

Common Terms of Pregnancy and Birth

During pregnancy and birth, you will hear many new words and expressions. These pages list of some of the most common ones you may hear. For a full list of the different healthcare providers you may meet before and after you give birth, please see the chapter “Your Healthcare Team” in this book.

Amniocentesis (amnio): A test used to diagnose chromosome problems and *spina bifida*.

Analgesia: No pain, or pain relief.

Anemia: A condition in which the number of red blood cells is lower than normal, reducing the blood’s capacity to carry oxygen.

Anesthesia: Medicine that blocks pain, feeling, and movement.

Antepartum (AP): Before birth.

Antibodies: Proteins that protect your body from bacteria and toxins. During pregnancy and breastfeeding, your baby receives antibodies from you.

Appropriate for gestational age (AGA): Baby's size is what is expected for how far along you are in your pregnancy.

Artificial rupture of membranes (AROM): Healthcare provider inserts a special hook through the cervix and makes a hole in the membranes to release amniotic fluid. Also called “breaking the bag of waters.”

Bag of waters: Sac of fluid that surrounds the baby inside the uterus. Also called “amniotic sac.”



An ultrasound image of a baby in the womb (see page 145).



Your healthcare provider will help you figure out the estimated date of delivery (EDD) based on the date your last menstrual period started.

Birth verification letter: A temporary substitute for a birth certificate. It is valid up to 60 days after your baby's birth date.

Catheter: A thin, long, flexible synthetic tube.

Cervical exam: In this exam the healthcare provider uses fingers to check the cervix for:

- Position of cervix (*posterior* means to the back; *anterior* means forward, to the mother's front)
- *Ripeness* (softness or firmness of the cervix)
- *Dilation* (how open the cervix is)
- *Effacement* (how thick or thin the cervix is, also called shortening or ripening of the cervix)
- *Station* (how low or high the baby is in the pelvis)

Cervix: Lowest part, or neck, of the uterus that ends in the top of the vagina (birth canal).

Cesarean birth or section, or C-section (CS): Surgery to deliver a baby through incisions in the abdomen and uterus.

Child Protective Services (CPS): A state agency that protects babies and children.

Combined spinal/epidural (CSE): A way to deliver pain medicine. CSE uses both an injection of pain medicine into the spinal fluid and an epidural.

Date of birth (DOB): The day a person is born. The DOB usually includes the month, day, and year.

Doppler: A handheld device placed on the mother's abdomen that makes it possible to hear the fetal heartbeat.

Electronic fetal monitoring, external fetal monitoring (EFM): Two sensing devices are placed on the mother's abdomen to monitor the fetus. One of these devices measures the baby's heart rate. The other picks up changes in uterine firmness (which shows contractions).

Epidural: An injection of pain medicine into the epidural space (the space between the layers of tissue that are around the spinal fluid).



UW Medicine has Special Care Nurseries and Neonatal Intensive Care Units for newborns who are born preterm or need special care.

Estimated date of confinement (EDC) or estimated date of delivery (EDD): The expected due date of the baby, counted as a 40-week period from the start of the mother's last menstrual period.

Failure to progress (FTP), prolonged labor: Labor is not progressing because the cervix is not dilating or the baby is not descending (getting into position for birth).

Fetal heart rate (FHR): Baby's heart rate measured while still in mother's uterus.

Fetal heart tones: Baby's heart rate sounds that can be heard with the Doppler or electronic fetal monitoring (EFM).

Forceps: A tool used during the pushing phase of labor, if needed. It is placed on the baby's head to help bring the baby out of the vagina.

Fundus: The top of the uterus.

General anesthesia: Medicine that causes a total loss of feeling and consciousness.

Gestational diabetes or gestational diabetes mellitus (GDM): A type of diabetes, or high blood sugar, that sometimes develops during pregnancy.

Gestational hypertension: High blood pressure that develops during pregnancy.

Group beta streptococcus (GBS): A type of bacteria in the vagina, rectum, or urine that can be passed on to the baby during labor. GBS can make the newborn very sick. Mothers are tested for GBS in late pregnancy. If bacteria are present, the mother is given antibiotics during labor.

Head circumference: Measurement of the baby's head.

IV, or intravenous, medicine: An injection of medicine into a vein, often through a catheter that goes into the vein.

Intrauterine device (IUD): Birth control device inserted into a woman's uterus.

Lactation/lactating mother: Mother feeding her baby with milk from her breasts, either by nursing or pumping her breast milk.



Patient-controlled epidural analgesia (PCEA) lets the patient control how much and when pain medicine is given.

Large for gestational age (LGA): Baby's size is larger than normal for how far along a woman is in her pregnancy.

Last menstrual period (LMP): The first day of mother's last menstrual period. This date is used to estimate the baby's due date.

Low transverse Cesarean section (LTCS): Incision for this type of Cesarean section birth goes across the lower section of mother's uterus, from 1 side of the belly to the other.

Lumbar epidural (LEP): Pain medicine used to decrease sensation (feeling) in the *lumbar* (lower back) area. LEP is used for labor pain (when desired) and for Cesarean births.

Meconium (MEC): Your baby's first bowel movement. This can occur before or after birth.

Neonatal Intensive Care Unit (NICU): Special care nursery for babies who are premature (born before 37 weeks) or who need special care or monitoring.

Newborn: Baby in the 1st month of life.

Non-stress test (NST): External monitoring of fetal heart rate and uterine contractions. An NST assesses a baby's well-being.

Normal spontaneous vaginal delivery (NSVD): A vaginal birth, without the use of forceps or vacuum.

Patient-controlled analgesia (PCA), patient-controlled epidural analgesia (PCEA): A method of pain relief that lets the patient press a button to control how much and when pain medicine is given.

Perinatal: The period of time from the 20th week of pregnancy to 1 month after birth.

Postpartum (PP): The period of time after the birth.

Pre-eclampsia: High blood pressure and protein in the urine. This can occur in the last half of pregnancy.

Pregnancy induced hypertension (PIH): High blood pressure related to the pregnancy.

Premature labor (PML): Contractions that cause changes in the cervix before 37 full weeks of pregnancy.

Some of the definitions used in this chapter are from the book

Pregnancy, Childbirth and the Newborn, by Simkin, Whalley, and Keppler.

Premature rupture of membranes (PROM): The “bag of waters,” or amniotic sac, breaks before 37 completed weeks of pregnancy.

Prenatal: The time during pregnancy and before birth.

Preterm labor: Labor contractions that begin before the 37th week of pregnancy.

Preterm birth: A birth that occurs before the 37th week of pregnancy.

Small for gestational age (SGA): The baby is smaller than normal for its age.

Spinal: A method of pain relief that involves an injection of *anesthetic* into your spinal fluid. This pain medicine takes effect very quickly.

Spinal/epidural: See “Combined spinal/epidural (CSE).”

Stripping/sweeping membranes: During a cervical exam, the provider inserts a finger into the cervix to loosen the bag of waters from the uterine wall to help the mother’s body release the hormones that start contractions.

Sudden infant death syndrome (SIDS): Unexpected death of an infant who seems healthy. It usually occurs while the baby is asleep or in bed. We do not fully understand the cause of SIDS. It most often occurs when a baby is between 1 month and 1 year of age.

Spontaneous rupture of membranes (SRM): The “bag of waters,” or amniotic sac, breaks on its own. This may feel like a big gush or a small trickle of fluid.

Tocometry (TOCO): External monitoring of contractions.

UltraCOM: Ultrasound Doppler test on the mother. It measures her *cardiac output* (size of arteries at the base of the neck and blood flow). This helps decide the best treatment for high blood pressure.

Ultrasound: A test that uses sound waves to take a picture inside the uterus. The ultrasound image shows the baby’s size, position, age, and overall health.

Vacuum extraction: A process that may be used during the pushing phase of labor, if needed. A plastic cap-like device is placed on the baby's head. A tube connects the cap to a vacuum pump that creates suction. During contractions, the provider gently pulls on a handle attached to the cap to help the baby come out of the vagina.

Vaginal exam: An exam to look at the inside and outside of the vagina. During the exam, the provider may use a gloved hand to gently check the cervix.

Questions?

Your questions are important. If you have questions about any of these terms, ask your prenatal healthcare provider or nurse at your next clinic visit.