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| **SCHEDULE for ANTE-NATAL PATIENTS****KELSO HEALTH CENTRE** |
| **WEEK** | **SEEN BY GP/MIDWIFE/****CONSULTANT** | **LABORATORY TESTS** | **COMMENTS** |
| 10 - 12 | Midwife | Full blood countBlood sugarBlood groupVDRLRubellaHepatitis BMSUV ZosterHIV | Ready Steady BabyBookExemption FormBounty BookEmma’s DiaryScreening Leaflets |
| 12 - 14 | G.P. |  |  |
| About 16+ | K.H.C. ScanConsultant | Screening to check the accuracy of your datesand for other abnormalitiesto measure the risk ofDown’s Syndrome andSpina Bifida |  |
| 18 – 22 | Midwife | Fetal Detail Scan | At Pregnancy Assessment Unit, BGH. |
| 20 | Midwife |  | Discuss Parentcraft Classes - Feeding |
| 24 | G.P. |  | Mat B1From 20 weeks onwards |
| 28 | Midwife | Full blood countBlood sugarAntibody check if Rh Negative |  |
| 30 | Consultant |  |  |
| 32 | G.P. |  |  |
| 34 | Midwife | Full blood countAntibody Screenon all patients |  |
| 36 | Midwife |  | Vitamin K LeafletPool Labour |
| 37 | G.P. |  |  |
| 38 | Midwife | FBC on any patient if Hb has been <10g/dl |  |
| 39 | Midwife |  |  |
| 40 | Consultant |  | I.O.L. Date |
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| PLEASE BRING A SPECIMEN OF URINE WITH YOU TO ALL APPOINTMENTS |