HEALTHCARE PROFESSIONAL **CONSULTATION FORM FOR** PRENATAL PHYSICAL ACTIVITY UK VERSION



| PATIENT NAME: | DUE DATE (DD/MM/YYYY): | TODAY'S DATE (DD/MM/YYYY): | |
|--|------------------------|--|--|
| Your patient wishes to begin or continue to be physically active during pregnancy. Your patient answered "Yes" to one or more questions on the Get Active Questionnaire for Pregnancy and has been asked to seek your advice (www.csep.ca/get-active-questionnaire-for-pregnancy-UK). Physical activity is safe for most pregnant individuals and has many health benefits. However, a small number of patients may need a thorough evaluation before taking part in physical activity during pregnancy. The United Kingdom's Chief Medical Officers recommend that pregnant women accumulate 150 minutes of moderate-intensity physical activity throughout the week and perform strengthening activities twice per week (see next page or www.gov.uk/government/collections/physical-activity-guidelines). But there are contraindications to this goal for some conditions (see right). Specific concern from your patient and/or from a Qualified Exercise Professional (e.g. clinical exercise specialist; certified exercise practitioner etc): | | Absolute contraindications Pregnant women with these conditions should continue activities of daily living, but not take part in moderate or vigorous physical activity: ruptured membranes, premature labour, unexplained persistent vaginal bleeding, placenta previa after 28 weeks gestation, preeclampsia, incompetent cervix, intrauterine growth restriction, high-order multiple pregnancy (e.g. triplets), uncontrolled Type I diabetes, uncontrolled thyroid disease, other serious cardiovascular, respiratory or systemic disorder. Relative contraindications Pregnant women with these conditions should discuss advantages and disadvantages of physical activity with you. They should continue physical activity, but modify exercises to reduce | |
| To ensure that your patient proceeds in the safest way possible, they were advised to consult with you about becoming or continuing to be physically active during pregnancy. Please discuss potential concerns you may have about physical activity with your patient and indicate in the box below any modifications you might recommend: | | | |
| ☐ Unrestricted physical activity based on the <i>United Kingdom's Chief Medical Officers Physical Activity Guidelines</i> (2019). | | | |
| ☐ Progressive physical activity | | intensity and/or duration. | |
| ☐ Recommend avoiding: ☐ Recommend including: | | □ recurrent pregnancy loss, □ gestational hypertension, □ a history of spontaneous preterm birth, □ mild/moderate cardiovascular or | |
| ☐ Recommend supervision by a Qualified Exercise Professional, if possible. | | respiratory disease, symptomatic anemia, malnutrition, | |
| Refer to a physiotherapist for pain, impairment and/or a pelvic floor assessment. | | | |
| ☐ Other comments: | | eating disorder, twin pregnancy after the 28th week, other significant medical conditions. | |

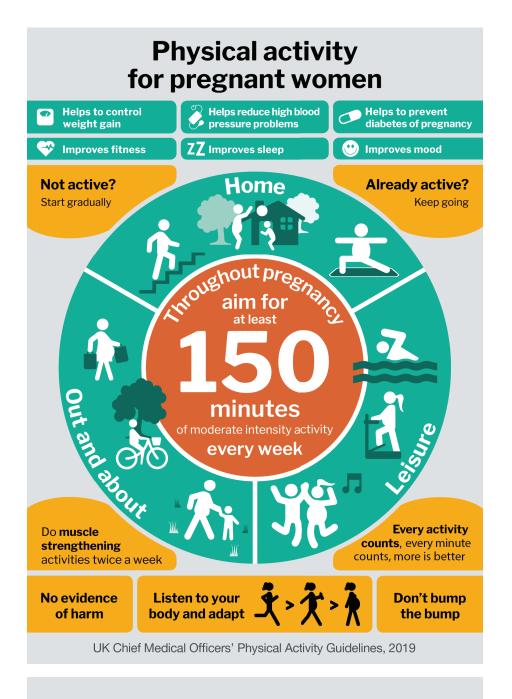




UK CHIEF MEDICAL OFFICERS' PHYSICAL ACTIVITY GUIDELINES FOR PREGNANT WOMEN



Research shows the health benefits and safety of being active throughout pregnancy for both mother and baby. Physical activity is now seen as a critical part of a healthy pregnancy. Following the guideline can reduce the risk of pregnancy-related illnesses such as depression, by at least 25%, and of developing gestational diabetes, high blood pressure and preeclampsia by 40%.¹



For more information and resources, visit: www.activepregnancyfoundation.org/

