

Section: Division of Nursing

* **PROCEDURE** *

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HACKETTSTOWN COMMUNITY HOSPITAL

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HEALTHSTART
(Scope)

TITLE: OBSTETRICAL SERVICES

PURPOSE: To provide obstetrical services to those clients meeting the financial requirements of the Healthstart program.

CONTENT:	<u>PROCEDURE</u>	<u>KEY POINTS</u>
	1.Frequency of prenatal visits: a. Every 4 weeks during the first 28 weeks of gestation. b. Every 2 weeks until 36 weeks gestation. c. Weekly thereafter.	Frequency of prenatal visits may be increased depending on medical necessity.
	2.Initial prenatal visit will include a. Introduction of case coordinator. b. Collate information on which to base care plan. 1) Medical/nursing history and assessment using POPRAS 2) Nutrition assessment 3) Psycho/social assessment 4) Health education assessment 5) Physical Examination c. Risk assessment and management d. Routine laboratory tests: Initial Visit 1) urinalysis 2) CBC with diff 3) Rh factor, blood typing 4) Antibody screening 5) Serological test for syphilis (RPR) 7) Rubella IgG 8) TB test as determined by provider 9) Hepatiits (HbsAG)	At least ½ hour allotted for initial visit.

- 10) Chlamydia culture
 - 11) GC culture
 - 12) HIV testing with client's consent.
 - 13) Rubeola Igg
 - 14) TSH
 - 15) CF Carrier testing with patient consent
 - 16) Free T4
 - 17) PapSmear/thin prep
- e. Procedures as indicated. As determined by history or advanced maternal age.
- f. Instruction on self-breast examination.
- g. Orientation of client to available service.
3. Subsequent prenatal visits will include: At least 10 minutes allotted for subsequent visits.
- a. Review and update of plan, including education on feeding of newborns with counseling and support of breastfeeding.
 - b. Health education
 - c. Interim history
 - d. Physical examination
 - e. Laboratory tests as ordered.
 - f. Special screening tests as medically indicated
4. Obstetrical delivery and treatment during postpartum stay will be provided by prenatal provider.
5. Postpartum visit will include:(see 7070.041a) ½ hour allotted for postpartum visits.
- a. Review of prenatal, labor and delivery record.
 - b. Postpartum health history
 - c. Physical examination
 - d. Laboratory tests - CBC and Pap smear /thin prep(see 7070.018a) as directed by provider instruction.
 - e. Family Planning
6. Parent-infant assessment of bonding and parenting skills
7. Referral and/or consultation as indicated.