

ANTENATAL CONTACTS QUICK REFERENCE GUIDE

This document describes a Greater Glasgow and Clyde schedule of universal midwifery care, informed by current practice in GGC, NICE guidance (2021), Intergrowth recommendations, and professional input from midwifery and obstetric clinical leads.

The recommended gestations provide a framework, but professional judgement should always be used and there can be variation of these gestations if indicated.

To monitor fetal growth in keeping with Intergrowth guidance, midwives should use their professional judgement about the timing of return appointments, to ensure there is a minimum of 2 weeks and a maximum of 4 weeks between fundal height measurements.

In addition, an acronym is suggested to support a **REVAMPP** of antenatal care in GGC.

Remember every woman every time, **V**TE, **A**naemia, **M**ovements, **P**lot Fundal Height, **P**lan.

BOOKING APPOINTMENT

AN contact	Weeks	Review care to date – at every contact <ul style="list-style-type: none"> Review blood results Enquire about Healthy Start Vitamins, Iron, Low dose aspirin Review and update Management Plan and Pathway 	Blood Pressure and Urinalysis	Oedema	Palpation <ul style="list-style-type: none"> Start fundal height measurement from 26-28 weeks 	Auscultate fetal heart	Blood tests	VTE risk	PPH risk	Discuss fetal movements	Plot fundal height and review fetal growth (2-4 weeks apart)	GIRFEC/ Routine Enquiry	AN education/ Leaflets – at every contact <ul style="list-style-type: none"> Signpost contact numbers Encourage healthy lifestyle (diet, exercise, smoking, etc) 	Things to do or double check! <ul style="list-style-type: none"> Review and update Management Plan and Pathway
1	<12		✓				✓ Booking set + ferritin	✓	Commence			✓	Ready Steady Baby and Booking Pack (DVT, vitamin D, smoking cessation, Alcohol in pregnancy, Care of your body in pregnancy, Vaccination leaflets) Conversations in Pregnancy (1st) Discuss place of birth Discuss AN screening	Obtain full medical, social and obstetric history Offer AN Screening Assess for GDM screening Assess for LDA Assess for SGA risk Document initial Management Plan Offer referrals to financial inclusion/money matters Best Start vouchers/Best Start grant

SUBSEQUENT ANTENATAL APPOINTMENTS

AN contact	Weeks	Review care to date – at every contact	Blood Pressure and Urinalysis	Oedema	Palpation	Auscultate fetal heart	Blood tests	VTE risk	PPH risk	Discuss fetal movements	Review fetal growth chart and plot fundal height (2-4 weeks apart)	GIRFEC/ Routine Enquiry	AN education/ Leaflets – at every contact	Things to do or double check!
		<ul style="list-style-type: none"> Review blood results Enquire about Healthy Start Vitamins, Iron, Low dose aspirin Review and update Management Plan and Pathway 			<ul style="list-style-type: none"> Start fundal height measurement from 26-28 weeks 								<ul style="list-style-type: none"> Signpost contact numbers Encourage healthy lifestyle (diet, exercise, smoking, etc) 	<ul style="list-style-type: none"> Review and update Management Plan and Pathway
		Remember, every woman, every time						VTE	Anaemia	Movements	Plot			Plan
		RE						V	A	M	P			P
2	15	✓	✓						Complete with blood results and USS findings			✓	Best Start Grant Best Start Foods Conversations in Pregnancy (2nd) Off to a Good Start	Parent Education dates Vaccination appointment OGTT appointment Anti D appointment HV Referral Other Referrals (SNIPS, FNP, PMHT, Smokefree, Threads)
3	22	✓	✓	✓	✓	✓				✓		✓	Fetal Movement Leaflet Baby box	Provide MATB1 OGTT appointment Anti D appointment

														Parent Education dates
4	28	✓	✓	✓	✓	✓	✓ FBC, G&S + ferritin	✓		✓	✓		Discuss contraception	Ensure has had OGTT & anti D if required Update weight
5	32	✓	✓	✓	✓	✓				✓	✓		Signpost or discuss Birth Preferences	
6	34	✓	✓	✓	✓	✓	✓ (or at 36) FBC + ferritin			✓	✓		Signpost or discuss Birth Preferences	
7	36	✓	✓	✓	✓	✓	✓ (if not at 34) FBC + ferritin		✓	✓	✓		Discuss Birth Preferences Discuss suitability for CMU/AMUs and confirm preference for place of birth Consider discussion membrane sweep and IOL +/- leaflets	Update weight
8	38	✓	✓	✓	✓	✓				✓	✓		Discuss membrane sweep and IOLs +/- leaflet If individualised	

													plan indicates reappoint at 39 weeks for Membrane sweep otherwise reappoint at 40 weeks	
9a	39	✓	✓	✓	✓	✓				✓	✓			Membrane Sweep
9b	40	✓	✓	✓	✓	✓				✓	✓		Offer IOL +/- book IOL	Offer membrane Sweep
10	41	✓	✓	✓	✓	✓				✓	✓		Offer IOL +/- book IOL Discuss and arrange plan of care if IOL declined	Offer membrane Sweep

**Comment from Dr Jane Richmond, Clinical Director, GG&C, Consultant Obstetrician and Gynaecologist, Queen Elizabeth University Hospital

'The NICE guideline *Inducing Labour* (2021) recommends discussion and offer of a membrane sweep at antenatal visits after 39+0 weeks. This should include discussion that membrane sweeping might make it more likely that labour will start without the need for additional pharmacological or mechanical methods of induction.

All low risk women can be offered a membrane sweep in community clinics from 39+0 weeks, following a risk assessment, with the offer of a further sweep if labour does not start spontaneously following the first sweep.'