

OBSTETRICS

Pregnancy Nutrition and Indian Diet Guide

Balanced meals, food safety and practical Indian choices

Original patient handbook | Evidence-aligned educational content

Prepared for patients of

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Important: This handbook provides general information. It cannot diagnose a condition, recommend individual treatment or replace emergency assessment.

How to use this handbook

Use this guide to prepare questions and recognise situations that need medical attention. Your clinician may advise differently based on your history, examination, test results and local clinical protocols.

Three principles

1. Keep scheduled follow-up.
2. Bring complete records.
3. Seek urgent care for warning symptoms.

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1. Build a balanced plate

- Aim for vegetables and fruit, whole grains or millets, protein foods and dairy or suitable alternatives across the day.
- Protein options include dal, beans, chickpeas, soy, paneer, curd, eggs, fish, poultry and lean meat according to preference and safety.
- Meal quantity and weight-gain targets should be individualised rather than based on 'eating for two'.

Prepare for your consultation

Write down the symptom timeline, medicines and supplements, previous reports and the three questions most important to you.

2. Indian meal ideas

- Breakfast: vegetable poha or upma with curd; besan chilla with vegetables; idli-sambar; egg with whole-grain roti.
- Main meals: roti or rice with dal, vegetables and curd; khichdi with vegetables and protein; fish or chicken with vegetables and a whole grain.
- Snacks: fruit with nuts, roasted chana, curd, sprouts prepared hygienically, or milk if tolerated.

3. Food safety

- Use pasteurised milk products, cook eggs and meat thoroughly, wash produce, avoid cross-contamination and refrigerate leftovers promptly.
- Avoid unpasteurised products and foods of uncertain hygiene. Discuss local fish choices and mercury risk with your clinician.

4. Supplements and symptoms

- Iron, folic acid, calcium, vitamin D or other supplements should follow clinical advice and local policy.
- For nausea, try smaller frequent meals and avoid triggers. Persistent vomiting, dehydration or inability to keep fluids down needs assessment.

Urgent care

Do not rely on a website or PDF during an emergency. Severe or rapidly worsening symptoms require direct assessment.

Consultation checklist

Item	Ready
Daily protein source	■
Vegetables and fruit	■
Safe drinking water	■
Prescribed supplements	■
Food-hygiene plan	■
Clinician-approved weight-gain target	■

Questions to ask

Frequently asked questions

Can I drink tea or coffee?

Caffeine should be limited in pregnancy. Ask your clinician about an appropriate daily limit and include all sources.

Is fasting safe?

Pregnancy and medical risks vary. Discuss religious or intermittent fasting before attempting it.

Do I need protein powder?

Most people can meet needs through food. Supplements should be chosen only after nutritional and clinical assessment.

Remember

Online information is most useful when it helps you communicate clearly with your own clinical team.

References and clinical framework

This handbook is original educational content informed by the following authoritative guidance. Recommendations may change and local protocols may differ.

WHO antenatal nutrition recommendations

<https://www.who.int/publications/i/item/9789241549912/>

WHO maternal health recommendations, 2nd edition

<https://www.who.int/publications/i/item/9789240080591>



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Medical disclaimer: This document is for general patient education only. It is not a diagnosis, prescription or personalised care plan. Do not start, stop or change medicines based on this guide. Emergency symptoms require direct emergency assessment. The website is not monitored for emergencies.

Publishing note: Final medical review and approval by Dr. Akрати Jain is required before public distribution.