Iowa Department of Human Services MEDICAID PRENATAL RISK ASSESSMENT

Primary provider name Provider phone number Date								
, , , , , , , , , , , , , , , , , , ,								
Client name		Phone number		Client date	Client date of birth			
Address					Medicaid	ID number		
Gestational age at initial assessment: Weeks Date			Gestational age at rescreen:			Weeks Date		
Instructions: Write the score that applies to each		r. (* For r	sk factor definitions	and no	utrition screen,			
Risk Factor/Value	A Score Initial	Risk Fac	ctor Current Pregna	ancv/\	/alue	B1 Initial OB	B2 Rescreen 28 wks+	
Maternal age	IIIIII	Bacteriuria,* chlamydia, GC this pregnat				0.5	20 WKST	
$20-40 = 0$ $16-19 \text{ or } >40 = 4$ $\leq 15 = 10$		no = 0			yes = 3			
Education		Pyelonep	nritis *					
GED or $12 = 0$ $\leq 11 = 2$ $\leq 8 = 4$			no =	: 0	yes = 5			
Marital status		Fibroids						
married = 0 single, divorced, separated = 2			no =		yes = 3			
Height		Presenting part engaged < 36 weeks no = 0			v.00 2			
>5 feet = 0 ≤ 5 feet = 3 Prepregancy weight		I Itarina bi		: U	yes = 3			
low (BMI < 19.8) = 2 obese (BMI > 29.0) = 2		Oterine bi	eeding ≥ 12 weeks * no =	. n	yes = 4			
AB 1st trimester *		Carvical I	ength < 1 cm < 34 wee		yes = 4			
<3 = 0 ≥ 3 = 1		Cervicari	=ngti1 < 1 cm < 54 wee = no		yes = 4			
AB 2nd trimester *		Dilation ≥			y00 = 1			
none = 0 $1 = 5$ $\geq 2 = 10$			no =	= O	yes = 4			
Race		Uterine in	itability * ≤ 34 weeks		,			
white = 0 black = 2 other = 1			no =	0	yes = 4			
Cone biopsy/LEEP		Placenta	orevia at < 30 weeks					
no = 0 yes = 3			no =	: 0	yes = 4			
Uterine anomaly *		Oligohydr						
no = 0 yes = 10		Dolubude	no =	: 0	yes = 10			
Previous SGA baby no = 0		Polyhydra	no =	. n	yes = 10			
Hx preterm labor * or preterm delivery		Multiple p		- 0	yc3 = 10			
no = 0 yes = number x 10			no =	0	yes = 10+			
Bleeding gums/never been to dentist		Surgery (abdominal * ≥ 18 week	s or ce	rclage)			
no = 0 yes = 5			no =	: 0	yes = 10			
Cigarette use/day		Depression						
1 cig - 1/2 ppd = 1 > 1/2 ppd = 4		Over the past 2 weeks have you ever depressed or handless?			er felt down,			
Illicit drug use * (this pregnancy) no = 0 ves = 5		depressed or hopeless?						
no = 0 yes = 5 Alcohol use * (this pregnancy)		 Over the past 2 weeks have you felt little in or pleasure in doing things? 			it little interest			
no = 0 $yes = 2$		(to eit		- 0	ves = 10			
Initial prenatal visit *			in at 22 weeks		y 00 = 10			
< 16 wks = 0 > 16 wks = 2		_ 3 3	≥ 7 lb. =	: 0	< 7 lb. = 2			
Poor social situation *		Weight lo	SS					
no = 0 yes = 5			< 5 lb. =	0	≥ 5 lb. = 3			
Children ≤ 5 years at home		Urine pro						
$0 \text{ or } 1 = 0$ $\geq 2 = 2$			ce = 0 1+ =		> 1+ = 5			
Employment *		Hypertens	sion * or HTN medication		V00 10			
none = 0 outside school/work = 1 heavy work = 3 Last pregnancy within 1 year of present pregnancy			no = Hemoglobin	- U	yes = 10 Hematocrit			
no = 0 $yes = 1$			< 11 = 3		< 33 = 3			
Subtotal A				ubtota	al B1 and B2			
Other: Additional risk factors indicat	ina	Subtotal			Subtotal A			
need for enhanced services. (See back for example		Subtotal			Subtotal B2		+	
Points need not total 10.	,					corcon	•	
Total 1st OD Total 25 Weeks screen							ad indit-	
Total score of 10 points or more = high risk for preterm delivery. Check all enhanced antepartum management services that apply and indicate who will be the primary provider of each service.								
□ Care coordination □ Nutrition counseling								
☐ Health education ☐ Home visit								
□ Psychosocial		Oral health						
☐ High risk follow-up ☐ Medical transportation								
Signature of primary provider Date Client signature: Release of information Date								
Date of referral for WIC convices:	10	State WIC Office 1 90)O_522	.1570)				
Date of referral for WIC services: (State WIC Office – 1-800-532-1579)								

Risk Factor Definition

AB 1st trimester: More than three spontaneous or induced abortions at less than 13 weeks gestation. (Do not include ectopic pregnancies.)

AB 2nd trimester: Spontaneous or induced abortion between 12 and 19 weeks gestation.

Uterine anomaly: Bicornate, T-shaped, or septate uterus, etc.

Dental visit: Routine preventive dental care; not visit for emergency extraction, mouth trauma.

DES exposure: Exposure to diethylstilbesterol in utero. Patient who has anomalies associated with diethylstilbesterol receives points for this item and uterine anomaly.

Hx PTL: Spontaneous preterm labor during any previous pregnancies (whether or not resulting in preterm birth) or preterm delivery.

Hx pyelonephritis: One or more episodes of pyelonephritis in past medical history.

Illicit drug use: Any street drug use during this pregnancy, e.g., speed, marijuana, cocaine, heroin (includes methadone), huffing, or the recreational use of Rx or OTC drugs.

Alcohol use: Consumption of 6 or more glasses of beer or wine per week or 4 or more mixed drinks per week. Includes any binge drinking.

Initial prenatal visit: First prenatal visit at or after 16 weeks gestation.

Poor social situation: Personal or family history of abuse, incarceration, homelessness, unstable housing, psychiatric disorder, child custody loss, cultural barriers, low cognitive functioning, mental retardation, negative attitude toward pregnancy, exposure to hazardous/toxic agents, inadequate support system, low self esteem.

Employment:

Light work = part time or sedentary work or school Heavy work = work involving strenuous physical effort, standing, or continuous nervous tension, such as, nurses, sales staff, cleaning staff, baby-sitters, laborers

Bacteriuria: Any symptomatic or asymptomatic urinary tract infection, i.e., 100,000 colonies in urinalysis.

Pyelonephritis: Diagnosed pyelonephritis in the current pregnancy. (Give points for pyelonephritis only, not both pyelonephritis and bacteriuria.)

Bleeding after 12th week: Vaginal bleeding or spotting after 12 weeks of gestation of any amount, duration, or frequency which is not obviously due to cervical contact.

Dilation (Internal os): Cervical dilation of the internal os of one cm or more at 34 weeks gestation.

Uterine irritability: Uterine contractions of 5 contractions in one hour perceived by patient or documented by provider without cervical change at less than 34 weeks.

Surgery: Any abdominal surgery performed at 18 weeks or more of gestation or cervical cerclage at any time in this pregnancy.

Hypertension: Two measurements showing an increase of systolic pressure of 30 mgHg above baseline, an increase in diastolic pressure of 15 mgHg above baseline, or both.

Nutritional Risk Factor Assessment and Definitions

Instructions: Check nutrition counseling if any of the factors below indicate nutritional risk.

Anemia:

Hgb < 11 or Hct < 33 (weeks 1-13 and weeks 27-40+) Hgb < 10.5 or Hct < 32 (weeks 14-26)

Inappropriate nutrition practices:

- Consuming potentially harmful dietary supplements (includes excessive doses and those that may be toxic or harmful in other ways)
- Consumes diet very low in calories or essential nutrients (includes vegan diet defined as consuming only fruits, vegetables, and grains; macrobiotic diet; food faddism; and impaired calorie intake or nutrient absorption following bariatric surgery)
- ♦ Pica
- ◆ Inadequate iron supplementation (< 30 mg/day)</p>
- Consuming foods potentially contaminated with pathogenic bacteria (raw seafood, meat, poultry, and eggs or any foods containing these products; raw sprouts; undercooked meat, poultry, and eggs; unpasteurized milk or foods containing it; soft cheeses such as feta, Brie, Camembert, blue-veined and Mexican-style cheese; unpasteurized fruit or vegetable juices; and hot dogs and luncheon meats unless reheated until steaming hot)

Examples of additional risk factors:

Medical

- Autoimmune disease
- Current eating disorder, fasting, skipping meals
- Diabetes
- Febrile illness
- Gestational diabetes
- Heart disease
- History of gastric bypass
- ♦ HIV
- Hyperemesis
- Psychiatric disorder
- Renal disease
- Seizure disorders
- Thyroid disease
- Type I diabetes

OB History

- Caesarean section
- Infertility
- Perinatal loss

Psychosocial

- Ambivalent, denying, or rejecting of this pregnancy
- ♦ Child care stress
- Cultural or communication barriers
- History of mental illness
- Not compliant with visit or healthy pregnancy behaviors (or not expected to be compliant without additional intervention)
- ◆ Teen pregnancy