**Multiple Pregnancy – Care Pathway**

This care pathway covers the level of care you should be offered from the time of your first hospital scan, in addition to the routine care that is offered to all women during pregnancy. It aims to reduce risks and improve outcomes for you and your babies.

Ideally you should be seen by a specialist team, who have more knowledge about multiple pregnancies, all the time. This would include a midwife, sonographer and doctor. This pathway is based on national best practice and hospitals receive extra funding to look after multiple pregnancies.

If you are not receiving the care you would expect please raise it with the PALS team (patient liaison) at your hospital and let us know – maternityengagement@twinstrust.org . We can then liaise with the hospital regarding the correct level of care that should be offered.

Feel free to share this with your midwifery team and use it as a checklist for each appointment.

**Different Types of Multiple Pregnancy**

There are different types of multiple pregnancy so each care pathway is slightly different.

Twins can be dichorionic (they have separate placentas) or monochorionic (they share a placenta).

Triplets have a few possible combinations:

**Trichorionic** – each baby has a separate placenta

**Dichorionic** – two of the babies share a placenta and the third baby is separate

**Monochorionic** – all three babies share a placenta

It is possible for twins and triplets to share an amniotic sac as well as a placenta. Although rare, these pregnancies need extra care, closer monitoring by a specialist and an individual care pathway. For twins, an earlier birth is recommended between 32-34 weeks. For triplets, the timing of birth will be decided and discussed with you individually and you may also be referred to a different hospital that has more experience of triplet pregnancies.

More information can be found here:

<https://www.nice.org.uk/guidance/ng137/informationforpublic>

<https://www.twinstrust.org/pregnancy/antenatal-care>

**ANTENATAL CARE PATHWAY FOR WOMEN WITH UNCOMPLICATED TWIN PREGNANCY (Dichorionic/Diamniotic - two placentas, two sacs)**

**You will have at least 8 appointments of which at least 6 will include scans**

|  |  |
| --- | --- |
| **Appointment** | **What Should Happen** |
| Dating scan between 11 and 14 weeks  | **Your midwife or doctor should give you information about:*** nutrition and diet, including vitamin D, Iron and folic acid supplements
* antenatal screening tests
* your pregnancy care pathway
* information on twin antenatal classes
* specialist multiple support groups – Twins Trust, multiple birth foundation and local multiple groups
* parent information pack on multiple pregnancy
 | **Your midwife or doctor should:*** carry out an ultrasound scan to estimate when the babies are due
* tell you what type of multiple pregnancy your pregnancy is
* see if you may need additional care or support
* plan the care you will get throughout your pregnancy
* measure your blood pressure and test your urine
* offer you screening tests and make sure you understand what is involved before you decide to have any of them
* discuss timing and how you’ll give birth and pre term birth
* advise on use of aspirin if you are at risk of high blood pressure
 |
| 16 weeks with multiples midwife | **Your midwife should give you information about:*** the ultrasound scan you will be offered at 20 weeks and help with any concerns or questions you have
* where to have your baby
* breastfeeding and workshops
* how the babies develop during pregnancy
* exercise, including pelvic floor exercises
* maternity benefits
 | **Your midwife should:*** discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and how you’ll give birth and pre term birth
 |
| 20 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** ante natal classes and book if wanted
 | **Your midwife or doctor should**:* carry out a detailed ultrasound scan to check the physical development of your babies
* measure your blood pressure and test your urine
 |
| 24 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** any need for experienced enhanced team referral e.g. physio, mental health
* provide a MAT B 1 certificate – medical evidence of your pregnancy for your employer (any time after 20 week scan)
* importance of babies movements and contact numbers
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test to check for anaemia
* discuss the risks and signs of early labour
 |
| 26 weeks with multiples midwife (if not already discussed) | **Your midwife should give you information about:*** discuss any anxieties - re pending life change, demands of two or more babies and coping strategies, mental health and post-natal depression
 | **Your midwife should:*** measure your blood pressure and test your urine
* discuss timing and type of birth
* discuss and record the results of any screening tests
 |
| 28 weeks with multiples midwife and team |  | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* offer first anti‑D treatment if you are rhesus D‑negative
* discuss timing and type of delivery (date for induction or elective caesarean) if not already been discussed
* discuss and agree birth plan and include in notes
* discuss how the placentae will be delivered
* discuss breastfeeding checklist
* organise a Health Visitor referral
 |
| 30 weeks with multiples midwife (if not already discussed) | **Your midwife should give you information about:*** breastfeeding /postnatal care information
 | **Your midwife should:*** discuss and record the results of any tests
* discuss labour, birth and coping strategies (birth plan)
* measure your blood pressure and test your urine
 |
| 32 weeks with multiples midwife and team | **Your midwife should give you information about:*** Vitamin K
* newborn screening tests
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
*
 |
| 34 weeks with multiples midwife  | **Your midwife should give you information about** * discuss any anxieties and postnatal depression.
* advise on care provided from multiples midwife once babies are born
* what will happen during & after delivery
 | **Your midwife should:*** discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* offer second anti‑D treatment (if required) if you are rhesus D‑negative
 |
| 36 weeks with multiples midwife and team | **Your midwife or doctor should give you information on:*** breastfeeding, including hints and tips for success
* caring for your newborn babies
* vitamin K and screening tests for your newborn babies
* your own health after the babies are born
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* discuss induction of labour or caesarean procedure
* plan for delivery at 37 weeks if not delivered and discuss use of steroids
* If planned delivery declined weekly appointments with specialist until delivered
 |
| 37 weeks with multiples midwife | **Your midwife or doctor should:**If babies haven’t arrived discuss induction of labour or caesarean procedure and discuss course of steroids if necessary. |

**At least 2 hospital appointments should be with a doctor who specialises in multiple pregnancies**

**ANTENATAL CARE PATHWAY FOR WOMEN WITH UNCOMPLICATED TWIN PREGNANCY (Monochorionic/Diamniotic - one placenta, two sacs)**

**You will have at least 11 appointments which will all include scans**

|  |  |
| --- | --- |
| **Appointment** | **What Should Happen** |
| Booking appointment between 11 and 14 weeks  | **Your midwife or doctor should give you information about:*** nutrition and diet, including vitamin D, Iron and folic acid supplements
* antenatal screening tests
* your pregnancy care pathway
* information on twin antenatal classes
* specialist multiple support groups – Twins Trust, multiple birth foundation and local multiple groups
* parent information pack on multiple pregnancy
 | **Your midwife or doctor should:*** carry out an ultrasound scan to estimate when the babies are due
* tell you what type of multiple pregnancy your pregnancy is
* see if you may need additional care or support
* plan the care you will get throughout your pregnancy
* measure your blood pressure and test your urine
* offer you screening tests and make sure you understand what is involved before you decide to have any of them
* discuss timing and how you’ll give birth and pre term birth
* advise on use of aspirin if you are at risk of high blood pressure
 |
| 16 weeks with multiples midwife | **Your midwife should give you information about:*** the ultrasound scan you will be offered at 20 weeks and help with any concerns or questions you have
* where to have your baby
* breastfeeding and workshops
* how the babies develop during pregnancy
* exercise, including pelvic floor exercises
* maternity benefits
 | **Your midwife should:*** discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and how you’ll give birth and pre term birth
 |
| 18 weeks with multiples midwife and team | Your midwife or doctor should help with any concerns or questions you have | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss the results
* measure your blood pressure and test your urine
 |
| 20 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** parent craft classes and book if wanted
 | **Your midwife or doctor should**:* carry out a detailed ultrasound scan to check the physical development of your babies
* measure your blood pressure and test your urine
 |
| 22 weeks with multiples midwife and team | Your midwife or doctor should help with any concerns or questions you have | **Your midwife or doctor should**:* carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
 |
| 24 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** any need for experienced enhanced team referral e.g. physio, mental health
* provide a MAT B 1 certificate – medical evidence of your pregnancy for your employer (any time after 20 week scan)
* importance of babies movements and contact numbers
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* talk to you about the risks/symptoms of early labour
 |
| 26 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** discuss any anxieties - re pending life change, demands of two or more babies and coping strategies, effect on relationships
* mental health and post-natal depression
 | **Your midwife or doctor should:*** carry out and ultrasound scan and discuss results
* discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and type of delivery (date for induction or elective caesarean)
 |
| 28 weeks with multiples midwife and team |  | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* offer first anti‑D treatment if you are rhesus D‑negative
* discuss timing and type of delivery (date for induction or elective caesarean) if not already been discussed
* discuss and agree birth plan and include in notes
* discuss how the placentae will be delivered
* discuss breastfeeding checklist
* organise a Health Visitor referral
 |
| 30 weeks with multiples midwife | **Your midwife or doctor should give you information about:*** breastfeeding /postnatal care information
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* discuss and record the results of any tests
* discuss labour, birth and coping strategies (birth plan)
* measure your blood pressure and test your urine
 |
| 32 weeks with multiples midwife and team | **Your midwife should give you information about:*** Vitamin K
* newborn screening tests
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
 |
| 34 weeks with multiples midwife  | **Your midwife should give you information about:*** discuss any anxieties and postnatal depression.
* advise on care provided from multiples midwife once babies are born
* breastfeeding, including hints and tips for success
* caring for your newborn babies
* vitamin K and screening tests for your newborn babies
* your own health after the babies are born
* what will happen during & after delivery
 | **Your midwife or doctor should:*** carry out an ultrasound and discuss results
* discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* offer second anti‑D treatment (if required) if you are rhesus D‑negative
* plan for delivery at 36 weeks following course of steroids
* If planned delivery declined weekly appointments with specialist until delivered
 |
| 36 weeks with multiples midwife and team | **Your midwife or doctor should:*** If babies haven’t arrived discuss induction of labour or caesarean procedure and offer course of steroids
 |

**At least 2 hospital appointments should be with a doctor who specialises in multiple pregnancies**

**ANTENATAL CARE PATHWAY FOR WOMEN WITH UNCOMPLICATED TRIPLET PREGNANCY**

**(Trichorionic/Triamniotic - three placentas, three sacs)**

**You will have at least 9 appointments of which at least 8 will include scans**

|  |  |
| --- | --- |
| **Appointment** | **What Should Happen** |
| Booking appointment between 11 and 14 weeks | **Your midwife or doctor should give you information about:*** nutrition and diet, including vitamin D, Iron and folic acid supplements
* antenatal screening tests
* your pregnancy care pathway
* information on triplet antenatal classes
* specialist multiple support groups – Twins Trust, multiple birth foundation and local multiple groups
* parent information pack on multiple pregnancy
 | **Your midwife or doctor should:*** carry out an ultrasound scan to estimate when the babies are due
* tell you what type of multiple pregnancy your pregnancy is
* see if you may need additional care or support
* plan the care you will get throughout your pregnancy
* measure your blood pressure and test your urine
* offer you screening tests and make sure you understand what is involved before you decide to have any of them
* discuss timing and how you’ll give birth and pre term birth
* advise on use of aspirin if you are at risk of high blood pressure
 |
| 16 weeks with multiples midwife | **Your midwife should give you information about:*** the ultrasound scan you will be offered at 20 weeks and help with any concerns or questions you have
* where to have your baby
* breastfeeding and workshops
* how the babies develop during pregnancy
* exercise, including pelvic floor exercises
* maternity benefits
 | **Your midwife should:*** discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and how you’ll give birth and pre term birth
 |
| 20 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** ante natal classes and book if wanted
 | **Your midwife or doctor should**:* carry out a detailed ultrasound scan to check the physical development of your babies and discuss the results
* measure your blood pressure and test your urine
 |
| 24 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** any need for experienced enhanced team referral e.g. physio, mental health
* provide a MAT B 1 certificate – medical evidence of your pregnancy for your employer (any time after 20 week scan)
* importance of babies movements and contact numbers
* Booking antenatal classes
 | **Your midwife or doctor should:*** discuss any further results from 20 week scan
* carry out an ultrasound scan
* measure your blood pressure and test your urine
* carry out a blood test
* talk to you about the risks/symptoms of early labour
 |
| 26 weeks with multiples midwife  | **Your midwife or doctor should give you information about:*** discuss any anxieties - re pending life change, demands of two or more babies and coping strategies, effect on relationships
* mental health and post-natal depression
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and type of delivery (date for induction or caesarean procedure)
 |
| 28 weeks with multiples midwife and team |  | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* offer first anti‑D treatment if you are rhesus D‑negative
* discuss timing and type of delivery (date for induction or elective caesarean) if not already been discussed
* discuss and agree birth plan and include in notes
* discuss how the placentae will be delivered
* discuss breastfeeding checklist
* organise a Health Visitor referral
 |
| 30 weeks with multiples midwife | **Your midwife or doctor should give you information about:*** breastfeeding /postnatal care information
* what will happen during & after delivery
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* discuss and record the results of any tests
* discuss labour, birth and coping strategies (birth plan)
* measure your blood pressure and test your urine
 |
| 32 weeks with multiples midwife and team | **Your midwife should give you information about:*** Vitamin K
* newborn screening tests
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
 |
| 34 weeks with multiples midwife and team | **Your midwife should give you information about:*** discuss any anxieties and postnatal depression.
* advise on care provided from multiples midwife once babies are born
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* discuss and record the results of any screening tests from the last appointment
* measure your blood pressure and test your urine
* offer second anti‑D treatment (if required) if you are rhesus D‑negative
* discuss induction of labour or caesarean procedure and offer course of steroids
* plan for delivery from 35 weeks following steroids. If planned delivery declined weekly appointments with specialist until delivered
 |

**At least 2 hospital appointments should be with a doctor who specialises in multiple pregnancies**

**ANTENATAL CARE PATHWAY FOR WOMEN WITH UNCOMPLICATED TRIPLET PREGNANCY (Dichorionic/Triamniotic - two placentas, three sacs) and**

**(Monochorionic/Triamniotic one placenta, three sacs)**

**You will have at least 11 appointments which will all include scans**

|  |  |
| --- | --- |
| **Appointment** | **What Should Happen** |
| Booking appointment between 11 and 14 weeks  | **Your midwife or doctor should give you information about:*** nutrition and diet, including vitamin D, Iron and folic acid supplements
* antenatal screening tests
* your pregnancy care pathway
* information on multiple antenatal classes
* specialist multiple support groups – Twins Trust, multiple birth foundation and local multiple groups
* parent information pack on multiple pregnancy
 | **Your midwife or doctor should:*** carry out an ultrasound scan to estimate when the babies are due
* tell you what type of multiple pregnancy your pregnancy is
* see if you may need additional care or support
* plan the care you will get throughout your pregnancy
* measure your blood pressure and test your urine
* offer you screening tests and make sure you understand what is involved before you decide to have any of them
* discuss timing and how you’ll give birth and pre term birth
* advise on use of aspirin if you are at risk of high blood pressure
 |
| 16 weeks with multiples midwife and team | **Your midwife should give you information about:*** the ultrasound scan you will be offered at 20 weeks and help with any concerns or questions you have
* where to have your baby
* breastfeeding and workshops
* how the babies develop during pregnancy
* exercise, including pelvic floor exercises
* maternity benefits
 | **Your midwife should:*** discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* discuss timing and how you’ll give birth and pre term birth
 |
| 18 weeks with multiples midwife and team | Your midwife or doctor should help with any concerns or questions you have | **Your midwife or doctor should:*** carry out an ultrasound scan to check the physical development of your babies
* measure your blood pressure and test your urine
 |
| 20 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** ante natal classes and book if wanted
 | **Your midwife or doctor should**:* carry out a detailed ultrasound scan to check the physical development of your babies
* measure your blood pressure and test your urine
 |
| 22 weeks with multiples midwife and team | Your midwife or doctor should help with any concerns or questions you have | **Your midwife or doctor should**:* carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
 |
| 24 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** any need for experienced enhanced team referral e.g. physio, mental health
* provide a MAT B 1 certificate – medical evidence of your pregnancy for your employer (any time after 20 week scan)
* importance of babies movements and contact numbers
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* talk to you about the risks/symptoms of early labour
 |
| 26 weeks with multiples midwife and team | **Your midwife or doctor should give you information about:*** discuss any anxieties - re pending life change, demands of two or more babies and coping strategies, effect on relationships
* mental health and post-natal depression
 | **Your midwife or doctor should:*** carry out and ultrasound scan and discuss results
* discuss and record the results of any screening and blood tests
* measure your blood pressure and test your urine
* discuss timing and type of delivery (date for induction or elective caesarean)
 |
| 28 weeks with multiples midwife and team |  | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
* offer first anti‑D treatment if you are rhesus D‑negative
* discuss timing and type of delivery (date for induction or elective caesarean) if not already been discussed
* discuss and agree birth plan and include in notes
* discuss how the placentae will be delivered
* discuss breastfeeding checklist
 |
| 30 weeks with multiples midwife | **Your midwife or doctor should give you information about:*** breastfeeding /postnatal care information
* what will happen during & after delivery
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss the results
* discuss and record the results of any tests
* discuss labour, birth and coping strategies (birth plan)
* measure your blood pressure and test your urine
 |
| 32 weeks with multiples midwife and team | **Your midwife should give you information about:*** Vitamin K
* newborn screening tests
 | **Your midwife or doctor should:*** carry out an ultrasound scan and discuss results
* measure your blood pressure and test your urine
* carry out a blood test
 |
| 34 weeks with multiples midwife  | **Your midwife should give you information about:*** discuss any anxieties and postnatal depression.
* advise on care provided from multiples midwife once babies are born
* breastfeeding, including hints and tips for success
* caring for your newborn babies
* vitamin K and screening tests for your newborn babies
* your own health after the babies are born
 | **Your midwife or doctor should:*** carry out an ultrasound and discuss the results
* discuss and record the results of any screening tests
* measure your blood pressure and test your urine
* offer second anti‑D treatment (if required) if you are rhesus D‑negative
* discuss induction of labour or caesarean procedure and offer course of steroids
* plan for delivery at 35 weeks for dichorionic/triamniotic triplets following course of steroids. Monochorionic/triamniotic triplets assessed individually. If planned delivery declined weekly appointments with scans with specialist until delivery
 |

**At least 5 hospital appointments should be with a doctor who specialises in multiple pregnancies**