9.0 PRECONCEPTION HEALTH SERVICES

TITLE	DESCRIPTION
DEFINITION:	As a core Title X service, Title X providers must offer preconception health services to female and male clients in accordance with the Centers for Disease Control and Prevention (CDC) recommendations to improve pregnancy and birth outcomes. Preconception is defined as a time when a reproductive aged female is not pregnant but at risk for becoming pregnant or when a man is at risk for impregnating his female partner. The goal of preconception health-care for women is to recognize and modify risks that impact health and/or pregnancy outcomes. This includes biomedical, behavioral and social risks. For men, addressing their direct contributions to the infant's health as well as recognizing their impact on a woman's health is important. The goal of preconception health services is to decrease adverse pregnancy outcomes.
SUBJECTIVE:	**Female history must include:** 1. Reproductive Life Plan. 2. Comprehensive Health History 3. Sexual Health Assessment. 4. Alcohol, nicotine and other drug use assessment. 5. Immunization status. 6. Depression screen. 7. Medication use, including folic acid use. 8. Partner violence assessment. **Male history must include:** 1. Reproductive Life Plan. 2. Comprehensive Health History 3. Sexual Health Assessment. 4. Alcohol, nicotine and other drug use assessment. 5. Immunization status. 6. Depression screen. 7. Medication use. 8. Partner violence assessment.
OBJECTIVE:	**Must include:** 1. BP. **May Include:** 1. Age appropriate physical exam, if indicated. 2. Height, weight and BMI
LABORATORY:	**May Include:** 1. STI/HIV screening, as indicated. 2. Pap screening, as indicated. 3. Preventative screening, as indicated.
ASSESSMENT:	Preconception Health Care.

TITLE	DESCRIPTION
PLAN:	1. Counsel all reproductive age women of the need to take a daily supplement containing 0.4-0.8mg folic acid. 2. Refer individuals who screen positive for intimate partner violence and depression. 3. Discuss identified lifestyle changes (e.g. weight loss, tobacco cessation, alcohol/drug use, etc.) and refer as indicated. 4. Encourage client to consult with prescribing provider of medication use that may impact pregnancy or fetal development. 5. Provide or refer for immunizations, as indicated. 6. Discuss and provide birth control if client does not desire a pregnancy.
EDUCATION:	1. Discuss reproductive life plan. 2. Discuss intimate partner violence and encourage development of a safety plan as indicated. 3. Discuss recommended age-appropriate immunizations.
REFERRAL TO MEDICAL PROVIDER:	1. Individuals with identified high risk health problems, chronic diseases, complicated obstetrical outcomes, and/or maintenance medications 2. Refer male and female clients for additional services if screening results indicate the presence of a health condition or as indicated (e.g. tobacco cessation, obesity, diabetes, depression, immunizations.)
REFERENCES:	*1. Gavin, L., Moskosky, S., Carter, M., et al.* Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs. *MMWR 2014;63 (No.RR-4). (http://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf).*