

List of Conditions and Accommodations

The table below provides some frequently experienced pregnancy-related conditions, and the accommodations provided in response.

Condition	Description	Potential Accommodations
Abnormal placentation; Subchorionic hematoma	Uterine or vaginal bleeding in pregnancy is a symptom usually caused by problems with placental attachment that can result in several pregnancy conditions that put women at risk for preterm delivery or miscarriage.	Allow scheduling changes or telework; move desk close to restrooms
Deep vein thrombosis	Pregnancy increases women's risk for blood clots, which can occur in the veins of the legs (deep vein thrombosis), lungs (pulmonary embolism) or brain (stroke).	Modification of desk or work station; breaks for stretching/exercise; space to store injections
Carpal Tunnel Syndrome	Tingling, pain, numbness and joint stiffness in hands and wrists is common in late pregnancy due to changes in fluid composition and increased amount of pressure on median nerve in wrist. ²⁷⁸ Carpal tunnel syndrome is an impairment that is much more prevalent in pregnant women than the population generally. ²⁷⁹	Allow occasional breaks from typing or similar tasks; provide programs that allow for dictation instead of typing or; assistance of a typist/notetaker
Chronic migraines	A condition sometimes exacerbated by pregnancy that can be a disability when the headaches reach substantially limiting levels. Migraines can limit major life activities such as seeing, hearing, eating, sleeping, walking, learning, reading, concentrating, thinking, communicating, and working.	Changing lighting; limiting exposure to noise and fragrances; allowing scheduling changes such as flexible schedules or remote access
Dependent edema	Swelling, especially of feet/ankles, is more common as pregnancy progresses, and becomes worse with standing. This is caused by an increase in the overall volume of fluid in the body, leading to a decrease in protein concentration or oncotic pressure within the circulatory system. This leads to fluid extravasation from blood vessels into the extravascular space.	Stool or chair to sit on; more frequent rest breaks; modification of footwear requirements
Depression	Includes both major and minor depressive disorders that occur during pregnancy or after giving birth. Symptoms include inability to sleep, loss of focus, feelings of helplessness, and thoughts of suicide. Depression may substantially limit major life activities (thinking, sleeping, concentrating, caring for oneself, and interacting with others). ²⁸³	Time off to attend therapeutic sessions; changes to provide a less distracting environment; telecommuting

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Dyspnea	Shortness of breath is common due to the partially compensated respiratory alkalosis of pregnancy. A pregnant woman breathes more deeply to allow gas exchange for herself, the placenta, and the fetus. Breathing more deeply (increasing “minute ventilation”) increases the pH of her blood (makes it a little more basic). Her kidneys partially compensate by putting more bicarbonate into her urine. This physiology is what makes daily life difficult for many pregnant women.	Stool or chair to sit on; more frequent rest breaks; scheduling or parking accommodations to account for increased difficulty walking between classes
Fatigue	A feeling of tiredness or exhaustion or a need to rest because of lack of energy or strength.	Light duty to avoid strenuous activity; Allow for more frequent breaks; flexible or reduced hours
Gastroesophageal reflux (GERD)	Mild to severe heartburn is common in pregnancy, caused by hormones loosening muscle that is supposed to hold stomach contents down.	Allowing food breaks as needed; providing space for medications to be stored
Gestational diabetes	This is a condition in which the placenta interferes with the body's normal metabolism of glucose. Women with gestational diabetes need to monitor their blood glucose two to six times per day, and some may need to take insulin or oral medication to control blood glucose levels. The resulting high blood glucose levels can cause placental dysfunction, increased fetal growth and postnatal metabolic abnormalities. Complications of uncontrolled gestational diabetes include fetal macrosomia, shoulder dystocia, and increased need for cesarean section.	Permission to take more frequent breaks; permission to eat small snacks; modified schedules
Hemorrhoids	Pregnancy can cause swelling of rectal veins due to hormonal changes, constipation (more common in pregnancy), and increased pelvic girth/pressure. Hemorrhoids can be painful or even bleed.	Avoiding being in a seated position all day or use of a special cushion
Hyperemesis gravidarum (persistent morning sickness)	Pregnant women can have nausea and/or vomiting that limits their ability to work in certain settings/certain times of day. Severe nausea and vomiting in pregnancy can result in weight loss, dehydration, and/or electrolyte imbalance that can be life threatening. It occurs most commonly in the first trimester but can extend throughout the entire pregnancy even beyond the pregnancy and all day long.	Permission to take more frequent bathroom breaks; testing location close to bathroom; permission to eat small snacks; limit exposure to scents; modified schedules or telework
Hypertension; preeclampsia	Chronic or pregnancy-induced high blood pressure may endanger both the health of the mother and the fetus. Pregnancy outcomes range from poor fetal growth, fetal distress and intrauterine demise. The mother may experience damage to her kidneys, liver, heart and brain (seizure or stroke). Major life activities impacted include performing manual tasks, walking, standing, lifting, bending, and working.	Stool or chair to sit on; limiting lifting and bending requirements; allowing work from home

Condition	Description	Potential Accommodations
Intrauterine Growth Restriction	Condition in which the fetus is not growing appropriately inside the uterus. There are multiple causes for this, including congenital anomalies, infection in pregnancy, placental attachment disorders, multiple gestation and maternal medical conditions. A related condition is low amniotic fluid or oligohydramnios. Complications include fetal distress, need for early delivery and increased need for cesarean section.	Provide telework option; time off for medical appointments
Lumbar lordosis	Pregnant women experience back pain through a variety of mechanisms, including the sway-backed posture (lumbar lordosis) caused by a growing belly and the hormones of pregnancy loosening up the joints, muscle spasms and “Braxton-Hicks” contractions. Pregnancy may also exacerbate pre-existing back problems. Back pain, if severe, can interfere with major life activities (standing, reaching, lifting, or bending).	Permit use of a heating pad; sitting instead of standing; lifting assistance or limitations
Perinatal depression	Includes both major and minor depressive disorders that occur during pregnancy or after giving birth. Symptoms include inability to sleep, loss of focus, feelings of helplessness, and thoughts of suicide. Depression may substantially limit major life activities (thinking, sleeping, concentrating, caring for oneself, and interacting with others).	Time off to attend therapeutic sessions; changes to provide a less distracting environment; telecommuting
Symphysealseparation (i. e., pubic symphysis separation)	Loosening of the joint on the front of the pelvic bone (pubic symphysis) in preparation for childbirth is caused by pregnancy hormones. This condition can result in severe pelvic pain and limited mobility like with some back problems.	Limits on lifting requirements; providing a stool or chair to sit on; more frequent breaks
Syncope or near-syncope	Feeling lightheaded or dizzy (or fainting) is common in pregnancy due to the increase in proportion of blood volume going to the uterus and fetus. Symptoms can be caused by heat, stress or unusual exertion. The patient may also experience palpitations or a racing heart beat.	Providing a stool or chair to sit on; more frequent breaks
Urinary tract or bladder infection	Although frequent urination is nearly universal in pregnancy, it can also be a symptom of a bladder infection--which is more common in pregnancy. Infections can result in pain, fever, nausea, and other symptoms and frequent urination can result in poor quality of sleep.	More frequent bathroom breaks; carrying a bottle of water