

# What to Expect at 36 Weeks of Pregnancy: Preparing for Labor and Self-Care



## Highlights

Marks the ninth month of pregnancy, approximately 8.5 months from the last menstrual period.

Baby weighs around 2.75 kg and measures 46 cm, with fully formed organs.

Maternal symptoms include fatigue, back pain, leg swelling, frequent urination, and sleep difficulties.

Signs of impending labor appear: Braxton Hicks contractions, mucus plug discharge, and occasional abdominal pressure.

Preterm birth at this stage is generally manageable, with infants typically breathing independently.

Important: monitor fetal movements, maternal health, nutrition, and physical activity.

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## **Maternal Sensations at 36 Weeks**

At this stage, the baby is active, with at least 10 movements in a 12-hour period.

Anxiety and emotional fluctuations are common: nervousness, irritability, tearfulness, fatigue, and drowsiness.

Physical discomfort is frequent due to: Heavily enlarged abdomen Difficulty walking Restricted movement Enlarged breasts

Heavily enlarged abdomen

Difficulty walking

Restricted movement

Enlarged breasts

Braxton Hicks contractions may be felt as intermittent abdominal tightening, signaling the approach of labor.

Positive sensations include increased energy, sometimes due to the baby dropping into the pelvis, especially in first-time pregnancies.

Heavily enlarged abdomen

Difficulty walking

Restricted movement

Enlarged breasts

## **Abdominal Changes and Fetal Movements**

The baby moves lower into the pelvis, preparing for birth.

This movement may relieve pressure on the diaphragm, easing breathing, but increases urinary frequency.

Discomforts such as heartburn, nausea, and shortness of breath may decrease slightly.

Fetal movements may appear less vigorous due to limited space, but remain noticeable.

## **Fetal Development at 36 Weeks**

Weight: ~2750 g

Length: ~46 cm

Cheeks are rounded, and the baby practices sucking reflexes.

Skin is smoother due to decreased vernix; amniotic fluid volume slightly decreases.

Hair, eyebrows, and eyelashes are visible; nail tips extend beyond fingers and toes.

The baby responds to familiar voices, with heart rate ~140 bpm.

Cranial bones remain soft and flexible to ease passage through the birth canal.

Internal organs and systems are fully formed, and the baby is considered full-term for survival outside the womb.

Genital development is complete.

### **Common Discomforts and Pain**

Back pain from increased weight and joint stress.

Abdominal pressure due to internal organ compression.

Ligament and pelvic pain from uterine support strain.

Leg cramps and fatigue are common.

Digestive issues like constipation or minor nausea may persist.

Mild menstrual-like cramps are normal; stronger pain may indicate low amniotic fluid or preterm labor.

### **Signs of Labor and Preterm Birth**

Preterm labor at 36 weeks requires attention but is generally safe for the baby.

Indicators of approaching labor: Regular contractions Mucus plug discharge

Rupture of membranes

Regular contractions

Mucus plug discharge

Rupture of membranes

Braxton Hicks contractions are irregular and shorter in duration; true labor contractions are consistent and may be accompanied by bleeding.

Regular contractions

Mucus plug discharge

Rupture of membranes

## **Vaginal Discharge**

Normal discharge is viscous and may become pinkish near labor. Curd-like, purulent, or bloody discharge signals potential infection or placental issues and requires immediate medical attention.

## **Nutrition and Physical Activity**

Focus on plant-based foods, moderate dairy, and fresh juices rich in vitamins. Limit fluid intake to ~0.8 L per day; avoid alcohol and excessive sugar. Light exercise and daily walks improve circulation, reduce swelling, and maintain maternal health. Avoid strenuous activity, heavy lifting, and stimulants that may trigger contractions.

## **Recommended Tests and Examinations**

Ultrasound: to check placental maturity and fetal positioning.  
Blood tests: for infections (HIV, STIs) and biochemical markers.  
Vaginal swab: to assess microbial flora.  
Urine analysis: kidney function and preeclampsia monitoring.  
Doppler ultrasound: fetal oxygen and nutrient supply.  
CTG (cardiotocography): fetal well-being and oxygenation.

## **Tips for Expectant Mothers**

Remain calm and informed; panic increases stress and may worsen discomfort. Track fetal movements and report significant changes to your doctor. Prepare your hospital bag and documents in advance. Spend time outdoors and rest as needed. Follow your doctor's guidance for nutrition, activity, and monitoring. Minimize infection risks and avoid unnecessary stress.

## **Tools and Assistance**

Fetal movement tracking apps  
Pregnancy pillows and ergonomic supports

Prenatal yoga and light exercise guides  
Hospital bag checklist and newborn essentials  
Telehealth consultations with obstetricians  
Compression stockings and hydration reminders