



EMR301540

Hospital / Health Service WACHS Maternity NWHPR Schedule of Care	SURNAME		UMRN / MRN	
	GIVEN NAMES		DOB	GENDER
	ADDRESS			POSTCODE
	TELEPHONE			
DOCTOR: _____				

EDUCATION / PLAN *page in Pregnancy, Birth and your baby book		Page*	Date	Initials
8 – 14 WEEKS	DISCUSS			
	Discuss models of care available at this health service			
	Discuss plan / schedule of care for pregnancy visits			
	Discuss need for dating ultrasound			
	Discuss first trimester screening (FTS) 9 – 13 weeks	27		
	Arrange booking for bloods to be completed			
	Need for folate supplements (correct dose for at risk women)	13		
	Discuss download "My Baby WA" app			
	OTHER			
BOOKING VISIT OR FIRST VISIT	DISCUSS			
	Confirm EDD by date LNMP (regular cycle), if uncertain by dating USS	29		
	Discuss models of care available at this health service	5		
	Schedule of pregnancy visits (as per Shared Care guideline)	23		
	NWHPR and advise to bring to all appointments, in labour and if travels			
	Discuss pregnancy screening tests	27		
	Antenatal education class options (on site and telehealth)			
	Value of breastfeeding and intended feeding method	31		
	Discuss side sleeping (as per Safer Baby Bundle)			
	Influenza vaccine	22		
	Health pregnancy:	12		
	• Diet / exercise / weight gain (Refer to O&G handout)	13		
	• Listeria, salmonella, CMV and toxoplasmosis avoidance advice	15 & 13		
	• Folate supplements	21		
	• Alcohol, smoking / drugs and second hand smoke	18		
	• Back care and minor discomforts of pregnancy	32		
	• Pelvic floor exercise			
	Involvement of students			
	Emotional needs (including last birth experience if multi)			
	Preparing birth plan and wishes	51		
	What to bring to hospital	49		
	REVIEW / SCREEN			
	Review initial pregnancy screening test results – or arrange PRN	27		
	Screen clinical risk factors (ACM midwifery guidelines) and refer PRN			
	Discuss modifiable risk factors – diet, smoking etc.			
	Conduct expired carbon monoxide testing (if applicable)			
	Screen for: <input type="checkbox"/> EPDS <input type="checkbox"/> Social risk factors <input type="checkbox"/> Fagerstrom <input type="checkbox"/> Audit C <input type="checkbox"/> FGM and refer PRN	23		
	Screen diabetes risk – offer random fasting BSL PRN or OGTT			
	Screen for micro risk alerts – arrange MRSA PRN			
	STI screening (if not attended by GP)			
Assess BMI, if high refer, commence MR73A and give hand-out				
Cervical screening within 5 years? If No, refer prior to 24 weeks				
DO				
Baseline clinical and physical assessment – refer PRN				
Download "My Baby WA" app or if no phone provide "Pregnancy, birth and your baby" book				
Assess for risk factors against ACM Midwifery guidelines				
Complete MR70 Pregnancy Instruction Sheet				
OTHER				

SAMPLE ONLY - DO NOT PRINT
 Order from iproc on 206738B

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EDUCATION / PLAN		*page in Pregnancy, Birth and your baby book	Page*	Date	Initials
14 – 20 WEEKS	DO				
	Routine antenatal clinical assessment and refer PRN				
	Assess for risk factors against ACM Midwifery guidelines				
	Review results of first trimester screening				
	Offer maternal serum screening (MSS) at 15 – 17 / 40 (if no FTS)				
	Book 19 / 40 ultrasound (anatomy and cervical length)				
	OTHER				
20 - 24 WEEKS	DISCUSS				
	Fetal movement cycles and what to do if concerned				
	If negative blood group – discuss Anti-D				
	Offer and arrange blood tests 26-28/40: OGTT. FBC. Fe (prn) Antibodies (prn)				
	Screen for syphilis if in high risk region				
	Whooping cough vaccine				
	Use of water labour and birth / pool hire				
	DO				
	Routine clinical assessment and refer PRN				
	Review results from second trimester screening – including EDD				
Repeat EPDS if indicated (RANZCOG handout)					
OTHER					
24 – 34 WEEKS	DISCUSS				
	Perineal massage				
	Child Health nurse role post-birth				
	Family planning post-birth				
	Car restraints				
	Birth plan and care preferences				
	Fetal movement cycles and what to do if concerned				
	DO				
	Routine clinical assessment and refer PRN				
	Review 28/40 bloods and refer PRN				
	Administer first dose Anti-D Rh D negative (28 weeks)				
	Repeat screen: <input type="checkbox"/> EPDS <input type="checkbox"/> Social risk factors (if not done previously) <input type="checkbox"/> Fagerstrom PRN <input type="checkbox"/> Audit C PRN <input type="checkbox"/> FGM and refer PRN				
	Reassess clinical risk factors against ACM National guidelines. Document on MR70C Pregnancy Instruction Sheet				
	Review BMI and update MR73A Maternity High BMI tool if in progress				
	Complete Primary Health Adult referral (if applicable)				
OTHER					

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EDUCATION / PLAN *page in Pregnancy, Birth and your baby book		Page*	Date	Initials
34 - 36 WEEKS	DISCUSS			
	Option to keep placenta and disclaimer form	55		
	Explore: • Birth issues / concerns • When to seek medical or midwifery advice • Recognising active labour / birth plan and • Need for NSMP based upon risk factors and woman's choice	52 53		
	Pain relief options for labour: <input type="checkbox"/> Water labour and birth / pool hire <input type="checkbox"/> Sterile water injections	61 57		
	Management of third stage	55		
	Consent for newborn Vitamin K and Hepatitis B immunisation	66		
	DO			
	Routine clinical assessment and refer PRN			
	Reassess clinical risk factors against ACM National guidelines Document on MR70C Pregnancy Instruction Sheet			
	Administer second Anti-D Rh D negative (34 weeks)	29		
	Offer and arrange repeat FBC, Fe (prn), Antibodies (prn) Syphilis (prn)	38		
	Water birth consents PRN			
	If high BMI, check gestational weight gain and update MR73A PRN			
	Review U/S PRN			
	Book 37 week MW ANC appointment for antenatal expressing discussion			
	Screen for social risk factors (if not done previously)			
	INFO: How to turn a breech baby and ECV brochures (if applicable)			
	OTHER			
37 - 38 WEEKS	DISCUSS			
	Fetal movements late in pregnancy and when to seek advice (Safer baby Bundle)	33		
	Explore birth issues and concerns, birth plan and support persons in labour ward	51		
	Care of the newborn and feeding choice			
	Newborn Screening test: <input type="checkbox"/> Hearing screen <input type="checkbox"/> NNST Blood Spot	66		
	Risk factors for SIDS and safe infant sleeping	78		
	Postnatal emotional help including baby blues and PND	74		
	DO			
	Routine clinical assessment and refer PRN			
	36 weeks blood results – refer PRN			
	Review fetal size and growth pattern			
	Give instruction on how to perform antenatal expressing if requested			
	Complete Vitamin K and Hepatitis B consents (if not done)	66		
Offer stretch and sweep after 39 weeks if clinically indicated				
OTHER				

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39 - 40 WEEKS	DO			
	Fetal movements late in pregnancy and when to seek advice	33		
	Management of prolonged pregnancy and IOL (RANZCOG brochure)	44		
	Make 41 week appointment with Obstetric Doctor			
	Discuss pain relief options, birth plan and choices	56		
	Routine clinical assessment and refer PRN			
	If stretch and sweep – record Bishop score			
	OTHER			
41 WEEKS	DO			
	Fetal movements late in pregnancy and when to seek advice			
	Routine clinical assessment and refer PRN			
	Offer stretch and sweep – record Bishop score			
	Offer and arrange bi-weekly CTG and/or USS for 41 week			
	OTHER			

ANTENATAL SCHEDULE BASED ON RISK ASSESSMENT

1. Assessment of risk to occur throughout pregnancy
2. Woman's pathway may change at any stage during pregnancy
3. Collaborative care arrangement pathway agreed between woman and her health care provider (HCP)

PATHWAY VISITS	↔	LOW RISK (Category A)	MODERATE RISK (Category B)	HIGH RISK (Category C)
8 – 10 weeks		<input type="checkbox"/> GP	<input type="checkbox"/> GP / GPO	<input type="checkbox"/> ObC
12 – 14 weeks		<input type="checkbox"/> GPO <input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> MW <input type="checkbox"/> ObC
16 – 17 weeks		<input type="checkbox"/> MW	<input type="checkbox"/> MW	<input type="checkbox"/> MW
BOOKING				
20 weeks		<input type="checkbox"/> MW <input type="checkbox"/> GPO	<input type="checkbox"/> GPO	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
24 – 26 weeks		<input type="checkbox"/> MW	<input type="checkbox"/> MW	<input type="checkbox"/> MW
28 – 30 weeks		<input type="checkbox"/> GPO <input type="checkbox"/> MW	<input type="checkbox"/> GPO	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
32 – 33 weeks		<input type="checkbox"/> MW	<input type="checkbox"/> MW	<input type="checkbox"/> MW
36 weeks		<input type="checkbox"/> GPO	<input type="checkbox"/> GPO	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
37 weeks		<input type="checkbox"/> MW (prn)	<input type="checkbox"/> MW (prn)	<input type="checkbox"/> MW
38 weeks		<input type="checkbox"/> MW	<input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
39 weeks		<input type="checkbox"/> MW	<input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> ObC <input type="checkbox"/> MW
40 weeks		<input type="checkbox"/> MW <input type="checkbox"/> GPO	<input type="checkbox"/> MW <input type="checkbox"/> GPO	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
ASSESS IOL				
41 weeks		<input type="checkbox"/> GPO <input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> MW	<input type="checkbox"/> GPO <input type="checkbox"/> ObC
BIRTH		<input type="checkbox"/> Home <input type="checkbox"/> Hospital	<input type="checkbox"/> Hospital	<input type="checkbox"/> Hospital
Postnatal Discharge		<ul style="list-style-type: none"> Uncomplicated birth – minimum 4 hour stay. LUSC – minimum 24 hour stay. 		As per current hospital care pathway
Postnatal Follow-up		<ul style="list-style-type: none"> Postnatal care to be individualized to client needs up to 6 weeks based upon the WACHS Maternal and Newborn Care Strategy 2019 – 2024. Referred onto Child Health : visited by Day 14 6 week postnatal check with GP Obstetrician 		