Guideline:  Routine Prenatal and Postnatal Care

Released:  June 2016

Refer to guideline for timeline of screening/recommendations

Updated recommendations:

Assessment and Interventions:
  Medical and OB history
  History of preterm labor

Psychosocial status and update

Education and counseling:
  Safety and important of dental care for mother and newborn, caries transmission; refer if indicated
  Prevention of unintended pregnancy, e.g. immediate post-partum LARC, and risks of next pregnancy within 18 months

Other:
  Routine urinalysis, culture, confirm pregnancy by testing
  Confirm expected delivery date (EDD), gestational age using ultrasound
  HIV counseling and testing. Use rapid HIV testing during labor for women without HIV status. Anti-retrovirals if HIV positive.
  STD screening (GC, Chlamydia, VDRL)
  Hepatitis B, rubella, and HCV (if high risk) screening
  Screening for gestational diabetes. Test on first visit if high risk of Type 2 diabetes.
  Screen for short cervix using ultrasound, treat if positive
  Elective/non-medically indicated induction prior to 39 weeks is contraindicated

1If patient had gestational diabetes, then screen 6-12 weeks postpartum for persistent diabetes mellitus with 3 hour OGTT
2American Diabetes Association 2016 Standards of Medical Care in Diabetes

This alert provides a brief summary of updated recommendations. Refer to the complete guideline for all recommendations and level of evidence.