

# GP News



the women's  
the royal women's hospital

Connecting healthcare for the benefit of patients

In this edition of GP News you'll find the revised schedule for Shared Maternity Care; COVID-19 information and updates; changes to the National Cervical Screening Program; and education and survey opportunities. Please get in touch with any feedback or questions via [gp.liaison@thewomens.org.au](mailto:gp.liaison@thewomens.org.au)

## Shared Maternity Care schedule changes

As we move to low community numbers and transmission of COVID-19, with enhanced mitigation strategies and vaccination rollout, we have updated the Shared Care schedules to:

- Largely resume face-to-face
- Resume GTTs

**Routine Schedule of Antenatal Care for Shared Maternity Care (Parkville) Revised: February 2021**

Gestation	Rh +ve	Rh -ve	Previous caesarean
15-20 weeks	Hospital*	Hospital*	Hospital*
16 weeks	SMCA*	SMCA*	SMCA*
22 weeks	SMCA*	SMCA*	SMCA*
28 weeks Review 26-28 week blood results^ Pertussis/Influenza vaccine if not had	SMCA	Hospital (+ Anti D)	Hospital
32 weeks	SMCA	SMCA	SMCA
34 weeks	SMCA	SMCA	SMCA
36 weeks (plus GBS swab)	Hospital	Hospital (+ Anti D)	Hospital
38 weeks	SMCA	SMCA	SMCA
39/40 weeks	SMCA	SMCA	Hospital
41 weeks (if required)	Hospital	Hospital	

SMCA telehealth or face-to-face appointment	*If a telehealth appointment, patient requires BP reading prior
SMCA face-to-face appointment	Examination required: BP, fundal height and fetal heart rate
Hospital telehealth or face-to-face appointment	*If a telehealth appointment, patient requires BP reading prior
Hospital face-to-face appointment	Examination required: BP, fundal height and fetal heart rate

## ^Testing for Gestational Diabetes (GDM)

Resumption of:

- **Glucose tolerance test (GTT) for all women at about 26-28 weeks** (unless known to have diabetes)
  - If woman is Rh-ve this is done at the Women's. Otherwise this is undertaken in the community (ordered by the hospital with a 'cc' to the Shared Care Doctor/Midwife).
  - FBE and blood group antibodies done routinely with GTT.
- **High risk women should *also* have a fasting blood glucose (FBG) & HbA1C in first trimester.**
  - Request from the Women's that this is ordered by their GP – thank you.
  - If FBG  $\geq 6$  or HbA1C  $\geq 5.9\%$  (or RBG  $\geq 7.8$ mmol/L), please notify the Shared Maternity Care Coordinator.
- **Postnatal GTT** for women who have gestational diabetes at about 6-12 weeks.

## COVID-19 vaccination in pregnancy, pre-pregnancy and breastfeeding

For Australian Government advice on COVID-19 vaccination for women who are pregnant, breastfeeding or planning pregnancy, see the [COVID-19 vaccination decision guide for women who are pregnant, breastfeeding, or planning pregnancy](#). The guide will be updated when other vaccines become available.

In summary:

- We do not routinely recommend COVID-19 vaccine in pregnancy. You and your health professional can consider it if the potential benefits of vaccination outweigh any potential risks. You should consider having a COVID-19 vaccine during your pregnancy if:
  - you have medical risk factors for severe COVID-19
  - you are at high risk of exposure to the virus that causes COVID-19 or very likely to be in contact with people with COVID-19.
- If you are planning a pregnancy, you can receive COVID-19 vaccination. You do not need to avoid becoming pregnant before or after vaccination.
- If you are breastfeeding, you can receive COVID-19 vaccination at any time, and do not need to stop breastfeeding after vaccination.

The Women's has added information and links to the decision guide on its [Advice for pregnant women webpage](#) and [COVID and feeding your baby webpage](#).

## COVID vaccination and cancer

Cancer Australia has released a new webpage with dedicated information on the COVID-19 vaccines for people affected by cancer. This information will supplement the broader information provided to clinicians and the community as part of the Australian Government's national COVID-19 vaccine rollout strategy.

The new [COVID-19 vaccines and cancer](#) page includes links to key resources to inform and support people affected by cancer, including:

- [Frequently Asked Questions \(FAQs\) about COVID-19 vaccines for people affected by cancer](#)
- [Health professional guidance on COVID-19 vaccines and cancer](#)
- National and international [research articles about COVID-19 vaccines and cancer](#).



## Hospital update

For latest guidance on what COVID-19 means for patients of the Women's and their visitors, please direct women to the COVID-19 Information Hub –

[www.thewomens.org.au/COVIDinfo](http://www.thewomens.org.au/COVIDinfo)

As at 9 March 2021:

- Two birth partners can be with a patient during labour and birth with no time limit.
- Two visitors (adults or patient's children) can visit together during visiting hours: 2-8pm. Partner or designated support person counted as a visitor but does not have time limit. Maximum of two people per bed at any one time.
- One partner or designated support person can accompany a patient to their clinic or imaging appointment.

## Childbirth Education

A reminder that the Women's is now offering Childbirth Education classes via video livestream.

A series of childbirth education videos are also available to view for free, along with a Parkville maternity video tour.

For all the options, visit our [Childbirth education webpage](#).

## New translated fact sheets

A number of early infant development fact sheets are now available in Arabic, Simplified Chinese and Vietnamese, to ensure neonatal care information is more accessible to families from culturally and linguistically diverse backgrounds.

The early infant development fact sheets that have been translated are:

- Early interaction with your baby at home
- Interacting with your baby: states of arousal
- Reading your baby's body language
- Skin-to-skin care with your baby
- Supporting your premature baby's development in NICU

You can download and print the fact sheets on our [Fact sheets webpage](#).

## National Cervical Screening changes: Intermediate risk (HPV non 16/18 with low grade cytology changes or better)

From 1 February 2021 the National Cervical Screening Program (NCSP) has altered its recommendations for women who have an intermediate risk cervical screening result (HPV not-16/18 positive with reflex LBC prediction negative, pLSIL or LSIL).

Under the Guidelines published in 2016, women who have had an intermediate risk cervical screening result (HPV not-16/18 positive with reflex LBC prediction negative, pLSIL or LSIL) were recommended to have a follow-up HPV test at 12 months. If any HPV was detected in their follow-up test the recommendation was that they are managed as higher risk and referred to colposcopy.

In light of new evidence, this has changed. It is now recommended that women with a 12-month follow up

HPV (not-16/18) result with LBC prediction negative, pLSIL or LSIL (intermediate risk result) should undertake a further HPV follow up test in 12 months' time following their previous HPV test instead of referral to colposcopy.

This protocol has been in place at the Women's since mid-2020.

However, the following women at higher risk should still be referred after two consecutive non 16/18 HPV. This is regardless of the cytology findings:

- Women 2 or more years overdue for screening at the time of the initial screen
- Women who identify as being of Aboriginal or Torres Strait Islander
- Women aged 50 years or older.

See [revised Cervical Screening Pathway for women at intermediate risk](#) and the Women's [acceptance criteria for colposcopy](#).

## Survey about the delivery of vaccine preventable infections in pregnancy

The Victorian Department of Health is evaluating the service delivery of interventions for vaccine preventable infections (pertussis, influenza and hepatitis B) in pregnancy in Victoria.

As Shared Maternity Care Affiliates you are core in delivering vaccinations in pregnancy. It's important the Department understands that you are one of the largest providers and your views on the enablers and barriers for the provision of such vital care.

- [Please complete the survey here](#)

## Education opportunities with CPD points

You are invited to join us for one or both of the following free webinars organised specifically for Shared Maternity

Care Affiliates at the Royal Women's Hospital, Northern Health, Mercy Health and Western Health in collaboration with North Western Melbourne PHN.

CPD points obtained will be applicable as pregnancy related CPD points for the next re-credentialing cycle for shared maternity care affiliation at the above hospitals.

### Tuesday 16 March, 7pm-8.30pm

Topics:

- **Early pregnancy issues** – Presented by Dr Priya Rajgopal, Obstetrician and Gynaecologist Consultant, Northern Health
- **The impact of COVID 19 on pregnancy** – Presented by Dr Steve Cole, Obstetrician and Specialist in Maternal-Fetal Medicine and Head, Multiple Pregnancy Clinic and Fetal Surgery and Shared Care Co-lead, the Women's
- [Click here for further information and to register](#)

### Tuesday 23 March, 7pm- 8.30pm

Topics:

- **Hepatitis B and syphilis in pregnancy** – Presented by Dr Nicole Allard, GP with a special interest in refugee health and hepatitis B treatment in primary care
- **Common skin problems in pregnancy** – Presented by Dr Sarah Gamboni, Dermatologist at the Women's and in private practice
- [Click here for further information and to register](#)

## Dermatology advice and education service available online: for ACRRM members and rural doctors (MM3 and above)

During these difficult times where travel is restricted and waiting lists are growing, rural doctors and Members of the Australian College of Rural and Remote Medicine (ACRRM) may benefit from access to an online dermatology advice service. Available 24/7, the service

allows you to submit your patient cases for advice on a diagnosis, treatment or management plan.

Doctors working in locations MM3 and above can [register for free access to Tele-Derm](#). Those working in more metropolitan areas or other health professionals can access the service by [joining ACCRM](#).

Tele-Derm is an online dermatology service funded by the Department of Health and run by the College and two dermatologists. Dr Jim Muir is based in Brisbane and Dr Rachael Foster (specialising in paediatrics) is based in Perth. The service also has a plastic surgeon, Dr Dan Kennedy, who is based in Brisbane.

Submit your case information along with any supporting photos and within 48 hours you will be able to chat online in a discussion style forum with the specialist about your case.

The platform also provides over 1000 education cases and access to learning resources on techniques such as curettage and skin biopsy. [Watch this video](#) to understand more about the service.

## Recent news from the Women's

- [\*Leading the conversation on the future of women's healthcare in Australia\*](#)
- [\*IVF success comparator welcomed by the Women's\*](#)
- [\*Hospital inspires women scientists of tomorrow\*](#)
- [\*The Australia Day award winners championing women and girl\*](#)
- [\*Heartfelt messages help end challenging year for healthcare workers\*](#)
- [\*Pregnant with twins, Mia contracted COVID-19\*](#)

## Contact

GP Liaison Unit



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**Parkville Connect**

Register at [parkvilleconnect.org.au](http://parkvilleconnect.org.au)

support email: [support@parkvilleconnect.org.au](mailto:support@parkvilleconnect.org.au)

**Fast Fax Referral**

fax: (03) 8345 3036

**GP Quick Access Number**

ph: (03) 8345 2058

**The Women's Switchboard**

ph: (03) 8345 2000

**The Women's Abortion and Contraception service**

ph: (03) 8345 3061 (professional line only – not for use by women needing the service)

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You have received this email because you are a Shared Maternity Care Affiliate and GP, or you have asked for online updates from the GP Liaison Unit



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