

Hear Her: Pregnancy Care in any Trimester

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Indian Country Care and Access for Pregnant People ECHO

Cases we've all seen...



- 22yo G1P0 with vaginal bleeding and a positive pregnancy test in the emergency room. Now what?
- 35yo G4P2012 at unknown gestation seeking treatment for opioid use disorder. Now what?
- 25yo, visibly pregnant, being evaluated in the emergency room after motor vehicle accident. Now what?





INDIAN + COUNTRY

ECHO

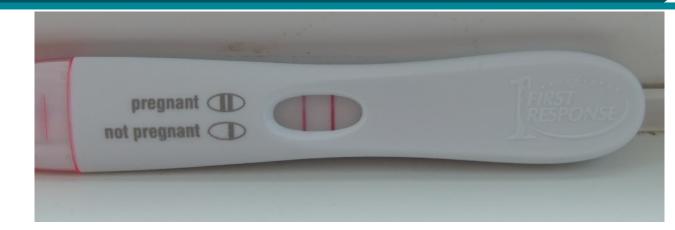
Outline & Objectives

- To establish a broad overview of pregnancy care in each trimester, with special attention to "don't miss" tests, diagnoses, and evaluations in either the ER or outpatient settings
 - To review special considerations including:
 - Pregnancy intendedness in a post-Roe world
 - Pregnancy in the setting of prior cesarean
 - Pregnancy in the setting of substance use disorder
- To understand the importance of intersectionality, racism/colonialism, and stigma on prenatal care for American Indian/Alaska Native, Native American, and Indigenous pregnant people



Pregnancy Presentations

- Vaginal bleeding
- Nausea and vomiting
- Abdominal pain
- Positive pregnancy test
 @ home
- Mental health deterioration
- Presentation to ED for non-ObGyn concern w incidentally positive pregnancy test

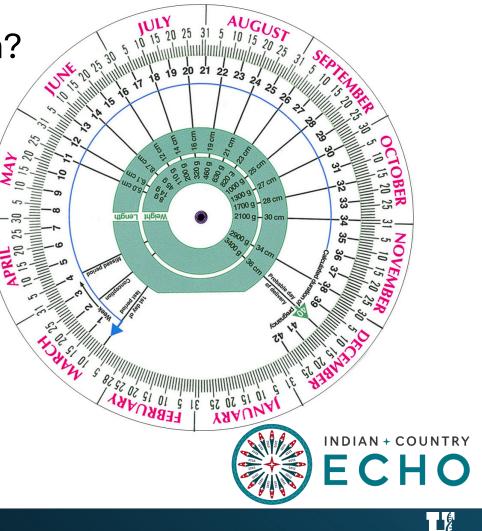




All the regular history....plus!

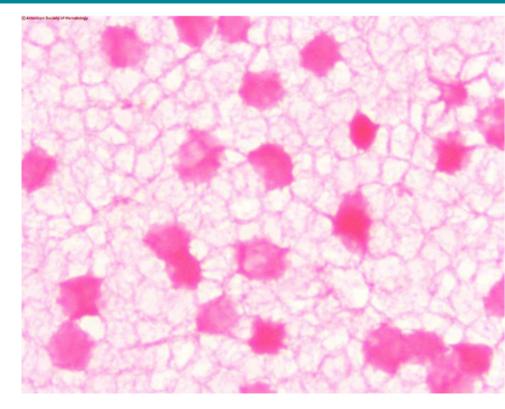


- Pregnancy dating LMP? Unknown?
- History of cesarean
 - Cesarean ectopic
 - Placenta previa/accreta
- Screening IPV, STI, and SUD
- Pregnancy intendedness
 - Document clearly and without incriminating details



Labs, labs, labs

- Rh status
 - NEW INFO: <12wks, DO NOT NEED RhoGAM for threatened Ab
 - Unlikely to need/vs only need 50mcg for spontaneous Ab, medication Ab
- RPR/Treponemal test
- HIV
- Hep B/C
- Urine culture
- CBC





Prenatal care by trimester

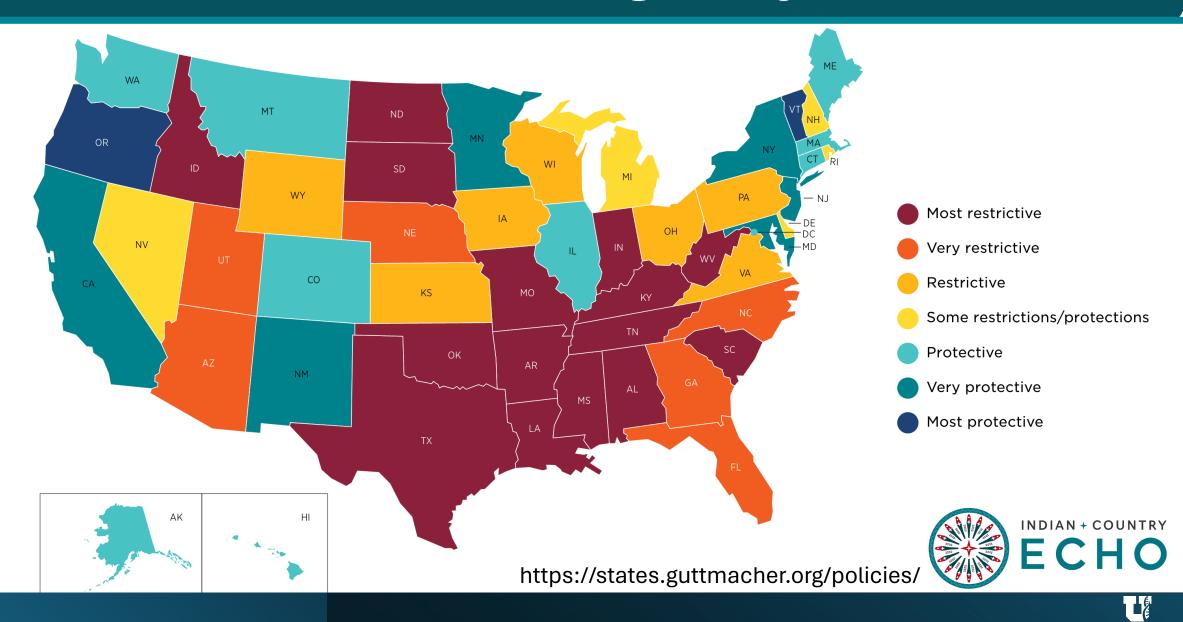


- First trimester
 - Dating US if any concern
 - First trimester labs
 - STI, SUD, IPV, MH screens
- Second trimester
 - Anatomic survey
 - STI, SUD, IPV, MH screens
- Third trimester
 - Glucose tolerance test
 - Anemia screening
 - STI, SUD, IPV, MH screens

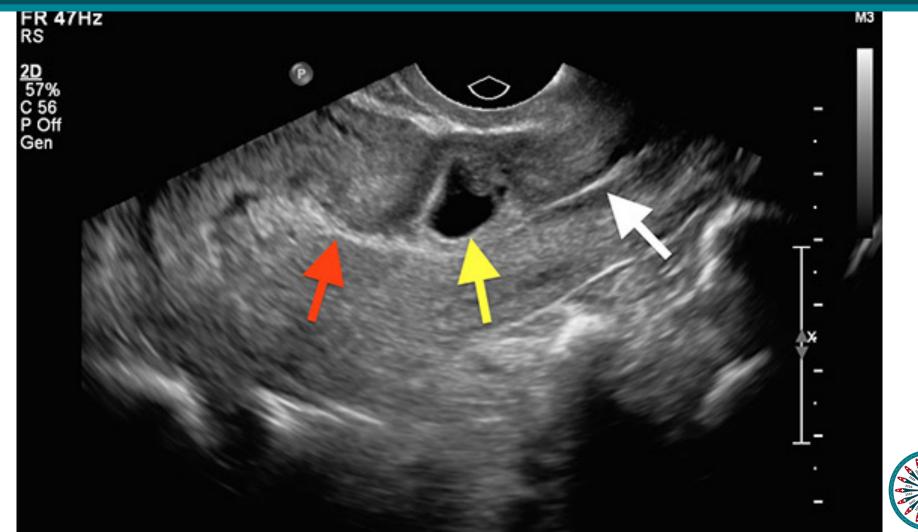
- +/- growth ultrasound
- RhoGAM PRN
- Any time
 - Vaccines as due
 - Pap
 - Contraception
 - STI, SUD, IPV, MH screens



Special considerations – Pregnancy Intendedness

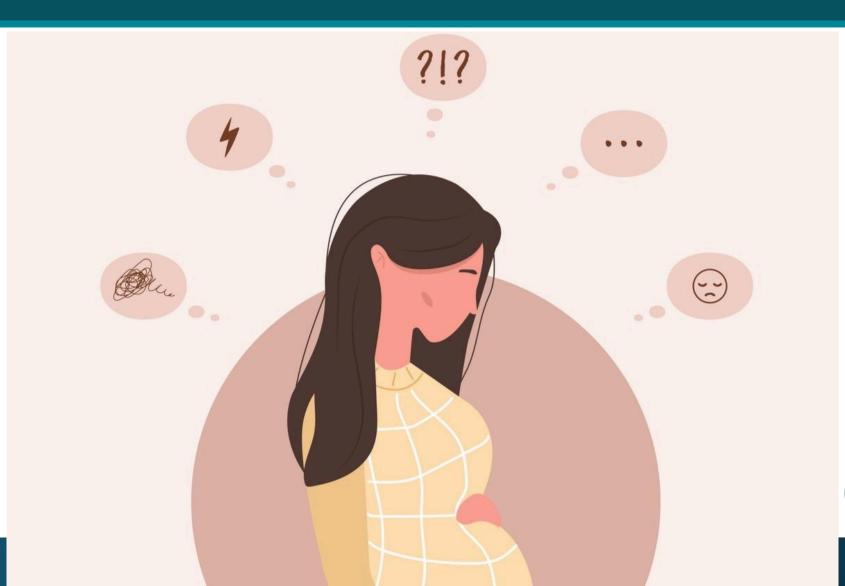


Special considerations – History of Cesarean





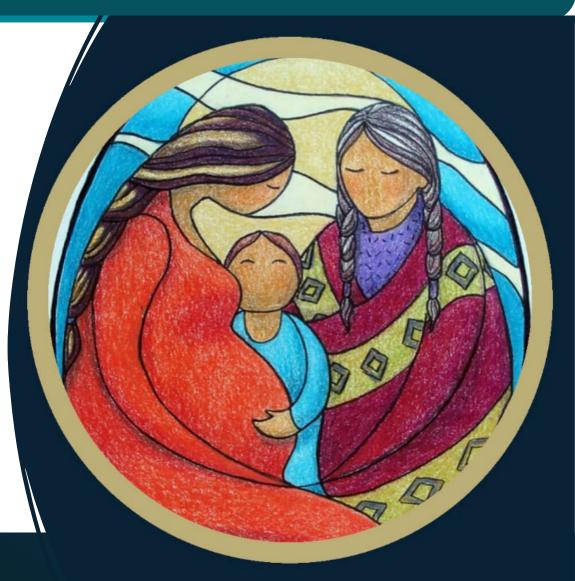
Special considerations – SUD or MH concerns





Intersectionality and Structural Racism/Colonialism

- Qualitative data concern about predominantly White health care institutions, provider assumptions, stigma, maternalinfant dyad separation
- Quantitative data bears out the reasons for concern
 - PRAMS findings
 - Maternal-infant dyad separation
 - Non-reunification
- Lack of culturally-responsive or culturally-integrated care



Warm hand-offs



- Critical to success
- Varies from setting to setting
- Develop relationships

