

# HEALTH CARE PROVIDER CONSULTATION FORM FOR PRENATAL PHYSICAL ACTIVITY

PATIENT NAME:	DUE DATE (DD/MM/YYYY):	TODAY'S DATE (DD/MM/YYYY):
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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/getactivequestionnaire-pregnancy](http://www.csep.ca/getactivequestionnaire-pregnancy)).

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 Society of Obstetricians and Gynaecologists of Canada/Canadian Society for Exercise Physiology *2019 Canadian Guideline for Physical Activity throughout Pregnancy* recommends that pregnant women get at least 150 minutes of moderate intensity physical activity each week (see next page or [csepguidelines.ca/pregnancy](http://csepguidelines.ca/pregnancy)). But there are contraindications to this goal for some conditions (see right).

Specific concern from your patient and/or from a Qualified Exercise Professional:

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 *SOGC/CSEP 2019 Canadian Guidelines for Physical Activity throughout Pregnancy*.
- Progressive physical activity
  - Recommend avoiding:
  - Recommend including:
- Recommend supervision by a Qualified Exercise Professional, if possible.
- Refer to a physiotherapist for pain, impairment and/or a pelvic floor assessment.
- Other comments:

## 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 hypertension,
- 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 intensity and/or duration.

- recurrent pregnancy loss,
- gestational hypertension,
- a history of spontaneous preterm birth,
- mild/moderate cardiovascular or respiratory disease,
- symptomatic anemia,
- malnutrition,
- eating disorder,
- twin pregnancy after the 28th week,
- other significant medical conditions.

# SOGC/CSEP 2019 CANADIAN GUIDELINE FOR PHYSICAL ACTIVITY THROUGHOUT PREGNANCY



The evidence-based guideline outlines the right amount of physical activity women should get throughout pregnancy to promote maternal, fetal, and neonatal health.

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%.

**Pregnant women should get at least 150 minutes of moderate-intensity physical activity each week over at least three days per week.** But even if they do not meet that goal, they are encouraged to be active in a variety of ways every day. Please visit [csepguidelines.ca/pregnancy](http://csepguidelines.ca/pregnancy) for more information. The guideline makes six recommendations:



All women without contraindication should be physically active throughout pregnancy. Specific subgroups were examined:

- Women who were previously inactive.
- Women diagnosed with gestational diabetes mellitus.
- Women categorized as overweight or obese (pre-pregnancy body mass index  $\geq 25\text{kg/m}^2$ ).



Pregnant women should accumulate at least 150 minutes of moderate-intensity physical activity each week to achieve clinically meaningful health benefits and reductions in pregnancy complications.



Physical activity should be accumulated over a minimum of three days per week; however, being active every day is encouraged.



Pregnant women should incorporate a variety of aerobic and resistance training activities to achieve greater benefits. Adding yoga and/or gentle stretching may also be beneficial.



Pelvic floor muscle training (e.g., Kegel exercises) may be performed on a daily basis to reduce the risk of urinary incontinence. Instruction in proper technique is recommended to obtain optimal benefits.



Pregnant women who experience light-headedness, nausea or feel unwell when they exercise flat on their back should modify their exercise position to avoid the supine position.