

Prenatal Care Checklist

For providers who will not be involved in prenatal care, please use this guide when encountering prenatal patient, before transferring to a family medicine obstetrical provider.

Initial prenatal visit and monthly before 13 weeks

Discussion topics

Toxoplasmosis, Listeria, CMV

Folic Acid 0.4 mg OD, 4 mg OD if high risk

Prenatal classes, breastfeeding class

Nutrition, vitamins

Smoking, smoking cessation, alcohol consumption, recreational drug use

Domestic violence

Morning sickness

Genetic counselling, especially if >40 or high risk. See investigations for website resource suggestions.

Status in Canada if no OHIP

Investigations

CBC, blood group and antibody screen, urine C&S, GC and chlamydia, PAP

HIV, VDRL, Hep B, Rubella (on Public Health Requisition)

Hb electrophoresis for Thalassemia if MCV low and ancestral risk Mediterranean, African, Mid-Eastern, Asian Indian, South east Asian, Chinese

Sickle cell screen for Sub-Saharan Africa and descendants, Caribbean, North American Blacks

Varicella- order if uncertain

First Trimester Screening (FTS) , 11w- 13w6d. Find information here:

<http://prenatalscreeningontario.ca/for-health-care-providers/screening-options/>

NIPT (sometimes covered by MOHLTC) – requisitions, coverage criteria and FAQs are here:

<http://geneticseducation.ca/educational-resources/gec-ko-on-the-run/non-invasive-prenatal-testing/>

Dating Ultrasound if over 7 weeks (could be combined with FTS US)

Monthly visits between 14-28 weeks

Discussion topics

Preterm labour

Previous Caesarean Section – options for VBAC . Information and booklet can be downloaded here:
<http://www.powertopush.ca/birth-options/types-of-birth/vaginal-birth-after-cesarean/>

Cord Blood Banking handout

Influenza Vaccination if appropriate

Investigations

Urine dip- starting at 28 weeks

MSS if missed FTS , before 20w6d

Ultrasound for morphology, ideal 18 -20 weeks

Blood work at 24-28 weeks:

- 50 gram GTT between 24-28 weeks, NON FASTING
- CBC between 24-28 weeks
- Repeat antibody screen if Rh Negative between 24-28 weeks

If Rh Negative, WinRho between 27-32 weeks

Adacel vaccination if eligible (preferably > 26 weeks)

Biweekly visits between 30-36 weeks

Discussion topics

Breastfeeding class

Smoking

Completion of hospital pre-admission forms

Fetal movement

Investigations

Urine dip every visit

u/s if unsure of fetal position at 34-35 weeks gestational age

**All weekly visits after 36 weeks should be with the family
medicine obstetrical provider**