

## Preventative Maintenance for Avoiding Induction/Pitocin North Shore Midwifery and Doula Resource

### Diet

- low in dairy, sugar. NO ice-cream. Do not unintentionally create a big, hard-headed baby!
- red raspberry leaf tea as uterine toner
- adequate but not excessive calcium, do not use Tums for heartburn
- lots of dark leafy greens
- adequate protein
- liquid chlorophyll is a great source of supplemental iron if needed, with other added benefits

### Exercise

- walk at least 15 mins per day, women that walk regularly tend to have shorter labors
- stretching/yoga
- flat footed squats to tone pelvic floor, at least once per day, the more the better

### Chiropractics / Acupuncture

- Webster's technique, skilled chiropractics can help with many pelvic and abdominal issues
- energy flow, skilled acupuncture can identify blockages and increase chi

### Optimal Fetal Positioning

- belly forward sitting positions, avoid long periods of reclining
- talk to baby and visualize perfect positioning
- spinning babies.com is a great resource for exercises you can do at home

### EDD

- re-calculation? LMP and duration of cycles, though this is less of an issue now that ultrasound is common
- Most OB's want to schedule induction for 41 weeks, but with regular NST's will go to 42
- last weeks of pregnancy stay super hydrated, low amniotic fluid is a indicator to be sent to hospital for IV fluids
- see Evidence Based Birth online to view most current research on going past your due date

### Emotional/Psychological

- fear/trauma, try to address and/or release old trauma through talk therapy, prayer, body work

### PROM

- research and develop a plan for if membranes leak or rupture before the start of labor, see Evidence Based Birth online to view the most current research on Term PROM

- understanding meconium, it is rarely a signal that baby is in distress