

facts on

Routine Blood Tests in Pregnancy

As part of good prenatal care, doctors recommend routine blood tests to look for infections and other conditions in pregnancy. If a problem is found, treatment can reduce the risk of harm to you and your baby. Information about each of these tests is provided below.

Complete Blood Count (CBC)

This test looks at the number and size of red blood cells, white blood cells, and platelets in a pregnant woman's blood. This test can find conditions like anemia, infections, or clotting problems. If these problems are found, they can be treated before delivery. This reduces the risk of harm to the mother and her baby.

Hepatitis B

Hepatitis B (HBV) is a viral infection of the liver. If a pregnant woman has HBV and is not treated, there is a chance her baby will be infected. Most of the time, the baby can be treated at birth to prevent infection.

Hepatitis C

Hepatitis C (HCV) is another viral infection of the liver that can be passed from mother to baby during birth. Since common treatments for HCV are not recommended during pregnancy, there is no way to protect the baby from HCV. Care can be taken at delivery to reduce the risk to the baby (e.g., not using fetal scalp clips). If a pregnant woman has HCV, her baby will be tested for HCV about 18 months after birth.

Human Immunodeficiency Virus

Human Immunodeficiency Virus (HIV) is a virus that attacks the immune system. The immune system helps your body fight off infection.

HIV can lead to Acquired Immunodeficiency Syndrome (AIDS) if not treated with medication. If a pregnant woman has the virus and is not treated, there is a 25% chance that her baby will be infected with HIV. Pregnant women can say no to (opt-out of) HIV testing. Testing is the only way to know if she has HIV. With treatment, medication, and care, this risk can be reduced to less than 2%.

Maternal Serum Screening

This blood test can tell a pregnant woman her chance of having a baby with spinal defects and some chromosome abnormalities, including Down syndrome and trisomy 18. If a woman has a positive screen result, her doctor will offer her tests, such as an ultrasound or amniocentesis to check whether her baby may have any of these conditions. Although every pregnant woman is offered maternal serum screening, it will only be done if she wants it.

Please turn this page over for information about Prenatal Group, Rubella, and Syphilis tests.

For More Information

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Prenatal Group (Antibody Screen, Blood Type, and Rh Status)

These blood tests check a pregnant woman's blood type (A, B, AB, O), her Rh status (Rh positive or Rh negative), and for the presence of antibodies (cells that fight infection). The antibody screen finds Rh antibodies and other less common antibodies that can cause blood diseases in the baby. If a pregnant woman is Rh negative, she may need to receive an injection (anti-D immune globulin) to stop her blood from developing antibodies against her baby's different blood type. This needle is usually given about three months before the woman's due date, after she gives birth, and if she has bleeding while pregnant or has an amniocentesis test. Without treatment, this condition can lead to severe problems in her baby and in future pregnancies.

Rubella (German Measles)

This test checks to see if a pregnant woman has antibodies for the rubella virus. A rubella infection during pregnancy can cause severe birth defects, including blindness, deafness, and serious developmental problems. If this test shows the woman is not immune, a vaccine can be given to help her body make protective antibodies. These women will also be given the vaccine after their babies are born to prevent infection in future pregnancies.

Syphilis

Syphilis is a sexually transmitted infection that can be passed from a pregnant woman to her baby. If a pregnant woman has syphilis, she can be treated to prevent or treat infection in the baby. Syphilis may cause problems for the baby, such as birth defects, if it is not found early in pregnancy.

Information for this fact sheet was adapted from:

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