

Definitions/glossary

You may come across the following words and phrases when talking with your pregnancy and birth carers - or when reading pregnancy related information:

Word/Phrase	Meaning
Accoucheur	A name taken from the French language to describe the person who "catches" a baby when he/she is born.
Anatomical	A description of the structure, position and attachments of organs and tissues of the body.
Antenatal	The time from when you become pregnant, until you go into labour. Also called prenatal.
Antenatal clinic	A place you can go to for pregnancy (antenatal) care. The clinics are usually held in hospitals - but some hospitals or areas also offer clinics in your local community. Also called outpatient clinics.
Assisted vaginal birth	One of the methods that may be used to speed up the birth of baby. Assisted vaginal birth is performed by either using forceps (special large curved tongs placed around the baby's head to assist movement through the birth canal) or vacuum extraction (gentle suction applied following placement of a large suction cap on the baby's head).
Augmentation	If your labour starts by itself, but progresses slowly, it may be necessary to speed things up. The doctor or midwife may break the water around the baby, or you may be given an intravenous drip with medication (oxytocin).
Birth centre	A place you can go for pregnancy (antenatal), labour, birth and postnatal care. Usually a home-like setting, with midwives as the main carer. Some hospitals have birth centres and there are one or two private centres in Victoria.
Birth suite	One of the places you can go for labour and birth. A specially equipped area in a hospital. Also called labour ward, delivery suite, birth room or birthing unit. A birth suite is NOT the same as a birth centre.
Booking visit	When you first ring a hospital to book for pregnancy and birth care, many hospitals offer you the opportunity to come in and see a midwife or doctor. At this visit your carer(s) will: <ul style="list-style-type: none"> • tell you about different options of care available to you • discuss issues such as your general health, diet, how you are feeling - and types of support available to you. Blood tests may be taken at this visit and an ultrasound may be ordered. This visit is a good time for you to ask questions
Braxton Hicks	Irregular tightening of the pregnant uterus that occurs throughout pregnancy. The tightening usually increases in duration, frequency and intensity.

Cardiotocograph (CTG)	The continuous electronic fetal monitoring of baby's heart rate during pregnancy or labour. This cardiotocograph (CTG) involves the placement of two plastic disks (receivers) on the abdomen held in place by two belts. The receivers are attached to a machine. Some hospitals have telemetry that enables monitoring while women move around freely.
Cervix	The part of the uterus that protrudes into the vagina, often referred to as the 'neck of the uterus'.
Complication	A disease or injury that develops during pregnancy, birth or postnatal phase that may alter the course and/or the management of the pregnancy, birth or postnatal phase.
Congenital hypothyroidism	A condition caused by the thyroid gland either absent or not functioning properly. It affects one in every 4100 babies in Victoria. If not treated, it will result in severe intellectual disability, growth problems and deafness.
Continuity of care	In this site, continuity refers to women getting to know their carers. A number of different carers may look after you during pregnancy, labour and birth. During research, many women have said it's important to them to have only a small number of people looking after them. They can then get to know their carers, and their carers can get to know them. Likewise, some women want to meet the midwife who will care for them during labour and birth. The amount of continuity differs with different models of care and between hospitals.
Cystic fibrosis	A respiratory disorder that affects one in every 3000 babies in Victoria. Characterised by thick mucus causing frequent respiratory infections, and poor digestion. It also affects the reproductive system.
Domiciliary care	Care provided in your own home. If you have a baby in a public hospital in Victoria you should be offered a home visit from a midwife, after you go home with your baby.
Ectopic pregnancy	When the pregnancy locates in an abnormal site or tissue, such as the fallopian tube, rather than the uterine cavity.
Electronic fetal monitoring	See cardiotocograph above.
Episiotomy	Sometimes it is necessary to make a cut in your skin at the lower end of your vagina to help the baby come out. This is more likely if you need a forceps delivery, but in some cases may also be thought necessary during a normal birth.
Fallopian tube	Two ducts that open at one end into the uterus. The other end opens over the ovary. The fallopian tube serves as a corridor for the ovum to pass from the ovary to the uterus.
Forceps	See assisted vaginal birth above.
Genetic	Inherited or hereditary.
Gestation	The number of weeks pregnant calculated from the first day of the mothers last normal menstrual period.

Gravida	The number of times a woman has been pregnant. It may be expressed as a number or used to differentiate between a woman who is pregnant for the first time (primigravida) and a woman who has been pregnant before (multigravida).
Induction of labour	Sometimes it is necessary to help your body begin the process of labour. Any method that does this is called induction. If it becomes necessary for you in your pregnancy, your carers will talk to you about the different types of induction.
High Risk	Women who have chronic health problems, or a history of serious problems with a previous pregnancy, are said to be at 'High Risk' of complications during their pregnancy.
Hypertension	High blood pressure.
Listeria infection	An infection contracted by eating food contaminated with the bacteria Listeria monocytogene. These bacteria have been found in raw meat, raw vegetables and some processed foods.
Low Risk	Women who have no serious health problems and no history of serious problems with a previous pregnancy, are said to be at 'Low Risk' of complications during their pregnancy. Some models of care require women to be at 'Low Risk' - such as birth centre care
Midwifery model of care	In some models of care, midwives can be your main carers during pregnancy, labour and birth. These models are said to be 'midwifery-led' or 'mainly midwives'. You would still usually have a doctor involved in your care, but to a lesser extent than in other models. Some rural hospitals may not be able to offer a midwifery model of care.
MIPP	Midwife in Private Practice. MIPPs are self-employed midwives who offer a range of services including: <ul style="list-style-type: none"> • pregnancy and birth care • lactation support • postnatal care. MIPPs are not Medicare funded, and are currently not covered by insurance.
Miscarriage	The loss of a pregnancy before 20 weeks' gestation.
Neonatal death	A baby who is born alive but dies within 28 days of birth.
Obstetrician	A doctor who has completed extensive specialist education, including exams, to be a specialist in maternity care (obstetrics) as well as in gynaecology (women's reproductive health).
Obstetric Resident	Junior trainee obstetrician.
Obstetric Registrar	Senior trainee obstetrician
Oedema	Swelling of the ankles, fingers, face and legs caused by retention of fluid.
Outpatient clinic	Clinics within a hospital where you can go for check ups or appointments when you are not an inpatient of the hospital. Antenatal clinics are often part of outpatient departments in hospitals.

Perineum	The skin and muscle between the vagina and the anus.
Phenylketonuria	A metabolic disorder that affects one in every 14,000 babies in Victoria. It is caused by the lack of an enzyme that, if not treated, can result in severe, progressive intellectual disability, motor and growth problems.
Physiological	A description of the processes and function of the organs and tissues of the human body.
Postnatal	The period of time after the birth.
Postnatal care	Care given to you after your baby is born. In most hospitals you will be transferred from the birth suite to the postnatal ward an hour or two after the birth. Midwives usually look after you, with one or more visits from a doctor if required.
Postpartum haemorrhage	Excessive bleeding (more than 600 ml) after the birth of baby.
Pre-admission clinic or visit	<p>Many hospitals offer you the opportunity to come in and see a midwife during mid to late pregnancy. This visit is different from a regular check up. The midwife will discuss with you:</p> <ul style="list-style-type: none"> • how things are going in general • your plans for when you go home after you've had your baby • getting organised at home, and who will help you • the things you need to bring in with you to hospital. <p>In some hospitals, where there are no midwifery-led models of care offered, this visit may be a good opportunity for you to chat to a midwife.</p>
Premature/preterm	Labour or birth of a baby prior to 37 weeks' gestation.
Presentation	Identifies the part of baby that lies closest to the cervix. This is usually the head, but may also be breech (baby's bottom).
Stillbirth	The death of a baby (at least 20 weeks' gestation) in the uterus before it is born.
Toxoplasmosis	A disease contracted by eating raw or undercooked meat or handling faeces of cats. The disease follows an initial infection with a parasite called toxoplasma gondii.
Ultrasound in Pregnancy	Ultrasound is a technique using high frequency sound waves and their echoes to create pictures of your internal parts. It has a huge number of uses, and not just in pregnancy. In fact, there are so many reasons a doctor or midwife may suggest you have an ultrasound scan that it is easy to misunderstand why you are having it.

<p>Ultrasound uses in Pregnancy</p>	<p>Ultrasound has many different uses in pregnancy and at different stages in pregnancy. In early pregnancy it is used to check the baby's:</p> <ul style="list-style-type: none"> • size - to determine the due date (called gestational age) • number - in case there is more than one! • gender • growth rate (by making measurements over time) • formation - are the heart, kidneys, lungs and other body parts properly formed? • risk of a genetic abnormality such as Down syndrome. • position of the placenta to see if it is improperly developing over the opening of the uterus (cervix) • ectopic pregnancy • abnormalities in your uterus or pelvis eg an ovarian cyst. <p>In later pregnancy it may be used to check:</p> <ul style="list-style-type: none"> • the volume of amniotic fluid (sometimes called liquor) cushioning the baby. This is used to screen for growth retardation and malformation in the baby • the baby's profile (presentation, movements, tone and breathing).
<p>Uterus</p>	<p>The hollow pear-shaped muscle in which the baby grows throughout pregnancy. Also referred to as 'the womb'.</p>
<p>Team Midwifery</p>	<p>A team of midwives who work in a public hospital and together, care for about 320 women a year.</p>
<p>Vacuum extraction</p>	<p>See assisted vaginal birth above.</p>