Common Terms and Abbreviations Used in Pregnancy Care

LMP = Last Menstrual Period: W use the first day of the last menstrual period to calculate the due date. The quick way to do it in your head is to count backwards 3 months from the first day of the LMP, then add 7 days. So if the LMP was 8/15, the 3 months backwards is 5 (May) plus 7 days added to the 15th =22, so the due date is May 22.

EDC or EDD = Estimated Due Date: EDC stands for the old-fashioned "estimated date of confinement." EDD is the more modern "Estimated Day of Delivery." The key word here is "estimated." Babies take different lengths of time to mature, anywhere from 3 weeks before to 2 weeks after the due date (37-42 weeks) the delivery is normal.

G = Gravida: The number of times a woman has been pregnant. Usually seen in association with:

P = Para: the outcome of those pregnancies. There can be 4 numbers after the "P" for "para."

The first number is how many term pregnancies.

The second number is how many premature babies.

The third number is how many abortions or miscarriages.

The fourth number is how many children are living at the time.

Examples:

G1PO = the woman is pregnant for the first time and has not yet delivered

G6P1132 = the woman is currently pregnant with her sixth pregnancy. She had one full-term delivery, one premature delivery, three abortions or miscarriages, and has two living children (the full term and preterm babies). G3P2002 - the woman is pregnant with her third pregnancy and has two living kids who were born full term.

EAB/TAB: Elective abortion, therapeutic abortion

SAB: Spontaneous abortion, the medical term for miscarriage

MAB: Missed abortion, incomplete abortion, meaning a miscarriage that has not been expelled from the body

TOP: Termination of pregnancy

Trimester: the pregnancy is divided into 3 "trimesters." The first one is from LMP up until 14 weeks. The second trimester is from 14 weeks until 28 weeks. The third trimester is from 28 weeks until delivery.

NSVD: normal spontaneous vaginal delivery, normal birth

VAD = **Vacuum Assisted Delivery**: May also be OVD- Operative Vaginal Delivery. A doctor (never in a birth center) applies a suction cup to the baby's head and gently draws it out, when the mother is unable to push effectively but the baby is very low in the pelvis.

Forceps: tools used to cradle the baby's head and guide it out of the pelvis if the mother is unable to push it out effectively

PCS = Primary Cesarean Section: first time a mother has delivered by Cesarean.

RCS = Repeat Cesarean Section: mother has already had a previous Cesarean delivery, and this is a repeat Cesarean birth. May also be ERCS for elective repeat cesarean section.

VBAC = Vaginal Birth After Cesarean: The mother has had a previous Cesarean delivery but has now delivered vaginally. There is a small amount of risk (less than 1%) that the old surgical scar on the uterus will rupture when a VBAC is attempted, so mothers who wish to attempt a VBAC must understand the

risks and sign an "informed consent" that shows they are aware of the risks/benefits. VBAC is not permitted in birth centers in New York.

TOLAC = Trial of Labor After Cesarean: If a woman has had a previous Cesarean birth and wants to have a VBAC, she is said to be undergoing a "trial of labor" when her contractions start. Not performed at the birth center.

Episiotomy: A cut made with surgical scissors from the opening of the vagina just before birth. Performed in a birth center if the baby's heartbeat is low and we cannot wait for the tissue to stretch naturally, to get the baby out safely.

Perineal laceration: a natural tearing of the tissue between the vaginal opening and the rectum. There are 4 "degrees" of lacerations: a first degree is minor, only involving skin and does not involve muscle. Frequently does not need stitches. A second-degree laceration does involve some muscle. A third-degree laceration involves some of the muscle of the rectal sphincter, and a fourth degree laceration goes all the way through the rectal sphincter. Third- and fourth-degree lacerations should be repaired by a surgeon so they require transfer to the hospital.

AROM = Artificial Rupture of Membranes: releasing the waters around the baby with a plastic hook, to start labor or help it progress.

SROM = Spontaneous Rupture of Membranes: waters around the baby releasing on their own (your water breaking). May happen before or any time during labor or even as the baby is being born.

IUI = Intrauterine Insemination: Sperm is inserted directly into the uterus to fertilize an egg. Used when intercourse is not desired or possible, or has not been successful, to achieve pregnancy.

IVF = in vitro fertilization: Egg(s) harvested from the mother or a donor are fertilized in the lab with the father's or a donor's sperm, then placed in the mother's uterus.

Sono, sonogram, ultrasound, scan, US: looking at something inside the body by bouncing high-frequency sound waves off the internal structures to get a picture of what's inside.

Nuchal translucency: Sonogram at 11 - 13 weeks of gestation which measures the thickness of the fold of the neck. This may be one indicator of a genetic problem like Downs Syndrome.

Anatomy scan: done at about 20 weeks gestation (as measured from LMP). A comprehensive ultrasound to look for any fetal anomalies. Can usually detect abnormalities in the brain, heart, bones, facial features, kidneys, stomach, liver. May not see an internal problem, like cleft palate. Cannot by itself completely rule out Down Syndrome or other anomalies.

CVS = Chorionic villus sampling: The "villi" (plural of villus) are parts of the placenta. Since the baby and the placenta form from the joining of the egg and the sperm, the genetics of the placenta is usually the same as the genetics of the placenta. So if a very small portion of the placenta is taken for analysis at 11 weeks or so from the LMP, it should be possible to be sure whether the placenta/baby are affected by Down Syndrome (or another problem). This procedure has a risk of miscarriage of 1-2%.

Amnio = Amniocentesis: A procedure, which, like CVS, is 100% accurate in diagnosing genetic problems (although it can't predict severity) because it can obtain fetal tissue for analysis. Because it is an "invasive" procedure it incurs a risk of a 1-2% loss of the pregnancy. It involves a needle inserted into the belly to obtain amniotic fluid.

BPP = Biophysical profile: An ultrasound to show the health of the baby and placenta, given a score based on 8 or 10 possible points

Doula: A professional labor support person, generally hired directly by the birthing family.

MFM = Maternal Fetal Medicine: A specialty of Obstetrics, usually treating high risk conditions but also used frequently to conduct ultrasounds. May also be a perinatologist.

Abbreviations Commonly Used in Pregnancy and Birth

AB abortion

AFI amniotic fluid index (how much fluid is around the baby)

AFP alpha fetoprotein (a chemical in the mother's blood which may indicate a problem with the baby like Downs Syndrome or a hole in the spine)

BF breastfeeding

BMI body mass index (height x weight)

BP blood pressure

BV bacterial vaginosis

CBC complete blood count

CBE clinical breast exam OR childbirth education

CIRC circumcision

CM Certified Midwife

CNM Certified Nurse Midwife

Contx or CXN contractions

CPD cephalopelvic disproportion

CVS chorionic villus sampling

C/S cesarean section

C-section cesarean section

D&C dilation and curettage

DUB dysfunctional uterine bleeding

DVT deep vein thrombosis

EBL estimated blood loss

EFW estimated fetal weight

FH fundal height

FHR fetal heart rate

FHT fetal heart tones

FM fetal movement

FOB father of baby

FTP failure to progress

G gravida

GBS group B streptococcus

GCT Glucose Challenge Test (1hr glucose screening)

GTT Glucose Tolerance Test (3hr glucose diagnostic test)

Gyn gynecology

hCG human chorionic gonadotropin (pregnancy hormone)

H&P history and physical

HA headache

HELLP hemolysis, elevated liver enzymes, low platelet (a severe illness related to high blood pressure)

HRT hormone replacement therapy

I&O intake and output

IUFD intrauterine fetal death

IUGR intrauterine growth restriction

IUP intrauterine pregnancy

LDR, L&D labor-delivery-recovery room, labor and delivery unit

LGA large for gestational age

LMP last menstrual period

MEC meconium

NB newborn

NICU neonatal intensive care unit

NKA no known allergies

NKDA no known drug allergies

NST nonstress test

NSVD normal spontaneous vaginal delivery

OB obstetrical (related to pregnancy)

ObGyn obstetrics and gynecology

OCP oral contraceptive pills

P para

PIH pregnancy induced hypertension

PMH past medical history

PP postpartum

PROM prelabor/premature rupture of membranes

PPROM preterm premature rupture of membranes

PTL/PTD/PTB preterm labor, preterm delivery, preterm birth

RDS respiratory distress syndrome

R/O rule out

SBE self-breast exam

SGA small-for-gestational age