

Antenatal Schedule for General Practitioners

RDPH Guideline

Purpose: To provide guidance for RDPH staff and General Practitioners across the Darwin/Palmerston Region in the schedule of care at Antenatal visits for pregnant women engaging with GP Shared models of care.

Gestation	Assessments Required
Initial Visit With GP Consider only if indicated: <ul style="list-style-type: none"> <input type="checkbox"/> Vit D levels <input type="checkbox"/> Thalassaemia Screening <input type="checkbox"/> Thyroid Disease <input type="checkbox"/> Varicella Serology <input type="checkbox"/> Early OGTT at 14 weeks if high risk (high risk flow chart) <input type="checkbox"/> Iron studies 	<ul style="list-style-type: none"> <input type="checkbox"/> Confirm pregnancy; Calculate pregnancy dates using last menstrual period <input type="checkbox"/> Refer for Dating USS (Most accurate between 7-8 weeks gestation) <input type="checkbox"/> Discuss Antenatal Care & Order routine blood tests <ul style="list-style-type: none"> <input type="checkbox"/> Full Blood Count <input type="checkbox"/> Blood group, Rhesus factor & Antibody screen <input type="checkbox"/> Rubella Titre <input type="checkbox"/> Syphilis Serology <input type="checkbox"/> Hepatitis B & Hepatitis C Serology <input type="checkbox"/> HIV <input type="checkbox"/> MSU <input type="checkbox"/> STI Screen <input type="checkbox"/> Recommend folic acid & iodine supplement <input type="checkbox"/> Discuss Smoking & Alcohol modifications <input type="checkbox"/> Recommend influenza vaccine to the woman and her partner (partner not funded) <input type="checkbox"/> Discuss Cervical Screen Testing if indicated <input type="checkbox"/> Encourage women to download the health direct app for pregnancy information <input type="checkbox"/> Discuss food safety
8-10 week visit With GP *2x appointments may be required or 1x long appointment	<ul style="list-style-type: none"> <input type="checkbox"/> Commence Hand Held Record (HHR) <input type="checkbox"/> BP, Gest, U/A <input type="checkbox"/> Review and document results of dating scan and routine screening in HHR <input type="checkbox"/> Document detailed Medical History including Diabetes, Thyroid, RHD <input type="checkbox"/> Measure Height, Weight & Calculate BMI <input type="checkbox"/> Screen for perinatal mental health issues using EPDS tool, Score tool if EPDS more than 13 repeat in 2-4 weeks refer to COPE and consider Perinatal Mental Health Referral or PANDA <input type="checkbox"/> Family violence, smoking, alcohol and other drug use screening in HHR <input type="checkbox"/> Review and document medication (seek specialist if required) <input type="checkbox"/> Discuss/ offer aneuploidy screening: <ol style="list-style-type: none"> 1. Nuchal translucency scan + first trimester screening SAMSAS, K11-13+6 or <ol style="list-style-type: none"> 2. Triple test K15-22+6 if desired. Not if twins or diabetes 3. NIPT >K10 (not Medicare funded) K11-13 structural USS <input type="checkbox"/> Refer to ANC using HHR as referral document. Attach all pathology and scans
14 week visit with GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Gest, Weight <input type="checkbox"/> If early OGTT positive or known Type 1 or Type 2 DM refer to RDH for ANC and to NT Healthy Living NT Healthy Living Diabetic Education Referral Form <input type="checkbox"/> Review results of antenatal screening and document in HHR <input type="checkbox"/> Give morphology referral form for 18-20 weeks (please note Territory Xray Bulk Bill and IMED there will be a cost to mother. CC ANC) encourage women to book USS ASAP
14 to 17 weeks Hospital Obstetrician & Midwife	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, FHR, FMF, U/A, Weight <input type="checkbox"/> Obstetrician to assess risk factors and confirm model of care <input type="checkbox"/> Antenatal Breastfeeding Checklist: benefits for mother and baby <input type="checkbox"/> Discuss childbirth education at the hospital <input type="checkbox"/> Give pathology for blood group and antibody screening to be done at RDH at next appointment.
20 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, FHR, FMF Normal Fetal Movement Information <input type="checkbox"/> Review morphology & ultrasound results <input type="checkbox"/> DTPA Vaccination to the woman and her partner (partner not funded)
24 Weeks	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR

With GP	<ul style="list-style-type: none"> <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, FHR, FMF <input type="checkbox"/> Give 28 week blood request form (copy in Antenatal Clinic) <ul style="list-style-type: none"> <input type="checkbox"/> Full blood count <input type="checkbox"/> OGTT (75g) <input type="checkbox"/> If Rh negative blood group add group and antibodies and discuss Anti-D information *Advise to have bloods taken within 5 days of planned Anti D administration
28 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, FHR, FMF <input type="checkbox"/> Review 28 week bloods <input type="checkbox"/> If OGTT positive refer to ANC and NT Healthy Living NT Healthy Living Diabetic Education Referral Form <input type="checkbox"/> Review group and antibody screen <ul style="list-style-type: none"> <input type="checkbox"/> Administer prophylactic Anti D to RH -ve women (without antibodies) <input type="checkbox"/> Repeat family violence, smoking, alcohol and other drug screening in HHR <input type="checkbox"/> Perinatal mental health issues using EPDS tool, Score tool if EDPS more than 13 repeat in 2-4 weeks and refer to COPE and consider Perinatal Mental Health Referral or PANDA <input type="checkbox"/> BF Education Checklist - see handheld record folder
30 Weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, FHR, FMF <input type="checkbox"/> Discuss preparing for labour Labour & Birth Handout; Going to hospital
32 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, FHR, FMF <input type="checkbox"/> Breastfeeding Education Checklist; referral to Lactation Consultant; advice on ABA if required <input type="checkbox"/> Discuss caring for a newborn including SIDS, NNST, Vit K, Newborn hearing test & Hepatitis B vaccine
34 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gest, Weight, Presentation, FHR, FMF Normal Fetal Movement Info <input type="checkbox"/> Administer prophylactic Anti -D to RH -ve women (without Antibodies) <input type="checkbox"/> Give 36 week blood form: Full blood count <input type="checkbox"/> Discuss Group B Streptococcus Screening for next appointment with the Obstetrician <input type="checkbox"/> Discuss pain relief options and what to bring to hospital
36 weeks Hospital Obstetrician	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, Presentation, FHR, FMF <input type="checkbox"/> Confirm fetal presentation. If suspected malpresentation refer for USS <input type="checkbox"/> Discuss and book Caesarean section if required <input type="checkbox"/> Encourage women to attend 36 week GBS screen prior to leaving clinic (cc Shared Care GP) <input type="checkbox"/> Give expressing kit if required <input type="checkbox"/> Confirm blood group and antibodies attended at RDH
38 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, Presentation, FHR, FMF <input type="checkbox"/> Review 36 week bloods <input type="checkbox"/> Discuss GBS Results
39 weeks With GP	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, Presentation, FHR, FMF <input type="checkbox"/> Discuss induction of labour
40 weeks Hospital Obstetrician	<ul style="list-style-type: none"> <input type="checkbox"/> Document in HHR <input type="checkbox"/> BP, Fundal Height, Gestation, Weight, Presentation, FHR, FMF <input type="checkbox"/> Discuss induction of labour <input type="checkbox"/> Notify Shared Care GP of Induction plan and future appointments.
6 Weeks Postpartum With GP 2x appointments: mum and baby	<ul style="list-style-type: none"> <input type="checkbox"/> Review mother (postpartum bleeding, breasts, feeding & sleep) postpartum information <input type="checkbox"/> Review baby (feeding, weight gain, elimination, sleep patterns & milestones) baby information <input type="checkbox"/> Follow up OGTT if indicated <input type="checkbox"/> Screen for perinatal mental health issues using EPDS tool, Scoring tool, if concerns contact Perinatal Mental Health , COPE or PANDA <input type="checkbox"/> Discuss Contraception <input type="checkbox"/> Review Vaccinations <input type="checkbox"/> Offer Cervical Screening Testing

Additional Information

>20 weeks: care of complications e.g. bleeding, pain, suspected preterm labour, hypertension or concerns about fetal movements contact on call O&G consultant

< 20 weeks: Refer to emergency department

GP Shared Care Information

- Please complete HHR at each visit
- Schedule as per guideline
- More frequent visits if clinically indicated
- If GTT +ve refer to RDH
- The GP providing antenatal care must follow up all investigations and results
- Women opting for Antenatal GP Shared Care must be available to attend a hospital appointment on a Friday morning

High risk for diabetes in pregnancy:

- Previous GDM
- BMI ≥ 30
- Baby >4500g or >90th percentile
- Previous elevated BGL;
- PCOS
- Family Hx;
- Maternal age >40
- Perinatal loss
- Multiple pregnancy
- Medications: corticosteroids
- High risk ethnicity
- Anti psychotics

If **early GTT positive** or known Type 1 or Type 2 refer to [NT Healthy Living & GDM Patient Resource](#)

High Risk Syphilis Screening:

- Women who reside in remote communities known to have a sexual network connection to a remote community
- Women under 25 years old who reside in a NT Remote Community

High Risk Screening Intervals:

- At least three times in pregnancy
- Booking visit
- 28 weeks
- 36 weeks
- Delivery
- 6 week postnatal check

This document should only be used as a guide for routine care of a low risk pregnancy. Always refer the [NT Healthpathways](#) or consult with Antenatal Shared Care Obstetrician