

# Summary of Changes to Assessments: Highlights from Training



***COMPREHENSIVE PERINATAL SERVICES PROGRAM***



# Prenatal Assessment & ICP

This document summarizes changes made to the CPSP Prenatal and Postpartum Assessment forms, as explained during our [live Protocols and Forms training](#). While the forms shown in the training included yellow highlights to indicate updates, they are not being distributed. Use this summary alongside the recorded training available on our website for further clarification.

Section / Question	Type of Change	Description
Intro	Revised	The word 'Delivery' was added to the existing hospital field to clarify where the client plans to give birth. This change supports continuity of care, as clients delivering at a hospital not affiliated with their OB may face risks due to limited access to their medical history.
Intro	Added	A new Race and Ethnicity section was added to promote health equity, improve demographic data collection, and better inform culturally responsive care.
Q5	Added	A new field for Delivery hospital was added. This helps providers coordinate care, especially when a patient delivers outside their medical group. Hospitals unfamiliar with a patient's history may lack critical information, increasing the risk for complications during labor and delivery.
Q9, Q13, Q15	Revised	These questions were updated to reflect more inclusive language, such as replacing gender-specific or outdated terms to better represent all clients regardless of gender identity.
Q16	Revised	Statement added to clarify that if "No" is checked off for WIC, there is no need to include this problem on the ICP summary as long as WIC referral date/intervention is noted.



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Q23.	Revised	The phrase “carbon monoxide detectors” was added to improve home safety assessment.
Q50.	Revised	The word “doula” was added as a support person option, acknowledging the growing use of doulas in pregnancy, labor, and postpartum care.
Q56	Expanded	Additional examples were included in the STI screening prompt: Hepatitis C, syphilis, and genital herpes. This ensures providers ask about a broader range of infections.
Q62	Revised	The word ‘chest’ was added before ‘breastfeeding’ to promote inclusive terminology. In addition, ‘Other’ was added to the Health Education Topics table to allow clients to indicate additional topics they are interested in that may not be listed.
Q62b	Revised	The vaccination reference was changed from COVID-19 to Influenza, shifting focus to a different seasonal immunization.
Q66	Revised	A table from the Steps to Take (STT) Guidelines was added to help providers assess the adequacy of weight gain during pregnancy.
Q67	Revised	A 3hr option was added to use if applicable
Q70 (Intervention Side)	Added	A new line was added: “Referred to a diabetes specialist / date.” This promotes timely referral for clients with elevated glucose levels or gestational diabetes concerns.



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Q72	Revised	The question now includes “sample preeclampsia” to guide providers in recognizing and documenting hypertensive disorders of pregnancy.
Q73	New Question	This is a new question added to the screening process to help identify any risk factors that may indicate the need for aspirin.
Q78	Revised	The word “chest” was added before breastfeeding. On the right side (intervention), the first checkbox was expanded to include: “and she is currently chest/breastfeeding while pregnant.”
Q79 (Intervention Side)	Added	The first, third, and fourth bullet points were added, enhancing options for follow-up related to nutrition or behavioral risks.
Q86	Revised	Inclusive language updated: the word “chest” was added to breastfeeding.
Q88	Removed	COVID-19 was removed from the immunization options table.
Q91	Revised	The word “doula” was added again as a possible birth support person, similar to Q50.
Q94 (Intervention Side)	Added	A new referral note was added: “Referred to DMH Access Hotline 1-800-854-7771.” This provides a mental health referral for clients expressing symptoms of depression or distress.



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Section / Question	Type of Change	Description
Intro	Added	A new field for “Weeks Postpartum” was included to track the timing of the visit and contextualize client needs.
Gender Area	Revised	“Other” was added to the gender options to promote inclusivity and reflect diverse identities.
Q3.	Expanded	Added examples: “preeclampsia” and “hemorrhaging” to guide client responses and clarify risk documentation.
Q4.	New	Entirely new question asking whether the client experienced postpartum preeclampsia, hemorrhaging, or C-section complications. Helps assess health risks beyond delivery.
Q20.	Added	Revised terminology to be chest/breastfeeding and added a checkbox for the Perinatal Food Group Recall for Gestational Diabetes (PFGR) to support focused nutrition follow-up.
Q29	Expanded	Added “Edinburgh Postnatal Depression Scale” (EPDS) as an option alongside PHQ-9 for postpartum mental health screening.



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Q42	Removed	Previous question regarding COVID-19 exposure was removed to streamline content and reflect updated priorities.
ICP- Updates & Outcomes	Added	Instruction added to the Updates & Outcomes box: "Include date, staff name, & title" for better tracking of interventions and accountability.

