



Pregnancy Testing and Counseling

DEFINITION	<ol style="list-style-type: none"> 1. Providers of family planning services should offer pregnancy testing and counseling services as part of core family planning services. Pregnancy testing is a common reason for a client to visit a provider of family planning services. Approximately 65% of pregnancies result in live births, 18% in induced abortion, and 17% spontaneous fetal loss. Among live births, only 1% of infants are placed for adoption within their first month of life. 2. A Title X project may not perform, promote, refer for, or support abortion as a method of family planning, nor take any other affirmative action to assist a patient to secure such an abortion. Referral for abortion may be made in cases of medical emergencies, or in the case of incest or rape. 3. A Title X project may not use the provision of any prenatal, social service, emergency medical, or other referral, of any counseling, or of any provider lists, as an indirect means of encouraging or promoting abortion as a method of family planning. 4. The list of licensed, qualified, comprehensive primary health care providers (including providers of prenatal care) may be limited to those that do not provide abortion, or may include licensed, qualified, comprehensive primary health care providers (including providers of prenatal care), some, but not the majority, of which also provide abortion as part of their comprehensive health care services. Neither the list nor project staff may identify which providers on the list perform abortion. 5. Because Title X funds are intended only for family planning, once a client served by a Title X project is medically verified as pregnant, she shall be referred to a health care provider for medically necessary prenatal health care. 6. In cases in which emergency care is required, the Title X project shall only be required to refer the client immediately to an appropriate provider of medical services needed to address the emergency. 7. Nothing here shall be construed as prohibiting the provision of information to a project client that is medically necessary to assess the risks and benefits of different methods of contraception in the course of selecting a method, provided that the provision of such information does not promote abortion as a method of family planning. (42 CFR 59.14)
SUBJECTIVE	<p>Female history should include:</p> <ol style="list-style-type: none"> 1. Reproductive Life Plan 2. LMP 3. Obstetric history including any past pregnancy complications 4. Medication use, including review of listed medication use safety in pregnancy 5. Any condition that exposes a woman to increased risk as a result of a pregnancy: (from 2016 MEC table) <ol style="list-style-type: none"> a. Sickle cell disease b. Breast cancer c. Cystic fibrosis d. Severe cirrhosis e. Diabetes with complications f. Endometrial cancer g. Epilepsy



	<ul style="list-style-type: none">h. Gestational trophoblastic diseasei. History of bariatric surgeryj. Ischemic heart diseasek. Known thrombogenic mutationsl. Ovarian cancerm. Postpartum cardiomyopathyn. Solid organ transplanto. Strokep. Systemic Lupus Erythematosusq. Tuberculosisr. Fibrosis of the livers. Complicated valvar heart disease <ul style="list-style-type: none">6. Family history7. Partner violence assessment8. Alcohol, nicotine, and other drug use assessment9. Immunization status10. Depression screen11. Screen for Zika exposure risk.
OBJECTIVE	Should include: <ul style="list-style-type: none">1. Height, weight and BMI2. BP May include: <ul style="list-style-type: none">1. Age appropriate physical exam, if indicated.2. A pelvic examination to estimate gestational age if LMP date is uncertain.3. Assessment of Fetal Heart Tones if > 10 wk. LMP
LABORATORY	Must include: <ul style="list-style-type: none">1. Qualitative urine pregnancy test May include: <ul style="list-style-type: none">1. STI/HIV screening, as indicated2. Pap screening, as indicated
ASSESSMENT	Pregnancy testing and counseling
PLAN	Pregnant clients may be offered neutral, factual information, and non-directive pregnancy counseling, when provided by a physician or Advanced Practice Provider. All Title X clinical staff may provide information regarding: <ul style="list-style-type: none">1. maintaining the health of the mother and unborn child during pregnancy as recommended by major medical organizations.2. normal early pregnancy symptoms, signs of miscarriage or ectopic pregnancy3. Rh considerations if client experiences spotting or bleeding.4. prenatal safety issues including domestic violence risks and depression risks.
CLIENT EDUCATION	Positive Pregnancy Test discussion may include: <ul style="list-style-type: none">1. Prenatal counseling in accordance with the recommendations of professional medical associations, such as ACOG, AAFP2. An estimation of gestational age so that appropriate counseling can be provided.3. Information about maintaining the health of the mother and unborn child during pregnancy4. Normal signs and symptoms early pregnancy and to report any concerns to a provider for further evaluation



	5. Review of pregnancy danger signs (to include ectopic and miscarriage)
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	<ol style="list-style-type: none"> 1. Medications that might be contraindicated in pregnancy 2. Encourage to take daily prenatal vitamin that includes folic acid 3. Avoid smoking, alcohol, and other drugs 4. Review nutritional advice to follow during pregnancy (fish that might have high levels of mercury, foods to avoid) 5. Avoidance of x-ray exposure 6. Review medical and social programs available, if applicable, (such as WIC, OPOPor other prenatal and parenting public health programs, Medicaid, area adoption agencies, and other social, financial and medical services programs). 7. Review of pregnancy support system (partner, family, friends), with referral to appropriate counseling or other supportive services as needed. 8. Refer for needed STD screening (including HIV) and vaccinations if there might be delays in obtaining prenatal care 9. Offer family planning services postpartum. <p>Negative Pregnancy Test discussion may include:</p> <ul style="list-style-type: none"> • Contraceptive options counseling for those who do not want to become pregnant • Reproductive Life Plan • Services to help achieve pregnancy or basic infertility services, as appropriate for those trying to become pregnant • Preconception health and STD services
<p>CONSULT/ REFER TO PHYSICIAN</p>	<ol style="list-style-type: none"> 1. If ectopic pregnancy or other pregnancy abnormalities or problems are suspected refer for immediate diagnosis and management. 2. Individuals with identified high risk health or social problems prior to pregnancy. 3. Referral to appropriate medical and social providers (with the exception of referrals for abortion as mentioned above) of follow-up care should be made at the request of the client,as needed.

References:

1. Curtis KM, Tepper NK, Jatlaoui TC, Berry-Bibee E, Horton LG, Zapata LB et al, U.S Medical Eligibility Criteria for Contraceptive Use 2016, MMWR Recomm Rep 2016; 65(3): 1-96 [US Medical Eligibility Criteria \(US MEC\) for Contraceptive Use, 2016 | CDC](#)
2. Hatcher RA, Nelson A, Trussell J, Cwiak C, Cason P, Policar MS, Edelman A, Aiken ARA, Marrasso J, Kowel D, eds. Contraceptive Technology. 21 edition. New York, NY: Ayer Company Publishers, Inc., 2018. pp 747-769
3. Gavin, L., Moskosky, S., Carter, M., et al. Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs. MMWR 2014; 63(4):1-60. [rr6304.pdf \(cdc.gov\)](#)
4. [Update: Providing Quality Family Planning Services — Recommendations from CDC and the U.S. Office of Population Affairs, 2017 | MMWR](#)
5. [Pregnancy Testing and Counseling | Reproductive Health National Training Center \(rhntc.org\)](#)
6. [Nutrition During Pregnancy | ACOG](#)

Web sites verified 6/10/2021