

# *North Carolina Women's Hospital*

## **Routine Prenatal Laboratory Studies**

**This table provides information about laboratory tests routinely done in pregnancy.**

### **Tests Done At Early Prenatal Visit**

Blood Group and Rh Testing	Some maternal blood types are associated with risks to the baby, which can be prevented with early identification and follow-up.
Blood Antibody Screen	Tests for red cell antibodies in the mother's blood.
Rubella Testing	Rubella infections in pregnancy can harm the baby; if a woman is not immune to rubella, we recommend rubella immunization in the postpartum period.
Hepatitis B Surface Antigen (HBSAg)	Children of chronic carriers of Hepatitis B need special immunizations at birth to prevent hepatitis infections.
Complete Blood Count (CBC)	Tests for anemia
Urine Culture	Urinary tract infections can increase in pregnancy
HIV: Recommended (requires consent)	Identification of women with HIV infection is important to treat her and to prevent the baby from becoming infected.
Syphilis Testing	Identification of women with syphilis is important to treat her infection and to prevent the baby from becoming infected. <b>State Law</b>
Varicella Testing	Done on women with no known history of chicken pox or immunization for chicken pox. If a woman is not immune, we recommend varicella immunization in the postpartum period.
Cystic Fibrosis Carrier Testing (optional)	Cystic Fibrosis is a lung and digestive disease that is inherited when both parents carry the gene. The risk of carrying the gene is different among races and ethnicities. There is a blood test available to see if you and your partner carry the gene. Not all health insurance plans cover testing. Talk to your provider to learn more about testing.
Sickle Cell Carrier Testing (optional)	Sickle cell disease is a problem of the blood cells that is inherited when both parents carry the gene. The risk of carrying the gene is different among races and ethnicities. There is a blood test available to see if you and your partner carry the gene.
<b>Tests Done During First Speculum And Pelvic Examination</b>	
Pap Smear	This screening test for cervical cancer is done if there's been no pap test in the past year.
Gonorrhea Culture	Screening for asymptomatic infection. Treatment lowers the risk of infection of the baby and preterm delivery. <b>State Law</b>
Chlamydia PCR	Screening for asymptomatic infection. Treatment lowers the risk of infection of the baby and preterm delivery. <b>State Law</b>

**Turn Over for Tests Done Later in Pregnancy**

### Tests Offered Later In Pregnancy

FIRST Testing	11-14 weeks (optional)	The FIRST Screening test is done to identify pregnancies at higher risk for Down Syndrome, Trisomy 18 and some heart problems. Please refer to the UNC Patient Education sheet or its pamphlet entitled "First Trimester Serum and Ultrasound Combined Screen" for more information.
Maternal Serum Screening	15-18 weeks (optional)	Tests for Alphafetoprotein, Estriol, and hCG which in various combinations are associated with increased risk for Down syndrome and some birth defects such as open neural tube defects.
Diabetes Screening	High risk patients: 1st trimester Routine: 24- 28 weeks	Screens for increased risk of gestational diabetes in pregnancy; if screen is positive, additional tests are necessary.
Syphilis	24-28 weeks	State Law
Gonorrhea (if less than 26 years old)	28-38 weeks	State Law
Chlamydia (if less than 26 years old)	28-38 weeks	State Law
Group B Strep (GBS)	36 weeks	Test to determine if mother carries the GBS bacteria so that antibiotics can be given in labor to prevent neonatal infection.
Repeat Rh Antibody Screen	For Rh negative women	To guide use of rhogam to prevent Rh disease in the fetus.
HIV: Recommended (requires verbal consent)	Around 30 weeks	Identification of women with HIV infection so that treatment can be started to decrease the likelihood of the baby becoming infected.

### Tests Done In Labor & Delivery

Complete Blood Count (CBC)	Part of routine admission panel
Blood Type and Antibody Screen	Part of routine admission panel
Syphilis	Part of routine admission panel
HIV	It is <b>State Law</b> that if a woman is not tested at least once during her pregnancy, she must be tested at labor and delivery or her infant will be tested before discharge.

*Reviewed in Division of Maternal-Fetal Medicine, August 1, 2006; revised February 2008.*