

Welcome to 7 Sails Obstetrics & Gynecology!

Office of Dr. Kristi Kyle & Dr. Allie Davidson

What to expect at your visits:

At each prenatal visit, we will check in with you, record your weight, listen to the fetal heart rate, and take your blood pressure. Once you are over 20 weeks, we will also measure your symphysis fundal height (SFH), and when you are closer to your due date, we will assess babies position with Leopold's maneuvers. When available, we will review test results, discuss upcoming tests, and answer any questions you have.

Standard Investigations and timing:

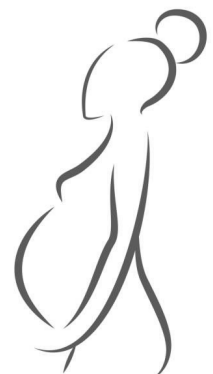
Depending on your pregnancy, visits with our clinic may alternate with your Primary Care Provider. In general, here is an overview of the typical frequency of visits and when to expect investigations:

Frequency:

- 10-24 weeks gestation: visits every 4-6 weeks
- 24-32 weeks gestation: visits every 3-4 weeks
- 33-37 weeks gestation: visits every 2 weeks
- 37 weeks-onwards: visits weekly until delivery
(Some people may require more frequent visits)

Investigations:

- **8-12 weeks:** Dating ultrasound & routine prenatal lab tests (infection screening – HIV, syphilis, hepatitis B, rubella, chlamydia, gonorrhea, urine; thyroid function; blood type; and complete blood count)
- **10-15+ weeks:** Genetic screening if desired (see details below)
- **18-22 weeks:** Anatomy Scan
- **24-28 weeks:**
 - Gestational diabetes screening (Glucose Challenge Test)
 - Repeat screening for anemia (blood work)
 - Additional investigations based on pregnancy risks
- **28 weeks:** RhIG injection (RhoGAM) if you have a negative blood type (e.g., O-)
- **35-37 weeks:** GBS screening (Vaginal-Rectal Swab)
- **38+ weeks:** option to complete a “Stretch and Sweep” or “Membrane Sweep” if you are planning a vaginal birth. This is an internal exam where we sweep the baby's membranes away from your cervix to release your body's own prostaglandins if the cervix is open. This can encourage the start of labour/prevent post-dates pregnancies. It can be associated with bleeding and cramping.



Genetic Screening:

Prenatal genetic screening can tell a pregnant person their chance of having a baby with Down syndrome (T21), trisomy 18 (T18), or an open neural tube defect.

There are three options for Genetic Screening in BC:

1. SIPS/IPS (free)
2. Quad screen (free) - offered in the event of second trimester presentation
3. NIPT (self-pay - some exceptions apply)

1. Serum Integrated Prenatal Screening (SIPS) & Integrated Prenatal Screening test (IPS):

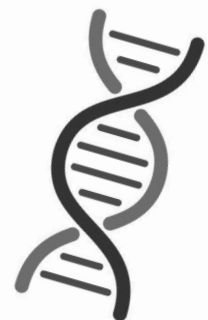
- SIPS is two blood samples taken at:
 - 1st: 9+0 to 13+6 weeks
 - 2nd: 14+0 to 20+6 weeks (preferably around 15 weeks)
- IPS is the SIPS test + a special ultrasound of the neck folds of the fetus (NT scan). Depending on your age, medical, or obstetrical history, you may be offered a NT ultrasound along with the blood tests.
- The result of SIPS/IPS is available about 10 days after the second blood test.

2. Quad screen is a single blood test completed at 15-20 weeks which can be offered if a person requests genetic screening after 15 weeks gestation.

3. A Non-Invasive Prenatal Test (NIPT) is a single blood test taken anytime after 9-10 weeks.

- The result is available in 10 days and is highly accurate for T21 and T18.
- Most patients must pay out of pocket for this, cost varies depending on the commercial test used.
- NIPT is covered by MSP for patients at higher risk for T21 / T18 based on SIPS/IPS results, or who have a history of a previous pregnancy with trisomy 21, 18 or 13.
- Sex chromosome testing is optional with an NIPT!

Note: SIPS, IPS, Quad and the private pay test (NIPT) are all screening tests that will tell you your chance of carrying a fetus with T21 or T18. Only an amniocentesis test can tell you for sure.



Vaccine Recommendations

1. During every pregnancy, you should receive a Tdap vaccine that protects against tetanus, diphtheria and pertussis. The vaccine protects your baby against whooping cough (pertussis) after birth and until they can receive the vaccine. It is recommended between 27-32 weeks.
2. The influenza (flu) vaccine is highly recommended during flu season (November to May) because you are at higher risk of becoming severely ill with the flu while pregnant. It also protects your newborn, who cannot receive this vaccine until 6 months of age.
3. A complete series of an mRNA COVID-19 vaccine is highly recommended during pregnancy if you have not already received it. During pregnancy, you are at a higher risk of becoming seriously ill if you get COVID-19. Evidence shows that mRNA COVID-19 vaccines are safe during pregnancy. Getting the COVID-19 vaccine can prevent serious illness, hospitalization and complications. Repeat dosing is offered in pregnancy during the COVID season.
4. The Abrysvo vaccine is now recommended in pregnancy to protect the infant from birth to 6 months of age from lower respiratory tract disease caused by RSV. This is recommended from 32-36 weeks. Most patients will need to pay out of pocket for this.

When Should I Get Vaccinated?

Vaccine	Purpose	Timing
Flu	Prevents serious illness from common strains of the influenza virus.	At the beginning of flu season , as soon as the vaccine is available in your community.
Tdap	Protects against 3 infections called tetanus, diphtheria, and pertussis (also called whooping cough). Pertussis can cause serious respiratory infection in infants.	Best time to get Tdap vaccine is between 27-32 weeks of pregnancy for the best newborn protection.
COVID-19	Helps protect against serious illness due to the COVID-19 virus.	When seasonally available. Earlier vaccination can offer protection for more of your pregnancy.
RSV	Protects against respiratory syncytial virus (RSV), a leading cause of respiratory infection and hospitalization in infants. <i>This vaccine is NOT currently covered in BC but is available for a cost (~\$360). Some drug plans may cover the cost.</i>	Maternal Vaccine: 32-36 weeks <i>Note: In some higher risk cases you may be advised that your baby get the vaccine for RSV after delivery instead of you. Outside of this, the Maternal vaccine is recommended.</i>

Blood Pressure Monitoring:

Your blood pressure is checked at every prenatal visit. A hypertensive disorder of pregnancy is diagnosed when you have either a very high reading or several moderately elevated blood pressure readings on multiple occasions. Pre-eclampsia is diagnosed by a combination of high blood pressure and abnormalities seen in your urine or on bloodwork.

High blood pressure is considered:

- Systolic blood pressure (the top number): ≥ 140 , and/or
- Diastolic blood pressure (the bottom number): ≥ 90

Signs or Symptoms of Pre-Eclampsia

- A headache that will not go away
- Blurry vision, seeing spots, or other changes in vision
- Severe nausea and vomiting during the 2nd half of pregnancy
- Shortness of breath or chest pain
- Swollen hands or face
- Severe shoulder or right upper abdominal pain

→ Please go to L&D triage if you develop any of these signs or symptoms!

If you have been instructed to monitor your blood pressure at home:

- Take your BP 1 hour after you take your blood pressure medications. If you receive a high reading above 140 for the top number or above 90 for the bottom number, wait 30 minutes and retake it. If it is still above this, then please call Labour & Delivery and come for assessment and medication adjustments. If it is ever very high, with a reading consistently above 160 for the top number (systolic), or 110 for the bottom number (diastolic), please come to L&D so we can urgently control your blood pressure.



Recommended resources:

Baby's Best Chance Handbook:



<https://bcaafc.com/wp-content/uploads/2020/01/Babys-Best-Chance-Manual.pdf>

Patient Handouts for ALL Topics
Pregnancy!



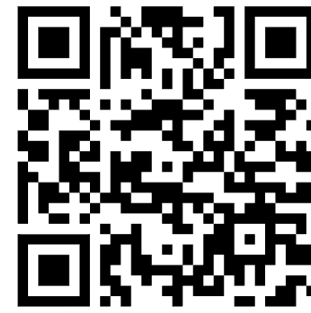
<https://gynqi.com/pregnancy-handouts/>

Genetic Screening Decision Making Tool:



https://www.perinatalservicesbc.ca/Documents/Screening/Prenatal-Families/ScreeningDecisionAid.pdf?_gl=1*1b424hy*_ga*Mic0NTI5NzMSLjE3NTY4MjcxNiE*_ga_ZKY1XG50LJ*cze3NjA3MTkyMjYkbzE1JGcxJHOxNzYwNzE5NzIxJG02MCRsMCRoMA

Genetic Screening Explained:



https://www.youtube.com/watch?v=z39_COwX-H4

RSV Vaccination BC Updates 2026:



https://cms.psbchealthhub.ca/sites/default/files/2025-09/Protecting%20Your%20Baby%20from%20RSV_2025-26.pdf

Guide to a Healthy Pregnancy:



<https://www.canada.ca/en/public-health/services/health-promotion/healthy-pregnancy/healthy-pregnancy-guide.html#a12>