



Antenatal Shared Care Clinical Protocol

Neek	Provider	Assessment	Investigations
5-12	GP	 Maternal health assessment Psychosocial assessment Dietary assessment Discuss smoking and 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 scar Glucose tolerance test for women who have had previous GDM Refer to specialist clinic for conditions excluded from shared care program Discuss antenatal class booking PATHOLOGY: FBC - Hep B & Hep C - Ab screen - Blood group - Varicella as indicated - HIV - Vit D as indicated
6-7	GP	Patient to ring hospital to organise FIRST visit for 12-13 weeks phone: 4734 2373, option 1	- Rubella - Pap smear if due
13	Hospital: Booking in	 ObstetriX history Problem list delineation Medical review of notes 	Completion of antenatal screen if not already completed by GP Psychosocial Screen & Edinburgh Depression Tool Safe Start assessment/referral Discuss FAS booking
12-15	GP	 Discuss Investigation results EDB is calculated using a complex algorithm within the ObstetriX database once all pregnancy information is collated and should not be altered without consultation with the hospital 	 Health promotions discussion Influenza vaccination in pregnancy
16-20	Hospital	 Counselling from Senior Medical Officer if last birth a Caesarean section Review history/results including FAS Approve model of care 	Review of previous birth notes to determine suitability for NBAC
24-26	GP	 Routine check i.e. check BP, symphysis-fundal height, assess fetal movements/FHR, Urinalysis only if indicated Review ANC notes/18 week scan 	 Arrange Glucose Tolerance Test and FBC to be attended by 28 weeks Arrange Blood group and antibodies for Rh-ve women to be attended by 28 weeks
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 28 – 34 weeks
31	GP	Extra visit for nulliparous womanRoutine check	Check and discuss smoking status
34	Hospital if Rh-ve	 Routine check Assess fetal lie – if breech refer Anti-D 	Anti-D injection Low vaginal swab Birth plan and breastfeeding discussion
	GP if Rh+ve	Routine check	Birth plan and breastfeeding discussion
36	Hospital	 Routine check Assess fetal lie – if breech refer to ANC for possible ECV 	Birth plan and breastfeeding discussionLow vaginal swab (if Rh-ve)
38	GP	 Extra visit for nulliparous woman Routine check Assess fetal lie, presentation, descent of head 	Birth plan and breastfeeding discussion
39	Hospital	Routine checkAssess 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 <u>URGENT</u> Clinical Enquiries page on-call Consultant Obstetrician between 8 am and 5 pm on 4734 2000 For <u>NON-</u>URGENT Clinical Enquiries call NUM, Women & Children's Outpatients Dept on 0400 916 318

