

Missed Opportunities for Counseling Documentation During Routine Antenatal Care in a Public Hospital in Liberia

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Abstract

Antenatal care (ANC) offers an important opportunity for early risk identification and preventive counseling. While guidelines emphasize comprehensive counseling and proper documentation, how these are implemented during routine ANC in busy public facilities is less well described.

A descriptive observational study was conducted during routine ANC services at a public referral hospital in Liberia. Data were collected through direct observation of clinic flow and individual ANC encounters, review of client-held ANC records ("big belly books"), and informal clarification with midwives regarding routine practices. Observations focused on measurement practices, counseling provided versus documented, and risk identification and referral. No client identifiers were collected.

Blood pressure, weight, and height were consistently measured and documented for all observed clients; however, body mass index calculation was not performed. Clinical risk factors, including elevated blood pressure and previous Caesarean section, were promptly identified, documented, and referred when present. Individual counseling during ANC encounters was selective and most commonly focused on birth preparedness and the need for ultrasound. Although verbal counseling was frequently observed, documentation of these counseling activities was often absent from ANC records. Laboratory investigations were selectively requested, mainly for first-time ANC clients or those presenting with complaints or danger signs. Midwives were consistently calm, supportive, and respectful in their interactions with patients. Routine ANC services demonstrated strong clinical screening and effective risk identification. However, gaps between counseling delivered and counseling documented were observed. Strengthening documentation practices may improve continuity and quality of ANC without increasing provider workload.

Index Terms

Antenatal Care; Counseling Documentation; Maternal Health; Healthcare Systems; Quality of Care