

ROUTINE PRENATAL CARE CHECKLIST

INITIAL VISIT THROUGH 2ND TRIMESTER

- Assess pregnancy symptoms
- Establish pregnancy dating
- Complete prenatal laboratory testing
 - Consider urine drug testing with consent
- Complete full patient medical history
 - Assess substance use/substance use disorder history
 - Assess other substance use, including tobacco and cannabis
 - Review prior treatments and periods of recovery
 - Assess OUD/SUD related comorbidities (Hepatitis C, cardiac complications)
- Complete pregnancy history
 - Assess if other births were in the setting of OUD/SUD and treatments
 - Assess for birth/health care experiences, including trauma
 - Assess for prior pregnancy and birth complications including those related to OUD/SUD
 - Assess for prior peripartum pain management experiences
- Complete full mental health history
 - History of mental health diagnoses and prior treatments (medication, therapy, hospitalizations)
 - Mental Health Screenings
 - Depression/Anxiety (e.g., EPDS)
 - History of trauma/ IPV (PSC-5)
- Complete screening for unmet social needs
 - Consider referrals to local organizations
 - Consider adjustments to make care more accessible (telemedicine, home monitoring)
- Review MOUD treatment options
 - Assess for dose adequacy/management of cravings



KEY POINT:

ACOG recommends universal drug screening for all patients.

Urine drug testing should never be done without the patient's permission.



KEY POINT:

More than 90% of individuals with OUD used more than 2 substances in the same year.

Polysubstance use may contribute to risk of overdose, traumatic injury, infectious disease, and mortality.⁶



KEY POINT:

80% of patients with OUD/SUD have concurrent Mental Health Conditions. Supporting mental health is crucial to supporting recovery!