 <p>SERVICE DELIVERY GUIDELINE</p>	Pregnancy Testing		
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1.0 Purpose

- 1.1 To provide guidance for Public Health Nurses (PHNs) when conducting pregnancy testing for clients who are experiencing barriers in accessing health care.

2.0 Background

- 2.1 Manitobans between the ages of 15 to 49 experienced a total of 17,688 pregnancies (55.9 per 1,000) in 2020/2021, and 16,274 babies (a rate of 11.9 newborns per 1,000) were born to Manitoba residents in 2019/2020.¹
- 2.2 It has been well established that inadequate prenatal care is associated with poorer health outcomes for both the infant and the birth parent, and that individuals who experience social and/or structural disadvantage are most at risk for experiencing inadequate prenatal care and poorer perinatal outcomes.^{2,3,4,5,6}
- 2.3 Being unaware of a pregnancy is further associated with inadequate access to early prenatal care.^{7,8}
- 2.4 In accordance with the Winnipeg Regional Health Authority Public Health Nurse Professional Practice Model (2024) and the Community Health Nurses of Canada Canadian Community Health Nursing Professional Practice Model & Standards of Practice (2019) <https://www.chnc.ca/en/standards-of-practice>, PHNs work with individuals, families and communities who are experiencing social and/or structural disadvantage in an effort to decrease inequity in health outcomes.


3.0 Definitions

Pregnancy Test: refers to the testing for the presence of [Human Chorionic Gonadotrophin](#) (HCG) in urine.

Pregnancy Termination / Therapeutic Abortion (TA): elective surgical or medical method of pregnancy termination.

4.0 Scope and Goal

- 4.1 PHNs may conduct pregnancy testing with individual clients when they are experiencing barriers in accessing medical care and / or pregnancy testing, in the context of relationship and capacity building, with the goal

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of connecting them to a health care provider and other resources for more comprehensive care.

5.0 Procedure

5.1 Storage and Stability:


- 5.1.1 All pregnancy tests are to be stored in a clean supply/medication storage room and are to be returned to this room at the end of the day.
- 5.1.2 Store as packaged in the sealed pouch and not opened until use.
- 5.1.3 Pregnancy tests removed from the building are transferred in a temperature monitored clean transport container when the recommended storage temperatures cannot be maintained.
- 5.1.4 Read instructions specific for the product regarding ongoing storage and temperature requirement.
- 5.1.5 Do not use beyond expiration date.

5.2 Routine Precautions:

- 5.2.1 All samples should be considered potentially hazardous and handled in the same manner as an infectious agent (using gloves).
- 5.2.2 The test device / urine specimen container should be discarded in a proper biohazard container after testing if completed in a clinical / public setting or discarded in the client's home if completed there.

5.3 Documentation:

- 5.3.1 The client interaction, consent for pregnancy testing, pregnancy test result and counselling provided, as well as referral to additional resources and / or health care providers (as applicable) should be documented in the client's health record or on a single-issue form using Data, Action, Response, Plan (DARP) format.
- 5.3.2 The PHN will assess for and note any clinical symptoms of pregnancy when the client indicates they believe they may be pregnant including a history of:
 - Last normal menstrual period (LNMP)
 - Amenorrhea
 - Irregular menses

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- Unusual vaginal bleeding (spotting)
- Breast enlargement or discomfort
- Fatigue
- Nausea and/or vomiting
- Recent miscarriage or pregnancy termination

5.4 The PHN will educate the client on how to collect their own urine sample and ensure that informed consent is obtained from the client prior to testing. Testing is to be completed by the PHN.

5.5 Prior to testing, the nurse should ensure consent / provide pre-test counselling:

5.5.1 Ensure that verbal consent is obtained from the client prior to testing.

5.5.2 Explore with the client what they are hoping for in terms of the pregnancy test result and how they may respond to a positive or negative test result.

5.5.3 Reassure the client that the PHN will provide support regardless of the outcome and/or the client's decision and will help connect them to health care / other services, including additional pregnancy counselling, as required.

5.6 Provide testing:

5.6.1 Obtain an approved Public Health Program individual foil pouch test strip urine pregnancy test that can detect the hormone human chorionic gonadotropin (HCG) in urine.

5.6.2 Read product monograph, check expiry date.

5.6.3 Only use pregnancy tests that have been properly stored in the recommended environmental conditions.

5.6.4 Follow the instructions as per package insert.

5.6.5 Obtain urine sample: PHN will provide urine specimen container and educate the client on how to collect their own urine sample.

5.6.6 Pregnancy testing must be conducted by the PHN / done on site where the care is taking place using routine practices (gloves) and cannot be distributed to the client for self-use.

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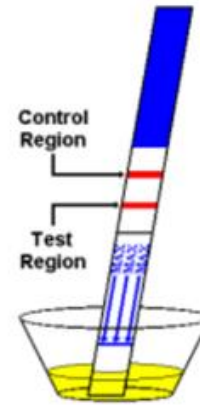
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Test Procedure

The test procedure for QuickStick™ Pro is performed at room temperature. Before performing the test, read the section entitled "Procedural Notes." The assay procedure is as follows:

1. Set up a sufficient number of test strips and label appropriately.
2. Remove a QuickStick™ Pro from its protective pouch. Verify that the test strip is within expiration dating.
3. Place the reaction strip vertically in the urine sample. The urine level must not be higher than the "MAX" line at bottom of the strip.
4. Capillary action will draw the urine sample up the reaction strip. In 5 minutes a colored band will appear at the top of the test area to show that the test is complete.
5. Read test results immediately.

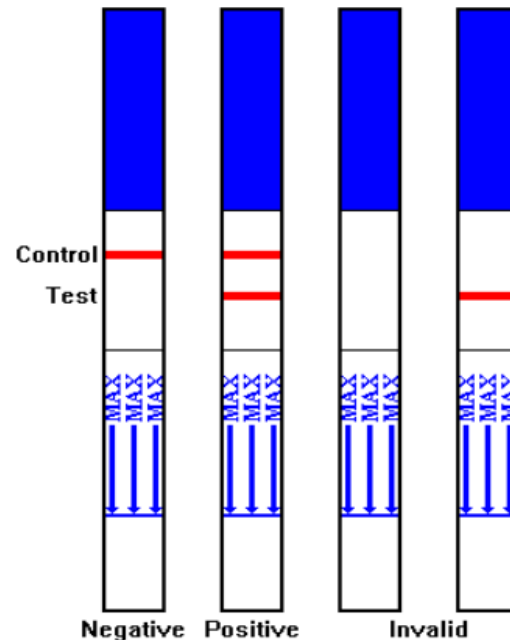



Interpretation of Results

Negative: The appearance of one (1) colored band in the test area.

Positive: The appearance of two (2) colored bands in the test area.


Invalid Result: If no control line appears, the test is invalid. The sample must be retested.



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6.0 Post-test Counseling:

- 6.1 Engage with the client to assess their priorities and needs in relation to the results.
- 6.2 As appropriate, discuss options related to pregnancy including following through with the pregnancy / parenting the infant (s), placing for adoption, or pregnancy termination (*depending on how far along the pregnancy is). The PHN will refer to Women’s Health Clinic, Klinik, or Women’s Centre (Health Sciences Centre) Pregnancy Counselling Clinic, or the client’s health care provider for additional pregnancy counseling and / or referral for pregnancy termination as required based on client’s response / desired course of action.
- 6.3 Review with client the benefits / risks of seeking or not seeking additional health care services or resources.
- 6.4 If client is pregnant and using alcohol or substances, explore and discuss options for harm reduction including stopping / reducing use, referral for opioid replacement / maintenance, support, STBBI testing and prevention, or addictions treatment as desired by the client based on their readiness.
- 6.5 Opioid replacement programs and addiction services will often prioritize referrals for pregnant women due to the risk of fetal distress with rapid cessation and the special needs of this population. Provide support as needed to connect client to this care as required.
- 6.6 Negative Pregnancy Test Result:
 - 6.6.1 In the event that a pregnancy test is negative (as indicated by 1 line), the PHN should advise the individual of the result in a non-judgmental, factual manner (example: “the test result is negative”).
 - 6.6.2 The PHN should also explore with the client how they are feeling regarding the result i.e. “how do you feel about the test result?”
 - 6.6.3 Refer as needed for additional health follow up or counseling / support if the client is distraught regarding the test result or there is question regarding the accuracy of the test. Client can be referred to a health care provider as appropriate (see resource list).

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6.6.4 Provide counselling and support regarding pregnancy prevention, as well as STBBI testing and prevention based on client’s interest including assisting with access to care / prevention services.

6.7 Positive Pregnancy Test Result:

6.7.1 In the event that a pregnancy test is positive (as indicated by 2 lines), the PHN should inform the client of the result in a non-judgmental, factual manner (example: “the pregnancy test is positive”).

6.7.2 The PHN should explore with the client how they are feeling regarding the test result (including allowing enough time for the client to process this information). Explore their intentions regarding the pregnancy and review options as applicable: i.e. continue with pregnancy / parent the infant(s), place for adoption, or pregnancy termination (*depending on how far along the pregnancy is). If client is uncertain re course of action related to positive pregnancy test result, plan for follow up with the client and / or refer for additional counselling (see resource list).

6.7.3 If the intention is to keep the pregnancy, refer the individual to a health care provider (physician, nurse practitioner or midwife) for early, ongoing prenatal care.


6.7.3.1 Provide general information that promotes the health and well-being of the mother and fetus during pregnancy.

Refer to the [Prenatal Evidence Informed Care Pathway.pdf](#)

6.7.3.2 Encourage client to utilize identified supports / connect with social programs (including Healthy Baby Prenatal Benefit) as applicable: [Manitoba Prenatal Benefit Program](#).

6.7.4 If the client’s intention is to terminate the pregnancy or they are uncertain which course of action to choose, refer to Women’s Health Clinic, Klinik, or Women’s Centre (Health Sciences Centre) Pregnancy Counselling Clinic or the client’s health care provider for additional pregnancy counselling and / or pregnancy termination. Provide information as requested regarding pregnancy options, including adoption (see resource list).

6.7.5 The time limit for pregnancy termination in Manitoba is 19 weeks after the LNMP, but most physicians will only perform a therapeutic abortion within the first 16 weeks of a pregnancy.

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- 6.8 Mildly Positive (lighter) or Indeterminant Pregnancy Test Results:
 - 6.8.1 Clients who have had a recent birth, miscarriage, or pregnancy termination may test positive for pregnancy while hCG levels are declining for up to 2-4 weeks after (depending on how advanced the pregnancy was). These clients and those who have not yet missed a period or are experiencing pregnancy symptoms with a negative or indeterminant result should be referred to a health care provider for further testing and comprehensive care.
 - 6.8.2 Client assessment / counseling should include: gestational age / date of miscarriage or pregnancy termination / type of pregnancy termination (medical or D & C) to determine if may be testing mild positive due to recent miscarriage or TA / declining hormones of pregnancy. If it was a while ago, and not using protection, might they be pregnant again? Assess sexual history following the event, contraceptive plans and safer sex practices. Are they wishing to become pregnant again or wanting to postpone / take steps to prevent another pregnancy? Provide counselling according to client's wishes.
 - 6.8.3 Prompt referral to medical services is required when the PHN suspects / has concerns that the client may have retained products of conception or infection and is at risk for sepsis including symptoms such as abnormal vaginal bleeding, fever, pain or symptoms of infection.

7.0 Resources


[Klinik Crisis Support](#)

[Klinik](#)

[Women's Health Clinic](#)

[Women's Health \(HSC\)](#)

[Rapid Access to Addictions Medicine \(RAAM\)](#)

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[Pregnancy and Parenting | Health Link BC](#)

[Manitoba Public Health Nurse Prenatal Referral](#)

[Manitoba Prenatal Benefit Program](#)

[Healthy Parenting Winnipeg \(parentinginmanitoba.ca\)](#)

[Quick Stick Pro HCG Test Instructions](#)


[Pamphlet - Teen Pregnancy Options](#)

Youth Pregnancy Options HANDBOOK for Service Providers

https://www.gov.mb.ca/healthychild/mcad/had_yourchoice.pdf

8.0 References

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