healthy baby!

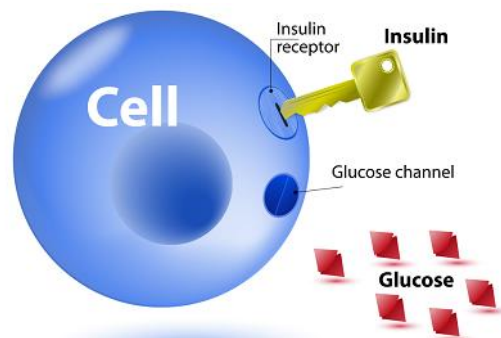
Gestational Diabetes Mellitus



Gestational diabetes mellitus (GDM) is defined as a glucose (carbohydrate) intolerance of varying severity with onset during pregnancy affecting 10-14% of the pregnant population. When given the diagnosis you may feel guilty or that you have failed. It is not your fault! Gestational diabetes occurs as a result of the changes in your female hormones and their increased production during pregnancy.

Metabolism of GDM

As pregnancy advances, the body naturally produces more hormones related to pregnancy. These hormones include human placental lactogen (HPL), prolactin, estrogen, progesterone, growth hormone and cortisol. These hormones are stronger than the hormone insulin. As the pregnancy advances, insulin has a more difficult time working, resulting in "insulin resistance." Your body still produces insulin and may attach to a body cell, but it may be unable to open the cell to allow the sugar (glucose) to leave the bloodstream to be used for fuel. The sugar will not be able to enter the cell, thus increasing the circulating blood sugar level. Not all cells are resistant to insulin, but with the increasing weight, advancing pregnancy and hormone production, the insulin will continue to work less effectively, increasing the insulin resistance.



The Importance of Blood Sugar Control During Pregnancy

To help reduce the risks of any of these complications, it is important to maintain good blood sugar control throughout your entire pregnancy and up until the day of your delivery. If you are having difficulties keeping your blood sugars within range, please contact a Sweet Success diabetes educator.

Fetal Risks with High Blood Glucose

Macrosomia

The baby has its own pancreas which produces insulin at 13-18 weeks of age or post conception. Nutrients and sugar cross the placenta. If there is an elevation in the mother's blood sugar, the blood sugar will also cross the placenta. In response to the mother's high blood glucose, the baby will produce extra insulin. This excess insulin that the baby has produced allows protein and fat to be stored, which makes the baby grow and gain weight. The baby will have an increase in fat deposits. The term for a large baby is macrosomia (usually babies larger than 4000 grams or about 8 lbs. 14 oz). The baby may be large in size, while the organs are still maturing at their normal rate.

Shoulder Dystocia/ Brachial Plexus Injuries

Larger babies may have a more difficult time being delivered vaginally. Birth injuries may occur due to the very large size of the baby. This is seen because of the disproportionate enlargement of the trunk and shoulders. The shoulders may become stuck and unable to pass during vaginal delivery, or damage to the nerves in the shoulders and arms can occur due to the trauma.

Premature Contractions/Delivery

Women with larger babies are at risk for premature contractions or early delivery due to the extensive stretching of the uterine walls. There are other risk factors with premature delivery. If you are placed on medication for premature contractions please inform your diabetes educator.

Respiratory Distress

If the baby is born prematurely, the baby's lungs may not be mature and may not have enough of the slippery substance called surfactant. This substance helps baby's lungs to work effectively when they breathe on their own. Surfactant allows the lungs to expand when breathing in and contract when breathing out. If the level of surfactant is not adequate, respiratory distress (breathing problems) may occur after delivery.

Jaundice

Jaundice of the baby occurs more often in women with diabetes. The baby is born with higher than normal amount of red blood cells. When the liver breaks down the red cells the waste product is called bilirubin. The young liver may not be able to handle the workload to breakdown all of the extra cells. The pigments of the extra red blood cells that are broken down are what give the yellowness or yellow hue to the skin until they are reabsorbed.

Fetal Hypoglycemia

It is rare for babies to be born with diabetes. Your baby is at a greater risk for developing low blood sugar (hypoglycemia). Due to the extra insulin the baby may have produced in response to your higher blood sugar levels, as well as the immaturity of the pancreas, it may not be able to slow the production of insulin immediately after delivery. This results in a lower blood sugar (glucose) for the baby after delivery. The baby will be taken to the nursery and a blood sugar test will be done. It utilizes the same steps/process you use to test your blood sugar. They will use a lancet and penetrate the skin on the heel. If the baby's blood sugar is low (less than 40 mg/dl), they will try to have the baby breastfeed early or formula feed as necessary.

Maternal Risks

- After the baby is born, there is a 92% probability that the diabetes will go away.
- 50% of women may develop type 2 diabetes within 5-8 years after diagnosis of GDM.
- Reaching and maintaining a healthy weight and becoming physically active can reduce your risk factors for diabetes from 60% to 25%.

Emotional Support

Ask questions of your health care team - they can help you understand things more clearly. Here are a few things that can help make it easier for you:

1. Have your significant other, spouse, friend or family member come with you. They can be great support during your visits. Keep yourself busy. Take walks, read books and spend time seeing friends.
2. The emotional impact of being pregnant and managing gestational diabetes can increase your stress levels.
3. As part of your health care team, we will be glad to provide you with support. If there is a need for additional support, please contact Hoag Maternal Mental Health Program: (949) 764-8191.
4. **The Mary and Dick Allen Diabetes Center is hosting a virtual support group for women diagnosed with gestational diabetes. Join others living with gestational diabetes to support, learn from, and encourage each other through this special season of life. The support group is led by a National Board Certified Health and Wellness Coach. Sign up information can be accessed from hoag.org/GDM-video. For questions or assistance signing up, please contact 949-764-8065.**



Hoag Maternal Mental Health Program

Hoag Maternal Mental Health Program is a collaboration between the Pickup Family Neurosciences Institute and Women's Health Institute. We understand the importance of identifying and treating mental health conditions before, during and after pregnancy to ensure healthy outcomes for both mothers and babies.

The program is focused on four core principles:

- 1. Universal Screening** – We promote screening in physician clinical offices for maternal mental health needs during pre-conception, pregnancy and postpartum.
- 2. Connection to Support Services** – Our support line helps connect mothers and doctors with therapists, psychiatrists, nurses and other resources in a timely manner.
- 3. Early Intervention and Treatment** – The Maternal Mental Health Outpatient Clinic at Hoag provides comprehensive mental health evaluation and treatment for pregnant and postpartum women struggling with a variety of mental health conditions, such as depression, anxiety, panic disorder, post-traumatic stress disorder, bipolar spectrum, obsessive compulsive disorder and sleep disturbances, as well as other conditions.
- 4. Community Education** – Our community education goal is to decrease the stigma and increase awareness about the importance of including maternal mental health as part of comprehensive pregnancy and postpartum care.

Maternal Mental Health Outpatient Clinic

Women who are currently pregnant, postpartum (up to one year) or planning to conceive and desire a pre-conception medication safety evaluation can be referred to the clinic.

Clinic services include:

- Pre-conception planning (women with existing mental health conditions or currently taking medications and planning to conceive).
- Mental health assessment during pregnancy and postpartum.
- Individual and group psychotherapy.
- Medication safety evaluation during pregnancy and breastfeeding.
- Pharmacogenomics testing.
- Connection to support services.

Learn more at hoag.org/mmh or call 949-764-8191 for more information.

Clinic Information

Hours: Monday through Friday, 9 a.m. to 5 p.m.

Location: 500 Superior Avenue, Suite 315, Newport Beach, CA 92336

Fax: 949-764-4268

For **scheduling and insurance eligibility**, please call 949-764-8191.

To learn more about our clinic and connection to support services, please call our **Maternal Mental Health Support Line** Monday through Friday from 9 a.m. to 5 p.m. at **949-764-8191**.

Meet Our Team



Sarah Kauffman, M.D.
Physician Director

Dr. Kauffman is a Columbia trained, board certified psychiatrist who specializes in reproductive and forensic psychiatry. She completed her medical training at the University of California, San Diego (UCSD) and her general psychiatry residency training, as well as a women's mental health fellowship and forensic psychiatry fellowship, at Columbia University in NYC. Dr. Kauffman has authored papers and book chapters related to the intersection of women's mental health and forensic psychiatry.



Elizabeth Whitham, M.D., M.A.
Reproductive Psychiatrist

Elizabeth Whitham, M.D., M.A. is board-certified psychiatrist who specializes in reproductive psychiatry. She completed her general psychiatry residency training at Louisiana State University in New Orleans, and specialized training in Women's Mental Health at Loyola University and the Hines VA Hospital. She has a master's degree in the sociology of Women's Health and brings this perspective to her practice of medicine, placing patients' unique identities at the center of problem-solving in healthcare. She has authored papers on depressive disorders and has worked as a researcher on clinical studies of bipolar disorder and the depressive mixed state.



Angela Mains, L.C.S.W.
Lead Therapist Care Manager

Angela is a licensed clinical social worker with over 30 years of experience working with individuals facing life changing events. She completed her training at UCLA and became a member of the Hoag Care Management Team in 2001. She is passionate about addressing emotional and psychological needs of women facing challenges during the perinatal experience. As a mother herself, Angela brings both personal empathy and professional expertise to her role.



Sandy Yokoyama, L.M.F.T.
Therapist

Sandy is a licensed marriage and family therapist who has worked in a variety of different settings with a diverse population of individuals, groups and families. Sandy completed her undergraduate studies in Psychology at UC Berkeley, and then obtained a Master of Science degree in Counseling at California State University, Long Beach. Sandy is EMDR trained and certified in the evidence-based practice Seeking Safety with experience and knowledge in trauma work.



Emily Densmore, L.C.S.W.
Therapist

Emily is a licensed clinical social worker with eight years of experience providing psychotherapeutic services to children, couples, groups, families and adults. Emily utilizes a compassion-focused approach to treatment, while integrating evidence-based interventions and strategies to assist clients in navigating life's challenges. Self-growth is a non-linear process, and Emily aims to provide an affirming space for individuals to feel seen and supported on their healing journey.



Salpi Salibian, M.S., PA-C
Executive Director

Salpi joined Hoag in 2015. She oversees and helps develop integrated programs and offerings within the Women's Health and Hoag Family Cancer Institutes. Salpi is a Certified Physician Assistant with over 10 years of clinical practice and research experience in various healthcare settings, which allows her to combine her passion for clinical excellence and innovative patient-centered care models. She holds a Certificate in Leadership for Healthcare Transformation from the University of California, Irvine, as well as a Master of Science degree in Physician Assistant Studies from Northeastern University, Boston.

Pregnancy Exercise Guidelines

At least **30 minutes/day of moderate exercise** is recommended.

Always consult with your OB before starting an exercise program, especially if you are on any type of exercise restriction or bed rest.

Benefits of Exercising during Pregnancy

Improves
glucose
control

Improves
carbohydrate
utilization

Helps
prevent
increased
baby's birth
weight

Helps reduce
backaches,
constipation,
swelling and
bloating

May
improve
your ability
to cope
with labor

What Types of Exercises are appropriate during pregnancy?



Walking



Water Aerobics



Dancing



Bicycling
(Only early in pregnancy)



Light Weight Training

Limited Mobility Exercises

Good Exercises for Women on Bed Rest:

Pelvic Tilt Exercise:



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1. Lie on your back, knees bent, feet on floor, exhale and tilt your pelvis upward
2. Tighten your abdominals and squeeze your buttock muscles together
3. Gently flatten your back against the floor
4. Hold for a count of five. Inhale as you release
5. Repeat 8-10 times

Ankle Circles Exercise (while sitting or lying down):



1. Make 10-15 circles with your ankles in a clockwise and counter-clockwise direction
2. Repeat 3-5 times

Leg Sliding Exercise:



1. Sit up straight with your knees bent
2. Inhale, then slowly slide one heel up the floor or bed, exhale and slowly lower the leg
3. Keep your back straight at all times and only work within the range that you can maintain a straight back
4. Repeat 8-10 times

Resistance Exercise:



1. Attach a thick rubber band to the bedpost
2. Lie on your back with your knees bent
3. Place pillow for support under arm to be exercised
4. Inhale, then slowly bringing arm up toward the body, exhale and slowly lower the arm
5. Repeat 8-10 times

Bridge Exercise:



1. Lie on your back with knees bent, feet firmly on bed hip width apart
2. Raise buttocks slowly off the ground and lift your hips about 2-3 inches off the floor to form a straight line
3. Place your hands on your buttocks to feel the muscles tighten
 - a. You should feel the weight primarily in the legs and buttocks, not your lower back
4. If you feel in the lower back, lower your hips slightly
5. Repeat 3-5 times

Introduction to Good Nutrition

Good nutrition is important not only for your health, but also to provide optimal health for your baby as well. Our goal is to provide you with the information you will need not only for good nutrition for your pregnancy, but also guidelines to help you achieve/maintain good blood sugar control.

Where to Begin

There are some important components to consider before we begin:

- 1) Modify your meals into *3 meals and 3 snacks a day*.
- 2) Breakfast should be consumed within 1 hour of waking up in the morning.
- 3) All meals/snacks should be eaten **2-3 hours apart**.
- 4) No more than 10 hours between your bedtime snack and breakfast the following day.

Although you may be unaccustomed to eating so frequently throughout the day, it is important that you make this change. Having smaller, frequent meals/snacks throughout the day can improve your blood sugar control. It can also help reduce nausea and heartburn during your pregnancy.

Breakfast

- Breakfast is the smallest meal of the day.
- Early in the morning, your pregnancy hormones tend to peak and cause a significant amount of insulin resistance. Therefore, your body may not be able to handle normal amounts of carbohydrates in the morning.
- It is very important to strictly limit carbohydrates at breakfast. **You may need to avoid fruit, yogurt, and milk.** For some, caffeine *may* increase blood sugars.

Meal Schedule

- **Skipping meals or snacks may** make it more difficult to control your blood sugar.
- **A bed time snack may be necessary** to prevent the liver from releasing sugar into the bloodstream while you sleep which can lead to high blood sugar numbers before breakfast the next day.

Timing of Meals and Snacks

	Breakfast	AM snack	Lunch	PM snack	Dinner	Bedtime snack*
Sample #1	7am	9am	12pm	3pm	6pm	9pm
Sample #2	10am	1pm	3pm	6pm	9pm	12am
My own:						

Carbohydrate Food

Starch List

Each serving is equal to 15 grams of carbohydrate, 3 grams protein, 0-1 grams fat

Bread

Bagel	1/4 (1oz)
Bread, reduced- calorie.	2 slices (1 1/2 oz)
*Bread.	1 slice (1oz)
Bread, sticks, crisp, 4 in. long x 1/2 in.	2 (1/3 oz)
English muffin	1/2 ea
Hot dog or hamburger bun	1/2 (1oz)
Pita, 6 in. across	1/2 ea
Roll, plain, small	1 (1oz)
Raisin bread, unfrosted.	1 slice (1oz)
Tortilla, corn, 6 in. across	1 ea
Tortilla, flour, 7-8 in. across.	1 ea
Waffle, 4 1/2 in. square, reduced-fat	1 ea
Pancake, 4 in. across.	1

Cereals and Grains

Bran cereals.	1/2 cup
Cereals (cooked).	1/2 cup
Cereals, unsweetened ready-to-eat	3/4 cup
Couscous.	1/3 cup
Flour (dry)	3 Tbsp
Granola, low-fat.	1/4 cup
Grape-Nuts®.	1/4 cup
Grits.	1/2 cup
Kasha.	1/2 cup
Millet.	1/4 cup
Muesli.	1/4 cup
Oatmeal(cooked)	1/2 cup
Pasta (cooked)	1/3 cup
Puffed cereal.	1 1/2 cup
Rice, white or brown (cooked)	1/3 cup
Shredded Wheat ®.	1/2 cup
Quinoa	1/3 cup

Starchy Vegetables

Baked beans.	1/3 cup
Corn.	1/2 cup
Corn on cob, medium.	1 (5oz)
Mixed vegetables with corn, peas or pasta	1 cup
Peas, green.	1/2 cup
Potato, baked or boiled.	1 small (3oz)
Potato, mashed.	1/2 cup
Squash, winter (acorn, butternut)	1 cup
Yam, sweet potato, plain.	1/2 cup

Crackers and Snacks

Animal crackers.	8
Graham crackers, 2 1/2 in. square.	3
Matzo.	3/4oz
Melba toast.	4 slices
Oyster crackers.	24
Popcorn (popped, no fat added or low-fat microwave)	3 cups
Saltine-type crackers.	6
Snack chips, fat-free (tortilla, potato).	15-20 (3/4oz)
Whole-wheat crackers, no fat added.	2-5 (3/4oz)

Beans, Peas, and Lentils (cooked)

Beans and peas (garbanzo, pinto, white split, black, great northern, black-eyed, etc.)	1/2 cup
Lima beans.	2/3 cup
Lentils.	1/2 cup
Miso	3 Tbsp
Bean soup.	1 cup

* LOOK FOR BREAD THAT HAS 4-5 GRAMS OF FIBER OR MORE PER SLICE AND IS BETWEEN 11-20 GRAMS OF TOTAL CARBOHYDRATE.

Carbohydrate Food**High Fat Starch List****Each serving is equal to 15 grams of carbohydrate and 5 grams of fat**

Biscuit, 2 1/2 in. across. 1/2	Popcorn, microwave. 3 cups
Chow mein noodles. 1/2 cup	Sandwich crackers, cheese or
Corn bread, 2 in. cube. 1 (2oz)	peanut butter filling. 3
Crackers, round butter type. 6	Stuffing, bread (prepared) 1/3 cup
Croutons. 1 cup	Taco shell, 6 in. across. 2
French-fried potatoes. 12-15 (3oz)	Waffle, 4 1/2 in. across. 1
Granola. 1/4 cup	Whole-wheat crackers,
Muffin, small. 1 (1 1/2 oz)	fat added. 4-6 (1oz)
	Wheat thins (regular) 12
	*Hummus 1/3 cup

* Also counts for 1 protein

***Limit selections from this list to special occasions or replace
with reduced fat versions for more frequent enjoyment***

Carbohydrate Food

Fruit List

One fruit serving equals 15 grams of carbohydrate and 60 calories

Fresh Fruit

Apple, unpeeled, small.	1 (4 oz)
Applesauce, unsweetened.	1/2 cup
Apples, dried.	4 rings
Apricots, fresh.	4 whole (5 1/2oz)
Apricots, dried.	8 halves
Raisins	2 Tbsp
Banana, small.	1 (4oz)
*Blackberries.	3/4 cup
*Blueberries.	3/4 cup
Cantaloupe, small.	1 cup cubes
Cherries, sweet, fresh.	12 (3 oz)
Dates.	3
Figs, fresh.	1 1/2 large or 2 medium (3 1/2 oz)
*Figs, dried.	1 1/2
Grapefruit, large.	1/2 (11 oz)
Grapes, small	17 (3oz)
Honeydew melon.	1 cup cubes
Kiwi.	1 (3 1/2 oz)
Mandarin oranges, canned.	3/4 cup
Mango, small.	1/2 cup
Nectarine, small.	1 (5 oz)
Orange, small.	1 (6 1/2 oz)

Fresh Fruit

Papaya	1 cup
Peach, medium, fresh	1 (6 oz)
*Pear, large, fresh	1/2 (4oz)
Pineapple, fresh	3/4 cup
Plums, small	2 (5oz)
Prunes	3
Raisins	2 Tbsp
*Raspberries	1 cup
*Strawberries	1 1/4 cup whole
Tangerines, small	2
Watermelon	1 1/4 cup cubed

Dried Fruit 1/4 cup



1 serving of rounded fruit about tennis ball size.

Fruit Juice should be avoided.

***These fruits are high in fiber ☺**

Carbohydrate Food**Milk and Yogurt List****One milk serving equals 15 grams of carbohydrate & 8 grams of protein****Skim and Very Low-Fat Milk**

Skim milk.	1 cup
1/2 % milk.	1 cup
1 % milk.	1 cup
Nonfat or low-fat buttermilk.	1 cup
Evaporated skim milk.	1/2 cup
Nonfat dry milk.	1/3 cup dry
Plain nonfat yogurt.	1 cup
Nonfat/low-fat fruit-flavored yogurt (artificially sweetened)	6 oz
Greek yogurt.	6 oz
Sugar free hot cocoa	1 packet

Dairy Alternatives

Soy Milk (Original, Vanilla or Chocolate)	1 cup
Almond/Cashew Milk, Oatmilk, Sweetened (Original or Vanilla)	1 cup
(Unsweetened Almond/Soy milk has 1-gram carbohydrate per 1 cup)	
Coconut Milk (Original, Vanilla or Chocolate)	1 cup
*Rice Milk (Original or Chocolate)	6 oz

Low-Fat

2 % milk.	1 cup
Plain low-fat yogurt.	3/4 cup
Fortified soy milk.	1 cup
Sweet acidophilus milk.	1 cup

Whole Milk

Whole milk.	1 cup
Evaporated whole milk.	1/2 cup
Goat's milk.	1 cup

Lower Fat Protein List

(Select choices from this lower fat list most often)

Very Lean Meat and Substitutes

One very lean meat serving equals 0 grams carbohydrate, 7 grams protein, 0-1 gram fat and 35 calories

Poultry - Chicken or turkey (white meat, no skin), Cornish hen (no skin) 1 oz

Fish - Fresh or frozen cod, flounder, haddock, halibut, trout, tuna-fresh or canned, in water. 1 oz

Shellfish - Clams, crab, lobster, scallops, shrimp, imitation shellfish. 1 oz

Game - Duck or pheasant (no skin), venison, buffalo, ostrich. 1 oz

Cheese with 1 gram or less fat per oz.

Cottage cheese. ¼ cup
Any cheese 1 oz

Other

Processed sandwich meats with 1 gram or less fat per oz, such as deli thin, shaved meats, chipped beef, turkey, ham. 1 oz

Egg whites. 2

Egg substitutes, plain. ¼ cup

Hot dogs with 1 gram or less fat per ounce 1 oz

Sausage with 1 gram or less fat per oz. 1 oz

Edamame pods 1½ cups

Edamame beans (shelled) ½ cup

Lean Meat and Substitutes List

One lean meat serving equals 0 grams carbohydrate, 7 grams protein, 3 grams fat and 55 calories

Beef

USDA Select or Choice grades of lean beef trimmed of fat, such as round, sirloin, and flank steak; tenderloin; roast (rib, chuck, rump); steak (T-bone, porterhouse, cubed), ground round. 1 oz

Pork

Lean pork, such as fresh ham; canned, cured or boiled ham, Canadian bacon; tenderloin, center loin chop 1 oz

Lamb - Roast, chop, leg. 1 oz

Veal - Lean chop, roast 1 oz

Poultry

Chicken, turkey
chicken- white meat
domestic duck or goose (well drained of fat, no skin) 1 oz

Fish

Oysters (Cooked) 6 medium
Salmon (fresh or canned), catfish 1 oz
Sardines (canned) 2 medium
Tuna (canned, in oil, drained). 1 oz

Game - Goose (no skin), rabbit 1 oz

Other

Hot dogs with 3 grams or less fat per ounce 1½ oz
Processed sandwich meat with 3 grams or less fat per ounce, such as turkey

pastrami or kielbasa. 1 oz

Vegetarian sausage. 1 patty or 2 links
Veggie Slices – soy 2 slices

Higher Fat Protein List

(Limit these sources or use them in moderation)

Medium-fat Meat and Substitutes List

One Medium fat meat serving equals 0 grams carbohydrate, 7 grams protein, 5 grams fat and 75 calories

Grated Parmesan. 2 Tbsp

Cheeses with 3 grams or less
fat per oz. 1 oz

Beef - Most beef products fall
into this category (ground beef,
meatloaf, corned beef, short ribs,
prime grades of meat trimmed of fat,
such as prime rib. 1 oz

Pork - Top loin, chop, Boston
butt, cutlet 1 oz

Lamb - Rib roast, ground. 1 oz

Veal - Cutlet (ground or cubed,
unbreaded) 1 oz

Poultry - Chicken dark meat (with
skin), ground turkey or ground chicken,
fried chicken (with skin) 1 oz

Fish - Any fried fish product. 1 oz

Cheese (With 5 gms or less fat per oz.)

Feta. 1 oz

Mozzarella. 1 oz

Ricotta. 4oz (1/2cup)

Other

Tempeh. 1/4 cup

Tofu. 4oz (½ cup)

Vegetarian corn dog 1

**Remember to weigh meats after cooking
and removing bones and fat.**

High-fat Meat and Substitutes List

1 serving = 1 protein + 1 fat

*One High fat meat equals 0 grams carbohydrate,
7 grams protein, 8 grams fat and 100 calories*

Pork

Spareribs, ground pork,
pork sausage. 1 oz

Cheese

All regular cheeses, such
as American, cheddar,
Monterey Jack, Swiss. 1 oz

Other

Processed sandwich
meats with 8 grams or less fat
per ounce, such as bologna,
pimento loaf, salami. 1 oz

Sausage, such as bratwurst, Italian
knockwurst, Polish, smoked. 1 oz

Hot dog 1 (10 per lb.)

Nut butters (natural style) 2 Tbsp

Peanut butter (natural style) 2 Tbsp

**DO NOT USE REDUCED FAT PEANUT
BUTTER**

**3 oz of protein is about the size and
thickness of a deck of cards.**



Vegetarian Sources of Protein List

Food source	Serving size	# of servings
Canned baked beans	1/3 cup	1 protein, 1 carb
Cooked beans (black, garbanzo, lima, etc.)	1/2 cup	1 protein, 1 carb
Cooked lentils	1/2 cup	1 protein, 1 carb
Cooked Quinoa	1/2 cup	1 protein, 1 carb
Falafel	1/4 cup	1 protein, 1 carb , fat
Swiss, cheddar, and provolone cheese	1oz	1 protein, 1 fat
Processed cheese (American)	1.5oz	1 protein, 1 fat
Ricotta cheese	1/4 cup	1 protein
Cottage cheese	1/4 cup	1 protein
Eggs	1 large egg	1 protein
Egg whites	2 ea.	1 protein
Nut butter (peanut butter, almond butter, etc.)	2 Tbsp	1 protein, 2 fat
Raw nuts (Almonds, peanuts, pistachios, pine nuts.)	1oz	1 protein, 2 fat
Raw nuts (brazil nuts, cashews, hazelnuts, pecans, walnuts.)	2oz	1 protein, 3 fat
Edamame (shelled)	1/2 cup	1 protein, 1/2 carb , 1 fat
Tofu	1/2 oz	1 protein
Tempeh	2oz	1 protein
Seitan	1oz	1 protein
Garden burger	1 patty	1 protein, 1-2 carb (may vary)
Veggie hot dog	1 link	1 protein
Soy cheese	1 oz	1 protein
Soy chicken nuggets	3-4 nuggets	1 protein, 1 carb , 1 fat
Soy patty	1 patty	1 protein, 1 fat
Soy sausage	2 links	2 protein, 1/2 carb , 1 fat
Soy jerky	1oz	1 protein
Soy crumbles	2/3cup	1 protein, 1 fat
Soy chorizo	4 Tbsp	1 protein, 1 fat
Protein Powders and Protein Bars	*You must look at the nutrition label to find the protein and carbohydrate servings for each type.*	

1 protein = 7 grams of protein

1 carb = 15 grams of carbohydrates

Vegetable List

One vegetable serving equals 5 grams carbohydrate, 2 grams protein, 0 grams fat

One serving is: 1/2 cup cooked or chopped vegetables; 1 cup raw vegetables or vegetable soup.

Artichoke
 Artichoke hearts
 Asparagus
 Beans (green, wax, Italian)
 Bean sprouts
 Beets
 Broccoli
 Brussels sprouts
 Cabbage
 Cactus (Nopales)
 Carrots
 Cauliflower
 Celery
 Cucumber
 Eggplant
 Green onions or scallions
 Greens (collard, kale, mustard, turnip)
 Jicama – ½ cup
 Leeks
 Kohlrabi
 Leeks
 Mixed vegetables (w/o corn, peas, or pasta)
 Mushrooms

Okra
 Onions
 Pea pods
 Peppers (all varieties)
 Radishes
 Salad greens (endive, escarole, lettuce, romaine, fresh spinach)
 *Sauerkraut
 Spinach, cooked
 Summer squash
 Tomato
 *Tomatoes, canned
 *Tomato sauce
 *Tomato/vegetable juice
 Turnips
 Water chestnuts
 Watercress
 Zucchini

 *High in salt/sodium so limit quantities

These vegetables are considered “**Free**” foods!

Fat List

One fat serving equals 0 grams of carbohydrates and 45 calories.

Monounsaturated Fats –Best Fats

Avocado, medium.	1/8 (1 oz)
Oil (olive, canola, peanut).	1 tsp
Mixed (50% peanuts)6
Almonds, cashews.6
Peanuts.	10
Pecans.	4 halves
Pistachios	16
Olives, black, ripe.	8 large
Olives, green, stuffed.	10 large

Polyunsaturated Fats – Good Fats

Oil (corn, safflower, grape seed, flaxseed, soybean, sunflower)	1 tsp
Salad dressing, regular	1 Tbsp
Salad dressing, <i>reduced-fat</i>	2 Tbsp
Seeds- sesame, pumpkin, flax, chia, sunflower, hemp	1 Tbsp
Walnuts	4 halves
Tahini paste	1 Tbsp

Saturated Fats – Bad Fats

Limit these choices

Bacon	1 strip
Butter, stick.	1 tsp
Butter, whipped.	2 tsp
Butter, reduced-fat.	1 Tbsp
Coconut oil	1 tsp
Coconut, sweetened, shredded. . .	2 Tbsp
Sour Cream, regular.	1 Tbsp
Cream cheese, regular.	1 Tbsp
Cream cheese, <i>reduced-fat</i>	2 Tbs

Free and Other Food List

A free food is any drink, food, condiment that contains 20 calories or less or 5g carbohydrate or less per serving. A free food is allowed up to 3 servings throughout the day, but only one serving at a time.

Fat Free or Reduced Fat Foods

Cream cheese, fat free	1 Tbsp
Creamers, nondairy	1 Tbsp
Creamers, powder	2 tsp
Mayonnaise, fat free	1 Tbsp
Reduced fat	1 tsp
Margarine, fat free	4 Tbsp
Reduced fat	1 tsp
Miracle Whip, nonfat	1 Tbsp
Salad dressing, fat free	1 Tbsp
Salsa	¼ cup
Sour cream, fat free	1 Tbsp
Reduced fat	1 Tbsp
Whipped topping,	
Light, fat free	2 Tbsp

Oils

Nonstick cooking spray	
Spray margarine	5 sprays

Drinks

*Diet drinks (such as Diet Snapple®, Crystal Light®)
Carbonated mineral water
Tea, herbal
*Diet sodas

***contains artificial sweeteners
and possibly caffeine**

Spices and Seasonings (as often as you'd like)

Garlic
Herbs – fresh or dried
Spices
Hot Chilies
Salt/pepper

Condiments

Barbecue sauce	2 tsp
Ketchup	1 Tbsp
Honey (not at breakfast)	1 tsp
Sugar (not at breakfast)	1 tsp
Maple syrup	1 tsp
Pickles, dill	1½ med
Teriyaki sauce	1 Tbsp
Taco sauce	1 Tbsp

Free Condiments

Vinegar
Lemon juice
Lime juice
Horseradish
Mustard
Soy sauce (high in sodium)

Sugar Free or Low Sugar Foods

*Candy, hard, sugar free	1 piece
*Gelatin dessert, sugar free	
*Gum, sugar free	
*Jam or jelly, low sugar	2 tsp
Light	2 tsp
*Syrup, sugar free	2 Tbsp

Important Safety Precautions

Alcohol/Smoking/Drugs

These need to be avoided during your pregnancy as they can potentially lead to birth defects such as fetal alcohol syndrome, growth and mental retardation. Because no safe level of alcohol during pregnancy has been established and alcohol is known to cause birth defects and developmental disabilities as well as other adverse pregnancy outcomes, the recommendation continues to be that women should refrain from drinking alcohol during pregnancy.

Caffeine: 0-200 mg/day

Zero caffeine intake is most ideal as studies show that caffeine may increase the risk for underweight babies, miscarriage, and even birth defects. If you do drink coffee, consider limiting to 1 cup/day or using decaffeinated coffee. Remember, caffeine is not only found in coffee, but it can also be found in some teas, chocolates, coffee-flavored yogurt, and also some sodas. For more information on caffeine contents of specific foods, see the “Resource Section” of this book.

Caffeine may increase your blood sugar values.



Artificial Sweeteners: 2-3 servings/day

These are nonnutritive sweeteners which mean they provide no calories and no carbohydrates. Currently, the following sweeteners have undergone extensive safety testing prior to FDA approval in the United States.

Saccharin – Sweet ‘n’ Low[®], Sugar Twin[®]

Aspartame – Equal[®]

Sucralose – Splenda[®]



Because *saccharin* (Sweet ‘n’ Low[®] and Sugar Twin[®]) may cross the placental barrier and has slow fetal clearance we do not recommend its use during pregnancy.

Natural Sweeteners

Stevia, Truvia, PureVia, Monk Fruit Extract – These are derived from the stevia plant and, usually, contain no calories and very little to no carbohydrates. They are classified by the FDA as Generally Recognized as Safe (GRAS) and are acceptable in moderation during pregnancy. Please read the labels for carbohydrate content.

Agave Nectar/Syrup – This is made from the agave plant. It is mixed with fructose and glucose and therefore has calories and carbohydrates. It is also considered GRAS and is acceptable in moderation during pregnancy. However, in large doses it can be a uterine stimulant.

Regular table sugar may be used if you have any reservations about using artificial sweeteners, as long as it is used in the recommended amounts. This is discussed in the “Free and Other Food ” list.

Self-Monitoring of Blood Sugar

You will be testing your blood sugar 4 times a day. The times you will be testing and the target ranges for your blood sugar are below:

- **Fasting: Less than 90 mg/dL**
(This should be 8-9 hours after having your bedtime **snack**)
- **1 hour from the beginning of meals: Less than 130 mg/dL**
(1 hour after breakfast, lunch and dinner)

Example:

*One hour after a meal would be one hour from the **first** bite of food.*

** If you begin a meal at 8 am then you would test at 9 am.*

Please record your results on the blood sugar logs we will provide. When you log your results, also note any foods or unusual patterns like restaurant dining or special occasions. Bring these to your follow-up with the educators. Please make sure you bring them to all of your doctor appointments.

Please contact Sweet Success between your appointments if:

- You have three fasting blood sugar readings in a row that are 90 mg/dL and above
- You have six after meal reading 130 mg/dl and above in a week.

Using Your Meter

The following are some guidelines for using your meter:

1. Follow the manufacturer's instructions on how to use your meter properly.
2. If you experience a problem with the meter, please call the number on the back of the meter.
3. Ensure that test strips are good (check the expiration date on the container) and that the control solution is not outdated (the control solution is good for 3 months from the date you open the vial). Do not expose the strips to heat or moisture.
4. Run a control test with the first strip (of each new bottle) to ensure that the strips are good and have not been damaged.

Meter Supplies

Request a prescription from your Doctor that includes a Meter, Test Strips, and Lancets. Pick up prescription from your pharmacy and begin testing. Please ensure that you discuss your benefits for coverage of meter supplies with your insurance company's member services department.



Using Your Lancing Device instructions

The finger stick is done with a lancing device that pricks the skin. Use the sides of your fingers and alternate the fingers you use each time you test. Do not use the “pad” of the finger (where the fingerprint is); there are more nerve endings and you may be more sensitive in that region.

To prepare yourself for testing, follow this procedure:

1. Wash your hands with soap and warm water (this will help the blood circulate to the fingers). If using hand sanitizer, use unscented types. Massage hands with a dime-sized portion of the product and allow it to dry without wiping.
2. Drop your hand to your side and shake, then massage or “milk” your hand starting at your wrist.



Disposal of Lancets/Insulin Syringes

Single use lancets need to be disposed of in a **Sharps Container**.



If Sharps container is not available, place used sharps in a **strong, plastic container**, like a **laundry detergent or bleach bottle**. The container should be leak-resistant, remain upright during use, and have a tight-fitting, puncture-resistant lid. When the container is about 2/3 full, follow guidelines for proper disposal methods.

Keep sharps containers out of reach of young children.

Lancet drums can be disposed of in **trash bin**.



Safe Sharps Disposal Options

Beginning September 1, 2008 California law (Section 118286 of the California Health and Safety Code) makes it illegal to dispose of home-generated sharps waste in the trash or recycling containers, and requires that all sharps waste be transported to a collection center in an approved sharps container. Sharps users have several options available to them to meet the requirements of the new law.

Here are some other disposal options for residents:

Anaheim 1071 N Blue Gum St Anaheim, CA 92806	Huntington Beach 17121 Nichols St Gate 6 Huntington Beach, CA 92647	Irvine 6411 Oak Canyon Irvine, CA 92618	San Juan Capistrano 32250 La Pata Ave San Juan Capistrano, CA 92675
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Resource Orange County's Household Hazardous Waste Collection Centers

Collection Center Hours: 9:00am to 3:00pm Tuesday through Saturday
Closed major holidays and rainy days.

More information about household hazardous waste disposal is available at
714-834-6752 and at www.oclandfills.com.

Ask your health care provider or pharmacist if they take back used needles, lancets and syringes.

Consider using a "Mail-Back" service for proper disposal. You may also purchase the mail-back containers online. The following are mail-back services approved by the California Department of Public Health. (Fees apply)

EnviroMed Safety & Compliance
(877) 340-2430
www.enviromedinc.com

Sharps Compliance, Inc.
SCI Mail Sharps Disposal System
(800) 772-5657
www.sharpsinc.com

GRP & Associates
(800) 207-0976
www.sharpsdisposal.com

Stericycle, Inc. – Sharps mail-back service
(800) 355-8773, (800) 527-0666
www.stericycle.com

Medasend, Inc
(800) 200-3581
<http://www.medasend.com/>

How Will I Know My Baby is All Right?

There are special tests that can check your baby's health. These tests are done later in pregnancy. They are:

Kick Counts

Ultrasounds

Stress Tests

Kick Counts

One of the most important tests you can do for your baby is kick counts. Kick counts check your baby's movements. Sometime between 16 and 20 weeks you will begin to feel your baby move. You will be asked to do kick counts every day starting around 26 weeks. At this time, you should be able to clearly feel your baby moving. Ask your health care provider when and how to check your baby's movements. Also, ask when or who you should call if you have questions or if your baby isn't moving.

Here's one method used to do kick counts:

1. Choose the time of day that you feel your baby moves the most. Often this will be after your evening meal. Try to check kick counts at the same time every day.
2. Lie down on your **left side** or sit in a comfortable chair.
3. Pay attention to your baby's movements.
4. The first time you feel your baby move, write down the time.
5. Count every kick or movement until you feel ten movements. When you feel that tenth movement write the time down. Usually the baby will move 10 times in 10-20 minutes.
6. Check the time and write it down. Most babies move ten times in 2 hours.
7. Take your kick count record sheet to each doctor's visit.



If you baby is not moving or if you are concerned call your doctor!

Your physician will discuss kick counts with you and when he/she feels it would be necessary for you to do them. There are many different ways for the mother to monitor fetal activity and there may be a different method for you to use.

Use the following table to assist with writing down the time.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start time Stop time							
Start time Stop time							
Start time Stop time							
Start time Stop time							
Start time Stop time							
Start time Stop time							
Start time Stop time							

Weight Goals for Pregnancy

Body Mass Index

Recommended total weight gain:

Underweight

BMI \leq 18.5

With twins

28-40 lb

* min. of 37-54 lb

Normal

BMI= 18.6-24.9

With twins

25-35 lb

37-54 lb

Overweight

BMI= 25.0-29.9

With twins

15-25 lb

31-50 lb

Obese

BMI $>$ 30.0

With twins

11-20 lb

25-42 lb

The average rate of weight gain for a woman of normal body mass index is: for the first trimester, about 1-6 lb. For the second and third trimesters, about 0.8 – 1.0 lb per week.

If there is an excess amount of weight gain during your pregnancy, a slower rate of weight gain, or maintenance of weight is recommended.

* IOM, 2009, *Weight Gain During Pregnancy: Reexamining the Guidelines*. Washington, DC: National Academies Press

Maternity Resources

MothersToBaby CA is a great resource providing additional support and expert advice before, during, and after pregnancy. The site allows access to educational fact sheets with up-to-date information on medications, vaccines, and other exposures during pregnancy and breastfeeding.

Link: <http://www.mothersbabyca.org/39>

OB Education at Hoag Hospital

If you need guidance or assistance after the birth of your baby, Hoag offers a variety of support groups and resources including: Babyline, Postpartum Adjustment Group, Mood Disorders, Lactation Support, and Pregnancy & Infant Loss.

866-300-1671 or 949-764-5940

<http://www.hoag.org/Specialty/Womens-Health/Pages/OB-Education.aspx>

Please call or look on-line for information about the following classes – many of these are now offered on-line:

- Hospital maternity services, orientation and tour
- Prepared Childbirth
 - Lamaze Class
 - Boot Camp for New Dads
 - Cesarean Birth Class
 - Multiple Miracles
 - Moms 35+
- Breastfeeding Clinic and eLearning
- Fitting for Breastfeeding Bra (37 weeks)
- Rent Breast Pump
- Baby Care Class
- Infant CPR/Safety Class
- Car Seat Safety

Call the Hoag Babyline: 949-764-2229

Mon-Fri 9am-5:45pm

An OB Education Nurse will call back within the hour to answer questions about pregnancy (before, during and after), as well as baby care and breastfeeding.

Text for Baby

Get FREE text messages on prenatal care, baby health, parenting and more! Sign up online or text "BABY" to 511411.

Hoag Circle App

Free Pregnancy and Parenting App | Circle by Hoag

Circle was designed for expectant women and their partners, and growing families with kids up to 18 years old. Circle was developed within the PSJH Digital Innovation Group and was acquired by Wildflower Health. Compatible for iPhone and Android

Maternity Resources

CHILDCARE

Children's Home Society	714-543-2273
Kid Care Hotline- subsidized care	949-364-6605
OC Child Care Assn. Referral Line	714-893-0390
Head Start Program (4 y/o+)	714-541-8164
Community Care Licensing	714-703-2800

Nannies/Doulas

After the Stork	949-589-4311
Doulas of North America	

www.dona.org

SAFETY/HEALTHCARE

Hoag BabyLine	949-764-BABY
Community Nursing Program	714-834-7747
Poison Control	800-222-1222
Immunization Referral Line	800-564-8448
CPR- American Red Cross	714-481-5300
OC Healthcare Agency	800-914-4887

*child checkups, pregnancy, immunizations

CHOC Community Education	714-509-8887
*low cost car seat program	

DentaCal	800-322-6384
Healthcare Referral Line	800-564-8448
Child Health-Disability Prevention	800-993-2437

www.dhcs.ca.gov/services/chdp

Planned Parenthood	800-230-7526
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INSURANCE/FINANCIAL

CalWorks, Medi-Cal, Food Stamps	714-435-5800
Social Security	800-772-1213
AIM (Access for Mothers/Infants)	800-433-2611
Kaiser for Kids	800-255-5053
Covered CA	800-300-1506

www.coveredca.com

LEGAL/CHILD SUPPORT

Birth Certificates	714-480-6700
OC Dept. Child Support Services	866-901-3212
Legal Aid Society	800-834-5001
Public Law Center	714-541-1010
Temporary Restraining Orders	714-935-7956

WEBSITES

www.hoag.org/womens-mental-health

www.womensmentalhealth.org

www.postpartum.net

www.postpartumprogress.com

SUPPORT SERVICES

Parenting Programs

MOMS Resource Center	714-972-2610
OC Child Abuse Prevention Ctr.	714-543-4333
Children's Bureau	714-517-1900

Breastfeeding

La Leche League	714-965-1182
OC Breastfeeding Coalition	714-834-8363
WIC Breastfeeding Warm Line	866-482-9573

Other Resources

FACT- Families & Communities	
Together- Family Resource Ctrs.	714-704-8777
Southwest Community Center	714-543-8933
*food, diapers, clothing	

WIC	714-834-8333
Commodity Supplemental	714-897-6670
Food Program	ext. 3610

Bootcamp for New Dads	714-838-9392
Child Resource Center	949-724-6721

*library, childcare info, classes, educational materials

So. Cty. Family Resource Center	949-364-0500
*classes, counseling, support groups, etc.	

Ntl. Assn. of Mothers of Twins	877-540-2200
Sidelines	888-447-4754

*support for bedrest moms

Sperm Preservation	310-443-5244
DNA Diagnostics - paternity testing	800-362-2368
Social Security - Santa Ana office	714-246-8150
Info Link Referral Line	211
Abbott Laboratories Feeding Line	800-986-8800

Postpartum Depression/Therapy

Hoag Maternal Mental Health Line	949-764-5333
Hoag Postpartum Adjustment Grp.	949-764-2229
Mission Hospital	877-459-3627
St. Joseph's PDD Program	714-771-8101
Hoag Mental Health Center	949-764-6542
OC Crisis Prevention Line	877-727-4747
OC Adult Mental Health Services	949-850-8463
Living Success Center	949-645-4723

Therapists (PDD specialized)

Laura Navarro-Pickens, LCSW	562-882-7901
Alicia Duzman, Ph.D.	949-916-5060
Leah Dean, LMFT	714-376-3914
Sonya Rasminksy, MD	949-734-4912

Additional Dietary Guidelines During Pregnancy

Folate Guidelines 600µg/day

Folate is a natural B-vitamin, whereas folic acid is a synthetic form of the B-vitamin that is found in your prenatal vitamin. This vitamin is essential to help prevent neural tube defects and spina bifida in your baby. Excellent sources of folate can be found in dark green leafy vegetables like kale, mustard greens, spinach, and romaine lettuce. Additional sources can also be found in beans, oranges, strawberries, and fortified foods such as cereals and pastas. It is also advised that a non-pregnant woman continuously meet 400µg/day of folate.

Iron Guidelines - 27 mg/day

Iron is important in your diet, especially if you are experiencing anemia during your pregnancy. Iron is a component of our red blood cells. When you are pregnant, your blood volume expands and can cause anemia. Although iron is in your prenatal supplements, we can also find a lot of food sources that are rich in iron. When you do not get enough iron, your baby has a higher chance of being born early or too small.

In our foods, we have heme (animal sources) and non-heme (plant sources) iron. Our body is better able to absorb the heme iron from animal sources and particularly in a lot of the darker poultry and red meats.

Vitamin C can enhance our body's absorption of iron. **If your doctor has prescribed an iron supplement, you can enhance its absorption by taking it with a glass of water with fresh, squeezed lemon or lime. Because of the GDM, we do not advise having orange juice with it.**

Every time you have a meal or snack, having a vitamin C rich vegetable or fruit will also help you absorb more iron from your food. The following foods are high in vitamin C:

Oranges	Broccoli	Lemons/Limes	Tomatoes
Grapefruits	Cabbage	Mangoes	Cauliflower

The following foods are good sources of "heme" iron:

Beef	Dark turkey meat
Cooked oysters	Cooked beef tongue
Cooked clams	

The following foods are good sources of "non-heme" iron:

All beans	Soybeans	Blackeye peas	Pumpkin seeds	Lima beans
Lentils	Spinach	Prunes	Dried apricots	Raisins

When you take your iron pills:

- Do not take milk at the same time
- Do not drink coffee, tea or cola beverages at the same time
- Do not eat yogurt, cheese or bran at the same time
- Do not use antacids at the same time or close to the same time
- High fiber and calcium foods can decrease the absorption of iron

Calcium Guidelines 1000 mg/day

Calcium is essential for your bone health and especially during your pregnancy. Sources of calcium can be found in a lot of our foods including milk, yogurt, cheeses, fortified soymilk, tofu, and some vegetables. (A detailed list of foods and calcium content can be found in the “Resource Section” of this book.)

Sources of Calcium

Dairy	Serving Size	(mg)
Yogurt, plain nonfat	1 cup	452
Cheese	1 oz	
American		175
Cheddar		204
Cottage cheese		138
Mozzarella		183
Ice cream		
Low-fat Healthy Choice (Vanilla)	½ cup	100
Milk	1 cup	300
Frozen Yogurt, plain	½ cup	100

Protein	Serving Size	(mg)
Halibut, cooked	3 oz	51
Perch	3 oz	117
Red Kidney beans	½ cup	30
Salmon, pink, canned w/ bone	3 oz	181
Sardines, canned	2	92
Soy beans, raw	½ cup	258
Tofu, with calcium sulfate	½ cup	204
Tofu, w/o calcium sulfate	½ cup	100

Vegetables	Serving size	mg
Beet greens, boiled	½ cup	164
Broccoli, chopped & boiled	½ cup	47
Collards, chopped & boiled	½ cup	113
Kale, chopped & boiled	½ cup	47
Mustard greens, chopped & boiled	½ cup	52
Okra, frozen, cooked	½ cup	88
Spinach, frozen, chopped & cooked	½ cup	139
Swiss chard, chopped & boiled	½ cup	51
Turnip greens, boiled	½ cup	125

Fiber Guidelines 28 grams/day

Fiber is a type of carbohydrate that is found in plants. There are two types of fiber, soluble and insoluble fibers, both of which are beneficial for our health for many reasons.

For pregnant women, an increased fiber intake can help alleviate constipation. If you're having problems with constipation, be sure to drink plenty of water. *High fiber food sources include fresh fruits and vegetables, whole grains (such as whole wheat bread) and legumes/beans.*

In managing your blood sugar, fiber has a beneficial property, which helps to delay the absorption of sugar into your blood.

Sources of Dietary Fiber

Bread/Crackers	Amount	Fiber (grams)
Graham crackers	2 squares	1.5
Popcorn, popped	3 cups	3.5
Pumpnickel bread	1 slice	1.7
Rye bread	1 slice	1.9
Whole wheat bread	1 slice	2.0
Whole wheat crackers	6 pieces	1.0
Whole wheat roll	$\frac{3}{4}$ roll	1.0

Cereals	Amount	Fiber (grams)
All bran, 100%	$\frac{1}{3}$ cup	1.8
Bran Chex	$\frac{1}{2}$ cup	3.2
Corn flakes	$\frac{3}{4}$ cup	0.8
Grapenut flakes	$\frac{2}{3}$ cup	2.5
Grapenuts	3 Tbsp	2.5
Oatmeal, cooked	$\frac{1}{4}$ cup	2.0
Shredded wheat	1 biscuit	2.6
Wheaties	$\frac{3}{4}$ cup	2.3

Fruits	Amount	Fiber (grams)
Apple	$\frac{1}{2}$ large	2.8
Apricot	2 small	1.9
Banana	$\frac{1}{2}$ medium	1.5
Blackberries	$\frac{3}{4}$ cup	5.7
Cantaloupe, cubes	1 cup	1.4
Cherries	12	2.7
Dates, dried	2	1.2
Figs, dried	1 $\frac{1}{2}$ medium	3.5
Grapes, red/green	7	0.9
Grapefruit	$\frac{1}{2}$	1.0
Honeydew melon	1 cup	1.1
Orange	1 small	2.3
Peach	1 medium	2.0
Pear	$\frac{1}{2}$ medium	3.0

Pineapple	$\frac{3}{4}$ cup	1.4
Plum	3 small	2.0
Prunes, dried	3	1.8
Raisins	2 Tbsp	1.0
Raspberries	$\frac{3}{4}$ cup	6.0
Strawberries	1 $\frac{1}{4}$ cup	4.1
Tangerine	1 medium	1.9

Grains	Amount	Fiber (grams)
Brown rice, cooked	$\frac{1}{3}$ cup	1.2
Wild rice, cooked	$\frac{1}{3}$ cup	1.0
White rice, cooked	$\frac{1}{3}$ cup	0.5
Quinoa, cooked	$\frac{1}{3}$ cup	1.6
Buckwheat, cooked	$\frac{1}{2}$ cup	2.2
Farro, cooked	$\frac{1}{3}$ cup	2.3
Barley, cooked	$\frac{1}{3}$ cup	2.0
Couscous, cooked	$\frac{1}{2}$ cup	1.0
Whole Wheat Spaghetti, cooked	$\frac{1}{3}$ cup	2.1

Legumes/Nuts/Seeds	Amount	Fiber (grams)
Baked beans	$\frac{1}{3}$ cup	4.0
Black beans, cooked	$\frac{1}{2}$ cup	5.6
Garbanzo beans, cooked	$\frac{1}{2}$ cup	4.1
Lentils, cooked	$\frac{1}{2}$ cup	7.8
Lima Beans, cooked	$\frac{1}{3}$ cup	5.0
Pinto beans, cooked	$\frac{1}{2}$ cup	5.4
Soybeans, cooked	1 cup	8.6
Split peas, cooked	$\frac{1}{2}$ cup	8.1
Almonds	1 oz	3.5
Cashews	1 oz	1.0
Peanuts	1 oz	2.4
Pecans	1 oz	2.7
Pistachio nuts	1 oz	2.9
Chia seeds	1 Tbsp	5
Flaxseeds, whole	1 Tbsp	2.8
Pumpkin seeds	$\frac{1}{4}$ cup	4.1
Sunflower seeds	$\frac{1}{4}$ cup	3.9

Root Vegetables	Amount	Fiber (grams)
Beets, cooked	$\frac{1}{2}$ cup	1.7
Carrots, cooked	$\frac{1}{2}$ cup	2.6
Potato, baked (w/skin)	$\frac{1}{2}$ medium	1.9
Radishes, raw	$\frac{1}{2}$ cup	0.9
Sweet potato, baked (w/skin)	$\frac{1}{2}$ medium	1.7
Winter squash	$\frac{1}{2}$ cup	3.1

Leafy Vegetables	Amount	Fiber (grams)
Brussels sprouts, cooked	½ cup	2.0
Bok choy, cooked	½ cup	1.4
Cabbage, cooked	½ cup	1.5
Kale, raw chopped	1 cup	1.3
Lettuce, Romaine	1 cup	1.0
Spinach, raw	1 cup	0.8
Swiss Chad, cooked	1 cup	3.7
Spinach, cooked	1 cup	4.2
Turnip greens, boiled	1 cup	5.0

Other Vegetables	Amount	Fiber (grams)
Acorn squash, cooked, cubed	½ cup	4.5
Artichoke, cooked	1 medium	10.3
Broccoli, cooked	½ cup	2.8
Beans, green, cooked	½ cup	2.0
Carrots, raw	½ cup	1.7
Cauliflower, cooked	½ cup	1.7
Celery, raw	½ cup	1.0
Cucumber, raw	½ cup	1.2
Eggplant, cooked	½ cup	1.3
Lentils, cooked	½ cup	7.8
Mushrooms, raw	½ cup	0.8
Onions, cooked	½ cup	1.5
Snow peas, raw	1 cup	1.6
Tomatoes, raw	½ cup	0.7
Zucchini squash, cooked	½ cup	1.3

Sodium Intake

There are no specific sodium restrictions in pregnancy. However, later in the pregnancy your blood pressure may start to go up or you may start to retain fluids (swelling in your hands and feet). Your doctor may tell you to watch your sodium intake

Has your doctor recommended you reduce your sodium intake?

In general, excess sodium intake can lead to raised blood pressure-, which can lead to serious health consequences if left untreated.

Be aware that 75% of dietary sodium comes from eating packaged and restaurant foods!

The general guidelines are:

- The Dietary Guidelines for Americans recommends limiting sodium to less than 2,300 mg per day
- Most doctors suggest limiting intake to under 2,000 mg per day
- The American Heart Association recommends limited intake to under 1,500 mg per day

Americans, on average, eat about **3,300 mg of sodium per day**

In general, the TOTAL sodium in EACH MEAL should be limited to
less than 650 mg of sodium.

Note: One teaspoon of salt has about 2300 mg of sodium

More than 40% of sodium consumed by Americans comes from the following 10 food types:

1. Breads and rolls
2. Cold cuts and cured meats
3. Pizza
4. Fresh and processed poultry
5. Soups
6. Sandwiches
7. Cheese
8. Mixed pasta dishes
9. Mixed meat dishes
10. Snacks

Remember sodium content will vary within food categories- read the **Nutritional Facts Label** to compare the amount of sodium in different products! Don't forget to make sure serving sizes are similar and choose products with the lowest sodium!

Foodborne Illnesses and Listeriosis

Listeriosis is an illness caused by eating foods contaminated with a kind of bacteria called *Listeria monocytogenes*. Most people do not get listeriosis. However, pregnant women are at risk for becoming seriously ill from eating foods that contain these bacteria. Many times, pregnant women who are infected with listeriosis don't feel sick. However, they can pass the infection to their unborn babies even without knowing it. The symptoms can take a few days or weeks to appear and may include fever, chills, diarrhea, upset stomach, headache or stiff neck. That's why prevention of listeriosis is so important!

How can I prevent listeriosis?

DO NOT EAT:

- Hot dogs, luncheon meats, or deli meats that have been sitting out- *unless they are reheated to steaming hot.*
- Soft cheeses such as feta, brie, Camembert, blue-veined cheeses, Mexican-style "queso blanco," "queso fresco," or Panela- unless they're made with pasteurized milk. If the cheese was made in Mexico, it is recommended you do not eat it while pregnant. *Make sure the label says "made with pasteurized milk."*
- Refrigerated paté or meat spreads.
- Refrigerated smoked seafood (such as salmon, trout, whitefish, cod or tuna) - *unless it is in a cooked dish, such as a casserole.*
- Raw (unpasteurized) milk or foods that contain unpasteurized milk
- Raw, uncooked meats.

OKAY TO EAT:

- Hard cheeses such as cheddar, semi-soft cheeses such as mozzarella, pasteurized processed cheese slices and spreads, cream cheese, and cottage cheeses.
- Canned or shelf-stable meat spreads or smoked seafood can be eaten.
- Pasteurized milk or foods that contain pasteurized milk.

Refrigeration/Chilling tips:

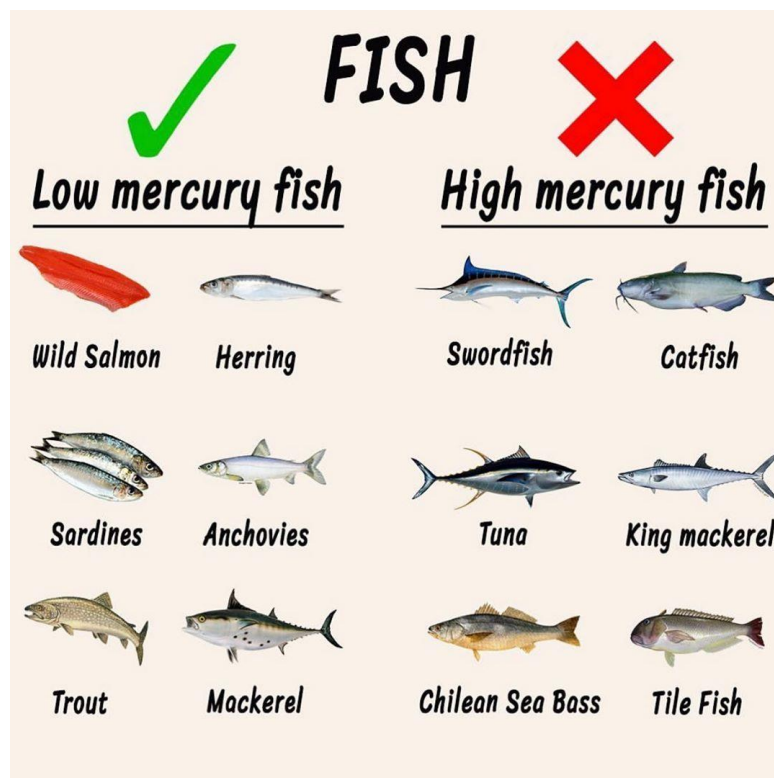
- Refrigerate or freeze perishables, prepared food, and leftovers within 2 hours of eating or preparation. When temperatures are above 90°F, discard food after 1 hour.
- Your refrigerator should register at 40°F or below and the freezer at 0°F. Place a refrigerator thermometer in the refrigerator and check the temperature regularly.

Mercury Toxin in Fish

Fish and shellfish can be a healthy part of your regular diet. There are many nutritional benefits of fish that can be included in a well-balanced diet. However, some fish and shellfish contain higher levels of mercury that may harm an unborn baby or a young child's developing nervous system. That is why it is advised that women who may become pregnant, pregnant women, nursing mothers, and young children avoid some types of fish and eat fish and shellfish that are lower in mercury.

By following the 3 recommendations below for eating fish or shellfish, women and young children will receive the benefits of eating fish and shellfish and be confident that they have reduced their exposure to the harmful effects of mercury.

1. **Do not eat Shark, Swordfish, King Mackerel, or Tilefish** because they contain high levels of mercury. Children under the age of six should not eat these fish also.
2. You may eat *up to 12 ounces* per week of a variety of fish and shellfish that are lower in mercury.
 - Five of the most commonly eaten fish that are low in mercury include: shrimp, canned light tuna, salmon, pollock, and catfish.
 - Another commonly eaten fish is albacore ("white") tuna which has more mercury than canned tuna. When choosing your 2 meals of fish and shellfish a week, you may only eat *up to 6 ounces of albacore tuna per week and 12 ounces of the above mentioned fish*.
3. Check local advisories about the safety of fish caught by friends and family in your local rivers, lakes, and coastal areas. If no advice is available, eat *up to 6 ounces per week of fish you catch from local waters*, but don't consume any other fish during that week.



Sources of Caffeine in Beverages

Limit to 200 mg/day

Product (Coffee)	Amount	Caffeine (mg)
Coffee, brewed	8 oz	95-200
Coffee, decaf	8 oz	5
Coffee, short, Starbucks	12 oz	375*
Coffee, brewed, Dunkin Donuts	16 oz	211
Cappuccino	4 oz	35
Cappuccino, decaf	4 oz	<1
General Foods Intl Coffee, Orange Cappuccino	8 oz	102
Coffee, instant	8 oz	95
General Foods Intl Coffee, Café Vienna	8 oz	90
Maxwell House Cappuccino, Mocha	8 oz	60-65
General Foods Intl Coffee, Swiss Mocha	8 oz	55
Maxwell House, Cappuccino: French Vanilla, Irish Crème	8 oz	45-50
Maxwell House Cappuccino, Amaretto	8 oz	25-30
General Foods Intl Coffee, Viennese Chocolate Café	8 oz	26
Maxwell House Cappuccino, decaf	8 oz	3-6

Product (Tea)	Amount	Caffeine (mg)
Arizona Iced Tea, assorted	16 oz	15-30
Bigelow Raspberry Royale tea	8 oz	83
Celestial Seasonings Herbal Tea,		
All varieties	8 oz	0
Celestial Seasonings Herbal Iced		
Tea, bottled	16 oz	0
Lipton Natural Brew Iced Tea Mix, diet	8 oz	10-15
Lipton Natural Brew Iced Tea Mix		
Unsweetened	8 oz	25-45
Lipton Soothing Moments Blackberry	8 oz	25

Lipton Soothing Moments Peppermint	8 oz	0
Lipton Tea	8 oz	35-50
Lipton Iced Tea, assorted	16 oz	18-40
Nestea Pure Sweetened Ice Tea	16 oz	34
Nestea, Pure Lemon Sweetened Iced Tea	16 oz	22
Snapple Diet Lemonade Iced Tea	8 oz	12
Snapple Diet Lemon Tea	8 oz	21
Snapple Lime Green Tea	8 oz	5
Snapple Diet Peach Tea	8 oz	21
Snapple Diet Plum-a-Granate	8 oz	18
Snapple Diet Raspberry Tea	8 oz	21
Tea, black	8 oz	38-50
Tea, black, decaf	8 oz	~2
Tea, green	8 oz	30
Tea, instant	8 oz	15
Tea, leaf or bag	8 oz	50

Product (Soft Drinks)	Amount	Caffeine (mg)
Diet Bargs	12 oz	0
Diet Cherry Coke	12 oz	23
Diet Coke	12 oz	31
Diet Coke with Lemon	12 oz	31
Diet Dr. Pepper	12 oz	54
Diet Mr. Pibb	12 oz	27
Diet Rite	12 oz	32
Diet Sprite	12 oz	0

Product (Caffeinated Water)	Amount	Caffeine (mg)
Java Water	½ liter (16.9 oz)	125
Krank 2-0	½ liter (16.9 oz)	100
Aqua Blash	½ liter (16.9 oz)	90
Water Joe	½ liter (16.9 oz)	60-70

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