## Medical Tests Required for Prenatal Care in the United States

## Obstetric Profile Num. II

- Blood type of blood group with RH
- Hepatitis B surface antibody

HIV

- Antibody screen of red blood cells (Indirect Coombs)
- Chlamydia and Gonorrhea
- Pap

- Complete blood count (Hematocrit and Hemoglobin)
- Rubeola
  IgG
- VDRL

## **Additional Tests**

- Urianalysis
- Repeat HIV, Hematocrit, and Hemoglobin at 32 weeks
- Streptococcus (GBS)
- Glucose tolerance test (O'Sullivan Test). This is done to rule out gestational diabetes



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