



Before 13 weeks pregnant

Pregnancy appointments
visual story



aspect
Autism Spectrum Australia

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This visual story has been developed by the team at Aspect as a resource to help navigate antenatal appointments.

Aspect welcome any feedback, good or bad, on how this resource can support you better. Contact research@aspect.org.au or scan the QR code





This visual story will cover general information about pregnancy.

All pregnancy journeys look different.

It's okay if my pregnancy journey looks different to what is written in this visual story.

My care may occur in my house, in the hospital, or at the doctor's clinic.

If there are terms I am not sure of, I can check the glossary in the back of this visual story.

Pregnancy timeline

This visual story is about this part of pregnancy.



First trimester

Weeks 1–12
(Before 13 weeks)



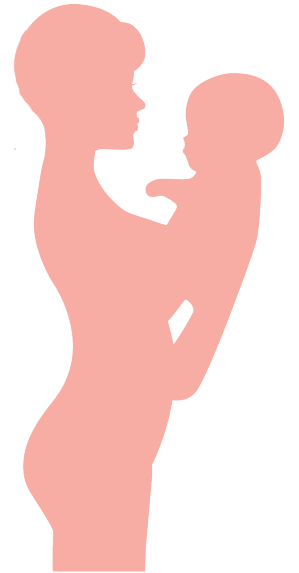
Second trimester

Weeks 13–27
(After 13 weeks)



Third trimester

Weeks 28–40



**Labour/
birth of
baby**

*After 13 weeks
pregnant – pregnancy
appointments visual story:
tinyurl.com/14-40weeks*





Some signs that I may be pregnant

Before I find out if I am pregnant, I might notice some different signs in my body. These can be:

- a missed period
- changes in what I want to eat (e.g. a strong dislike of a food I normally like, or craving a particular food)
- bloating (my belly feels swollen)
- spotting (instead of a full period)
- nausea or vomiting
- sore breasts
- extreme fatigue.

If I think I am pregnant, or notice any of these different signs in my body, I can take a home pregnancy test. I can find these at a pharmacy.

If the pregnancy test is positive, **I should see a doctor/GP.**



Before I go to a pregnancy appointment



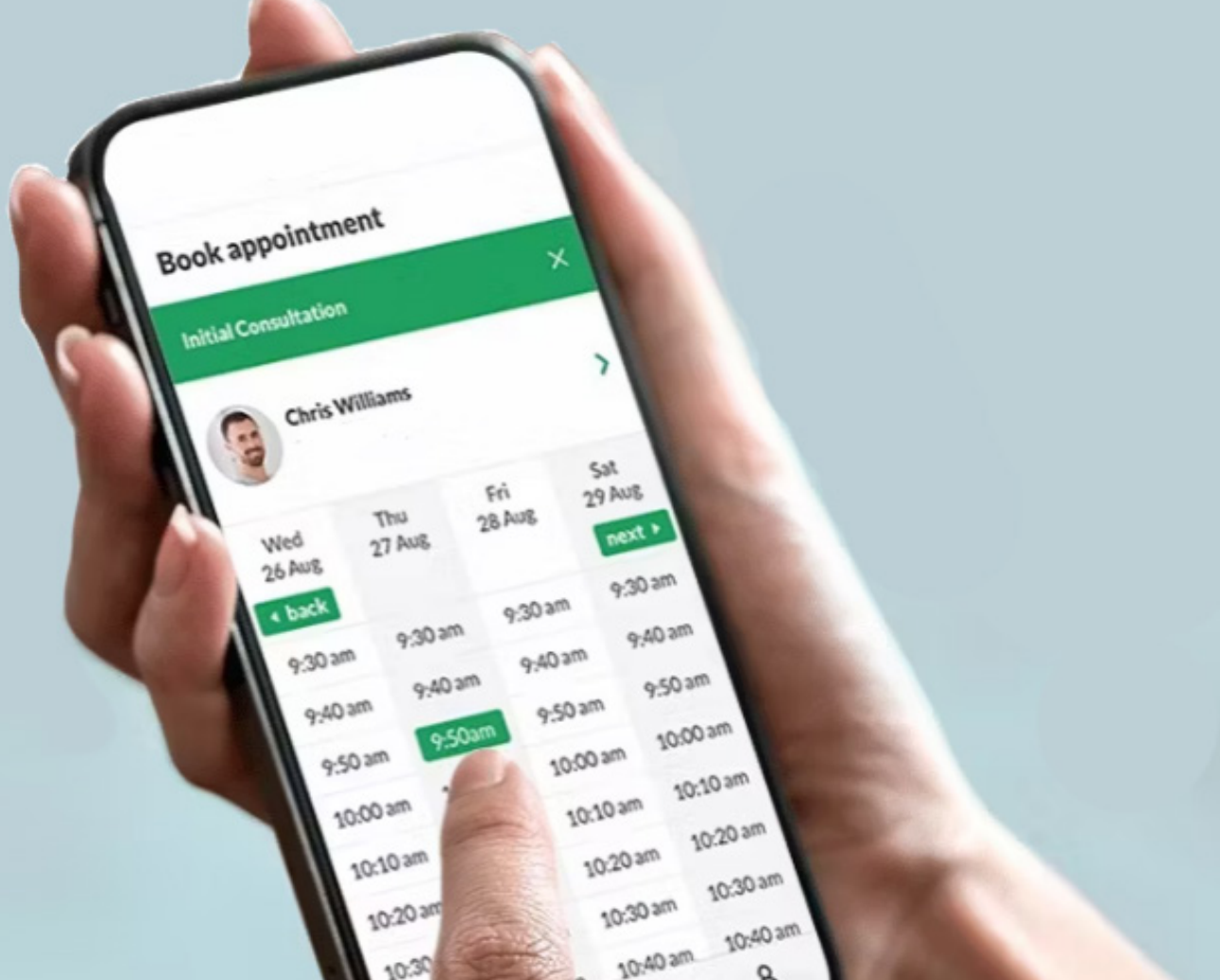


Why should I see a doctor if I am pregnant?

As soon as I find out that I am pregnant, I should book an appointment with a doctor/GP. The appointments I have throughout my pregnancy are called **antenatal or prenatal appointments**.

Seeing a doctor once I am pregnant is important because:

- The doctor can check if the baby is healthy.
- The doctor can check if I am healthy.
- The doctor can advise me on how to keep healthy during pregnancy.
- The doctor can talk with me about nutrition and exercise.
- The doctor can help with quitting any drugs, alcohol or smoking, if I need.
- I can find out when my baby is due.
- I can talk to the doctor about any questions or concerns I might have about pregnancy, giving birth or after pregnancy care.
- The doctor can explain different types of care for me and my baby and refer me to the one I choose.



When and how to book a doctor

It's best to have my first appointment before 10 weeks into my pregnancy. This is because there are:

- lots of things to learn about during pregnancy
- tests that can help with taking care of myself and my baby.

If I do not know how long I have been pregnant, that is okay – I should book an appointment to see a doctor as soon as I can.

If I have a regular doctor/GP, I can make an appointment with them.

If I do not have a regular care doctor/GP, I can search for doctors in my area on the internet, and book online using HotDoc or by calling the medical centre. Pregnancy care is free through Medicare/ the public health system. If I have complications with my pregnancy, I may need more visits.

I can choose to have an appointment at a doctor's clinic or at the hospital.



Before I go to the doctor

I can prepare some things to help me feel more comfortable during my doctor's appointment.

I can choose to:



Bring someone to the appointment with me



Bring sensory toys or headphones



Write a script to help me speak to my doctor



Bring a list of medicines I am taking



Bring communication cards (or pre-written messages on my notes app on my phone e.g. "I need a break" "Please don't touch me")



Bring a piece of paper with questions I have for my care team (see **page 20** for an example list of questions)



If I have one, I should bring my Medicare card or healthcare card.



If I need to bring my children with me, I need to bring items to keep them entertained before and during the appointment.



Rules and expected behaviour for a doctor's appointment

- A doctor should always ask for **consent** before touching me. This means they should ask if it is okay to touch me. I can also let doctors know I do not like to be touched without warning, or if I have certain areas which I do not like to be touched.
- I can ask my doctor any questions that will make me more comfortable in an appointment, or any questions that I am unsure about.
- If I am feeling stressed or unable to communicate using spoken words, I can ask my doctor for a break, or to speak to my support person, if I brought one. I can also write what I would like to say to the doctor before I go to the appointment.
- A doctor should not make me feel shame or embarrassment. They have seen a lot of different things. I should expect no judgement from a doctor.
- If I feel like I am not being listened to or respected, I can request a different doctor. I can also look on my doctor's website for information on how to make a complaint.



At my first pregnancy appointment



Process of an appointment



1. Arrive at healthcare centre



2. Check in at reception



3. Sit in the waiting room until my name is called



4. Follow the doctor/GP to their office



5. Talk with the doctor



6. Finish my appointment at reception



Arriving at the medical centre

I should arrive to my appointment 10–15 minutes before it is scheduled. Before I see my doctor, I may need this time to:

- find parking, if I need
- navigate to the reception desk
- queue to see the receptionist and tell them I have arrived
- fill out any forms that I may need.



Checking in at reception

I will find the reception desk and check in (I will tell the receptionist my name and my booking time).

After I have checked in, I can sit anywhere I prefer in the waiting room.

I can choose to bring items to help me relax, like headphones.



Sitting in the waiting room until my name is called

In the waiting room, I might have some unpredictable sensory experiences:



Loud noise levels



Bright lights



**Accidental touch
from patients**



**Smells like latex
gloves, disinfectant**



**Long waits without
specified time**

I can ask the receptionist if I can wait in my car until the appointment starts.

If I choose to wait in my car, they will ask for my phone number and call me when it is my turn to see the doctor. If I choose to wait in the waiting room, a doctor will call out my name.



Follow the doctor/GP into their office

I will follow the doctor into their office. They may be wearing a coat, scrubs or everyday clothing.

The doctor will show me to a chair or examination table to sit on. **I can choose to tell my doctor that I am Autistic**, or if I have any communication or sensory needs.

The doctor may perform some tests where touch is necessary. This may make me feel uncomfortable.

I can tell the doctor if touch is uncomfortable for me, or if I need a moment to prepare, or if I need to pause.



Talking with my doctor/GP – types of things they might do

At my appointment, my doctor will give me information about antenatal care. During my appointment, my doctor may do none, one or all of the things below. This is okay. If I am feeling nervous, I can write down what I want to say to my doctor before I go to my appointment. My doctor may:

- Ask me a lot of questions. I can tell the doctor if I need them to slow down, or if I need them to write down anything to help me remember or process. I can see more about the types of questions I may be asked on the next page.
- Talk with me about any concerns I may have with my pregnancy or general health.
- Talk with me about the other types of routine tests and doctor's appointments I will need.
- Discuss maternity care options, or other care I might need, including who might be a main maternity carer for me.
- Discuss what kinds of food, vitamins, exercise or medicines are safe in pregnancy.
- Check my blood pressure and heart rate. This might feel uncomfortable when the pressure monitor is wrapped around my arm. It is normal to feel like my blood is pumping very fast or loud through my arm.
- Measure my weight and height.



Talking with my doctor/GP – types of questions I might be asked

At my appointment, my doctor will ask some questions. These questions are not to judge me. These questions are asked to everybody. They are asked so that my doctor can better support me through my pregnancy.

It is up to me whether I answer these questions. It is okay to not have all the answers to these questions.

Anything I say will be kept private between my medical professionals and me. They may ask me:

- Do I have any prior pregnancies?
- Have I had any prior illnesses or operations?
- Am I allergic to any medicines?
- Do I take any drugs, drink any alcohol, or smoke any cigarettes/vapes?
- Am I stressed or do I have any signs of depression or anxiety?
- Am I experiencing any domestic violence, and whether I would like support or professional help? (If my doctor is asking me about domestic violence, it does not mean that they think I am being abused. It is a question they ask everybody so that pregnant people have a safe way to ask for help, if they need it.)
- Do I have any family history of twins, genetic illnesses or chronic illnesses like diabetes?
- Where might I like to keep receiving antenatal care, and what my options are to give birth?



Finishing my appointment at reception

I can ask my doctor to write down any part of my appointment that is extra important, or that I would like help remembering.

I can discuss next steps with my doctor, or when I will need to book in another appointment.

I should be given a timetable of when I will need to come in for appointments. If I am not given a timetable, I can ask the doctor or receptionist for one.

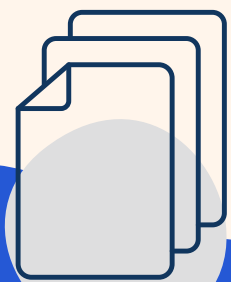
The doctor will tell me when they will contact me with any test results.

I may need to talk to the receptionist after my appointment to:

- book my next appointment, if I require
- pay any fees, if I need to.



Extra resources





If I notice any of the following, here is what I can do

Sometimes during a pregnancy, my body may do things that I am not expecting, or I have not experienced. If I notice any of the following signs, I should **visit my healthcare professional**:

- mild nausea and vomiting
- slight vaginal discharge
- backache
- mild headaches.

If I notice any of the following signs, I should **go to the hospital or emergency room** straight away:

- vaginal bleeding
- severe pain in my abdomen
- chest pain
- sudden swelling in my face, hands or feet
- severe headaches with vision changes
- loss of consciousness
- seizures
- shortness of breath
- high fever
- severe vomiting that leads to dehydration.

If I am unsure, I can call Health Direct ([healthdirect.gov.au](https://www.healthdirect.gov.au)) on 1800 022 222 to ask what I should do.

Important terms to know

Amniotic fluid

A clear or slightly yellow liquid that surrounds, protects and helps my baby grow.

Antenatal/prenatal appointment

These are terms used to describe the many appointments I may have across my pregnancy.

Birth plan

A written document that says my preferences for labour and delivery.

Braxton Hicks

Braxton Hicks contractions may occur all throughout pregnancy. They are also known as “false labour” – even though they feel like contractions, they don’t lead to labour.

Care team

Anybody involved in looking after me while pregnant, e.g. OBGYNs, midwives, doulas.

C-section (caesarean section)

An operation where a baby is born through a cut made in the abdomen.

Cervix

A passage/canal that connects the uterus to the vagina where the baby is birthed.

Conception

The action of becoming pregnant, describing the moment where sperm meets the egg.

Contractions

Contractions usually occur at the end of pregnancy. They are my body’s way of getting ready for labour. They feel like mild menstrual cramps or a tightening in a specific area of the abdomen. My contractions may be intense or painful, and this is okay and normal.

Doula

A person employed to provide guidance and support to someone giving birth. They may be a non-medical companion. A doula can support before, during and after a pregnancy.

Fetal

A describing term that has to do with a fetus (an unborn baby) or pregnancy.

First, second and third trimester

These are time periods through my pregnancy:

- first trimester – conception to 12 weeks
- second trimester – 13 to 27 weeks
- third trimester – 28 to 40 weeks

Folic acid

A B vitamin that helps prevent neural tube defects (NTDs) in babies. It is commonly found in leafy greens but is recommended to take as a vitamin before or during pregnancy.

Labour

The processes a body might go through just before giving birth, e.g. contractions, the cervix opening.

Important terms to know

Midwife

A health professional trained to provide support and care during pregnancy, labour and birth.

Miscarriage

The loss of a pregnancy before the unborn baby (fetus) can survive outside the uterus (womb). A missed miscarriage/abortion is when a pregnancy stops developing, but the embryo or fetus remains in the uterus.

Obstetrician/OBGYN

A health professional that provides specialised medical care during pregnancy and labour. They can help, if I have complications or concerns about my pregnancy.

Pathology

A pathologist or pathology clinic examines samples of body tissue or body fluids to check the health of myself or my baby.

Placenta

An organ that develops during pregnancy to provide oxygen and nutrients to the baby and remove waste products from the baby's blood.

Postnatal

A term to refer to anything occurring or being after birth.

Preeclampsia

A common complication of pregnancy that . It can cause circulation problems in me or my baby. I should go to the hospital if I notice any symptoms, e.g. high blood pressure, blurred vision, protein in urine, and sudden excessive swelling of the face, hands and feet.

Sonogram

A computer picture created by an ultrasound of the inside of an abdomen.

Spotting

A few drops of blood every now and then from a vagina. Some spotting is normal very early in pregnancy, but I should tell a healthcare professional about it.

Ultrasound

A procedure that creates a visual image of tissues and organs inside the body, including a baby. A healthcare practitioner may use gel with a handheld device on the abdomen or insert the device into a vagina to make sure the body or baby looks healthy.

Uterus

Where a fetus (an unborn baby) develops and grows. It is also called a womb.

VBAC (vaginal birth after caesarean)

A vaginal delivery after a previous caesarean.

Vaginal birth/delivery

The delivery of a baby through the vagina. It can be spontaneous, induced (artificially started through medication or other procedures), or assisted (using an instrument to help the baby out).



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