

## Pregnancy visit schedule for shared maternity care

## Implementation Tool

Some women will have had initial visit with their Shared Maternity Care Affiliate (SMCA). Some may be referred out to a SMCA after Booking, in which case comprehensive notes need to be faxed to SMCA after MAC visit. Any queries re process can be directed to Shared Care Coordinator (SCC) [sharedcarecoordinator@monashhealth.org](mailto:sharedcarecoordinator@monashhealth.org) Mob: 0466 412 885 Fax: 9554 8188.

HOSPITAL Midwife Telehealth	10-12 weeks	<ul style="list-style-type: none"> <li>Document history/psychosocial assessment and review investigations performed.</li> <li>Discuss and refer for outstanding screening investigations including aneuploidy screening with <b>copy to: SMCA name and Provider number</b></li> <li><b>Post to patient:</b> pathology form, team wallet, handheld record (MRF03) chart &amp; tape measure</li> <li><b>Fax to SMCA:</b> BOS printed copy (MRF01 page 1 and 2)</li> </ul>
SMCA Telehealth +/- Face to face	16-18 weeks	<ul style="list-style-type: none"> <li>Review faxed hospital pregnancy (BOS) record*</li> <li>Check results of investigations*</li> <li>Offer influenza vaccine if not already given</li> <li>Perform BP (if none documented)</li> <li>Check taking aspirin if mod - high <a href="#">preeclampsia risk</a></li> <li><b>Provide referral for 20-22 week ultrasound; copy to:</b> Shared Care Coordinator Fax: 9554 8188.</li> </ul>
SMCA Telehealth	22 weeks	<ul style="list-style-type: none"> <li><b>Check morphology ultrasound result</b></li> <li>Offer pertussis vaccination</li> <li><b>Provide referral for 26-28 week investigations with copy to:</b> Shared Care Coordinator Fax 9554 8188</li> </ul>
HOSPITAL Face to face	28 weeks	<ul style="list-style-type: none"> <li>Pregnancy check and document in handheld record.</li> <li>Full physical check if not yet performed.</li> <li>Check results of investigations and arrange GDM referrals if necessary</li> <li>Instruct women on <a href="#">self-measuring SFH</a> importance of fetal movements, sleeping on side</li> <li>Give Anti D prophylaxis if Rh negative.</li> <li>Offer pertussis vaccination if not already given.</li> <li>Discuss mode of birth if previous caesarean section (CS)</li> <li>Confirm suitability to remain in shared care</li> </ul>
SMCA Telehealth	31 weeks	<ul style="list-style-type: none"> <li>Ask about fetal movements and preeclampsia symptoms</li> <li>Check BP and SFH self-measurements</li> <li>If concerns re growth or have not done home BP check, will need F2F check</li> </ul>
SMCA Telehealth	34 weeks	<ul style="list-style-type: none"> <li>Ask about fetal movements, growth and preeclampsia symptoms</li> <li>Check BP and SFH self-measurements</li> <li>If concerns re growth or have not done home BP check, will need F2F check</li> </ul>
HOSPITAL Doctor Face to face And midwife Telehealth	36 weeks	<ul style="list-style-type: none"> <li>Pregnancy check and document in handheld record.</li> <li>GBS screen and FBE/ferritin if required with <b>copy to: SMCA name and Provider number.</b></li> <li>Anti D prophylaxis if Rh negative</li> <li>Mode of birth confirmed for women with prior CS</li> <li>Organise post-dates investigations for women of South Asian background (from 39 weeks)</li> <li>Labour and postnatal planning information via <a href="https://monashwomens.org">https://monashwomens.org</a></li> </ul>
SMCA <b>**Face to face or Telehealth</b>	38/39 weeks	<ul style="list-style-type: none"> <li>Pregnancy check and document in handheld record (or check BP/FH self-measurements)</li> <li><b>Check results of GBS screen +/- FBE /Ferritin</b></li> <li>Check post-dates monitoring has been organised for women of South Asian background</li> </ul>
SMCA Face to face	40 weeks	<ul style="list-style-type: none"> <li>Pregnancy check and document in handheld record</li> <li>Check NEXT hospital appointment made</li> <li><b>Ensure patient knows to bring handheld record to hospital for birth</b></li> </ul>
Hospital visit – Doctor Face to face	41 weeks	<ul style="list-style-type: none"> <li>Post-dates management</li> </ul>

\*if not available, contact Shared Care Coordinator

\*\* could be Telehealth if has home BP, low risk of growth restriction as assessed by hospital

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**GP/SMCA SUPPORT**

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- **Maternity Shared Care Coordinator (all sites)**

For appointments or non-urgent clinical support - response in 48 hours acceptable.

E.g. arranging referral for gestational diabetes

E: [sharedcarecoordinator@monashhealth.org](mailto:sharedcarecoordinator@monashhealth.org) M: 0466 412 885

- **Pregnancy Assessment Unit - if URGENT**

E.g. decreased fetal movements, high BP, malpresentation after 36 weeks, COVID -19 confirmed or suspected; antepartum haemorrhage

**Clayton**, 9594 5032 (Select Option 3) **Dandenong**, Birth Suite 9554 8180 **Casey**, Birth Suite 8768 1755

- **Monash Genetics**

E.g. abnormal/high risk aneuploidy test

P: 9594 2026

- **Fetal Diagnostic Unit**

E.g. significant abnormality on ultrasound – phone: 9594 2343 or 9594 2171 (Mon- Fri)

**For other concerns, contact: Maternity GP Liaison Officer – Dr Rebecca Fradkin**

via Monash Health Switchboard 9594 6666 (Option 6) or [rebecca.fradkin@monashhealth.org](mailto:rebecca.fradkin@monashhealth.org)

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**RELATED PROCEDURES and GUIDELINE**

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[Pregnancy care: visits, tests, information, immunisations CG](#)

[Pregnancy tests, investigations and key visit information Procedure](#)

[Down syndrome, aneuploidy and high risk screening CG](#)

[Preparation for labour, birth, breastfeeding and early parenting](#)

[Birth after a previous caesarean](#)

[Rhesus D negative women](#)

[Aspirin to help prevent pre-eclampsia \(patient information\)](#)

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Maternity Services GP & Shared Care Committee

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<b>Document Governance</b>	
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