

OBSTETRICS

Antenatal Care Guide

Visits, tests, scans and preparing for birth

Original patient handbook | Evidence-aligned educational content

Prepared for patients of

Dr. Akrati Jain

Consultant Obstetrician & Gynaecologist

Appointment

+91 99679 66493

drakratijain.com

Important: This handbook provides general information. It cannot diagnose a condition, recommend individual treatment or replace emergency assessment.

How to use this handbook

Use this guide to prepare questions and recognise situations that need medical attention. Your clinician may advise differently based on your history, examination, test results and local clinical protocols.

Three principles

1. Keep scheduled follow-up.
2. Bring complete records.
3. Seek urgent care for warning symptoms.

Contents

1. The first antenatal consultation
2. Why visit schedules differ
3. Common assessments
4. Birth and postpartum planning
5. Consultation checklist
6. Frequently asked questions
7. References and disclaimer

1. The first antenatal consultation

- Bring the first day of the last menstrual period, details of previous pregnancies, medical and surgical history, medicines, allergies and vaccination records.
- The first visit may include blood pressure, weight review, examination, laboratory tests, screening discussions and ultrasound planning.

Prepare for your consultation

Write down the symptom timeline, medicines and supplements, previous reports and the three questions most important to you.

2. Why visit schedules differ

- Antenatal care should be tailored. More frequent visits or additional testing may be required for hypertension, diabetes, thyroid disease, multiple pregnancy, previous complications or concerns about growth.
- Attend planned visits even when you feel well because some complications initially have few symptoms.

3. Common assessments

- Assessments may include blood pressure, urine testing, blood count and blood group, infection screening, glucose testing, fetal growth and wellbeing checks.
- The exact tests and timing depend on gestation, history, national protocols and clinical findings.

4. Birth and postpartum planning

- Discuss preferred birth setting, pain relief, support person, transport, blood availability when relevant, newborn care and feeding.
- Plan for postpartum help, follow-up of pregnancy complications and contraception.

Urgent care

Do not rely on a website or PDF during an emergency. Severe or rapidly worsening symptoms require direct assessment.

Consultation checklist

Item	Ready
Identity and insurance documents	■
All reports organised by date	■
Medication list	■
Blood-pressure or glucose log if requested	■
Birth-plan questions	■
Hospital bag by the recommended stage	■

Questions to ask

Frequently asked questions

Do I need an ultrasound at every visit?

No. Ultrasound timing depends on clinical indication and local protocol.

Can some visits be remote?

Selected counselling may be remote, but examinations, tests and scans require in-person care.

What if I miss a visit?

Contact the clinic to reschedule and ask whether any time-sensitive tests need priority.

Remember

Online information is most useful when it helps you communicate clearly with your own clinical team.

References and clinical framework

This handbook is original educational content informed by the following authoritative guidance. Recommendations may change and local protocols may differ.

WHO antenatal care recommendations

<https://www.who.int/publications/i/item/9789241549912/>

ACOG - Prenatal Care

<https://www.acog.org/womens-health/faqs/prenatal-care>

**Request an appointment**

Scan to open WhatsApp.

+91 99679 66493

<https://drakratijain.com>

Medical disclaimer: This document is for general patient education only. It is not a diagnosis, prescription or personalised care plan. Do not start, stop or change medicines based on this guide. Emergency symptoms require direct emergency assessment. The website is not monitored for emergencies.

Publishing note: Final medical review and approval by Dr. Akрати Jain is required before public distribution.