Antenatal Shared Care Clinical Protocol

Week	Provider	Assessment	Investigations
5-12	GP	 Maternal health assessment Psychosocial assessment Dietary assessment Discuss smoking an alcohol Pregnancy dating Prenatal screening/Antenatal tests Discuss options for care +/-delivery Provide details of future visits and Advise to book into hospital at 6-7 weeks, ideally. Book before 12 weeks. 	 BHCG/dating scan as indicated Counselling and referral for Nuchal Translucency scan or offer NIPT Provide education and offer reproductive carrier screening (Fragile X, CF, SMA) if not performed previously Refer to specialist clinic for conditions excluded from shared care program Discuss antenatal class booking ROUTINE PATHOLOGY FBC, Blood group & Ab screen HIV Hep B & Hep C Syphilis screen Urine MCS
		HealthPathways Antenatal – First Consult https://nbm.communityhealthpathways.org/37932.htm Patient to ring hospital to organise first visit for 12-13 weeks: Nepean 4734 2373	Consider: • PCR for chlamydia and gonorrhoea (for – women ≤ 30 years or with risk factors) • Varicella (if no history of chicken pox) • Rubella • Vit D • TSH • Ferritin • Haemoglobin EPG • Cervical Screening if due
13	Hospital booking in	Katoomba 47 84 6572 • Ematernity history • Problem list delineation • Medical review of notes	 Early GTT (if high risk GDM) Completion of antenatal screen if not already completed by GP Psychosocial Screen & Edinburgh Depression Tool Safe Start assessment/referral Discuss morphology booking
12-15	GP	 Discuss Investigation results EDB is calculated using a complex algorithm within the Ematernity database once all pregnancy information is collated and should not be altered without consultation with the hospital 	 Health promotions discussion Influenza vaccination – any trimester Referral for Morphology scan to be done between 18-20 weeks if not already referred by Hospital
16-20	Hospital	 Counselling from Senior Medical Officer if last birth a Caesarean section Review history/results including Morphology Approve model of care 	 Review of previous birth notes to determine suitability for NBAC
24-26	GP	 Routine check. Check BP, fundal height, assess fetal movements/FHR, U/A Review ANC notes/18-week scan 	 Arrange Blood group & antibody, FBC and OGTT by 28 weeks 2nd Syphilis screening
28	Hospital	 Routine check Appointment with senior medical officer to determine suitability of NBAC as indicated 	 Anti-D injection, if indicated C-section booking if required Boostrix vaccine to be given 20-32 weeks – each pregnancy
31	GP	 Extra visit for nulliparous woman Routine check, Check BP, fundal height, assess fetal movement/FHR, U/A 	
34	Hospital	 Routine check Assess fetal lie – if breech refer Anti-D if Rh-ve 	Anti-D injectionBirth plan and breastfeeding discussion
36	Hospital	 Routine check Assess fetal lie – if breech refer to ANC for possible ECV 	 Birth plan and breastfeeding discussion Low vaginal swab
38	GP	 Extra visit for nulliparous woman Routine check, Check BP, fundal height, assess fetal movement/ FHR, U/A Assess fetal lie, presentation, descent of head 	Birth plan and breastfeeding discussion
39	GP	 Routine check, check BP, fundal height, assess fetal movement/FHR, U/A Assess fetal lie, presentation, descent of head 	Birth plan and breastfeeding discussion
40-41	Hospital	 Routine check Assess fetal lie, presentation, descent of head Manage according to prolonged pregnancy protocol 	Birth plan and breastfeeding discussion

For URGENT Clinical enquiries page on-call Consultant Obstetrician between 8am and 5pm on 4734 2000

For NON-URGENT Clinical enquiries call NUM, Women & Children's Outpatients Dept on 4734 2305

Blue Mountains Hospital Switchboard – 4784 6500 • Midwives Clinic – 4784 6572







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