# Cairns Hospital Routine Antenatal Blood Tests

<table>
<thead>
<tr>
<th>WEEKS</th>
<th>TESTS</th>
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| 8-12  | Full Blood Count: To check the iron content of your blood. Iron is important for the growth of your baby. Haemoglobin carries oxygen to your baby.  
Blood Group and Antibodies: Should you require a blood transfusion; the hospital will know which blood they could give you. If antibodies are present, you may require further tests – this will be discussed with you.  
Iron studies: To assess your iron stores and if there is a need for iron supplementation.  
Rubella: To check if you are immune to German Measles, if not advice will be given to you about reducing the risk of contracting it in pregnancy as it can cause abnormalities in the baby. Vaccination is advised after you have the baby.  
Hepatitis B: Most women have not had contact with Hepatitis B. If you test positive then your baby may require Immunoglobulin after birth to decrease the risks of transmission.  
RPR: This is for Syphilis, which is a sexually transmitted disease. Syphilis is less common now, if you test positive you will need treatment to decrease the risks of transmission to your baby.  
HIV and Hepatitis C: These tests are not compulsory. However, the RANZCOG recommends these tests are offered to all pregnant women. It is possible to be infected by either of these diseases without symptoms being experienced. HIV and Hepatitis C can affect your baby. Counselling is available prior to having these tests at CH.  
Urine: This is to check for bladder and kidney infections, and to screen for sexually transmitted diseases e.g. Chlamydia & gonorrhoea which can occur without symptoms  
Pap smear: This will be offered to you if you have not had one within the last 12 months. |
| 24-28 | Full Blood Count and Antibodies  
Iron Studies  
RPR  
Glucose tolerance Test: Some women develop a condition known as Gestational Diabetes (Diabetes in pregnancy). |
| 36    | Full Blood Count  
Antibodies  
RPR |