A Father’s Guide to Pregnancy

- How long does pregnancy last?
- What is a “due date”?
- What happens during the first trimester?
- What happens during the second trimester?
- What happens during the third trimester?
- Is sex OK during pregnancy?
- What if I smoke?
- Should I attend my partner’s prenatal care visits?
- What tests will my partner have at her first prenatal care visit?
- When is an ultrasound exam done?
- What other tests may be included in prenatal care visits?
- What can I do to help prepare for labor and delivery?
- What should I expect during labor?
- How can I help my partner during labor and delivery?
- What will my partner experience during the postpartum period?
- What is postpartum depression?
- What are symptoms of postpartum depression?
- How can I bond with the baby during breastfeeding?
- When can I and my partner have sexual intercourse after the baby is born?
- Glossary

How long does pregnancy last?
Pregnancy lasts about 40 weeks, which is equal to 9 months. The 9 months of pregnancy are divided into three 3-month periods called trimesters.

What is a “due date”?
The due date that you are given by your partner’s health care provider is only an estimate of when the baby will be born. To calculate a due date, try this simple formula: take the date of the first day of your partner’s last menstrual period and subtract 3 months. Then add 7 days to get the due date.

What happens during the first trimester?
During the first trimester, most women need more rest. Women in early pregnancy also may have symptoms of nausea and vomiting. Although commonly known as “morning sickness,” these symptoms can occur at any time during the day or night.
What happens during the second trimester?
For most women, the second trimester of pregnancy (weeks 14–28) is the time they feel the best. As the woman's body adjusts to being pregnant, she usually begins to feel better physically. Her energy level improves, and morning sickness usually goes away.

What happens during the third trimester?
In the third trimester of pregnancy (weeks 28–40), your partner may feel some discomfort as the baby grows larger and her body gets ready for the birth. She may have trouble sleeping, walking quickly, and doing routine tasks.

Is sex OK during pregnancy?
Unless your partner's health care provider has told her otherwise, you and your partner can have sex throughout the entire 9 months. Also, there are other ways to be intimate during her pregnancy. Cuddling, kissing, fondling, mutual masturbation, and oral sex can fill the void until you can have intercourse again.

What if I smoke?
Not smoking around your partner is important because the chemicals in secondhand cigarette smoke can harm your baby before and after it is born. Babies exposed to secondhand smoke have an increased risk of developing asthma and sudden infant death syndrome.

Should I attend my partner’s prenatal care visits?
It may be helpful for you to go to some of your partner’s prenatal visits. At one of the early visits, you and your partner will be asked about your personal and family health histories. If you have a strong family history of a certain disease, you may have a gene for the disease that can be passed to your baby. Be sure that your partner knows your history if you cannot be there.

What tests will my partner have at her first prenatal care visit?
Your partner may have these tests and exams at the first visit:

- Complete physical exam with blood and urine tests
- A pelvic exam
- Blood pressure, height, and weight measurements

All pregnant women are tested for human immunodeficiency virus (HIV) and syphilis. Many women also receive routine tests for other sexually transmitted diseases.

When is an ultrasound exam done?
Most women receive an ultrasound examination at 18–20 weeks of pregnancy. This exam gives an estimate of the actual age of the fetus and checks the baby’s development. It also may be possible to find out the baby’s sex.

What other tests may be included in prenatal care visits?
Later prenatal care visits may include the following tests and exams:

- Checking the baby’s heart rate
- Measuring your partner's blood pressure
- Testing her urine for signs of gestational diabetes
- Measuring her weight
- Measuring the height of the uterus to gauge the baby’s growth
- Checking the position of the fetus
- Screening tests for birth defects
- Blood test to screen for gestational diabetes
- Screening test for group B streptococcus

What can I do to help prepare for labor and delivery?
You can help prepare for labor and delivery by taking the following steps:

- Enroll in childbirth classes.
- Take a tour of the hospital.
- Install an infant car seat.

What should I expect during labor?
Labor happens in three stages. It may last between 10 hours and 20 hours. If an emergency occurs during labor or delivery, you may be asked to leave the room. Although there may not be time to explain why at that moment, someone will explain the reasons to you later.
How can I help my partner during labor and delivery?
Although your partner is the one giving birth, there is plenty you can do to help during labor and in the delivery room:

• Help distract your partner during the first stage of labor.
• Unless she has been told to stay in bed, take short walks with your partner.
• Time her contractions.
• Offer to massage her back and shoulders between contractions.
• Help her with the relaxation techniques you learned in childbirth class.
• Encourage her during the pushing stage.

What will my partner experience during the postpartum period?
The postpartum period is the first 6 weeks after birth. Most women will feel tired and sore for a few days to a few weeks after childbirth. Women who have had a cesarean delivery may take longer to heal. Also, having a new baby in the house can be stressful. You, your partner, and any other children you have need to adjust to a new lifestyle.

What is postpartum depression?
It is very common for new mothers to feel sad, upset, or anxious after childbirth. Many new mothers have mild feelings of sadness called postpartum blues or “baby blues.” When these feelings are more extreme or last longer than a week or two, it may be a sign of a more serious condition known as postpartum depression. Postpartum depression also can occur several weeks after the birth. Women with a history of depression are at greater risk of this condition.

What are symptoms of postpartum depression?
A new mother may be developing—or already have—postpartum depression if she has any of the following signs and symptoms:

• The baby blues do not start to fade after about 1 week, or the feelings get worse.
• She has feelings of sadness, doubt, guilt, or helplessness that seem to increase each week and get in the way of normal functions.
• She is not able to care for herself or her baby.
• She has trouble doing tasks at home or on the job.
• Her appetite changes.
• Things that used to bring her pleasure no longer do.
• Concern and worry about the baby are too intense, or interest in the baby is lacking.
• Anxiety or panic attacks occur. She may be afraid to be left alone with the baby.
• She fears harming the baby.
• She has thoughts of self-harm or suicide.

How can I bond with the baby during breastfeeding?
Some fathers feel left out when watching the closeness of breastfeeding. But if your partner has chosen to breastfeed, there are ways you can share in these moments:

• Bring the baby to her for feedings.
• Burp and change the baby afterward.
• Cuddle and rock the baby to sleep.
• Help feed your baby if your partner pumps her breast milk into a bottle.

When can I and my partner have sexual intercourse after the baby is born?
There is no set “waiting period” before a woman can have sex again after giving birth. Some health care providers recommend waiting 4–6 weeks. The chances of a problem occurring, like bleeding or infection, are small after about 2 weeks following birth. If your partner has had an episiotomy or a tear during birth, the site may be sore for more than a week and she may be told to not have intercourse for a while.

Glossary

Episiotomy: A surgical incision made into the perineum (the region between the vagina and the anus) to widen the vaginal opening for delivery.

Gene: A DNA “blueprint” that codes for specific traits, such as hair and eye color.

Gestational Diabetes: Diabetes that arises during pregnancy.
Human Immunodeficiency Virus (HIV): A virus that attacks certain cells of the body’s immune system and causes acquired immunodeficiency syndrome (AIDS).

Pelvic Exam: A physical examination of a woman’s reproductive organs.

Sexually Transmitted Diseases: Diseases that are spread by sexual contact, including chlamydial infection, gonorrhea, human papillomavirus infection, herpes, syphilis, and infection with human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

Syphilis: A sexually transmitted disease that is caused by an organism called Treponema pallidum; it may cause major health problems or death in its later stages.

Trimesters: The three 3-month periods into which pregnancy is divided.

Ultrasound: A test in which sound waves are used to examine internal structures. During pregnancy, it can be used to examine the fetus.

Uterus: A muscular organ located in the female pelvis that contains and nourishes the developing fetus during pregnancy.

If you have further questions, contact your obstetrician–gynecologist.

FAQ032: Designed as an aid to patients, this document sets forth current information and opinions related to women’s health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to the institution or type of practice, may be appropriate.

Copyright April 2013 by the American College of Obstetricians and Gynecologists