

North Carolina Women's Hospital

Routine Prenatal Laboratory Studies

If you have questions about these tests, your provider will give you more information.

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 in order to prevent risk to infant.
Rubella (German Measles) 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 infection.
Complete Blood Count (CBC)	Test for anemia
Urine Culture	Urinary tract infections can increase in pregnancy
HIV State Law	Screening for HIV infection is important to allow early treatment of the mother, and to prevent the baby from becoming infected. If infant is delivered to a woman whose HIV status is unknown at time of delivery, the infant shall be tested for HIV.
Syphilis Testing (RPR) State Law	Screening for syphilis is important to allow early treatment of the mother, and to prevent the infant from becoming infected.
Varicella (Chicken Pox) Testing	Screening of women without history of or immunization for chicken pox. If a woman is not immune, we recommend immunization in the postpartum period.

Tests Done During First Pelvic Exam

Pap Smear	Screening test for cervical cancer.
Gonorrhea Test State Law	Screening for infection. Treatment of infection lowers the risk of infection of the baby and preterm delivery.
Chlamydia PCR Test State Law	Screening for infection. Treatment of infection lowers the risk of infection of the baby and preterm delivery.

Tests Done Later in Pregnancy

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 State Law	28-38 weeks	Women less than 26 years old should be screened at the first prenatal visit and in the third trimester. Women of all ages with new sexual partners or multiple partners should also be screened. Those who have Gonorrhea should get appropriate treatment and be re-tested 3-4 months after completing treatment.
Chlamydia State Law	28-38 weeks	Women less than 26 years old should be screened at the first prenatal visit and in the third trimester. Women of all ages with new sexual partners or multiple partners should also be screened. Those who have Chlamydia should get appropriate treatment and be re-tested 3-4 months after completing treatment.
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 infection of baby.
Repeat Rh Antibody Screen	For Rh negative women	Rhogam is needed for treatment to prevent Rh disease in the fetus.
HIV: Recommended (requires verbal consent)	Around 30 weeks	Screening for HIV infection is important to allow early treatment of the mother, and to prevent the baby from becoming infected. If infant is delivered to a woman whose HIV status is unknown at time of delivery, the infant shall be tested for HIV.

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 State Law	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.

Options Screening Tests Offered in Pregnancy

Cystic fibrosis carrier screening	Any time	Cystic fibrosis is a chronic health condition that affects the lungs and digestive system. This condition is most common in Caucasians. Cystic fibrosis screening is offered to all ancestry groups. Screening includes a blood test to determine if you are a carrier of the condition. Genetic counseling is recommended if results are abnormal.
Hemoglobinopathy carrier screening	Any time	Hemoglobinopathies are conditions that affect the function or structure of blood cells and include conditions like sickle cell disease. Screening for hemoglobinopathies is offered to individuals who have African American, Southeast Asian, or Mediterranean ancestry. Screening includes a blood test to determine if you are a carrier of the condition. Genetic counseling is recommended if results are abnormal.
Jewish ancestry carrier screening	Any time	Certain genetic conditions are more common in individuals with Eastern European (Ashkenazi) Jewish ancestry. This screening is recommended if one of the partners has Jewish ancestry. Screening includes a blood test to determine if you are a carrier of any of the conditions. Genetic counseling is recommended if results are abnormal.
First trimester screening	11-14 weeks	A routine screening test that is used to determine if there is an increased risk for Down syndrome, trisomy 18, or trisomy 13 in the pregnancy. Screening includes a blood test and an ultrasound.
Second trimester screening	15-22 weeks	A routine screening test that is used to determine if there is an increased for Down syndrome, trisomy 18, or spina bifida in the pregnancy. Screening includes a blood test.
Non-invasive prenatal testing (NIPT)	After 10 weeks	A new screening test that is ONLY offered to women who have an increased risk of Down syndrome, trisomy 18, or trisomy 13 in the pregnancy (Risk factors include: maternal age 35 and older, family history, or abnormal screening results). Genetic counseling is completed before the blood test.

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