



# Intrauterine Growth Restriction Care at Home

**Jim Pattison Outpatient Care and Surgery Centre**

9750 – 140<sup>th</sup> Street, Surrey, BC

Maternity Clinics:

Antepartum Care at Home Program (ACAHP)

Office: 604-582-4559

Hours: 8:45AM to 4:15PM, 7 days a week

**After hours call:** **604-585-5572**  
(Surrey Memorial Hospital Triage)

Closest hospital: \_\_\_\_\_

**Royal Columbian Hospital**

330 East Columbia Street, New Westminster, BC

Antepartum Care at Home Program (ACAHP)

Office: 604-520-4182

Hours: 7:30AM to 3:30PM, 7 days a week

**After hours call:** **604-520-4587**  
(Royal Columbian Hospital Triage)

Closest hospital: \_\_\_\_\_



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## Introduction

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Women with intrauterine growth restriction need special care during their pregnancy.

Your doctor has determined it is safe for you to get this care at home through our **Antepartum Care at Home Program (ACAHP)**.

One of our Program nurses contacts you every day and visits you in your home. You and your family are actively involved in your care.

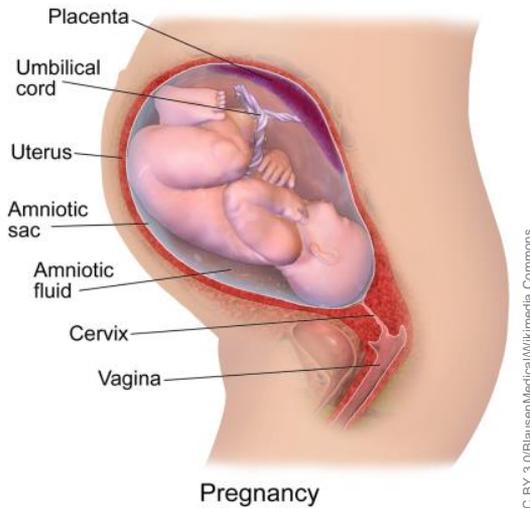
Our aim is to help keep you and your baby safe, healthy, and comfortable in your own home while you progress through your pregnancy.

This booklet gives you information about intrauterine growth restriction. We outline the tests and treatments you can expect. We also describe what you and your family can do to care for you and your unborn baby.

**Tip:** Use the space at the back to write down any questions you have. We will review this information with you and answer any of your questions.

## About Intrauterine Growth Restriction

Intrauterine Growth Restriction is when the baby's placenta is not able to absorb nutrients from the mother as needed. This can result in the baby growing slowly. Sometimes there is less amniotic fluid around the baby as well. We call this oligohydramnios (say *all-eh-go-hi-dram-nee-os*).



## Effect on Your Baby

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Babies with intrauterine growth restriction have a lower birth weight and sometimes need to be born early (premature).

Your baby can get stressed with contractions, even when the contractions are not painful to you. Because of this, your baby will be checked often both during pregnancy and labour.

Small or premature babies sometimes need help with breathing, keeping their blood sugar normal, and staying warm. Some babies need medical care in a special nursery such as the Neonatal Intensive Care Unit (NICU).

## Tests and Treatments

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You can expect to have certain tests and therapies while being cared for in the Program (ACAHP).

### Activity and Rest Therapy

When resting during the day or going to bed at night, lie on your side. This is the best position to make sure there is good blood flow to your baby.

We know that bedrest is not the best thing for you or your body, so we do not advise it. It can decrease your muscle strength and tone, slow down your digestion, cause constipation, and increase the chances of having blood clots. Also, bedrest can be hard on your whole family.

You might notice more contractions when you have increased activity. To help us compare how your activities affect your contractions, we ask you to record both your hours of rest and your activities through the day.

Do you have more contractions when doing these activities?

- When up walking?
- When bending over?
- When standing for long periods?

Go slow. Try not to do any of the activities that increase your contractions.

## Ultrasound Scans

An ultrasound scan shows your baby's position and allows us to measure:

- your baby's growth
- the amount of fluid around your baby
- blood flow to and away from your baby, called a 'Doppler study'

Your doctor decides how often you need an ultrasound scan.



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Ultrasound

## Non-Stress Test

Unborn babies can give messages about their health through their heart rate.

We do a non-stress test 2 to 3 times a week, depending on the results of your ultrasound scan. To do this test, we use a machine called a fetal monitor. It records your baby's heartbeat and movements as well as your contractions. This test can take between 20 to 80 minutes, depending on how awake your baby is at the time.



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## Home Visits

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A nurse from the Program (ACAHP) visits you at home 2 to 3 times a week and contacts you by telephone each day. Together with your doctor and nurse, you make a visiting schedule.

At each visit, the nurse:

- feels your abdomen (belly) for contractions or for any tenderness, and your baby's position
- does a non-stress test
- checks your blood pressure
- asks about any vaginal discharge
- looks at your **Mom's Record**

During visits, you and your nurse talk about how you are managing at home and how you are caring for yourself.

A good way to prepare for your visits is to write down any questions or concerns you have and want to remember to ask your nurse. You can use the 'Notes' section to write down your questions.

\*Remember to bring your **Mom's Record** with you to your doctor's appointment and any hospital visits.

## Care at Home

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You play a large role in your care, keeping watch over your own health and the health of your baby.

Each day, you complete your **Mom's Record** with:

- how long you rest at night and 3 times in the day
- awareness of any contractions
- your baby's movements counted 3 times each day  
(If you are less than 26 weeks, you don't need to count but take some time during the day to see how your baby is moving.)

Your nurse teaches you how to do each of these checks.

## Count contractions

It is normal for your uterus to have some painless contractions throughout pregnancy. They help to prepare your body for labour.

Babies who have grown less than expected or who have less amniotic fluid might become stressed by contractions. Knowing this, we want to make sure you know how to feel your abdomen for uterine contractions.

### How to feel for contractions:

1. While resting, place your finger tips on the top of your uterus. If your uterus is contracting, you will actually feel your abdomen get tight or hard, and then feel it relax or soften when the contraction is over.
2. Keep your hands on your abdomen for 1 hour.
3. Count the number of contractions.
4. Write down the total number counted in 1 hour on your **Mom's Record**.

To tell how often the contractions are coming, note the time 1 contraction starts and the time the next one starts.

If you notice contractions every 15 minutes or less, follow the instructions on page 15 on 'When to get help'.

## Count your baby's movements

You know your baby and you know his or her normal moving pattern. We have learned that when some babies do not feel well, they move less often. This is usually a change from normal and women can sense their baby is moving less often. Counting your baby's movements helps us check in on how your baby is feeling each day.

When counting baby's movements:

- Write down the time you start counting movements.
- Count until you feel 6 episodes (groups) of activity.
- Write down the time you stop counting.

We are looking for more than 6 episodes of activity in 2 hours. If your baby moves less than 6 times, follow the instructions on page 15 on 'When to get help'.



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**Take care of yourself**

Take time each day to check in with yourself on your **emotional health**.

You will experience the usual range of emotions and changes in pregnancy. With intrauterine growth restriction, it is natural to also feel bored, frustrated, guilty, or worried.

Please share your concerns with your nurse and doctor.





## When to Get Help

### Call the Antepartum Care at Home Program if you have:

- less than 6 episodes of your baby moving in 2 hours
- contractions every 15 minutes or less
- pain in your abdomen (belly)

If we do not call you back within 15 minutes, call the hospital where you plan to deliver your baby.

### Call the Maternity Unit at your delivery hospital then go to the hospital right away if you have:

- red coloured spotting (blood) from your vagina
- trickle or gush of fluid from your vagina (water breaks)

### Call 9-1-1 for an ambulance if you have:

- large amount of bright red blood from your vagina

My delivery hospital: \_\_\_\_\_

Birth Unit/  
Maternity Unit phone number: \_\_\_\_\_