



GANESH TEST TUBE BABY CENTRE

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PREGNANCY CARE GUIDE MONTH BY MONTH

Nurturing Motherhood, One Month at a Time

This guide is prepared with love to help you take better care of yourself between your visits. Please read it carefully and follow the advice given here. Always consult your doctor before making any changes to your treatment.

Every month of pregnancy brings exciting new developments and important medical milestones. This guide tells you what to expect, what to eat, what tests are due, and what warning signs to watch for – month by month.

Month 1 (Week 1–4)— The Beginning – Confirm & Protect

- Confirm pregnancy with a blood test (Beta HCG) – more accurate than urine strips.
 - Start folic acid 5mg daily immediately – prevents brain and spine defects in the baby.
 - See your doctor even before you feel symptoms.
 - Rest more than usual; light fatigue is normal.
 - Avoid all medicines (even Crocin, Combiflam) without consulting your doctor.
 - Stop alcohol, smoking and caffeine completely.
 - Eat small frequent meals – nausea is common, do not starve.
- Book your first detailed ultrasound at 6–7 weeks to confirm heartbeat.

Month 2 (Week 5–8)— Nausea, Fatigue & First Heartbeat

- Morning sickness (nausea/vomiting) is very common – eat dry crackers, murmura, or toast before getting up from bed.
 - Ginger tea or saunf (fennel) water helps nausea.
 - Vitamin B6 foods – bananas, potatoes, chickpeas – reduce nausea naturally.
 - Continue folic acid and all prescribed medicines.
 - Your first ultrasound shows the baby's heartbeat – a magical moment!
 - Breast tenderness and frequent urination are normal.
 - Avoid heavy lifting, hot baths, and any intense physical activity.
- Do NOT use any herbal medicines, kadha, or supplements without your doctor's approval.

Month 3 (Week 9–12)— End of First Trimester – Key Scans Due

- NT Scan (Nuchal Translucency) is due this month – mandatory for detecting Down's Syndrome and other genetic conditions.
- Double Marker blood test may be advised along with NT Scan.
- Morning sickness usually begins to ease by end of this month.
- Energy levels improve. You can resume light yoga and gentle walking.
- Weight gain target: 1–2 kg this trimester only.
- Begin wearing looser clothing. Invest in good maternity bras.
- Dental check-up is recommended – pregnancy hormones can cause gum disease.

Thyroid check – critical in first trimester. Take thyroid medicine before breakfast if prescribed.

Month 4 (Week 13–16)— Baby Bump Appears – Second Trimester Begins

- This is usually the most comfortable trimester – nausea gone, energy back!
 - Start sleeping on your left side – improves blood flow to the baby.
 - Triple marker / Quad Screen blood test may be advised between 15–20 weeks.
 - Gentle prenatal yoga, swimming, or walking 30 min daily is ideal.
 - Increase calorie intake by ~300 kcal/day – add 1 extra meal equivalent.
 - Iron and calcium supplements are critical now – take as prescribed.
 - Fetal movements (quickening) may be felt faintly for the first time.
- Avoid lying flat on your back – it can compress a major blood vessel.

Month 5 (Week 17–20)— Baby Moves! Anatomy Scan Due

- **Anomaly Scan (Level 2 / TIFFA Scan) at 18–20 weeks is MANDATORY** – detects structural abnormalities. Do not miss it.
 - Baby's movements (kicks) will become more regular and noticeable.
 - Leg cramps at night – stretch your calf muscles, increase calcium and magnesium intake.
 - Back pain may begin – sleep with a pillow between knees. Avoid heels.
 - Increase protein intake significantly – 2–3 servings of dal, paneer, eggs or chicken daily.
 - Stay hydrated – helps prevent UTIs which are common in pregnancy.
- Wear a comfortable, supportive maternity belt if your back hurts.

Month 6 (Week 21–24)— Baby Grows Rapidly – Watch Your Sugar

- Glucose Challenge Test (GCT) / Gestational Diabetes screening is done at 24–28 weeks. Prepare by fasting as instructed.
 - Gestational Diabetes (GDM) is common and fully manageable – do not panic if detected.
 - Constipation is very common – eat more fibre, drink warm water, include prunes and papaya.
 - Braxton Hicks (practice contractions) may begin – mild tightening, not painful. Normal.
 - Heartburn / acidity – eat small meals, avoid spicy/oily food, do not lie down immediately after eating.
 - Haemoglobin check is due – anaemia is common and must be treated with iron supplements.
- Baby's hearing develops – talk to your baby, play music (classical, devotional) softly.

Month 7 (Week 25–28)— Third Trimester – Final Stretch Begins

- Growth scan ultrasound due to check baby's size and position.
 - Continue iron, calcium and folic acid supplements as prescribed.
 - Shortness of breath while walking is normal – the uterus pushes the diaphragm up.
 - Swelling of feet and ankles – keep legs elevated while resting. Reduce salt intake.
 - Sleep propped up with extra pillows. Left-side sleeping is best.
 - Begin preparing for birth – attend childbirth class or discuss birthing plan with your doctor.
 - Pelvic floor exercises (Kegels) daily – reduces risk of urine leakage after delivery.
- Rapid or irregular heartbeat – mention to doctor on next visit.

Month 8 (Week 29–32)— Baby Positions for Delivery

- Growth scan + Doppler study – checks blood flow to baby and confirms baby's weight and position.
 - Baby should ideally be in head-down (cephalic) position by end of month 8.
 - Prepare your hospital bag – documents, clothes, baby essentials.
 - Colostrum (early breast milk) production may begin – yellowish discharge from nipples is normal.
 - Reduce salt and processed food – helps control swelling.
 - Attend all weekly or fortnightly doctor appointments – do not skip.
 - Complete your vaccination schedule – TT / Tdap as advised.
- Learn warning signs of preterm labour (contractions before 37 weeks, unusual discharge, water leaking).

Month 9 (Week 33–40)— Almost There – Be Ready!

- Weekly NST (Non-Stress Test) or BPP (Biophysical Profile) may be done to monitor baby's wellbeing.
- Count fetal kicks daily: 10 kicks in 2 hours is normal. Call the clinic if baby moves less than usual.
- Rest as much as possible. Avoid long travel after 36 weeks.
- Early signs of labour: regular contractions every 5–10 minutes, water breaking, or blood-tinged mucus discharge (show).
- Go to the hospital immediately if: water breaks, heavy bleeding, baby not moving, severe headache or blurred vision.
- Positive cervical exams may be done – do not be alarmed if doctor checks the cervix.
- Eat light, nutritious meals. Dates (3–4 daily from week 36) may help ease labour – ask your doctor.

Trust your body. You have come this far – you are ready! 🌸

Every pregnancy is unique, and every milestone deserves the right care. Regular antenatal check-ups, timely investigations, a healthy lifestyle, and following your doctor's advice are the keys to a safe pregnancy and a healthy baby. If you notice any unusual symptoms or have concerns at any stage, never hesitate to contact your healthcare team.

Our care doesn't end with the delivery of your baby. We are here to support you through every stage of parenthood—from expert lactation and breastfeeding guidance to newborn vaccination packages, postnatal care, and early parenting support.



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Your health is our priority. Call us anytime with
your questions — no query is too small.



This guide is for informational purposes only and does not replace
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