

Pregnancy Checklist



- Decide on where and how you wish to have your child—do you wish to be looked after privately or a publicly? Do you wish to have midwifery, general practitioner (GP) or obstetric care?
- Screening for depression during and after pregnancy is recommended for all women. Depression is a common, significant complication both during pregnancy and after baby is born.
- When was your last Cervical Screening Test or Pap Smear –it should be up to date.
- The following tests are recommended: Full Blood Count (for anaemia); Blood Group and antibodies; Rubella immunity, Hepatitis B, Hepatitis C, HIV and Syphilis serology and a urine test for kidney disease and infections. If you have a high risk of diabetes, you are advised to have a first trimester glucose tolerance test or HbA1c
- Chicken Pox, thyroid, chlamydia, iron stores or vitamin D levels may need to be checked, depending upon your history
- Supplements of folic acid and iodine are recommended.
- Reliable information on safe use of drugs and alcohol, diet, exercise and lifestyle activities in pregnancy can be found on the following websites: www.maternal.org.au/journey www.thewomens.org.au/health-information/pregnancyand-birth/ and <http://healthinsite.gov.au> (follow the links to pregnancy and parenting) which has a useful link to Listeria information as well as a multitude of other useful articles/information.
- Smoking during pregnancy is associated with significant health problems and if you are a smoker, we would like to work with you to help you to stop during this pregnancy.
- It is recommended that alcohol be stopped as it is known to cause problems for you and/or your baby. If you are having difficulty stopping, we would like to work with you to help you to stop drinking alcohol
- It is recommended that you have a free* influenza vaccine from your GP when they are available, regardless of your stage in pregnancy.
- There is a blood test (B HCG and PAPP-A) and an ultrasound test (the Nuchal translucency scan) that can be done between 11 and 13 weeks of pregnancy. This test assists to determine your chance of having a child with conditions including Down's Syndrome, as well as dating the pregnancy and providing other useful information. There is also a newer

blood test, the NIPT, which gives information about a limited range of chromosomal abnormalities, including Down's Syndrome. It does not have any Medicare funding and costs ~ \$425. This should be discussed further and these or other tests may be recommended.

- An ultrasound test, the morphology scan, is recommended and usually done between 18 and 20 weeks of pregnancy to check on well being, size and development of the baby
- It is recommended that you have a visit with your GP, midwife or obstetrician to follow up the results of any blood tests or ultrasound scans as soon as practical after the test. Don't just assume everything is OK if you have not contacted.
- If you have a Rhesus negative blood group, it is recommended that you have an injection, commonly called AntiD, if you have vaginal bleeding during pregnancy and routinely at 28 and 34 weeks. If you have any vaginal bleeding, you must let us know as soon as possible as you may need to have an injection within 72 hours of the bleeding commencing. This significantly reduces the risk of you developing antibodies which could harm your baby
- At 26-28 weeks of pregnancy, your blood count is checked again for anaemia and blood group antibodies and a glucose tolerance test is recommended, unless it is already known that you have diabetes.
- It is recommended that you have a free* whooping cough booster from your GP from 28 weeks gestation in each and every pregnancy, even if the pregnancies are less than two years apart.
- Visits are generally recommended every four weeks from week 12 until 28 weeks, every three weeks until 34 weeks and every two weeks until 40 weeks, with follow up at 41 weeks if you have not yet had your baby. If you have special needs or other health concerns, you may be asked to come in more often or you can choose to be seen more often.
- A blood test for anaemia is recommended at 36 weeks of pregnancy
- If you choose to have Shared Antenatal Care with your GP, you will usually be seen at the hospital for a booking in appointment at 16-20 weeks (earlier if you are at higher risk) and 36 weeks.

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