Current Pregnancy Status

Collection date of current pregnancy status:

_____
(DD-MM-YYYY)

CURRENT PREGNANCY STATUS

Is the participant currently pregnant?
○ Yes
○ No

(If Yes) Estimated due date:

_____
(DD-MM-YYYY)

OR (If Yes) Assessed gestational weeks:

_____
(Number of gestational weeks.)

(If Yes) Is the number of fetuses known?
○ Yes
○ No

(If Yes) Number of foetuses:

_____

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H3ABioNet & H3Africa Phenotype Standards