



Pam White
Health Net

Prenatal/Perinatal Health Guidelines

Initial evaluation	Up to 28 weeks	28–36 weeks	36+ weeks
The first prenatal visit should be within the first 12 weeks of pregnancy	Visits should be every four weeks ¹	Visits should be every two to three weeks ¹	Visits should be weekly ¹
Complete physical exam, including review of systems	Visits should include: <ul style="list-style-type: none"> • Blood pressure • Weight • Urine for presence of protein and glucose • Uterine size for progressive growth and consistency with estimated date of delivery • Fetal heart rate • Fetal movement assessment 	Visits should include: <ul style="list-style-type: none"> • Blood pressure • Weight • Urine for presence of protein and glucose • Uterine size for progressive growth and consistency with estimated date of delivery • Fetal heart rate • Fetal movement assessment 	Visits should include: <ul style="list-style-type: none"> • Blood pressure • Weight • Urine for presence of protein and glucose • Uterine size for progressive growth and consistency with estimated date of delivery • Fetal heart rate • Fetal movement assessment • Fetal presentation
Complete medical history of expectant mother, including menstrual history and previous pregnancies	Assessed at the first visit	Assessed at the first visit	Assessed at the first visit
Genetic screening/counseling of expectant mother and father and any pertinent family history	Assessed at the first visit	Assessed at the first visit	Assessed at the first visit
Lab tests: <ul style="list-style-type: none"> • Blood group and RH type • Antibody screen • Hematocrit and hemoglobin (Hct/Hgb) • Varicella and rubella • Chlamydia screen • VDRL (syphilis) • Urinalysis • Urine culture and sensitivity • Hepatitis B surface antigen • HIV counseling and testing is offered 	Lab tests (when indicated): <ul style="list-style-type: none"> • Repeat antibody tests in unsensitized, D-negative patient at 28–29 weeks, and prophylactic anti-D immune globulin should be administered • Screen for gestational diabetes mellitus at 24–28 weeks • Repeat hematocrit and hemoglobin 	Lab tests: <ul style="list-style-type: none"> • Hct/Hgb • Screen at 35–37 weeks for Group B strep Additional lab tests (when indicated): <ul style="list-style-type: none"> • Ultrasound • VDRL • Gonorrhea and Chlamydia • HIV (women at high risk) 	



¹The frequency of follow-up visits is determined by the individual needs of the woman and assessment of her risk. Women with medical or obstetric problems may require closer surveillance.