

## Criteria for Prenatal Aspirin (PNA) Recommendation

### Risk Level: High

- History preeclampsia ± adverse outcomes
- Multifetal gestation
- Chronic hypertension
- Type 1 or 2 diabetes
- Renal disease
- Autoimmune disease

*If at least 1 is checked, recommend PNA*

### Risk Level: Moderate

- Nulliparity (including history of miscarriage in first trimester)
- Obesity (BMI >30 kg/m<sup>2</sup>)
- Family history preeclampsia: mother or sister
- Sociodemographics: Black, low socioeconomic status
- Age ≥35 years
- Personal history: low birth weight, small for gestational age, previous adverse pregnancy outcomes after first trimester, ≥10 year pregnancy interval

*If several are checked patient is at high risk, recommend PNA*

### Risk Level: Low

- Previous uncomplicated full-term delivery

*Do not recommend PNA*

*Recommend PNA to be taking in the evening, starting after 12 weeks gestation.*

**NOTE:** Please document risk level and education given in Supervision of Pregnancy problem list.

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These are the United States Preventative Service Task Force recommendations and more information can be found here:

<https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/low-dose-aspirin-use-for-the-prevention-of-morbidity-and-mortality-from-preeclampsia-preventive-medication>