



1. Purpose

This guideline outlines the antenatal care schedule and care strategies for women receiving antenatal care at the Women's. A summary is provided for the clinical and educational content to be covered at each visit.

See the Shared Maternity Care schedules for women accessing Shared-Care.

This guideline is related to <u>many other guidelines/procedures</u> and <u>consumer fact sheets</u>. These are listed at the end of this document.

2. Definitions

Not appiciable.

3. Responsibilities

Midwifery and medical staff, including those providing shared-care.

Midwifery and medical students under supervision.

4. Guideline

4.1 Standardised schedules

The Royal Women's Hospital aims to provide antenatal visits with the right clinician, at the right time, according to the woman's needs. Four standardised schedules are documented in <u>Table</u> 1, and include the use of face-to-face and telehealth visits:

- The standard pathway includes **only** midwife visits. Medical consults will only be arranged as required. This is "default" for all women, unless indicated.
- The modified pathway includes an initial medical visit at ~22 weeks, after the midwife booking. Subsequent visits are to be determined after the medical review.
- The Rhesus negative pathway includes Anti D at 28 and 36 weeks.
- The Previous Caesarean pathway includes scheduled medical visits, and no IOL midwife.

Links to suggested scripts for Booking, 22,32, 34 and 36 week visits can be found on the Pregnancy Clinic Resources page <a href="https://example.com/here.c

The modified pathway for GDM testing during the COVID-19 pandemic can be found on the Pregnancy Clinic Resources page here.

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Antenatal Care Schedule: hospital-led care



Table 1 Schedule of Antenatal Care, includes telehealth and face-to-face appointments

Low-risk Consultation Type Matrix						
Туре	Gestation	Standard	Modified- some risk	Rhesus negative	Previous caesaran	
	16-20 weeks Booking	Midwife (plus Doctor only if indicated)				
	22 weeks	Midwife	Doctor	Midwife	Midwife	
	28 weeks	Midwife	TBC	Midwife Plus Anti-D	Doctor	
	32 weeks	Midwife	ТВС	Midwife	Midwife	
	34 weeks	Midwife	ТВС	Midwife	Midwife	
-	36 weeks, plus GBS	Midwife	TBC	Midwife Plus Anti-D	Doctor	
	38 weeks	Midwife	ТВС	Midwife	Midwife	
	39/40 weeks	Midwife	ТВС	Midwife	Doctor	
	41 weeks	IOL Midwife	IOL Midwife	IOL Midwife		

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4.2 Standardised Content

Table 2 summarises the clinical and educational content to be covered at each visit, with the aim of standardising the care provided.

Gestation	Clinical content for this visit	Education topics for this visit
16-20 weeks booking	 Establish gestation / estimated due date (EDD) as per guideline Family violence screening Drug and alcohol screening Edinburgh Postnatal Depression Screen (EPDS) Health and Wellbeing screening Model of Care: discuss, offer appropriate available options, confirm preference Check Results: review and discuss all investigations/USS, and request/order if missing. Routine: Blood group & antibodies, full blood examination (FBE), ferritin, Hepatitis B, Hepatitis C, TPHA, Rubella, HIV with pre-test counselling, MSU, As indicated: haemaglobinopathy	Note: The content for this visit is covered in group education PowerPoint which will be available online. Breastfeeding (review MR 1200) Sleeping positions during pregnancy Nutrition and exercise Pelvic floor exercises Sex, relationships, family Drugs / Alcohol/Smoking Taking care of yourself (e.g. dental health) Research and students Common concerns / symptoms When to see a GP / Women's Emergency Care (WEC) Your birth and postnatal length of stay (brief overview of LOS and support people) Discuss accessing childbirth education.
22 weeks	Standard Antenatal Check – done verbally i.e. ask (and record) about BP, fetal movement, concerns. Check, review & discuss ultrasound scanning (USS) Organise diabetes screening, FBE, red cell antibodies for 26/40 If a previous birth was a caesarean – discuss mode of birth and use the VBAC decision-making tool.	 Breastfeeding (review MR 1200) Pregnancy related risk factors Postnatal depression and anxiety Fetal movements.

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Antenatal Care Schedule: hospital-led care

Gestation	Clinical content for this visit	Education topics for this visit	
28 weeks	Standard Antenatal Check Commence symphysis-fundal height measurements and plot on growth chart from 24 weeks. (Refer to Abdominal Palpation procedure). Check Results: Routine: GDM screening, haemoglobin (Hb), red cell antibodies for all women If Rh negative: give Anti-D If confirmed GDM refer to GDM management pathway If previous caesarean – mode of birth to be discussed and VBAC decision-making tool used to make a decision.	 Breastfeeding (review MR 1200) Importance of skin-to-skin post birth Baby tests and injections (NNST, vitamin K, hepatitis B) Sleeping positions during pregnancy Fetal movements. 	
32 weeks	Standard Antenatal Check - verbal check using telehealth	Breastfeeding (complete MR 1200) Going home with your baby: Car seat Postnatal Care in the Home Safe sleeping / SIDS. Your previous experience of birth (if applicable) Birth plan What to bring into hospital Support people during labour and birth Managing pain How labour progresses (stages of labour) Sleeping positions during pregnancy Fetal movements.	
34 weeks	Standard Antenatal Check - verbal check using telehealth	Sleeping positions during pregnancyFetal movements.	

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Antenatal Care Schedule: hospital-led care

Gestation	Clinical content for this visit	Education topics for this visit
36 weeks + GBS	Standard Antenatal Check If Rh negative: give Anti-D GBS screening If indicated check haemoglobin (consider ordering if low Hb) Birth Options: Discuss. Consider referrals for: IOL, elective CS Elective c/s: confirm date. If unknown ring 8345 3335 for operation date. If not booked for caesarean, liaise with medical team. Provide: a pathology form for Group and Hold and 150mg ranitidine tablets. Instruct woman to: have G&H test no more than 3 days before caesarean date at RWH pathology. to take: ONE tablet at 10PM the night before the Caesarean and ONE tablet at 6AM on the morning of the Caesarean	 Managing early labour at home and when to come in/call Positions in labour and birth Monitoring your baby's health in labour Complications / what to expect Sleeping positions during pregnancy Fetal movements Breast feeding advice – reiterate.
38 weeks	Standard Antenatal Check - verbal check using telehealth Check GBS result If for elective c/s: Check if has caesarean date and has received ranitidine and instructions Advise to come into WEC if early labour occurs prior to c/s date If breech: Rrefer to Breech guideline and action if needed	 Sleeping positions during pregnancy Fetal movements.
39/40 weeks	Standard Antenatal Check Give request form (red) for CTG / AFI prior to the 41/40 appointment	 What happens if I go over my due date? Sleeping positions during pregnancy Provide <u>fact sheet for stretch and sweep</u> if appropriate Fetal movements.
41 weeks (booked if indicated)	 CTG / AFI prior to appointment Pakville: IOL midwife appointment (including Standard Antenatal Check) Consider stretch and sweep. (Fact sheet English version.) 	 Standard information per <u>IOL midwife</u> (Parkville) <u>Induction information</u> (Sandringham) Consider need to provide the consumer fact sheet.

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4.3 Links to associated procedures and guidelines

- Antenatal Check- Standard
- Referral and Consultation in Pregnancy
- COVID-19: Maternity care for women who are suspected/confirmed
- Anti-D Immunoglobulin for Maternity Patients
- Abdominal palpation-Pregnancy
- Breech: Management
- Caesarean: Booking a Planned Caesarean
- Diabetes Mellitus: Management of Gestational Diabetes
- Family Violence- Screening in Antenatal Clinics
- GBS Colonisation- Antenatal and Intrapartum Strategies to Prevent Early-Onset Neonatal Sepsis
- Induction of Labour-Parkville
- Induction of Labour-W@S
- Next Birth After Caesarean
- Pertussis Vaccination
- Sweeping the Membranes procedure
- Thalassaemia and <u>abnormal haemoglobins in Pregnancy</u>
- Vitamin D Testing and Management: Maternity Patients and Newborns

Consumer Information referred to in this document:

- External Cephalic Version
- Induction of Labour English version, other languages are available here.
- Stretch and sweep
- Whooping Cough (pertussis) vaccine for parents

Further consumer information is available here and via the Women's Pregnancy and Birth internet page.

5. Evaluation, monitoring and reporting of compliance to this guideline

Compliance to this guideline or procedure compliance may be measured by review of incidents, and/ or audit at targeted times throughout the year.

6. References

Three Centres Consensus Guidelines on Antenatal Care Project, Mercy Hospital for Women, Southern Health and Women's & Children's Health 2001, pp5-7.

Clinical Practice Guidelines: Antenatal care – Module 1, Australian Health Ministers Advisory Council, 2012, Australian Government Department of Health and Ageing, p 31-33

7. Legislation/Regulations related to this guideline or procedure

Not applicable.

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