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Policy Title: Follow up of pregnant woman			
Department/Unite:	Policy Number:	Replaces No:	
General Clinics.	UOJ-MSA-GC-P/09		
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Revision History			
Subject	Changes made	Done by	Revision date
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- 1. CONDITIONS:
- 1.1 All Maternal Care Staff.
- 2. PURPOSE:
- 2.1 Follow up of pregnant woman at health Centre.
- 3. **DEFINITIONS**:
- 3.1 Basic Component Group: Pregnant without any "Risk Factor"
- **3.2 Specialized Care Group:** The pregnant with at least one Risk Factor positive mentioned in "Maternal & Child Passport".
- 4. <u>Related</u>

N/A

<u>Documents:</u>

- 5. POLICY:
- 5.1 Basic Component Group: Pregnant should be followed up at MSA with 4 basic ANC visits according to schedule mentioned in MC Passport. Two additional ANC visits can be offered to this group according to clinical guidelines.
- 5.2 Specialized Care Group, pregnant should be referred to hospital for follow-up.
- 5.3 Each mother should have a post-natal visit at home/PHCC/Hospital within first 97-313-36-KX FBD1AS+F/Koa0+NJKNW==-6/20/2023 12:35:02 PM week after delivery.
- 5.4 Each mother should have a post-natal visit at PHCC at 4-6 weeks after delivery (Post-partum period)
- 6. PROCEDURES:
- 6.1 When the Pregnant attends the MSA for the first visit, the following is done:
- 6.1.1The Pregnant from catchment area should inform the reception clerk of her
- 6.1.2 health record number & the reception clerk will send her health record number to Health Records department.
- 6.2 Health Records department will send her file to Maternity Clinic.
- 6.3 Visitor pregnant will report to reception & the reception clerk will send her required details to Health Records department to open her visitor file.
- 6.4 The reception clerk will request the pregnant to wait in the specified area of maternity clinic
- 6.5 The nurse measures the vital signs and weight& height & BMI &she will register it in The patient's electronic medical file.
- 6.6 The nurse measures the fundal height (if applicable).

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- 6.7 Then the nurse sends the pregnant to the doctor
- 6.8 The doctor will use the key printed to classify the pregnant for her eligibility for:
- 6.8.1"Basic Component" and PHCC follow up. BD1AS+F/KoaO+NJkNw==-6/20/2023 12:35:02 PM
- 6.8.2 "Specialized Care Group" and hospital referral
- 6.9 The "Specialized Care Group "pregnant will be referred after:
- 6.9.1 Registration at Daily Register.
- 6.9.2 Registration in Maternal Register.
- 6.9.3 Registration in Referral Register.
- 6.10 The Specialized Care pregnant may have follow-up at PHCC if:
- The "Risk Factor" is removed &her status is changed to "Basic Component"
- 6.10.1 The consultant at hospital recommends that she should be followed -up at PHCC.
- 6.10.2 Health Promotion & Tetanus Toxoid coverage.
- 6.11 For Basic component pregnant, the doctor will:
- 6.11.1 Review the information registered by the nurse. [2:35:02 PM]
- 6.11.2 Complete the medical history, physical examination &
- 6.11.3 Review lab test done and advise for completion of lab tests if applicable.
- 6.11.4 Provide due health promotion for maternal empowerment.
- 6.11.5 Intervention (Iron & Folic acid).
- 6.11.6 Assessment for referral.
- 6.11.7 Request for U/S if applicable.
- 6.11.8 Next appointment.

6.12 The doctor will send back the pregnant of "Basic component "to maternity nurse for:

- 6.12.1 Registration in the appointment & follow-up Diary.
- 6.12.2 Complete Referral form for U/S if advised by doctor.
- 6.12.3 Health promotion & maternal empowerment before she leaves the MSA.

6.13 PREGNANT COMING FOR FOLLOW-UP VISIT:

- 6.13.1 Only "Basic Component Pregnant" will come for follow-up at PHCC (4 visits),
- 6.13.2 The Pregnant from catchment area should inform the reception clerk of her

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health record number & the reception clerk will send her health record number to Health Records.

- 6.13.3 The reception clerk will request the pregnant to wait in the specified area of maternity clinic.
- 6.13.4 The nurse measures the vital signs and weight of the pregnant &BMI & she will register it in Patient record.
- 6.13.5 the nurse measures the fundal height (if applicable).
- 6.13.6 The nurse will request Urine complete analysis and FBS from the lab with priority given to pregnant women in the laboratory and treated as urgent basis.
- 6.13.7 Then the nurse sends the pregnant to the doctor with the lab results

6.13.8 The doctor will do:

- 6.13.8.1 Assessment for referral.
- 6.13.8.2 Intervention (Iron & Folic acid).
- 6.13.8.3 Provide due health promotion for maternal empowerment.
- 6.13.8.4 Request for U/S if applicable. W==-6/20/2023 12:35:02 PM
- 6.13.8.5 Next appointment.

6.13.9 The doctor will send back the pregnant of "Basic component "to maternity nurse for:

- 6.13.9.1 Registration in the appointment & follow-up Diary.
- 6.13.9.2 Complete Referral form for U/S if advised by doctor.
- 6.13.9.3 Health promotion & maternal empowerment before.

6.14 FOLLOW UP OF CASES AFTER DELIVERY:

- 6.14.1 After delivery, within first week the delivered woman from catchment area should inform the reception clerk of her health record number & the reception clerk will send her health record number to Health Records department.
- 6.14.2 HR department will send her file to Maternity Clinic.
- 6.14.3 Visitor pregnant after delivery, will also report to reception & the reception clerk will send her required details to HR department to open her file.
- 6.14.4 The reception clerk will request the mother to wait in the specified area of maternity clinic

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6.14.5 The nurse measures the vital signs and weight of the mother& she will register it in patient record.

6.14.6 The nurse will inject Tetanus Toxoid if needed.

6.14.7 Then the nurse sends the mother to the doctor.

6.14.8 The doctor will do:

6.14.8.1 Complete clinical exam according to guideline in MCH Passport.

6.14.8.2 Assessment for referral.

6.14.8.3 Intervention (Iron & Folic acid).

6.14.8.4 Provide due health promotion for Breast Feeding.

6.14.8.5 Lab Test if required

6.14.8.6 Next appointment.

7. RESPONSIBILITIES 7.1 Maternity Care Physician.

7.2 Maternity Care Nurse.

8. Appendix: 8.1 The model of educating the patients and their families.

9. **REFERRANCES:** 9.1 Ministry of Health Manual for Dental clinic.

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