

## Prenatal Health Maintenance Guidelines

This document is for guidance only. Specific consents describing benefits, limitations and risks for tests, vaccines and procedures are recommended.

Incorporation of preconception education is encouraged when evaluating/treating our members.



| PRENATAL VISIT SCHEDULE                                                                                                                                                                                         | EVERY 4 WEEKS FOR 1ST 28 WEEKS             |               |               | EVERY 2-3 WEEKS |           | WEEKLY VISITS |          |          |          |          |          |                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------|---------------|-----------------|-----------|---------------|----------|----------|----------|----------|----------|-------------------------------------|
|                                                                                                                                                                                                                 | 6 - 8 Weeks                                | 14 - 16 Weeks | 24 - 28 Weeks | 32 Weeks        | 36 Weeks  | 37 Weeks      | 38 Weeks | 39 Weeks | 40 Weeks | 41 Weeks | 42 Weeks | Post Partum<br>4 - 6 Weeks<br>After |
| Screen for tobacco use, alcohol and drug use and provide counseling                                                                                                                                             | X                                          | X             | X             | X               | X         | X             | X        | X        | X        | X        | X        | X                                   |
| History/Risk Assessment (update at each visit)                                                                                                                                                                  | X                                          | X             | X             | X               | X         | X             | X        | X        | X        | X        | X        | X                                   |
| General Physical Exam                                                                                                                                                                                           | X                                          |               |               |                 |           |               |          |          |          |          |          | X                                   |
| Pelvic Exam                                                                                                                                                                                                     | X                                          |               |               |                 |           |               |          |          |          |          |          | X                                   |
| Blood Pressure, Weight, UA Dipstick                                                                                                                                                                             | X                                          | X             | X             | X               | X         | X             | X        | X        | X        | X        | X        | Wt, BP                              |
| Fundal Height                                                                                                                                                                                                   |                                            |               | X             | X               | X         | X             | X        | X        | X        | X        | X        |                                     |
| Fetal Heart Tones                                                                                                                                                                                               |                                            | X             | X             | X               | X         | X             | X        | X        | X        | X        | X        |                                     |
| Initial lab tests to include: ABO/Rh/Ab1, CBC, HBsAg, HIV, and Syphilis. Pap Test per age recommendations. Screen for Gonorrhea and Chlamydia depending upon age and risk. Rubella titer is not covered by ACA. | X                                          |               |               |                 |           |               |          |          |          |          |          |                                     |
| Offer Multiple Marker ("quad") Screen                                                                                                                                                                           |                                            | 16-20 wks     |               |                 |           |               |          |          |          |          |          |                                     |
| Offer Aneuploidy Screening (process will vary by care available in community)                                                                                                                                   | 10-12 wks completed gestation              |               |               |                 |           |               |          |          |          |          |          |                                     |
| UA Culture                                                                                                                                                                                                      |                                            | 12-16 wks     |               |                 |           |               |          |          |          |          |          |                                     |
| Diabetes Screen                                                                                                                                                                                                 |                                            |               | X             |                 |           |               |          |          |          |          |          |                                     |
| Tdap Vaccine <sup>2</sup>                                                                                                                                                                                       |                                            |               |               | X               |           |               |          |          |          |          |          |                                     |
| Injectable Flu Vaccine (in any trimester)                                                                                                                                                                       |                                            |               |               |                 |           |               |          |          |          |          |          |                                     |
| Group B Strep Cultures Vaginal and Rectal <sup>3</sup>                                                                                                                                                          |                                            |               |               |                 | 35-37 wks |               |          |          |          |          |          |                                     |
| Folic Acid (.4 - .8 mg one month prior to conception through 1st trimester)                                                                                                                                     | X                                          | X             |               |                 |           |               |          |          |          |          |          |                                     |
| Include cytomegalovirus avoidance counseling/education                                                                                                                                                          | During any preconception or prenatal visit |               |               |                 |           |               |          |          |          |          |          |                                     |
| Promote and support breast feeding                                                                                                                                                                              | During pregnancy and after birth           |               |               |                 |           |               |          |          |          |          |          |                                     |
| Provide screening and counseling for interpersonal and domestic violence                                                                                                                                        | X                                          |               |               |                 |           |               |          |          |          |          |          |                                     |

<sup>1</sup> Repeat Rh (D) incompatibility screening at 24-28 weeks for unsensitized Rh negative women unless the biological father is known to be Rh negative. <sup>2</sup> Administer one dose of Tdap to pregnant women during each pregnancy regardless of number of years since prior Td or Tdap vaccination. <sup>3</sup> The CDC and ACOG recommend universal prenatal screening for vaginal and rectal GBS colonization of all pregnant women at 35-37 weeks gestation. This Guideline is a combination of recommendations from the U.S. Preventive Services Task Force; the Centers for Disease Control and Prevention, the American College of Obstetricians and Gynecologists (ACOG); the American Academy of Pediatrics and the Institute for Clinical systems Improvement.