

Colorado Choice Health Plans Prenatal Clinical Guideline



	Frequency of Visits	Monthly	Monthly	Monthly	Monthly	2 weeks	2 weeks	2 weeks	weekly
	Visit #	1	2	3	4	5 & 6	7 & 8	9 & 10	11-13
	# weeks gestation	4-10	12	16-18	22	28	32	36	38-41
History	Allergies/Medical	√	√	√	√	√	√	√	√
	Social/Surgical	√							
	Travel	√							
	ZIKA	√							As needed
Measurements	Height/Weight/BMI	√	√	√	√	√	√	√	√
	Blood Pressure	√	√	√	√	√	√	√	√
	Fetal Activity				√	√	√	√	√
	Fetal Heart Tones				√	√	√	√	√
	Fundus Height				√	√	√	√	√
Screenings	Fasting	√							
	1 Hour Glucose Test					√			
	Antibody Screen	√			24-28 weeks				
	Birth Defects Screening			√					
	Blood Type	√				28 weeks			
	CBC	√				√			
	Depression Screening	√							
	Domestic Abuse Screening	√				√			√
	Evaluation of Edema	√							As needed
	Fetal Aneuploidy								
	Genetic Counseling/Testing	√	√	√					
	Group B Strep	√							35-37 wks
	Hepatitis B	√							√ ¹
	Hepatitis B Titer	√							
	Hepatitis C	√							√ ¹
	HIV Screening	√							√ ¹
	OB History/H&P	√							
RH Factor	√								

¹ High Risk

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Screenings (cont)	Rhogam Fetal-maternal Transfusion					28 weeks			
	Rubella Titer	√							
	Sexually Transmitted Infections	√						√ ¹	
	Sickle Cell (if at risk)	√							
	Sonogram			18-20 weeks					
	TB (if high risk)	√							
	T-dap					27-30 weeks			
	Urine culture	√							
	Urine dipstick (for protein/ketones/glucose)	√	√	√	√	√	√	√	√
	Varicella Titer	√							
Exams	Physical Exam	√							As needed
	Vaginal Exam	√							As needed
	Fetal Position Assessment						√	√	√
Health Ed/Counseling	Exercise/Work	√				√			As needed
	Body Changes	√				√			As needed
	Dental Care	√				√			As needed
	Domestic Abuse	√				√			As needed
	Medication (Rx/OTC/Herbal)	√				√			As needed
	Warning Signs	√				√			As needed
	Alcohol/Drugs/Tobacco	√				√			As needed
	Sex	√							As needed
	Sexually Transmitted Infections	√							As needed
	Preterm Labor Education					√	√	√	√
	Air Travel	√							
	Birds/Reptiles/Salmonella	√							
	Breastfeeding	√							
	Breastfeeding Support						√	√	√
	Cats/Toxoplasmosis	√							

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Health Ed/Counseling	Childbirth Education	√						√	√
	Contraception Discussion						√	√	√
	Exercise	√							As needed
	Fetal Movement Counts				24 weeks		√	√	√
	Hair Treatments	√							
	Heavy Metals	√							
	Herbal Therapies	√							
	Hot Tubs/Saunas	√							
	Radiation	√							
	Seat-belt Use	√							
	Solvents	√							
	ZIKA	√							
	Nutrition	Nutrition/Dietary Assessment	√						
Artificial Sweeteners		√							
Caffeine		√							
Caloric Intake		√							
Dairy		√							
Delicatessen Foods		√							
Eggs		√							
Folic Acid		√							
Fruits/Vegetables		√							
Herbal Teas		√							
Leftover Foods		√							
Meat		√							
Seafood		√							

² Journal of American Academy of Family Physicians, "Update on Prenatal Care" Volume 89, No 3, pp 199-208; Guideline for preconception and Interconception care by HealthTeamWorks, December 2008; Initial Prenatal assessment and first trimester prenatal Care UpToDate, July 2016; Prenatal Care (second & third trimesters). UpToDate, July 2016.