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Project on

Assessment Of Total Number Of second Trimester Among Second and Third Trimester Pregnant Mother Attended ANC At Mohammadpur Fertility Services and Training Center, Dhaka.

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CERTIFICATION OF APPROVAL

I am pleased to certify that the project report on “Assessment total number of second trimester among second and trimester and third trimester pregnant mother attending ANC at Mohammadpur fertility services and training center” conducted by Aliza Hasan, bearing ID No: 153-34-465 of the Department of Nutrition and Food Engineering has been approved for presentation also defense for the academic degree. I strongly favored this report, have presented by researcher and bears a significance character and a very pleasant personality. I wish her all success in life.



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LETTER OF TRANSMITTAL

Date: 19 December 2019

To

Dr. Md. Bellal Hossain

Professor and Head

Department of Nutrition and Food Engineering

Faculty of allied health science (FAHS)

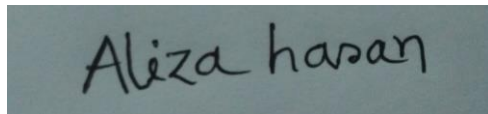
Daffodil International University

Subject: Submission for Project Report on Assessment Of Total Number Of second Trimester Among Second and Third Trimester Pregnant Mother Attended ANC At Mohammadpur Fertility Services and Training Center, Dhaka.

Dear mem,

It is a great pleasure for me to the opportunity to submit the Project report as a part of the Nutrition and Food Engineering (NFE) program curriculum for partially fulfillment under graduation degree. I have prepared this report based on the acquired knowledge during my intern period MFSTC hospital. It is a great honor for me to opportunity this project work in MFSTC hospital. This Report base on 'assessment of total number of second trimester among second and third trimester pregnant mother attended ANC at Mohammadpur Fertility Services and Training Center, Dhaka.

I, therefore, would like to place this report to your judgment and also your indication. Your kind advice will help to better planning and performs in the future.



Sincerely Yours

Aliza Hasan

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At first I am grateful to my almighty for giving me this opportunity in my life to perform my responsibility as project work at ‘Mohammadpur Fertility Services and Training Center’.

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This Project Work is dedicated to
My Parents

Abstract

Antenatal consideration is one of the fundamental components of maternal consideration on which relies upon babies and the mother and furthermore depends the introduction of solid children. It's happen to diminishing the maternal mortality and furthermore determinants high maternal death rate so it is assuming significant job. In creating nation ladies are gotten the administrations of antenatal consideration yet in our nation the vast majority of the mother particularly country zone, urban ghettos don't get the administrations of antenatal consideration. In the overview instruction and antenatal consideration altogether related on the grounds that the ladies who are taught getting the antenatal consideration during pregnancy, effectively keeps up the standard and guideline what they are doing during pregnancy and how they are keeping up their eating routine, likewise mindful about the significance of pregnancy. Now and then pay are identified with the ANC administrations. Notwithstanding the time being known, they can't get this administration reason of no capacity. Pregnancy issue socially touchy in our nation on the grounds that during pregnancy appropriate consideration is required and furthermore critical to the health of kid and mother. It is basic for confusions during pregnancy, solid labor, insurance of her and furthermore safe conveyance.

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Chapter-1

Background

Background:

To diminish the pregnancy related inconvenience antenatal consideration has incredible job and it has additionally extraordinary job for lessening maternal mortality. It thought about a basic component of antenatal consideration at the hour of pregnancy. The wellbeing of new conceived infant relies upon the mother medicinal services during pregnancy. Instruction and ANC fundamentally related in light of the fact that informed mother mindful of the significance of antenatal consideration during pregnancy. Be that as it may, the vast majority of the individuals in Bangladesh under destitution line uniquely the provincial region and urban ghettos. They have no training so they can't understand the significance of antenatal consideration during pregnancy. Pay is likewise related on the grounds that lower pay family mother have not sufficient supplements nourishment, so they absence of nutrient and birth undesirable youngster. Maternal instruction impact the antenatal consideration in Bangladesh. For this reason Bangladesh statistic and wellbeing overview (BDHS) information have been utilized, so the antenatal visit of pregnant ladies were expanded. Maternal instruction impact to guarantee the ANC visit of pregnant ladies and furthermore relationship of ANC visit.

In comprehensively 86 % of ladies got appropriate antenatal consideration with a soundness of staff. % of ladies age 15-46 went to in any event four time of ANC at the hour of pregnancy. They likewise gather the information that ladies who are gotten at any rate four ANC. Other than the

ladies contract with pro, nurture at the hour of pregnancy. In sub-Saharan Africa and south Asia are less measure of antenatal consideration. The world wellbeing association (WHO) alludes least eight antenatal consideration can change the ladies experience, thinking and furthermore diminish the perinatal mortality.

Objective:

General target:

This report discovers kinds of larger part gestational age among second and third trimester to get antenatal registration. Furthermore, related with statistic, financial, ANC care factors at MFSTC.

The particular item:

The fundamental article is to distinguish the kinds of gestational age among second and third trimester visit at MFSTC for ANC care during current pregnancy and furthermore recognize the variables identified with the ANC, financial, wellbeing difficulties, and sorts of anti-conception medication strategy among the pregnant mother going to at MFSTC emergency clinic.

Section TWO

Related definitions

ANC: exceptional consideration, perception, offered guidance which is better for ladies and her creating embryo, planed assessment for the mother from origination to birth multi month to multi month). The pregnancy of multi month and its separated into three trimester division each on multi month).

The three trimester are given underneath

1. First trimester is from 0 weeks to 13 weeks. This time progressively basic to her baby's improvement.
2. Second trimester is from 14 weeks to 26 weeks. This period is called brilliant period the same number of difficulty vanish to the early.
3. Third trimester is from 27 weeks to 40 weeks.

Point: To conceive an offspring a sound infant and a solid mother closure of a pregnancy of a mother. This consideration starting at the origination to end of the pregnancy.

THE OBJECTIVE OF ANTENATAL CARE:

- For diminishing the maternal mortality and newborn child mortality
- To recognize different difficulty during pregnancy and illuminating it.
- To recognize the higher hazard related issue and explaining at the earliest opportunity.
- To expel different difficulty during pregnancy

THE BENEFIT OF FOCUS ANTENATAL CARE

- Easily comprehending wellbeing related difficulty
- Relevant for gestational age
- Most wellbeing related issues influencing the mother and new conceived child

Objective

- To guarantee the recognize high hazard condition treatment
- To guarantee wellbeing of a mother and her infant
- To guarantee for decreasing maternal mortality and newborn child mortality
- To give human services and self-consideration during pregnancy.
- To give wellbeing propensity data completion of pregnancy

SUPPLEMENT AVOID DURING PREGNANCY

Nutrient E, nutrient A (very little).

VITAMINE INCLUDE: folic corrosive 400 mcg (following 13 weeks to abstain from taking enhancement), thiamine 3mg, niacin 20 mg, nutrient D 400 IU, nutrient C 70 mg, nutrient B12 6 mcg(it is significant for sensory systems), zinc 12 mg for each day. During pregnancy period the

most basic time frame is first and a month ago. So this time deliberately taken her. Supplement FOOD: there are numerous natural products to counsel take her like or apricots (which substance iron, nutrient A,C,E, calcium, potassium, phosphorus), orange (which content(nutrient c, water), mangoes (nutrient A,C), pomegranates (calcium, folate, fiber, protein), guava (nutrient C,E, polyphenols, carotenoids), bananas (nutrient C, B6, potassium, fiber), grapes (nutrient C,K, gelatin, natural corrosive, cell reinforcements), berries (nutrient c, sugar solid), apples (nutrient A,C, potassium, fiber), dried organic product which content nutrient, minerals and furthermore vitality. Ordinary one bit of foods grown from the ground serving of cleaved natural product ought to be eaten. Other than different vegetables like beans , broccoli, eggplant, cabbage, cauliflower, oats, grains, mushroom, potatoes, green cold, spinach carrot, pumpkin, sweet potato and furthermore eat milk (nutrient B1, B2,B5,B12, B3, nutrient c), cheddar, yogurt, meat, fish (nutrient D, B2, iron, zinc, mineral, iodine, potassium, magnesium) and its eats in any event two times each week .

CHAPTER -2
METHODS AND MATERIALS

Study area selection:

The study was conducted at the mohammadpur fertility services and training center, Dhaka. On the base of the title of the project author surveyed mohammadpur fertility services and training center to conduct the project work.

Study design: A Hospital based cross sectional study was conducted at the mohammadpur fertility services and training center for 40 days. This study was conducted on 100 pregnant mother at mohammadpur fertility services and training center. The pregnant women who visited for taking antenatal care services from this hospital, they were selected as targeted group.

Study population: all pregnant mother who visited here for taking antenatal care services at mohammadpur fertility services and training center were selected the targeted group. The study were conducted among second trimester and third trimester of pregnant mother, aged in between less than 18 to 38 who visited the mohammadpur fertility services and training center for antenatal inspections. 100 data was collected from the pregnant mother.

Sample size: this study was conducted 100 pregnant mother who were attending in mohammadpur fertility services and training center. This study was conducted among second trimester and third trimester were selected for targeted group.

Sampling method: the target population were selected by studying to identify second trimester period and third trimester period of pregnant mother.

Observation method: during my project i worked here with nutritionist, four counselors. Here I observed the patients and treatment and counselling process.

Interview method: I talked with the patients to get the information that I want to study

Question answer method: for preparing my project report make some questionnaire and asked to the targeted patients.

Discussion method: after collecting the questionnaire did discussion hospital author and also counselors.

Data collection procedure: the structure of the questionnaire based on the patients age, height, weight, educational qualification, occupation, patients husband occupations, monthly income, numbers of baby, health problem, physical test, birth control method, food habit during pregnancy, tetanus vaccine, what basis she visit this hospital, do she maintain hospital instructions, which delivery she expected and where she want to child delivery from mohammadpur fertility services and training center.

Data analysis: the data were entered and analysis data, frequency of the variable data were calculated and their percent were noted.

CHAPTER -3

Result and discussion

Result: from total 100 participants 10% pregnant women were 17 weeks of pregnancy, 43.3% women 21 weeks pregnancy, 46.7% women 25 weeks of pregnancy. In total number of 60 (100%) women were second trimesters of pregnancy. On the other side 40% women 30 weeks of pregnancy, 26.7% women 34 weeks pregnancy so that number of 40 (66.7)% women were third trimesters of pregnancy. So that total number of 60 (100%) second trimester pregnant mother came to the hospital to received antenatal care.

Table: 1 Socio- economic and demographic history of second and third trimesters of pregnant mother

In total 100 pregnant mother attended ANC at MFSTC during this study where each of them responded in some questionnaire. Among the study majority of the pregnant women aged in between 18 and 24 (103.3%). The religion of pregnant women 158.3% Muslims, 6.7% Hindu, 1.7% Christian. The height range of 86.7% pregnant mother were in between 151 and 160cm. this study found the range of weight 88.3% of pregnant women were in between 46 and 60.

Variable	Category	Frequency	Percent %
Age	< 18	2	3.3%
	18-24	62	103.3%
	25-30	19	31.7%
	31-38	17	28.3%
Weight	34-45	4	6.7%
	46-60	53	88.3%
	61-70	32	53.3%
	Above 71	11	18.3%

Height	142-150 cm	38	63.3%
	151-160 cm	52	86.7%
	Above 161 cm	10	16.7%
Religion	Hindu	4	6.7%
	Muslim	95	158.3%
	Christian	1	1.7%

This table shows that age between 18 and 24 (103.3%), weight range between 46 and 60 (88.3%) , height range between 151 cm and 160cm (86.7%), religion majority Muslim 158.3%.

Table: 2 economical and economical background among pregnant women

In total 100 pregnant mother attended ANC at MFSTC during this study where each of them responded in some questionnaire. Among the study majority of the pregnant women educational background 61.7% primary complete and 23.3% secondary complete. Most of cases patients husband were only earning person 66.7% job holder of patients husband and 123.3% women were housewife ,the range of income of their husbands were 10000 to 20000 (101.7 %).

Variable	category	Frequency	Percent%
Educational qualification	No education	13	21.6%
	Primary to class nine	37	61.7%
	secondary	14	23.3%
	Secondary above	36	60%

occupation	Housewife	74	123.3%
	Job holder	6	10%
	Worker	20	33.3%
Husbands occupation	business	9	15%
	Job holder	40	66.7%
	Worker	10	16.7%
	Other	33	55%
	Rickshaw puller	8	13.3%
	< 10000	7	11.7%
Monthly income	10000-20000	61	101.7%
	>21000	32	53.3%

This tables shows that primary to class nine (61.7%), patient's occupation housewife 123.3%, patient's husband occupation job holder (66.7%), income average 10000 to 20000 (101.7%).

Table: 3 Reproductive History of Second and third trimester of pregnant mother attended ANC at MFSTC

This study found that 60% pregnant women were having 1 child, 31.7% pregnant women were 2 had child, 8.3% pregnant women had 3 or more child. 66% pregnant women were new mother. The rates of miscarriage very few only 1.7% pregnant mother. This study found that 15% pregnant women were used injection (3 month), 10% pregnant women were used pill,16.7% pregnant

women were used condom. 21.7% pregnant women were used vaginal ring (10 years), 8.3% pregnant women were used ligation method (long term), most of them used implant method which duration 3 years. 95% pregnant women were used implant method. This study found that number of 60 pregnant were second trimesters And also found that number of 40 pregnant mother were third trimesters taking antenatal care during current pregnant period.

Variable	Category	Frequency	Percent %
Number of children	1 child	36	60%
	2 child	19	31.7%
	3 or more child	5	8.3%
	New mother	40	66.7%
Miscarriage history	Miscarriage	1	1.7%
Gestational age	1 st trimester	0	0%
	2 nd trimester	60	100%
	3 rd trimester	40	66.7%
Her accept birth control method	Injection	9	15%
	Pill	6	10%
	Condom	10	16.7%
	Vaginal ring	13	21.7%

	Ligation	5	8.3%
	Implant	57	95%
		Total=100	

This table shows that majority new mother (66.7%) , miscarriage(1.7%), gestational age second trimester(100%), majority used implant (95%) for birth control method.

Table: 4 types of health complications during current pregnancy

this study found that 56.7% pregnant women were vomiting, 48.3% pregnant women were headache, 26.7% pregnant women were back pain happened, 21.7% pregnant were dizziness, 05% pregnant were low pressure, malnourish and high pressure were 8.3% pregnant women. This table shows that most of time found out the complications 56.7% vomiting of pregnant mother

Variable	Category	Frequency	Percent %
Health complication	Headache	29	48.3%
	back pain	16	26.7%
	Vomiting	34	56.7%
	Dizziness	13	21.7%
	Low pressure	03	5%
	Other (malnourish, high pressure and other)	05	8.3%

This table shows that majority of pregnant mother were vomiting during pregnancy (56.7%).

Table: 5 types of physical test of pregnancy mother attended ANC at MFSTC

This study found that majority of pregnant mother were having ultrasonography around 131.7%. Then 66.7% pregnant women did urine test. 30% pregnant women (majority poor) whose were not any physical test, around 10% pregnant women were having blood test. So this case found that most of the mother ability to physical test and most of them were having ultrasonography.

Variable	Category	Frequency	Percent %
PHYSICAL TEST	Ultrasonography	79	131.7%
	Urine test	40	66.7%
	Blood test	06	10%
	No test	18	30%

This table shows that majority were having ultrasonography (131.7%).

Table: 6 dietary habits of pregnant mother attended ANC at MFSTC

This cases found that 61.7% of pregnant mother were normally eaten, they were eating various nutrient food like seasonal fruit, vegetables, egg, milk, fish, egg etc. in other cases 36.7% pregnant women were no taste for eating maximum in first pregnancy. In this study 68.3% pregnant women were eating nutrient food like fruits, vegetables, meat, fish, egg etc. in larger amount.

Variable	Category	Frequency	Percent%
Dietary history	Normally eaten	37	61.7%
	No taste for eating	22	36.7%
	Increase amount of nutrient meal (like)	41	68.3%

	fruits, vegetables, meat, fish, egg etc)		
		Total = 100	

This table shows that majority were increased their meal (68.3%).

Table: 7 economical effect of pregnancy mother

In this table 90% pregnant mother had no economic effect.

53.3% pregnant women had economical effect

26.7% pregnant women had little economical effect.

Variable	Category	Frequency	Percent
Economical effect	Yes	32	53.3%
	No	54	90%
	Little	16	26.7%

This table shows that majority of pregnant women had no economic effect (90%).

Table: 8 tetanus vaccination of pregnant mother

This study found out total 100% of pregnant women were completed their vaccination because they were aware of this vaccination.

And 66.7% pregnant women were not completed their tetanus vaccination (in which most were rural area).

Variable	Category	Frequency	Percent%
Tetanus vaccination	Complete	60	100%
	Incomplete	40	66.7%

This table shows that majority of pregnant women were complete their vaccination (60%).

Table: 9 had complete/ incomplete blood donor of pregnant women

In this survey 75% pregnant women were completed to ready their blood donor.

And 91.7% pregnant women not their blood donor ready

Variable	Category	Frequency	Percent
Ready or not ready of blood donor	Yes	45	75%
	No	55	91.7%

This table shows that majority pregnant women were not their blood donor ready (91.7%).

Table: 10 what types of delivery expected of pregnant women

In the term of this table 60% pregnant women wanted to caesarian for some complications, if 1st pregnancy were delivered caesarian, was possible to had Caesar later. If height less than 145cm were fewer tendency to normal delivery. And the other survey 106.7% of pregnant women wanted to normal delivery.

Variable	Category	Frequency	Percent
Types of delivery she expected	Caesar	36	60%
	Normal	64	106.7%

This table shows that 64% pregnant women were expected normal delivery (106.7%).

Table: 11 did them maintain hospital instructions

In this study 143.3 % pregnant women were maintained the hospital instruction, most of them educational background between primary to class nine (61.7%). Above secondary 60% pregnant women were educated. So that they easily understood the instruction of the hospital. Other study found that 14% pregnant women were not understood the instructions of the hospital because some some pregnant women were no education (about 21.6%).

Variable	Category	Frequency	Percent%
Maintain hospital instruction	Yes	86	143.3%
	No	14	23.3%

This table shows that majority of the pregnant women were maintained the instructions of the hospital (143.3%)

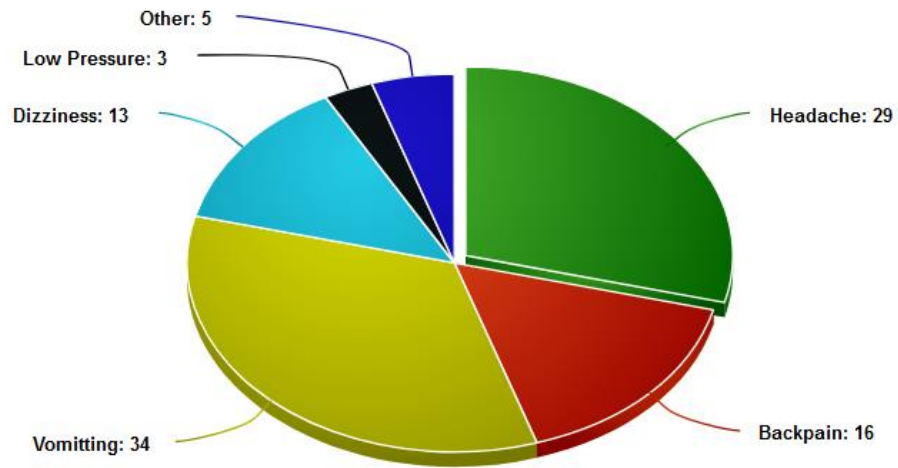
Table: 12 what on basis they visit this hospital for antenatal check-up

91.7% pregnant women were visited at MFSTC for good services. As this hospital was provided proper antenatal check-up so rural women or urban slums women came to this hospital for financial reason and this range 43.3 %. Other some of pregnant mother came to this hospital both good services and financial reason (31.7%).

Variable	Category	Frequency	percent
What on basis they visit this hospital	For good service	55	91.7%
	Financial reason	26	43.3%
	Both good service and financial reason	19	31.7%

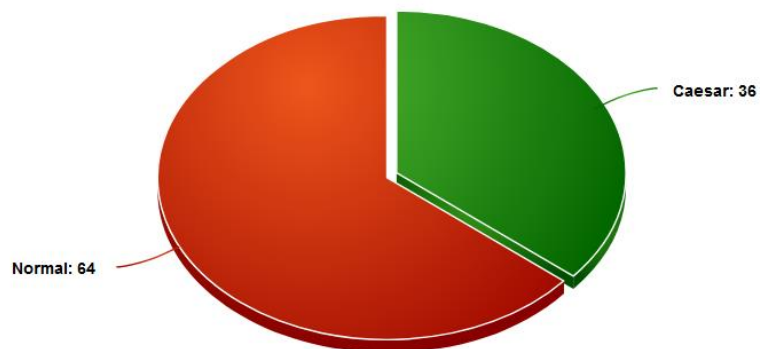
This table shows that majority came here for good services (91.7%)

Frequency of health complication of second and third trimester pregnant women



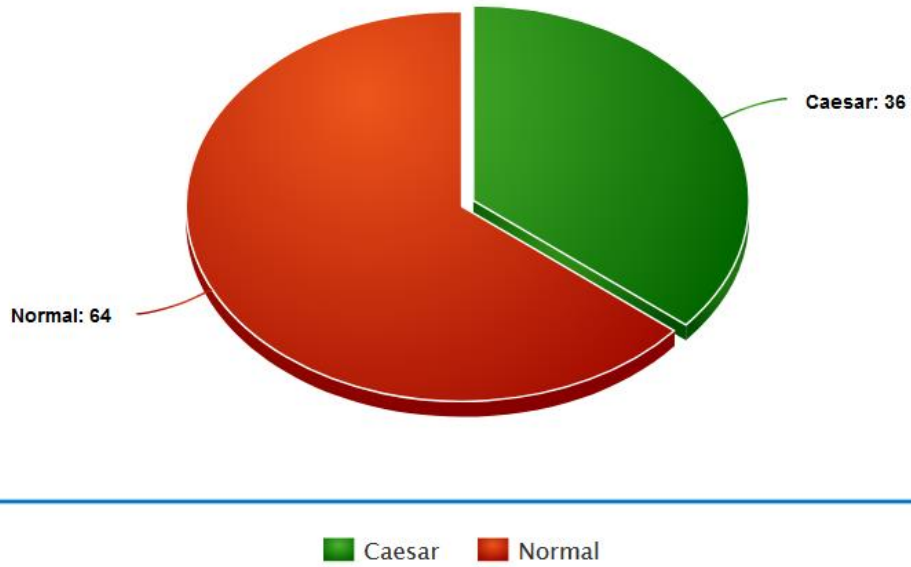
■ Headache ■ Backpain ■ Vomitting ■ Dizziness ■ Low Pressure ■ Other

Frequency of economic effect of second and third trimester pregnant mother

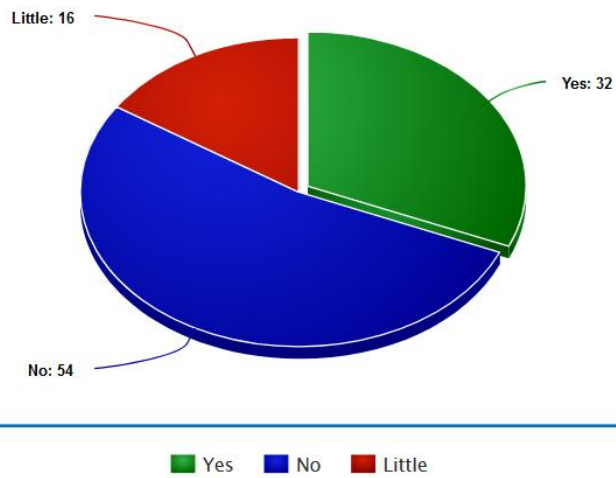


■ Caesar ■ Normal

Frequency of delivery among second and third trimester pregnant mother



Frequency of delivery among second and third trimester pregnant mother



Discussion

This report is to identify the factors associated with ANC among second and third trimester pregnant women attending in the Mohammadpur fertility services and training center in Dhaka. From this report it has been found that number of 60 (100%) pregnant women were second trimester came to the MFSTC for antenatal check-up during pregnancy. Total 100 data collected from second and third trimester of pregnancy which 60% (100%) second trimester and 40% (66.7%) third trimester were targeted group.

From this data majority of pregnant women were second trimester to receive the antenatal services. Majority less than 30 years of old women came to this hospital. Most of the people in our country majority are poor. So they do not get proper education and sometimes they complete just their primary level. For that inadequate knowledge they cannot understand the importance of special care, rules, regulation during pregnancy. That's why they cannot take care of her and sometimes miscarriage occurs. It's badly effect of her health in future pregnancy. They also little knowledge about the importance of blood donor ready (minimum 2 person) during pregnancy.

In this report majority women's were housewife so they depends on her husband income. Majority patients husband were job holder and their income level is average so that they provide proper amount of nutrient food during pregnancy for the pregnant mother. They were also aware of the importance of tetanus vaccination. For this majority complete their tetanus vaccination. Majority having one children but newly mother came to this hospital during current pregnancy. Most of the mother were complete their primary education so they little know about the importance of family planning method, maximum mother used implant (3 years) method for easy and safe reason. They also maintain the hospital instructions. During current pregnancy they were increased their meal like rice, seasonal fruits which content vitamin, mineral, water, magnesium, phosphorus, zinc. Various vegetables which content huge vitamin mineral, fish content with calcium, phosphorus, iodine, iron. Milk which content thiamin, riboflavin, vitamin B12 etc. Majority women expect normal delivery of their current pregnancy. Majority participants having health problem like vomiting, headache, dizziness that's why they cannot take proper nutrition as they no taste for eating (maximum 1st time pregnancy). So that this survey found out second trimester pregnant women those were taking proper nutrient food, complete their tetanus vaccination, maintains the rules regulation associate ANC, aware of special care, check-up during pregnancy.

CHAPTER- 4

Conclusion and References

CONCLUSION

This report focus on which types of pregnant women (on the basis of gestational age) come to visit at MFSTC hospital for antenatal checkup and their socioeconomic and demographic condition, dietary history, types of health complication and types of birth control method used people in average condition. To reduce the maternal mortality and infant mortality depends on antenatal care during

Pregnancy and this time need for special care of pregnant mother. This study also focus on the socio economic condition, their education which is related to ANC because an educated women aware of the antenatal care during pregnancy and whose economic condition is good are taking proper nutrients. In Bangladesh government has trying to reduce maternal mortality and infant mortality, for those purpose to provide maternal education associate with ANC. This study could be helpful to raise awareness and help to take government related to antenatal care and on basis provide maternal education associate ANC.

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