

TRAVEL AND PREGNANCY

In general, travel during pregnancy is safe. However, plans to do so should take into account current and past obstetrical and medical histories, destination, length of time away from home and medical facilities available during travel. Remember, if a complication occurs while you are out of town we will be unable to care for you.

An important note regarding Zika virus: Due to the continued mosquito-borne spread of Zika virus in many parts of the world, it is advised that pregnant women and their partners avoid any nonessential travel to affected areas throughout pregnancy. Please notify your healthcare provider of any planned travel so we may provide the most up-to-date information on the risk of Zika virus in that area and current CDC guidelines.

GENERAL RECOMMENDATIONS:

First Trimester: Travel in general is unrestricted.

- If you experience bleeding, significant cramping or any concerns regarding the possibility of an ectopic pregnancy, travel is NOT advised.
- You may want to have an initial ultrasound performed before any extensive travel, particularly to remote or third world destinations.

Second Trimester: Travel in general is unrestricted.

- If you are having bleeding or preterm contractions, travel is NOT advised.
- If you have placenta previa, travel is NOT advised.
- If your pregnancy is complicated by hypertension or diabetes, travel MAY NOT be advised.
- If you have twins, travel MAY NOT be advised.
- If you require Lovenox or Heparin therapy, travel MAY NOT be advised.

Third Trimester: Travel in general is acceptable until the last few weeks of pregnancy.

- Long flights may not be advised after 32 weeks.
- If your pregnancy is high risk or has medical complications, travel is NOT advised.

WE DO NOT RECOMMEND TRAVEL OUTSIDE THE WASHINGTON METROPOLITAN AREA IN THE LAST FEW WEEKS OF PREGNANCY BECAUSE:

- You may rupture your membranes and/or go into labor.
- You may develop bleeding or other complications of late pregnancy.
- You may DELIVER.