Early Prenatal Care Summary and Checklist for Family Physicians

These recommendations are based on a review of the best evidence and consensus opinion of the Vancouver Division of Family Practice Maternity Care Network Committee. This checklist is a summary of the recommendations found in the Women’s Health Maternity Care Pathway (2010) for the care of a pregnant woman at her first visit(s) to a health care provider. Some recommendations are updated here from the 2010 guideline and are marked (new). Women should have the opportunity to make informed decisions about their care, investigations, and treatment in partnership with their health care professionals.

At first contact with a health care provider, a pregnant woman should be offered ALL of the following:

REFERRAL TO A MATERNITY CARE PROVIDER
• Consider offering referral to a family physician (FP) who provides maternity care.
• Discuss all options for choice of maternity care provider (FP, midwife, or obstetrician), appropriate to the woman’s health, resources available, and preferences.

BLOOD AND URINE TESTING RECOMMENDED FOR ALL WOMEN
• CBC, TSH
• Urine C&S
• Chlamydia and gonorrhoea (urine or cervical)
• HBsAg, STS/RPR, HIV, Rubella titre
• Blood ABO Group, Rh factor, and antibody screen

ADDITIONAL BLOOD TESTS
• HbA1C if woman is at risk for Type 2 Diabetes
• HepC Ab if at risk
• Varicella antibody if history uncertain
• Ferritin if at risk for anaemia
• Thalassemia and hemoglobinopathy carrier screening – add HPLC (high performance liquid chromatography) for all women EXCEPT those who are:
  – Japanese
  – Korean
  – Northern European Caucasian
  – First Nations or Inuit (new)
• Ashplex screen if any family member is of Ashkenazi (northern European) Jewish descent

FIRST TRIMESTER ULTRASOUND FOR DATING
• Recommend first trimester ultrasound for ALL women ideally between 8-13 weeks.

• Estimate due date using earliest ultrasound beyond 7 weeks in spontaneous conceptions (new). If availability of ultrasound is limited use second trimester scan.
• Perform early dating ultrasound prior to nuchal translucency scan for women with uncertain menstrual dates.

PRENATAL GENETIC SCREENING
• Offer prenatal genetic screening to all women.
• Offer appropriate test(s) based on woman’s age, when she accesses care, local resources, and woman’s choice. Note options are time-sensitive.
• Prenatal Biochemistry Lab Requisition: http://ow.ly/qPODa

Private Pay Options for Prenatal Genetic Screening:
• Women under age 35 can access NT Ultrasound from private providers (approx. $500) and add to SIPS.
• Women of any age can access FTS from private providers (approx. $500).
• NIPT available at BCWH and private providers for highly accurate serum screen for Down Syndrome, trisomy 18 and trisomy 13 ($800-$1,200). http://ow.ly/toPY9 (new)

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LIFESTYLE/SUPPLEMENTS

- Recommend and provide Influenza vaccine prior to and during flu season.
- Recommend prenatal vitamin or Folic Acid 0.4-1mg daily prior to conception or at diagnosis of pregnancy.
- Recommend Folic Acid 5mg/d for women with multiples, obesity BMI>35, pre-existing diabetes, previous infant with neural tube defect, taking anticonvulsants, or if daily compliance problematic.
- Provide lifestyle advice: smoking cessation and the implications of substance use and alcohol consumption in pregnancy. Use harm reduction approach if woman unable to abstain. Refer early if substance using.
- Administer TWEAK screening tool for alcohol use.
- Discuss food hygiene and implications of food borne infections.

At second visit:

- Discuss place of birth and maternity care provider. Refer as needed.
- Offer detailed ultrasound for 18-20 weeks and refer if desired.
- Discuss prenatal genetic screening options and refer/order tests as per woman’s choices.
- Recommend Vitamin D supplementation: 10 micrograms (400 IU) daily during pregnancy and breastfeeding for all women in Canada (new) and 800 IU for women in the north in winter.
- Perform complete physical examination or refer to maternity provider.
- Offer Pap smear following usual screening guidelines.
- Provide lifestyle advice: nutrition, exercise (walking) a minimum of 30 min. a day, rest, and stress management.
- Offer early referral to local Public Health Prenatal Program. Vancouver Coastal Health 1-855-550-2229
- Send all records to maternity care provider.

Glossary:

**SIPS** – Serum Integrated Prenatal Screen
- Part I at 9-13 6/7 weeks; Part 2 at 15-20 6/7 weeks

**IPS** – Integrated Prenatal Screen
- SIPS + NT ultrasound done at 11-13 6/7 weeks (covered by MSP for women ≥ 35yrs)

**Quad Screen**
- SIPS Part 2

**NIPT** – Non Invasive Prenatal Testing

**FTS** – First Trimester Screening
- NT, nasal bones, fetal heart rate, Ductus Venosus flow, serum tests at 11-14 weeks

Resources for Health Care Providers

- Vancouver Division of Family Practice
  www.divisionsbc.ca/vancouver

- BC Women’s Hospital Department of Family Practice
  http://pregnancyvancouver.ca/

- Gestational Age Calculator http://ow.ly/sfEB6

- TWEAK questionnaire http://ow.ly/twals


**BC Prenatal Genetic Screening**
Provider and Family information http://ow.ly/wl6Sh

- NIPT http://ow.ly/t5DM1

- BC Cervical Cancer Screening
  http://www.screeningbc.ca/Cervix/ForHealthProfessionals/

- Pregnancy Weight Gain Calculator

Resources for Families

- Pregnancy Passport http://ow.ly/qPP8h

- HealthyFamiliesBC Pregnancy and Parenting
  http://www.healthypregnancybc.ca/

- Pregnancy and Food Safety http://ow.ly/qPIdh


- BC Prenatal Genetic Screening in various languages http://ow.ly/tpe1m

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