ENDO *Queen*

PREGNANCY AND ENDOMETRIOSIS

My pregnancy *with endometriosis*

My visits, my pain, my week, and life after the birth. Alongside my prenatal care.



First name _____

HOW TO USE IT

How to *use it*

To write down how you feel week after week, and talk about it more easily at each appointment.

1. **At the start**, fill in “Me and my contacts”: your team will see straight away that you have endometriosis or adenomyosis.
2. **At each appointment**, tick your schedule and note what you were told.
3. **Every week**, one “My week” page: pain, bleeding, contractions, mood, and your questions.
4. **Whenever you like**, “My pregnancy memories”: the firsts, a photo, a note for the baby.

Your medical records and your patient portal remain the official record. This booklet adds to them. It is not medical advice.

ME AND MY CONTACTS

The essentials *for my team*

My pregnancy

First day of my last period _____

Due date _____

Hospital or birth center _____

Insurance: plan, member ID _____

My endometriosis

☐ Endometriosis ☐ Adenomyosis ☐ Both

Where (if known)

☐ Ovaries ☐ Bladder ☐ Other

☐ Bowel ☐ Ligaments

☐ Known ovarian cyst (endometrioma)

Past operations (year, type) _____

Treatments before pregnancy

Name, and when I stopped.

_____

_____

About me

Blood type, Rh _____

Allergies _____

Previous pregnancies _____

Pregnancy after fertility treatment _____

My contacts

	Name	Phone
OB-GYN or midwife (CNM)		
After-hours line		
Labor and delivery (L&D)		
Primary care (PCP)		
Endometriosis specialist		
Insurance (member services)		
Pharmacy		

To tell every provider

"I have endometriosis or adenomyosis." My prenatal care may be adapted to my history, my symptoms, any past surgery and my care team's advice.

MY CARE

My prenatal *visits*

Your prenatal visit schedule is set with your OB-GYN or midwife and can be tailored to you. Write each visit here. Weeks are counted from the first day of your last period (LMP).

Date (MM/DD)	Weeks	Who I saw	What was done, what I was told

Tests and vaccines to ask about

Vaccine timings from the CDC page "Vaccine Recommendations Before, During, and After Pregnancy", updated 10/07/2026. Recommendations can change: check with your OB-GYN that they are still current.

Test or vaccine	When	Date	Done
Glucose test (gestational diabetes)	24–28 weeks, earlier if higher risk		☐
Group B strep test	late pregnancy		☐
Tdap vaccine (whooping cough), every pregnancy	27–36 weeks		☐
RSV vaccine, or RSV immunization for baby after birth	32–36 weeks, Sept. to Jan.		☐
Flu vaccine	ask, ideally by end of Oct.		☐
COVID-19 vaccine	ask your OB-GYN		☐
Ultrasounds and genetic screening offered to me	ask your OB-GYN		☐

Coverage: check your plan's maternity benefits, or your state's Medicaid program (healthcare.gov · medicaid.gov). Prior authorization needed for _____

UNDERSTANDING

What endometriosis *changes, or doesn't*

Pain

It may ease, stay the same or change. Every pregnancy is different. Pregnancy does not cure endometriosis.

The risks, without exaggerating them

Most pregnancies go well. Endometriosis and adenomyosis can, however, be linked with some complications: a low-lying placenta (placenta previa), premature birth, early miscarriage or ectopic pregnancy (outside the uterus); with adenomyosis, pre-eclampsia. These are links seen on average: they don't say what will happen to you.

Serious complications exist but are rare: internal bleeding, a bowel complication, an ovarian cyst that changes appearance on a scan.

Your care

Usual pregnancy care is the starting point, and your team can adapt it to you: your history, symptoms, past operations. The European guideline (ESHRE, 2022) does not call for extra monitoring for everyone. The key thing: your team knows.

My questions about my endometriosis during pregnancy

What my team told me

SAFETY

Urgent warning *signs*

Seek medical care right away if

- headache that won't go away or gets worse;
- dizziness or fainting;
- changes in your vision;
- fever of 100.4 °F or higher;
- extreme swelling of your hands or face;
- thoughts of harming yourself or your baby;
- trouble breathing;
- chest pain or fast-beating heart;
- severe nausea and throwing up;
- severe belly pain that doesn't go away;
- baby's movement stopping or slowing;
- vaginal bleeding or fluid leaking during pregnancy, including early on, especially with pain on one side of your lower belly;
- after pregnancy: heavy bleeding or large clots;
- swelling, redness or pain in a leg or arm;
- overwhelming tiredness.

These 15 signs (CDC "Hear Her") apply during pregnancy and up to a year after. Say: "I am pregnant" or "I was pregnant within the last year." Regular or painful contractions before 37 weeks: call your OB-GYN or L&D.

Call 911 right away if

- you faint or collapse;
- you have sudden, severe pain;
- you are bleeding heavily, or have any other serious sign.

With endometriosis

Sudden pain, very different from your usual pain: call your OB-GYN or L&D right away. With feeling faint, looking pale or pain in the shoulder: 911.

Keep an eye on

Your usual pain changing without getting worse, a new but bearable discomfort: note it below and mention it at your next visit. If you're unsure, call: that's what they're there for.

My numbers

OB-GYN, after hours _____

Labor and delivery (L&D) _____

Nearest ER _____

Took too much of a medicine: Poison Help **1-800-222-1222**, free, 24/7 (PoisonHelp.org).

What happened

Date	What happened	Who I called	What I was told

MY PAIN

Pain and *medicines*

- **Ask before any medicine**, including over-the-counter pain relievers: your OB-GYN, midwife or pharmacist.
- **Acetaminophen**: some studies have asked whether it is linked with autism or ADHD, and the FDA has asked for a warning to be added to the label. ACOG points out that the data do not show it causes these conditions, and still considers it an appropriate first choice for pain or fever in pregnancy: the lowest dose that works, for the shortest time, after talking with your OB-GYN or midwife.
- **NSAIDs** (ibuprofen, naproxen, aspirin for pain…): avoid them from 20 weeks unless your doctor tells you otherwise. Before 20 weeks, never without medical advice. Low-dose aspirin prescribed by your doctor is a separate case.
- **Without medicines**, with advice: gentle heat, rest, comfortable positions, physical therapy.

Date, time	Weeks	Pain 0 to 10	Where	What I took or did	Advised by	Effect

Where: lower belly, back, right or left side, rectum, bladder, other. Effect: better, same, worse.

MY WEEK · PRINT AS MANY TIMES AS YOU NEED

Week of _____ to _____ · ___ weeks

	Worst pain 0 to 10	Where	Bleeding 0 · spotting · light · heavy	Contractions how many, regular?	Nausea 0 to 3	Tiredness 0 to 3	Sleep hours, 1 to 3	Mood 1 to 5	Baby moving as usual · less	Bowels OK · constipated · pain
Sunday										
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										

What changed this week

My questions for the next visit

The answers I got

What made me happy this week

Baby moving less, bleeding, fluid leaking, or contractions before 37 weeks: call your OB-GYN or labor and delivery right away. Emergency: 911.

FOR ME

My pregnancy *memories*

No pressure to be fine: hard days count too. This is where you keep what does you good, at your own pace, and you don't have to fill in anything you don't feel like.

My firsts

	Date	How I felt
The day I found out		
My first ultrasound		
The first kick I felt		
The day we told people		
The name (or name ideas)		
A craving, a laugh, a moment to keep		

A photo, an ultrasound picture

stick it here

A note for the baby

AFTER THE BIRTH

Taking care *of yourself*

The baby blues usually pass. If you feel sad, anxious or exhausted for more than two weeks, talk to your OB-GYN, midwife or primary care provider: postpartum depression is common, and it can be treated. The urgent warning signs on the safety page apply up to a year after the birth.

When your period comes back varies a lot, and is usually later if you breastfeed. You can ovulate before your first period, so you can get pregnant before it returns. Talk to your provider about birth control if you need it, and about your endometriosis treatment. At work, most employees have the right to break time and a private place, other than a bathroom, to pump breast milk for 1 year after the birth (PUMP Act).

After the birth, call quickly

Your OB-GYN, midwife or L&D if you have a fever, belly pain that is getting worse, a scar that is red or oozing, or a red, painful breast.

911 if you are bleeding very heavily, have a painful or swollen calf, chest pain or trouble breathing, a severe headache or changes in your vision.

Help

1-833-852-6262 (1-833-TLC-MAMA) · National Maternal Mental Health Hotline, call or text, free, 24/7, English and Spanish.

1-800-944-4773 · Postpartum Support International HelpLine: leave a message, a trained volunteer calls back. Not a crisis line.

988 · call or text, thoughts of suicide.

Appointment	When	Date	Done
Postpartum visit(s) with my OB-GYN or midwife	ask when to book		☐
Baby's checkups with the pediatrician	ask when to book		☐
Pelvic floor physical therapy: ask if it's right for me			☐
Follow-up appointment for my endometriosis	to rebook		☐
Other: _____			☐

Week after the birth	Bleeding	Pain 0 to 10	Mood 1 to 5	Sleep	Period back (date)

Sources: CDC (Hear Her urgent maternal warning signs; vaccines during pregnancy, page updated 10/07/2026; gestational diabetes; group B strep), FDA (NSAIDs in pregnancy, 2020; acetaminophen, 2025), ACOG (acetaminophen in pregnancy, 2025), U.S. Department of Labor (PUMP Act), ESHRE guideline endometriosis 2022. Written in October 2026. Not medical advice: in an emergency, call 911.