



Ask questions During your antenatal checkups and scan appointments it is really important to ask any questions you may have, even if they seem silly or obvious to you they may highlight something to the midwife or sonographer. Getting answers will also help reduce your anxieties.

Healthcare professionals are under a lot of pressure with time and money, however your care and that of your baby is their responsibility, they want to help you. Sometimes though mistakes are made, signs can be missed, So it is your responsibility as a mother to ensure your baby is protected. It is your responsibility to ensure your healthcare providers are aware of any worries or concerns you have.

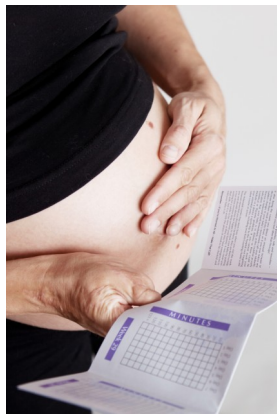
If you are at all concerned you should not worry about asking questions, if you are not happy with the response to your questions or are unhappy with your care, you are entitled to request a second opinion. You have rights as a patient and it is the healthcare professional's job to ensure you are 100% confident in their care.



Attend Antenatal classes A great way of learning about how to help you and your baby through pregnancy and birth is by attending antenatal classes. Your midwife will let you know about the standard NHS Parent Craft classes run at your local Maternity ward. There are also a number of Privately run courses. Not only will you learn about your pregnancy and birth at these courses but you will also meet other people who are experiencing the same thing and have the same worries as you. Most people make lifelong friends within their antenatal groups!



Stop smoking Smoking cigarettes in pregnancy is associated with higher rates of stillbirth. If you smoke while you are pregnant your baby's growth and development are affected, and problems with your baby's health and well being are much more likely. If you smoke YOU SHOULD STOP, and the people you live with should also not smoke. For help with quitting visit www.smokefree.nhs.uk



Keep track of your baby's movements with our FREE Pocket Kick Count Chart

Available to download from our website or we can post one to you.

If you're worried at all – Make the call
Help your Midwife help you



Ask your Midwife for your
FREE Antenatal Note Sticker
or visit:



www.countthekicks.org.uk

DISCLAIMER

COUNT THE KICKS encourages anyone with any concerns or questions regarding their pregnancy to contact their health care provider being their community Midwife, GP, Maternity Ward or Consultant Obstetrician. All information stated in this leaflet has been written as a guide only.



Monitoring Your Baby's Movements



COUNT THE KICKS™ want to empower Mums with knowledge and confidence during their pregnancy.

Ensuring Mums know the importance of monitoring their baby's movements and offering Mums information to enable her to make INFORMED choices.

We want to encourage Mums to work with their Midwives and healthcare providers to promote a healthy outcome. Empowering every Mum with the confidence to call for advice if she is ever worried at all and be confident that she will receive the best advice and monitoring from her healthcare provider.

www.countthekicks.org.uk

Why should I monitor my Baby's movements?



Your baby's movements indicates its wellbeing, monitoring movements gives you reassurance and confidence throughout your pregnancy. By knowing what is normal for your baby you will be able to quickly

recognise a change or prompt your baby to move, so if you are ever worried about your baby, by taking a few moments to monitor your baby's movements, and realising they are normal for your baby, this will help to put your mind at rest. It is also a really nice way of bonding with your baby and getting to know them which helps you enjoy every step of your pregnancy.

When should I start to Monitor my Baby's movements? You should begin to feel movements from around 18 weeks of pregnancy, however as every baby and pregnancy is different so it may be earlier or later on for you.

How often should my baby move? There is no average or normal amount of movements you should feel. It is important for you to recognise what is normal for your Baby.

How do I monitor Movements? Monitoring movements can be as simple as making notes every few days from around 20 weeks. It's difficult in the early weeks as baby's movements vary so much, but soon you will notice patterns and learn what is "normal" for YOUR baby.

Movements can be KICKS, SWOOSHES, PUNCHES, FLIPS or TURNS (Hiccups however are not classed as movements). We suggest at the beginning to monitor in sessions so for the first few days record how many movements you feel between breakfast and lunch, then for a few days between lunch and dinner, then after dinner until bedtime. It is also useful to recognise any movement patterns over night. Just by recording what time or when you are woken during the night, will help.

By doing this you will become very aware of any changes, if you feel the movements change it is essential you report this to a healthcare professional, and because you are able to offer them accurate information it will help them and save them time.

Other ways to help your baby...

Attend all your Antenatal appointments It is important to keep in regular contact with your midwife and doctor and go to all the antenatal check-ups and scans. They will monitor the progress of your pregnancy and if there are problems they can make sure you get the care you need.



Urine and blood tests, along with regular blood pressure monitoring and ultrasound scans can pick up early signs of medical conditions which might affect your baby.

Regular measurement of your baby's growth can tell your midwife (and you) about your baby's progress. Poor growth can indicate problems and it is important this is picked up. A baby not growing well is at risk of stillbirth.

Report any abdominal pain or bleeding If you have pain or tenderness in your abdominal area you should contact your doctor or midwife. Acute pain or vaginal bleeding should be reported immediately. It is better to report any pain that worries you sooner rather than later.

Avoid infection Some infections increase the risk of stillbirth, in particular Listeria, Salmonella, and Toxoplasmosis. There are simple things you can do to reduce the chances of being exposed to these infections. Ask for information from your midwife about what foods and activities to avoid during pregnancy.

Ultra sound NHS scans are routinely offered at 12 and 20 weeks currently. Among the main reasons for performing these scans are to date the pregnancy and screen for Downs Syndrome or fetal abnormality. A scan to monitor growth and fetal welfare later in pregnancy is not routinely offered on the NHS; but it is becoming increasingly popular for mums and dads to have these checks done privately. Especially if they have any concerns regarding their baby's growth or movements. Many private clinics offer a variety of scans at all stages of pregnancy, including detailed fetal welfare assessment.

How does the welfare scan work in your baby's interest?

During the scans the sonographer will take a number of measurements and compare them to a standard of what is expected for that stage of pregnancy.

During the scan, the operator will;

- Measure the circumference and diameter of the baby's head
- Measure the size of the baby's waist
- Measure the length of the baby's thigh bone (femur)
- Examine the placenta
- Assess the amount of fluid within the uterus
- Check the baby's movements
- Assess the blood flow in the umbilical cord, and if necessary other places in the baby

The data obtained is entered onto a database for comparison with known standards. The report includes graphs of baby's growth for discussion at the end of the scan. The detailed printout can then be shown to your GP, midwife or obstetrician at your next appointment, and used as backup for any questions or concerns you may have.



A welfare scan late in pregnancy will also confirm your baby's position for birth (Ideally head first - cephalic or vertex presentation).

If it is not in an ideal position your midwife will be able to act appropriately avoiding a late diagnosis in labour.