Pregnancy Screening

This practice algorithm has been specifically developed for MD Anderson using a multidisciplinary approach and taking into consideration circumstances particular to MD Anderson, including the following: MD Anderson’s specific patient population; MD Anderson’s services and structure; and MD Anderson’s clinical information. Moreover, this algorithm is not intended to replace the independent medical or professional judgment of physicians or other health care providers.

Patient of child bearing potential: The ability to conceive a fetus. This includes all female patients, between the onset of menses and the age of 8-60 years unless the patient presents with an exclusionary criteria¹.

Does the patient meet the exclusionary criteria¹?

Yes

- Patient meets exclusionary criteria¹
- No further questions or interventions clinically indicated. Proceed with treatment/intervention²

No

Order urine pregnancy test using per parameter no cosign required³

- Notify attending physician or health care provider IF positive pregnancy test
- Document pregnancy test results (negative or positive) in patient medical record

¹Patient may present with one of the following exclusion criteria: postmenopausal (no menses in greater than or equal to 12 consecutive months), hysterectomy or bilateral salpingo-oophorectomy, ovarian failure (Follicle Stimulating Hormone (FSH) and Estradiol in menopausal range, and/or who have received whole pelvic radiation therapy), and/or who have received whole pelvic radiation therapy, and/or tubal ligation or another surgical sterilization procedure.

²Chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures.

³Within 7 days before the start of initial chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures, or 30 days after an initial urine pregnancy test, and prior to any chemotherapy, surgery, diagnostic imaging, radiation therapy and other procedures.
SUGGESTED READINGS

ACR–SPR practice parameter for imaging pregnant or potentially pregnant adolescents and women with Ionizing Radiation. 2014.


SUGGESTED READINGS


This practice consensus algorithm is based on majority expert opinion of the Nursing Work Group at the University of Texas MD Anderson Cancer Center. It was developed using a multidisciplinary approach that included input from the following core group members:

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