

Michigan
COMMUNITY INTEGRATED PARAMEDICINE
Treatment Protocol
PRENATAL CARE

Initial Date: November 19, 2020

Revised Date:

Section 11-59

This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: To provide additional guidelines beyond the CIP General Assessment and Care for evaluating, caring for and educating patients and families who are pregnant.

- I. Follow **CIP Patient General Assessment and Care protocol**
- II. Obtain additional vital signs, history, and diagnostics pertinent to condition and/or as ordered by physician which may include:
 - a. Vitals:
 - a. Blood pressure both manual and automated
 - b. Weight
 - c. Fetal heart tones
 - d. Fundal height
 - b. History:
 - a. Substance use current and past (tobacco, illicit, use and/or abuse of prescribed or non-prescribed)
 - b. Domestic violence current and past
 - c. Prenatal care history/compliance
 - d. Vaginal bleeding
 - e. Gestational diabetes
 - f. Pregnancy induced hypertension or preeclampsia
 - g. Postpartum depression
 - c. Diagnostics:
 - a. Depression screening
- III. Care will not include vaginal examinations with the exception of impending delivery or hemorrhage
 - a. Cervical and pelvic examinations to check for dilation are not permitted
- IV. On-scene medication administration may include:
 - a. Use of approved MCA protocols and medications up to the extent of standard paramedic treatment according to protocol.
 - b. Assist with patient's prescribed home medications that are not included in standard EMS treatment protocols
- V. On-scene education and suggested support sources may include:
 - a. Nutrition and supplements
 - b. Breastfeeding resources
 - c. Postpartum depression support
 - d. Newborn safety including:
 - a. Safe sleeping recommendations/resource
 - b. Car seat safety
 - c. Infant CPR
 - d. Shaken baby syndrome