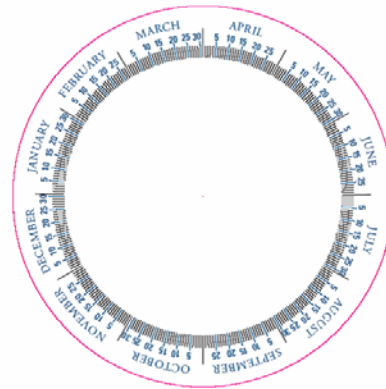


What to Expect at Your Prenatal Visits

These are the tests, screenings and assessments you will undergo throughout your pregnancy.

If you are unsure if you have received these or are unsure of what is involved, please ask your health care provider or office nurse.



First Review Period (up to 20 weeks)

Routine

Labs:

- Prenatal Panel
- Urinalysis
- Urine Culture
- Pap
- Test for HIV
- Test for GC/Chlamydia
- Quad Marker
- Ultrasound for dates

Other Tests and Screenings:

- Nutritional Assessment
- BMI Calculated
- Life Stress Screening
- Depression Screening
- Substance Abuse Screening
- Tobacco Use
- WIC/Healthy Babies referral
- Antepartum education documented
- Flu shot (Oct-May, any gestational age)

Selected patients (High risk or unknown status):

Labs:

- PPD vaccine
- Hb electrophoresis
- Cystic Fibrosis Testing
- Chicken pox titer or history documented
- Amniocentesis/CVS or declined (AMA)
- 1^o Glucose tolerance test (by 16 weeks for patients at risk for pre-gestational diabetes)

Other: Selected patients (if high risk or needed)

- In-office nutrition counseling
- Referral to nutritionist
- Life Stress referral
- Depression referral
- Substance Abuse referral
- Healthy Babies/WIC referral (eligible)
- Vaginal Birth After Cesarean (VBAC) consult/consent
- Family Genetic screening
- Ultrasound

Second Review Period (20 to 36 weeks)

Routine

Labs:

- 1^{hour} Glucose tolerance test (by 28 weeks)
- 3^{hour} Glucose tolerance test (if 1 hour abnormal)
- Hemagram (by 28 weeks)
- Antibody screen for Rh negative

Other:

- Nutritional Assessment
- Appropriate weight gain (through 28 weeks)
- Life Stress Screening
- Depression Screening
- Substance Abuse Screening
- Childbirth education recommendations
- Preterm Labor education

- Breastfeeding discussion
- Flu shot (Oct-May, any gestational age)

Selected patients (if high risk or needed)

- RhoGAM given (for Rh negative blood type)

Other: Selected patients (if high risk or needed)

- In-office nutrition counseling
- Referral to nutritionist
- Tobacco counseling
- Received treatment for gestational diabetes
- Life Stress referral
- Depression referral
- Substance Abuse referral
- Bilateral Tubal Ligation consent signed (if desired)

Third Review Period (36 weeks to delivery)

Routine

Labs:

- Group B Strep Culture

Other:

- Identify your Pediatrician
- Birth control after birth
- Birth plan documented
- Estimated weight of the baby
- Position of the baby
- Options for mode of delivery discussed

Selected patients (if high risk or needed)

Labs:

- GC/Chlamydia test
- HIV test

Other: Selected patients (if high risk or needed)

- Tobacco/Environmental Tobacco Smoke Plan discussed
- Antepartum testing
- Acyclovir (recurrent Herpes Simplex Virus)
- Received substance abuse treatment (if referred)
- Received Life Stress counseling (if referred)
- Received counseling/treatment for depression (if referred)

Postpartum Follow-up (by 2 weeks Postpartum)

Routine

- Depression Screen
- Newborn provider documented/notified

Routine

Other:

- Maternal Depression noted in newborn chart (if newborn a patient at this office)

