



Travel During Pregnancy

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Is travel safe during pregnancy?

For most women, traveling during pregnancy is safe. As long as you and your fetus are healthy, you can travel safely until you are 36 weeks pregnant.

When is the best time to travel during pregnancy?

The best time to travel is the middle of your pregnancy—between week 14 and week 28. Most common pregnancy problems happen in the first and third trimesters. During midpregnancy, your energy has returned, morning sickness usually is gone, and it is still easy to get around. Paying attention to the way you feel is the best guide for your activities.

When is travel not recommended during pregnancy?

Travel is not recommended if you have certain pregnancy complications, including **preeclampsia**, **prelabor rupture of membranes**, and **preterm** labor. Travel also may not be a good idea if you are pregnant with more than one fetus.

Are there areas that I should avoid traveling to while I am pregnant?

Travel is not recommended for pregnant women in areas where Zika outbreaks are ongoing. Zika is an illness spread by mosquitoes that can cause serious birth defects. Travel also is not recommended to areas with malaria, another mosquito-carried illness that is dangerous for pregnant women. For a current list of Zika and malaria outbreak areas, as well as other areas that may pose risks for pregnant women, go to wwwnc.cdc.gov/travel/notices.

What should I do before going on a trip?

There are a few things you can do to make sure your trip is safe and comfortable:

- Schedule a checkup with your **obstetrician–gynecologist (ob-gyn)** before you leave.
- Know your estimated due date. If you have a problem while you are traveling, your caregivers will need to know how far along you are in your pregnancy.

- Plan to bring any over-the-counter medications that you may need, such as pain relievers, hemorrhoid ointment, a first aid kit, and prenatal vitamins. Also bring any prescribed medications.
- Check that you are up to date with your vaccines.
- Think about how long it will take to get to your final destination. The fastest way often is the best.
- Make your travel plans easy to change. Consider buying travel insurance to cover tickets and deposits that cannot be refunded.

What is deep vein thrombosis and why is it a concern for pregnant travelers?

Deep vein thrombosis (DVT) is a condition in which a blood clot forms in the veins in the legs or other areas of the body. DVT can lead to a dangerous condition in which the clot travels to the lungs. Sitting or not moving for long periods of time, such as during long-distance travel, can increase the risk of DVT. Pregnancy further increases the risk of DVT. If you are planning a long trip, take the following steps to reduce your risk of DVT:

- Drink lots of fluids.
- Wear loose-fitting clothing.
- Walk and stretch at regular intervals. For example, when traveling by car, make frequent stops to get out and stretch your legs.

What are some tips for traveling by car?

During a car trip, make each day's drive as short as possible. Wear your seat belt every time you ride in a car. Buckle the belt low on your hipbones, below your belly. Place the shoulder belt off to the side of your belly and across the center of your chest (between your breasts). Plan to make frequent stops so that you can move around and stretch your legs.

What are some tips for traveling by plane?

Keep your due date in mind when booking your flight. Complete your flight before you reach 36 weeks of pregnancy. Some domestic airlines restrict travel completely or require a medical certificate during the last month of pregnancy. For international flights, the cutoff point often is earlier, sometimes as early as 28 weeks. Check your airline's policies when planning your trip.

Book an aisle seat so that you can get up and stretch your legs. Plan to do this every 2 hours or so. Avoid gas-producing foods and carbonated drinks before your flight. Gas expands in the low air pressure in airplane cabins and can cause discomfort. Wear your seatbelt at all times.

What are some tips for traveling by ship?

Make sure a doctor or nurse is on board the ship. Also make sure that your scheduled stops are places with modern medical facilities. Before you leave, ask your ob-gyn which medications are safe for you to take if you get seasickness.

A concern for cruise ship passengers is norovirus infection. Noroviruses are a group of viruses that can cause severe nausea and vomiting for 1–2 days. People easily can become infected by eating food, drinking liquids, or touching surfaces that are contaminated with the virus. Wash your hands frequently while on board the ship. If you have diarrhea and vomiting at the same time, seek medical care.

The Centers for Disease Control and Prevention (CDC) performs periodic inspections of cruise ships to prevent widespread virus outbreaks. You can check whether your ship has passed this health and safety inspection at www.cdc.gov/nceh/vsp.

What are some tips for traveling outside the United States?

Check your health insurance policy to see if you are covered internationally. If not, you may be able to buy special health care insurance for international travelers.

Travel to developing countries comes with the risk of consuming contaminated food and water. Travelers can become sick if they eat raw or undercooked food or drink local water. This short-term illness, called "traveler's diarrhea," may be a minor problem for someone who is not pregnant, but it is a greater concern for pregnant women. Serious illnesses, such as **hepatitis A** and **listeriosis**, also can be spread by contaminated food and water. These diseases can cause severe complications for a pregnant woman and her fetus.

If you get diarrhea, drink plenty of fluids to combat dehydration. Before taking a diarrhea treatment, check with your ob-gyn or other health care professional to make sure it is safe. The best way to prevent illness is to avoid unsafe food and water. The CDC offers food and water precautions at wwwnc.cdc.gov/travel/page/food-water-safety.

When should I seek emergency medical care when traveling?

Go to a hospital or call emergency medical services right away if you have any of the following:

- Vaginal bleeding
- Pelvic or abdominal pain or contractions
- Rupture of the membranes (your "water breaks")
- Signs and symptoms of preeclampsia (headache that will not go away, seeing spots or other changes in eyesight, swelling of the face or hands)

- Severe vomiting or diarrhea
- Signs of DVT (see [FAQ174 Preventing Deep Vein Thrombosis](#))

How can I find a health care professional while traveling?

Even if you are in perfect health before going on a trip, you never know when an emergency will come up. If you are traveling in the United States, locate the nearest hospital or medical clinic in the place you are visiting. You also can search online for a health care professional.

American College of Obstetricians and Gynecologists Find an Ob-Gyn

www.acog.org/About_ACOG/Find_an_Ob-Gyn

American Medical Association DoctorFinder

<https://apps.ama-assn.org/doctorfinder/home.jsp>

International Association for Medical Assistance to Travelers

www.iamat.org

Glossary

Hepatitis A: An infection caused by a virus that can be spread by contaminated food or water.

Listeriosis: A type of illness you can get from bacteria found in unpasteurized milk, hot dogs, luncheon meats, and smoked seafood.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.

Preeclampsia: A disorder that can occur during pregnancy or after childbirth in which there is high blood pressure and other signs of organ injury. These signs include an abnormal amount of protein in the urine, a low number of platelets, abnormal kidney or liver function, pain over the upper abdomen, fluid in the lungs, or a severe headache or changes in vision.

Prelabor Rupture of Membranes: Rupture of the amniotic membranes that happens before labor begins. Also called premature rupture of membranes.

Preterm: Less than 37 weeks of pregnancy.

If you have further questions, contact your obstetrician–gynecologist.

FAQ055: This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.

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