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Common Tests During Pregnancy Early- and Mid- Pregnancy Tests

Test	What's Tested	Information	Comments
Blood type and Rh factor	<i>Blood</i>	Rh negative woman with Rh positive partner may develop antibodies that could harm the baby. This is checked again during labor.	If mother is Rh negative and baby is Rh positive, the mother is given a Rhogam shot at 28 weeks and sometimes after birth.
CBC(Complete blood count)	<i>Blood</i>	Checks baselines blood count.	
Chlamydia*	<i>Swab from cervix or urine</i>	Common bacterial infection; may pass to the baby at birth.	Many women have no symptoms. Treated with antibiotics.
Gonorrhea*	<i>Swab from cervix or urine</i>	Bacterial infection; may pass to the baby at birth.	Many women have no symptoms. Treated with antibiotics.
Group B strep (Beta strep)	<i>Vaginal and rectal cultures; results are checked during labor</i>	May infect amniotic fluid; may pass infection to baby at birth.	Many have no symptoms. Treated with antibiotics in labor. If bacteria is present in the vagina or urine, or the mother has risk factors (such as PTL or ROM), she is treated with antibiotics. If the mother test positive, the baby may need to be observed for the first day or two.
Hematocrit	<i>Blood</i>	Checks for low red blood cell count (anemia). Also done after birth following blood loss during delivery.	Many need iron supplements.
Hepatitis B*	<i>Blood</i>	Infection of liver; may pass to the baby if infection is active.	We recommend all babies received the first of 3 vaccinations on the day of discharge.
Herpes (oral or genital types)	<i>Blood</i>	Some risk of passing it to the baby, especially when first infected; women may need treatment.	1 in 3 women have genital herpes; test can show past exposure, even when there are no symptoms.
HIV*	<i>Blood</i>	May not have symptoms; can pass onto to baby. Can progress to AIDS.	Mother can be treated to help prevent passing infection to the baby.
Pap smear	<i>Swab from cervix</i>	Screens for pre-cancerous or cancerous conditions.	Follow-up exams and/or treatment after pregnant. Get test every year.
Rubella	<i>Blood</i>	May pass the infection to the baby and cause birth defects.	If test negative, mother is given vaccine after the birth. If immune, there is no risk to the baby.

Common Tests During Pregnancy Early- and Mid- Pregnancy Tests (cont.)

Syphilis*	<i>Blood</i>	May cause stillbirth or birth defects and illnesses.	Treated with antibiotics.
Ultrasound	<i>Sound waves show image of baby in uterus</i>	Helps confirm due date and checks baby's position and growth.	Anatomy and growth is best seen after 18 weeks.
Urinalysis	<i>Urine</i>	Checks for bladder infection or kidney disease, which may be associated with preterm birth, and can develop into a kidney infection if not treated.	Treated with antibiotics.

* sexually transmitted.

Late- Pregnancy Tests

Test	What's Tested	Information	Comments
Fetal movement counting	<i>Feeling and counting the baby's movements</i>	These movements are one way to assess the baby's health.	Begin counting at 26 weeks of your pregnancy. Your baby should move at least 10 or more times in a 2 hour period daily.
Glucola	<i>Blood (after drinking special sugary drink)</i>	Screening test for diabetes in pregnancy (gestational diabetes).	Done weeks 26 to 28. If elevated, will have 3-hour tolerance test.
Nonstress test	<i>External electronic fetal monitor used</i>	Baby's heart rate recorded for 20 to 30 minutes to check changes in response to baby's movement.	Often done to assess your baby's well-being.

After- Pregnancy Tests

Test	What's Tested	Information	Comments
Pap smear	<i>Swab from cervix</i>	Screens for pre-cancerous or cancerous conditions.	Done at the 6-week postpartum check-up, then annually.
2-hour glucose tolerance test	<i>Blood (after drinking sugary drink)</i>	Screens for diabetes, and gestational diabetes in pregnancy.	Done at 6-week visit.
Breast self-exam	<i>You check your breast tissue for lumps or changes</i>	You may feel lumps or see changes that could be pre-cancerous or cancerous and may need further testing.	Do self-exam every month after your period, or on the last date of the month if not menstruating; report any lumps to your care provider.