

Scope and Target Population:

This guideline pertains to the care of all women who are pregnant or are considering pregnancy. All visits are outpatient/clinic based. (See the ICSI Management of Labor guideline for hospital-based care.)

Clinical Highlights for Individual Clinicians:

- Identify patients with greater potential for high-risk pregnancy and provide appropriate preconception counseling.
- Each pregnant patient should receive visit-specific screening tests, education, immunizations and chemoprophylaxis as described in the schedule of prenatal visits.
- Counseling for appropriate aneuploidy testing (screening) should be offered to all pregnant women regarding the different screening options and the limitations and benefits of each of the screening and diagnostic tests.
- For patients with previous Caesarean section, provide education of risks and benefits associated with vaginal birth after Caesarean (VBAC). Assess and document patient's desire and appropriateness for VBAC.
- Each pregnant patient and each patient planning a pregnancy should receive a comprehensive risk assessment and appropriate risk-related interventions, including risks for preterm labor, relevant infectious diseases, and relevant genetic disorders.

Priority Aims:

1. Increase the percentage of pregnant women who receive timely, comprehensive screens for risk factors.
2. Increase the percentage of pregnant women who receive timely prenatal counseling and education as outlined in the guideline.
3. Increase the number of first trimester patients who have documentation of counseling about appropriate aneuploidy screening.
4. Increase the percentage of VBAC-eligible women who receive documented education describing risks and benefits of VBAC.
5. Increase the rate of appropriate interventions for identified change in status in women with preterm birth (PTB) risk factors.