

C2.14 – PREGNANCY TEST VISIT

Policy

A pregnancy test may be performed at the client's request or if the Clinical Service Provider deems it necessary.

Procedure

Determine Client's Reason

Determine client's reason for suspecting pregnancy as well as onset of potential signs/symptoms of pregnancy.

Obtain the following information and/or update regardless of the results:

- Obstetrical history.
- Medical history.
- Menstrual history (with emphasis on LMP).
- Contraceptive history and current status.
- Date of last unprotected intercourse.
- Sexual history, sexual violence and reproductive coercion.
- Current medication, prescription, over-the-counter drug use.
- Alcohol, tobacco and illicit or prescription drug use, as indicated.

Education and Referral

Based the results of the pregnancy test:

1. Interpret the test results and exam findings.
2. Consider possible reasons for false negative results.
3. If a possibility exists that it is too early to confirm or rule out a pregnancy:
 - a. The client should be advised to return to the clinic in two (2) weeks for a repeat pregnancy test.
 - b. Discontinue hormone contraceptive methods if early gestation is probable, as indicated. Provide an alternative contraceptive, such as foam, condoms, sponge or diaphragm if the client does not desire pregnancy at this time. A Clinical Services Provider may choose to use reasonable certainty that the client is not pregnant and allow the client to continue hormone contraception if the client meets any of the following criteria and has been educated about the risks:
 - i. Less than 7 days from start of normal menses;
 - ii. Consistently and correctly using a reliable method of contraception;
 - iii. Less than 7 days after spontaneous or induced abortion;
 - iv. Within 4 weeks postpartum;
 - v. Is fully or nearly fully exclusively breastfeeding and amenorrhea and less than 6 months postpartum; or has not had intercourse since the last normal menses.
4. Those clients who have a positive pregnancy test may have a pelvic exam to corroborate the test results. If the pregnancy test and/or the exam findings are positive for pregnancy, the following pregnancy options counseling and information should be rendered and documented:
 - Prenatal care and delivery with infant care/parenting or, foster care/adoption; and
 - Pregnancy termination.
 - o If requested to provide such information and counseling, provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with the respect to any option(s) about which the

- pregnant client indicates they do not wish to receive such information and counseling.
- o Assessed for any risk factors which might adversely influence the pregnancy and provide appropriate education.
5. Clients with negative pregnancy test results who wish to become pregnant:
 - Instruct regarding timing of intercourse. Intercourse prior to ovulation is important to conception. While sperm can survive over 72 hours in the female genital tract, the ovum has a life expectancy of only 12 hours if it is not fertilized. The availability of sperm in the genital tract at or shortly after ovulation is essential. Clients should receive instruction to determine their most fertile time of the month. Natural FP techniques may be useful.
 - Women who have been trying to achieve pregnancy for more than 12 months or if the client is 35 or older with unprotected intercourse with the same partner, referral for infertility workup should be made. Clinics should maintain a resource list where services are available.
 6. Clients with negative pregnancy test results who do not wish to become pregnant should be assessed for:
 - Continued appropriateness of current contraceptive method (if applicable)
 - A contraceptive method should be provided with detailed instructions on use
 - RLP counseling should be done during this session.
 7. If ectopic pregnancy is suspected, immediately refer client for immediate medical care
 8. All clients, regardless of pregnancy test results, should be offered STI screening at the time of the pregnancy test visit.

Date Revised	September 2023
References	Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP) [2014] https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html
Additional Resources	