

## Prenatal / Perinatal Guidelines for Normal Pregnancy

*These prenatal/perinatal guidelines are for uncomplicated pregnancies. Frequency of visits and care rendered should be determined by a woman's individual needs and risk factors. These guidelines are based on recommendations from the American College of Obstetricians and Gynecologists (ACOG), and have been approved by Scott & White Health Plan Prenatal Team.*

Services	First Trimester Weeks 0 - 13	Second Trimester Weeks 14 - 28	Third Trimester Weeks 29 - 42	Postpartum 3 - 8 Weeks After Delivery
<b>Obstetrical Evaluations</b>	<p>An initial evaluation should be performed prior to 13 weeks including: Comprehensive health history, including previous history of depression and/or postpartum depression, family and social history, pregnancy history, genetics screening and counseling about testing options, including information about optional cystic fibrosis screening, physical exam, including height, weight, and blood pressure</p> <p>Labwork to be obtained and reviewed by early second trimester: Urine culture, hematocrit, platelets (optional), blood type and Rh, antibody screen, hepatitis B surface antigen, rubella titer, syphilis screening, cervical cytology, hemoglobinopathy screening (if indicated), gonorrhea &amp; chlamydia screening (unless considered extremely low risk), and HIV testing (offered with counseling and explanation of possible consequences and benefits)</p> <p>Multiparous patients do not require repeat rubella titer if previously documented as immune, or repeat blood type &amp; Rh</p>	<p>Between 15 - 19 weeks: Ultrasonography (if clinically indicated)</p> <p>Between 16 - 18 weeks: Maternal serum screening (alpha-fetoprotein and triple screen) should be offered and discussed</p> <p>Between 24 - 28 weeks: Glucose tolerance screening (unless no risk factors) and hematocrit</p> <p>At 28 weeks: If patient is Rh negative and unsensitized, and Rh of baby's father is positive or unknown, administer Rhogam and repeat antibody testing</p>	<p>At 36 - 37 weeks gestational age: Vaginal and anorectal culture for Group B streptococcus</p>	<p>At 36 - 37 weeks gestational age: Vaginal and anorectal culture for Group B streptococcus</p>
<b>Routine Office Visits</b>	<p>Every 4 - 6 weeks: Blood pressure, weight, screen for significant edema, fundal height, documentation of fetal heart activity (after approximately 10 weeks), and urine dipstick for albumin and glucose</p>		<p>Every 2 - 4 weeks until 36 weeks gestation, then weekly until delivery: Blood pressure, weight, screen for significant edema, fundal height, documentation of fetal heart activity and fetal presentation, urine dipstick for albumin and glucose</p>	<p>Follow-up on or between 21 and 56 days after delivery: Evaluation of weight, blood pressure, breasts and abdomen and/or a pelvic exam. Screening for postpartum depression.</p>
<b>Patient Education Information Presented Regarding</b>	<p>Nutrition, exercise, sexual activity, work activity, tobacco, alcohol, drug restriction, and postpartum depression</p>	<p>Preparation for childbirth (Refer to classes), breast feeding versus bottle-feeding, and family planning</p>	<p>Breast feeding instructions, onset of labor, rupture of membranes, abnormal bleeding, and fetal activity</p>	<p>Review family planning, Nutrition and exercise anticipatory guidance</p>