Traveling by Car During Pregnancy, Safe Timing, Seat Belt Fit and Comfort Tips



For most healthy women, **traveling by car during pregnancy** is safe. The most comfortable window is usually the **second trimester**, roughly weeks 14 to 28, when nausea has eased and your bump is not yet in the way. The safety basics are the same at every stage: wear your **seat belt correctly**, stop about **every 2 hours** to walk and stretch, and check with your doctor or midwife before a long trip, especially in the third trimester or with a high-risk pregnancy.

This guide explains **when car travel is safest**, how to position the **seat belt and your seat**, why regular stops matter for **blood clot prevention**, which **warning signs** mean you should call your provider, and how to stay **comfortable on a long drive** so back and hip pressure does not turn the trip into a struggle.

Quick answers

- **Is it safe?** Yes for most healthy pregnancies, with your provider's approval for long trips.
- **Best time to travel?** The second trimester, about weeks 14 to 28.
- **How often should you stop?** About every 2 hours, for a short walk and a bathroom break.

- **Seat belt?** Always, with the lap belt low across your hips and under your bump.

This article is for general information and does not replace advice from your doctor or midwife.

When Is the Best Time to Travel by Car During Pregnancy



The best time for **car travel during pregnancy** is the **second trimester, from about week 14 to week 28**. Most women feel their best during these weeks, and the most common pregnancy problems tend to appear in the first and third trimesters. You can still travel by car outside this window, but it calls for shorter drives, more planning and your provider's approval for any long trip.

Stage	Car travel	What to expect	Best approach
First trimester (weeks 1 to 13)	Usually possible	**Nausea**, fatigue, frequent bathroom stops	Short drives, frequent breaks, snacks and water
Second trimester (weeks 14 to 28)	**Best window**	More energy, fewer symptoms	Plan longer trips now, still stop every 2 hours
Third trimester (weeks 28 to 40)	Possible with limits	Back and hip discomfort, higher chance of early labor	Keep trips short and close to home, finish long trips by **36 weeks**

First trimester, weeks 1 to 13

Many healthy women can travel by car in early pregnancy, but this is often the hardest stage for long drives. **Nausea, tiredness and frequent bathroom stops** can turn a simple trip into an exhausting one, and fatigue makes it harder to stay focused behind the wheel.

The chance of miscarriage is also highest in the first trimester. That higher risk exists **whether or not you travel**, and there is no evidence that ordinary car travel causes it. Still, it helps to keep early trips short and flexible. Keep water, plain snacks and a small bag with wipes within reach, and stop whenever you feel unwell.

If you have **vaginal bleeding, abdominal pain** or a history of miscarriage, check with your doctor or midwife before you book any trip.

Second trimester, weeks 14 to 28

This is the sweet spot for a road trip. Morning sickness has eased for many women, energy is back, and your bump is not yet large enough to make sitting or buckling up awkward. If you are planning a **babymoon** or a longer family visit, this is the time to do it.

The safety basics still apply. Wear your seat belt correctly, stop about **every 2 hours** to walk and stretch, and drink water through the drive. As your belly grows, **back and hip discomfort** can begin to build during long sitting, so it is worth setting up your seat before you leave.

Third trimester, weeks 28 to 40

Travel gets harder as the weeks pass. Sitting becomes less comfortable, and the chance of early labor or a pregnancy complication rises. Many doctors recommend finishing long trips by about 36 weeks, or 32 weeks if you are expecting twins, and some advise staying within roughly **300 miles of home** during these months.

If you do travel late in pregnancy, keep the trip as short as you can, **do not drive alone** on a long route, and carry a copy of your prenatal records. Know where the nearest hospitals are along your route. Back pain tends to peak in these weeks too, so our guide to relieving back pain during pregnancy can help you prepare for longer sitting.

When car travel is not advised

Your doctor may advise you to stay close to home, or to avoid long trips completely, if you have any of the following:

- **Preeclampsia** or high blood pressure

- **Premature rupture of membranes**
- A history of **preterm labor**
- **Placental problems** such as placenta previa
- **Vaginal bleeding** during this pregnancy
- A **multiple pregnancy** (twins or more)

Every pregnancy is different, so the decision about whether and how far to travel should always be made together with your doctor or midwife.

How to Wear a Seat Belt and Set Up Your Car During Pregnancy



The safest way to ride in a car while pregnant is simple. Always wear **both the lap belt and the shoulder belt**, place the lap belt **low under your belly across your hips**, and keep your **breastbone at least 10 inches from the steering wheel**. A correctly worn seat belt is the best protection for you and your unborn baby in a crash, and it will not harm your baby when it sits in the right place.

Where the lap belt goes

Place the lap belt **below the curve of your belly**, snug across your **hips and pelvic bone**. It should never rest on or above your bump. As your belly grows, you may need to lift it slightly with one hand to slide the belt into place.

Where the shoulder belt goes

Lay the shoulder belt **diagonally between your breasts** and to the side of your bump, away from your neck. Keep it flat with no twists, and pull out any slack so both belts are snug without being painful.

Common seat belt mistakes to avoid

- Wearing the lap belt **across or above your belly**
- Tucking the shoulder belt **under your arm or behind your back**
- Letting the shoulder belt ride **high on your neck**
- Leaving the belt **loose or twisted**
- Skipping the belt because the car has airbags, which **never replace a seat belt**

Airbags and distance from the steering wheel

Keep your **airbags switched on**, because they are an important safety feature during pregnancy. What matters is distance. Move your seat **as far back as you can while still reaching the pedals comfortably**, and keep at least **10 inches between your breastbone and the steering wheel**. Passengers should keep the same 10 inches from the dashboard.

If your car has an adjustable steering wheel, **tilt it so it points toward your breastbone**, not toward your belly or your head. Recheck this distance every few weeks as your bump grows, because the seat position that felt right at 20 weeks may not fit at 32.

Set up your seat before every long drive

- Sit **fully back** in the seat, with your back against the seatback
- Hold the top of the steering wheel with your **elbows slightly bent**
- Reach the pedals with the **ball of your foot**, without stretching
- Adjust the headrest so it sits close to the back of your head

- Check both belts one last time, then start the car

If you can no longer keep a safe distance from the steering wheel while still reaching the pedals, talk to your doctor or midwife and let someone else drive.

If you use a seat cushion in the car

A cushion raises your seating height and can change how the belts cross your body and how far you sit from the steering wheel. If you add one, **repeat the checks above**: the lap belt must still sit low across your hips, and your breastbone must still be 10 inches from the wheel. Our guide on whether a seat cushion changes your seating height and visibility in a car explains how to adjust for it.

How Often to Stop and How to Prevent Blood Clots on a Car Trip

Plan to stop **every 1 to 2 hours** to walk, stretch, drink water and use the bathroom, and try not to stay seated for more than 2 hours at a time. Regular movement is the most effective way to lower the risk of **blood clots**, which is higher during pregnancy.

Why long sitting matters in pregnancy

When you sit still in a car, blood flows more slowly through the deep veins of your legs. The CDC explains that anyone traveling more than 4 hours by car, plane, bus or train can be at risk for blood clots, and it lists **pregnancy and the first 3 months after birth** among the factors that raise that risk. For most people the chance of a clot is still very small, and simple habits make it smaller.

A clot in a deep leg vein is called **deep vein thrombosis (DVT)**. Most clots dissolve on their own, but in rare cases a piece can travel to the lungs and cause a **pulmonary embolism**, which is an emergency. That is why movement and awareness of the warning signs matter on every longer drive.

Build a stop plan before you leave

- **Map your rest stops** before you start, so you are never searching for one when you need it
- Stop **before you feel stiff**, not after
- At each stop, **walk for a few minutes**, use the bathroom and drink some water
- On long routes, **split the trip across two days** instead of driving straight through
- Share the driving when you can, so you are not behind the wheel for the whole route

Simple leg movements that help circulation

Passengers can do these every so often while the car is moving. Drivers should do them during stops.

- **Ankle circles** in both directions
- **Point and flex your feet**, pulling your toes toward you
- **Calf raises**, pressing up onto the balls of your feet
- Shift your position often, and avoid crossing your legs

Other ways to lower your risk

- **Drink water steadily** through the trip, because dehydration can slow circulation
- Wear **loose, comfortable clothing**, with nothing tight around your waist or legs
- Ask your doctor whether **compression stockings** are right for you. If they are, put them on **before you get in the car**, not after your ankles start to swell
- If you have had a **previous blood clot**, a clotting disorder or a family history of clots, talk to your doctor before any long trip

Warning signs of a blood clot

Contact your doctor as soon as possible if you notice signs of a clot in the leg:

- **Swelling** in one leg
- **Pain or tenderness** you cannot explain, often in the calf or thigh
- Skin that feels **warm** to the touch
- **Redness or discoloration** of the skin

Seek **emergency medical help immediately** if you have signs of a clot in the lung:

- **Difficulty breathing**
- A **fast or irregular heartbeat**
- **Chest pain** that gets worse with a deep breath or cough
- **Coughing**, especially coughing up blood
- **Lightheadedness or fainting**

Warning Signs and What to Do in an Emergency on the Road

Most car trips in a healthy pregnancy are uneventful, but you should know when to stop. **Do not keep driving to your destination** if you notice a warning sign. Pull over safely and call your doctor or midwife, and call **911** or go to the nearest emergency department if the symptom is severe. The same applies after any crash. If you have an accident or any unusual pregnancy-related symptom, do not wait and see.

Warning signs that mean call your doctor right away

- **Vaginal bleeding**, with or without cramping
- **Leaking or a gush of fluid** from the vagina
- **Painful, regular contractions**, or lower abdominal and back pain that comes in waves
- **Severe or constant abdominal pain**
- **Decreased or stopped baby movement**
- A **severe headache** that does not go away, especially with blurred vision, spots, or sudden swelling of the face or hands
- **Fever** or chills
- **Pain, redness or swelling in one leg**, which can be a sign of a clot

Call 911 or go to the emergency department for

- **Heavy bleeding**
- **Chest pain or trouble breathing**
- **Fainting, seizure** or confusion
- **Severe belly pain** that does not ease
- **Any car crash**, even a minor one

If you feel faint or very unwell, do not drive yourself. Ask someone else to take you, or call for help.

What to do after a car accident

Seek medical attention **even if you feel fine**. Some pregnancy injuries, such as a problem with the placenta, can cause few symptoms at first, and only a medical check can confirm that you and your baby are safe. Tell the care team **how many weeks pregnant you are**, and show your prenatal

records if you have them with you. Call your own doctor or midwife afterward to report what happened.

Make an emergency plan before you leave

A few minutes of preparation can save hours if something goes wrong far from home.

- Save your **OB-GYN or midwife's number** and your **hospital's number** in your phone
- Look up a **hospital near your destination** and along your route
- Carry a **copy of your prenatal records**, including your due date, blood type and any complications
- Keep your **insurance card** in your wallet, or take a photo of it
- Pack your **prenatal vitamins and any prescribed medicines**, plus a small first aid kit
- Make sure your **roadside assistance** is active and your tank is full, especially on quiet roads

How to Stay Comfortable on a Long Drive While Pregnant

Comfort matters for more than enjoyment. Back and hip pain make it harder to stay alert, and they make you more likely to skip the breaks you need. As your belly grows, the curve of your lower back increases and your center of gravity shifts forward, so long sitting puts extra load on your **lower back, hips and tailbone**. A few setup changes before you leave make a big difference. Our guide to relieving back pain during pregnancy covers the causes in more detail.

Set up your seat to support your back

- Sit **fully back** in the seat, with your hips against the seatback
- Support the natural curve of your lower back with a small **lumbar roll** or a rolled towel
- Keep your thighs supported and your knees **slightly bent**, with about **two fingers of space** between the seat edge and the back of your knees
- Recline the backrest slightly, so you are not leaning forward toward the wheel
- Make these adjustments **before** you start driving, and recheck them at every stop

For a full step-by-step setup, see our guide to pain-free driving.

Add support with a seat cushion

A well-designed cushion can spread pressure more evenly across your seat and take some load off your tailbone and hips on long drives. The sitcushion Car Seat Cushion has a **U-shaped tailbone cutout**, high-density memory foam, a **non-slip base** and a removable, washable cover. It is designed for standard sedans, hatchbacks and compact SUVs.

Because it adds **about 2 to 3 inches of seat height**, always **recheck your seat belt fit and the 10-inch distance from the steering wheel** after you add it. If the added height makes it hard to reach the pedals comfortably or keep that distance, lower your seat or skip the cushion for driving and use it as a passenger.

Ease pressure on your back and hips

- **Change your position** often, and avoid crossing your legs
- At each stop, **walk for a few minutes** and do gentle standing stretches
- Passengers can rest their feet on a **small, stable box or bag** to take pressure off the lower back. Drivers should never place anything near the pedals
- If pain becomes severe or comes with bleeding, regular cramping or leg numbness, stop and call your doctor

Handle nausea and motion sickness

- Passengers can sit in the **front seat** and look at the road ahead
- Keep a window **slightly open** for fresh air, and avoid reading or looking at a phone while the car is moving
- Eat **small, frequent snacks** such as plain crackers instead of large meals
- Keep **water, wipes and a small bag** within reach, in case you cannot stop in time
- If you need a motion sickness remedy, ask your doctor first to make sure it is safe during pregnancy

Fight travel fatigue

- Plan **shorter driving days** and sleep well the night before
- Pack **portable snacks** such as fresh fruit, nuts, yogurt in a small cooler, whole-grain crackers with peanut butter, or low-sugar bars
- Drink water steadily through the day

- When you feel drowsy, pull over safely and rest. Do not push through to make up time

Pregnancy Car Trip Checklist

Use this checklist before every longer drive. Save it to your phone or print it and keep it in the glove box.

Before you leave

- **Check with your doctor or midwife**, especially in the third trimester or with a high-risk pregnancy
- Carry a **copy of your prenatal records**, including your due date, blood type and any complications
- Save your **OB-GYN and hospital numbers** in your phone, and look up a **hospital near your destination and along your route**
- Keep your **insurance card** in your wallet, or take a photo of it
- Plan **rest stops every 1 to 2 hours**, and split very long trips across two days
- Arrange for someone to **share the driving** so you are not alone on a long route
- Check your **tires (including the spare), wiper fluid and fuel**, and confirm your **roadside assistance** is active
- Pack your **prenatal vitamins, prescribed medicines** and a small **first aid kit**

Set up your seat and belt

- **Lap belt** low under your belly, snug across your hips and pelvic bone
- **Shoulder belt** between your breasts and beside your bump, away from your neck
- Seat as **far back** as you can while still reaching the pedals comfortably
- At least **10 inches** between your breastbone and the steering wheel, with the wheel tilted toward your breastbone
- **Airbags switched on**
- **Lumbar support** in place, and belts and distance rechecked if you add a cushion

Pack for comfort

- A **water bottle** you can refill, and **snacks** such as fruit, nuts, yogurt in a small cooler, or whole-grain crackers with peanut butter
- **Loose clothing** and **comfortable, easy-to-slip-off shoes**
- **Compression stockings**, if your doctor recommends them, put on before you get in the car
- **Wipes, a small bag and plain crackers** in case of nausea
- A small **pillow or lumbar roll**
- A **phone charger** and a printed or saved list of emergency numbers

On the road

- **Stop every 1 to 2 hours** to walk, use the bathroom and drink water
- Do **ankle circles and foot flexes** between stops (drivers during stops only)
- **Never drive drowsy.** Pull over safely and rest
- Know the **warning signs** and pull over to call your doctor if you notice one
- After any crash, **get checked right away**, even if you feel fine

Frequently Asked Questions About Car Travel During Pregnancy

Is it safe to travel by car during pregnancy?

Yes, for most healthy pregnancies. Car travel is considered safe throughout pregnancy unless your doctor or midwife advises otherwise. What matters is how you travel: wear a lap and shoulder seat belt correctly, stop every 1 to 2 hours, and check with your provider before long trips, especially in the third trimester or if you have complications.

When is the best time to travel by car while pregnant?

The best window is the **second trimester, about weeks 14 to 28**, according to ACOG guidance. Nausea has usually eased, energy is higher, and your bump is not yet large enough to make sitting and buckling up difficult. The most common pregnancy problems tend to appear in the first and third trimesters, which is why longer trips are best planned in the middle of pregnancy.

Can traveling by car cause a miscarriage?

There is no evidence that ordinary car travel causes miscarriage. The risk of early pregnancy loss is highest in the first trimester whether you travel or not, and most early losses are caused by chromosomal problems, not by activity or travel. If you have bleeding, pain or a history of miscarriage, talk to your doctor before a long trip.

How long can a pregnant woman travel by car in one day?

Guidance varies, but many sources suggest limiting driving to about **4 to 6 hours a day**. March of Dimes advises trying not to drive more than 5 to 6 hours daily, and it recommends splitting longer trips across several days. Your own limit depends on how you feel and on your provider's advice, so shorter days are always reasonable.

How often should a pregnant woman stop on a long car trip?

Stop **every 1 to 2 hours** to walk, stretch and use the bathroom. The CDC notes that anyone traveling more than 4 hours by car can be at risk for blood clots, and pregnancy adds to that risk. Walking for a few minutes at each stop keeps blood moving in your legs and also eases back and hip pressure.

How late in pregnancy can you travel by car?

You can take short local trips by car throughout pregnancy unless your provider says otherwise. For **long trips**, many doctors recommend finishing them by about **36 weeks** (or 32 weeks for twins), and many advise staying within roughly 300 miles of home in the third trimester. If you have preeclampsia, a history of preterm labor or ruptured membranes, ask your doctor before traveling at all.

When should I stop driving while pregnant?

There is no set week when you must stop. You can keep driving as long as you feel alert, can reach the pedals and wheel comfortably, and can keep your **breastbone at least 10 inches from the steering wheel**. Stop driving, or let someone else drive, if you cannot meet those conditions, if you feel very tired or dizzy, or if your doctor advises it.

Where should the seat belt go when I'm pregnant?

Wear **both the lap belt and the shoulder belt**. Place the lap belt **below your belly**, snug across your hips and pelvic bone, and the shoulder belt **between your breasts** and beside your bump,

never under your arm or behind your back. ACOG and NHTSA both recommend wearing a seat belt on every ride, because it is the best protection for you and your baby in a crash.

Can bumpy roads or speed bumps hurt my baby?

Bumpy roads do not harm a healthy baby. Your baby is cushioned by your pelvis, your abdominal muscles and the amniotic fluid, and there is no evidence that bumpy rides cause labor. Slowing down over speed bumps is more comfortable for you. If you notice pain, bleeding, leaking fluid or less baby movement after a jolt, call your doctor.

Why do my feet swell on long drives, and what helps?

Sitting still slows blood flow back from your legs, so fluid collects in your feet and ankles. To reduce it, **stop and walk every 1 to 2 hours**, circle and flex your ankles, drink water, wear loose shoes, and ask your doctor about **compression stockings**. Call your doctor if swelling is in **one leg only**, or comes with pain, warmth or redness, because that can signal a blood clot.

Where should a pregnant woman sit in a car?

You can sit in the front or back seat, as long as you wear your seat belt correctly. In the front passenger seat, move the seat back and keep at least **10 inches between your breastbone and the dashboard**, and leave the airbags on. In the back seat, the lap and shoulder belt should sit in the same positions described above.

What should I do if I'm in a car accident while pregnant?

Get medical attention right away, even if you feel fine. Some injuries, such as a problem with the placenta, can cause few symptoms at first, and only an exam can confirm that you and your baby are safe. Call 911 or go to the emergency department, tell the team how many weeks pregnant you are, and call your own doctor or midwife afterward.

Is it safe to use a seat cushion in the car while pregnant?

Usually yes, if the cushion is stable and does not change how your belts fit or how far you sit from the steering wheel. A cushion raises your seat, so recheck that the lap belt still sits low across your hips and that you keep 10 inches from the wheel. The sitcushion Car Seat Cushion adds about 2 to 3 inches of height, so adjust your seat after adding it. Ask your doctor if you have pelvic pain or complications.

Key Takeaways for Safe Car Travel During Pregnancy

For most healthy women, **traveling by car during pregnancy** is safe, and a little planning makes it comfortable too. The **second trimester, roughly weeks 14 to 28**, is the easiest time for a longer trip. At any stage, a few habits matter most:

- **Wear your seat belt correctly** every time, with the lap belt under your belly across your hips and the shoulder belt between your breasts
- Keep your **breastbone at least 10 inches from the steering wheel** and your airbags switched on
- **Stop every 1 to 2 hours** to walk, stretch and drink water, which also lowers your risk of blood clots
- Know the **warning signs**, and pull over and call your doctor if you notice bleeding, leaking fluid, regular contractions, severe pain or less baby movement
- **Get checked after any crash**, even if you feel fine
- Ask your doctor before **long trips in the third trimester**, and finish them by about 36 weeks when possible

Comfort matters as well. A well-adjusted seat, good lumbar support and regular movement help keep back and hip pain from building on the road. Every pregnancy is different, so if you are unsure about a trip, ask your doctor or midwife before you go.

For more guides on sitting comfort, posture and pain-free driving, visit our Knowledge Center.

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