British Columbia Antenatal Record Part 1 Attending physician/midwife Referring physician/midwife Mother's name Date of birth Age at EDD Surname Given name Mother's maiden name Ethnic origin Language preferred Address Occupation Work hrs./day No. of school yrs completed Partner's name Ethnic origin of Partner's work Phone number Personal health number newborn's father ☐ None known 2. Allergies Medications/herbals Beliefs & practices ☐ Yes (reaction) 3. Obstetrical History Gravida Term Preterm **A**bortion (Induced Spontaneous___) Living Children Place of birth/ abortion Gest. age Birth weight Present health Type of birth Perinatal complications 4. I MP EDD by dates Menses cycle Contraceptives When stopped Confirmed EDD ☐ US performed _____ Gest wks. ___ DD MM YYYY DD MM YYYY 5. Present Pregnancy 7. Medical History 8. Lifestyle & Social yes (specify) Discussed Referred Concerns yes (specify) ☐ Surgery □ IVF pregnancy _ □ Diet Bleeding ☐ Folic acid _ _ 🗆 □ Nausea _ Anesthesia ☐ Physical activity/ rest / stop work date _ ☐ Infections or fever ☐ Uterine/Cx procedure _ ☐ OTC drugs / vitamins _ □ Other . \square RESP. or CV □ quit <u>DD MM YYYY</u> ☐ Alcohol ☐ never 6. Family History ☐ STIs / infections yes (specify) Drinks/wk: before pregnancy _____ current __ ☐ Susceptible to chicken pox _ ☐ Heart disease Binge drinking \square no \square yes ☐ Thromboembolic / coag. __ ☐ Hypertension ☐ TWEAK score _ _ (see reverse) ☐ Hypertension _ □ Diabetes □ yes ☐ Substance use ☐ no □ GI ___ ☐ Depression / psychiatric ☐ Urinary __ ☐ Heroin □ Cocaine ☐ Marijuana ☐ Alcohol / ☐ Methadone ☐ Solvents ☐ Other ☐ Endocrine/diabetes ___ drug use _ ☐ Prescription □ Unknown ☐ Neurologic _ \square quit \underline{DD} \underline{MM} \underline{YYYY} $\hfill\Box$ Thromboembolic / coag. ☐ Smoking ☐ never ☐ Hx of mental illness Maternal Newborn's Father Cig/day: before pregnancy _ current _ ☐ Inherited disease / defect _ \square Exposure 2nd hand smoke \square no \square yes $_$ ☐ Anxiety ☐ Depression □ Bipolar ☐ Ethnic (e.g. ☐ Financial & housing _ □ PP depression ☐ Other □ Unknown Taysachs, Sickle) _ ☐ Support system ___ ☐ Other ☐ Other ☐ IPV 9. Physical Examination 10. First Trimester Topics Discussed: Plans to breastfeed Pre-pregnant weight|Pre-pregnant BM |Height ☐ Yes ☐ MSS offered ☐ Genetic counseling offered ☐ HIV & other tests DD MM YYYY □ No ☐ Baby's Best Chance ☐ Prenatal education ☐ Maternity pathway ☐ Maybe ☐ Seat belt use ☐ Sexual relations Musculoskeletal Head & neck 11. Summary Breasts & nipples Varicies & skin Heart & lungs Pelvic exam Abdomen Swabs/cervix cytology SIGNATURE: MD / MW

12. Intended place of birth							ce of birth ((Hospital)					
					7	to pla		(i roopital)					
13. Investigations/Results ABO group Rh factor			Rubella PP		on indicated		Maternal prenatal screening			Surname Given Name			
Antibody	Antibody titre Results		S.T.S.							Address			
1 DD MM YYYY HIV test do			st done	☐ Yes	□ No								
2 DD MM			HBsAg	done	□ Yes	□No	Wks DD MM YYYY Resul GBS screen (35-37 wks)			_			
1 DD MM YYYY DPartner/hous					Resu		☐ Yes	□ No		Phone Number Personal Health Number			
							DD MM YYYY ☐ Copy to hospita			15. Potential or Actual Concerns:			
Hemoglol			_		on indica . Hep C,		Edinburgh Postnat Scale (28-32 week Score Follow-up \(\subseteq \text{Yes}		(S) DD MM YYYY	Lifestyle			
1st	3rd		Varicel	la)	•					Pregnancy			
Urine C 8	. S						i ollow-up	, m 162	□NO	Labour			
14. Age	Pre-pre	egnant we	iaht		LMP		EDD			Postpartum			
			G		DD MM Y		YYY	1	MM YYYY	Newborn			
16. Date D M Y	B.P.	Urine	Wt. KG	Gest. Wks.	Fundus cms.	FHF	R FM	Pres. and Pos.		Comments	Nex Visit		
-										1 st tri: serum & NT 10 - 13 ⁺⁶ we	eks		
										2 nd tri: serum 15 - 20 ⁺⁶ we	eks		
										☐ Copy given to patient ☐ Copy sent to hospital at 20 we	eks		
										Gest diabetes screen at 24 - 28 we	eks		
										Discuss fetal movement 26 - 32 we	eks		
										EPDS at 28 - 32 we	eks		
									R	eassess diet, physical activity, smoking, substance & alcohol	use		
										GBS Screen 35 - 37 we	eks		
										Send Hospital copy at 36 we	eks		
40 Use a sot Top of syst	tape measure nphysis to top	of fundus	HEIGHT	90% 50% - 10%	☐ (☐ F	Call sci Risks/b use of l er Inv	& Third Tri hedule penefits of p blood/blood estigation	olanned of products	Breastfe	abour ☐ Hospital admission ☐ Doula ☐ Back to slee vement ☐ Birth plan ☐ VBAC ☐ Infant car se	eats		
20	ESTATI	SMALI SMALI	FOR DATE		SIGNATI	JRE							

16 18 20 22 24 26 28 30 32 34 36 38 40

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WHITE: MOTHER'S CHART YELLOW: INFANT'S CHART PINK: PHYSICIAN/MIDWIFE

12. Intended place of birth							ce of birth ((Hospital)					
					7	to pla		(i roopital)					
13. Investigations/Results ABO group Rh factor			Rubella PP		on indicated		Maternal prenatal screening			Surname Given Name			
Antibody	Antibody titre Results		S.T.S.							Address			
1 DD MM YYYY HIV test do			st done	☐ Yes	□ No								
2 DD MM			HBsAg	done	□ Yes	□No	Wks DD MM YYYY Resul GBS screen (35-37 wks)			_			
1 DD MM YYYY DPartner/hous					Resu		☐ Yes	□ No		Phone Number Personal Health Number			
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WHITE: MOTHER'S CHART YELLOW: INFANT'S CHART PINK: PHYSICIAN/MIDWIFE

RISK ASSESSMENT GUIDE

PAST OBSTETRICAL HISTORY

□ Abortion (12-20 weeks)
□ Cesarean birth (uterine surgery)
□ Habitual abortion (3+)
□ Hypertensive disorders of pregnancy
□ IUGR baby
□ Macrosomic baby
□ Major congenital anomalies
(e.g. Cardiac, CNS, Down Syndrome)
□ Neonatal death
□ Placental abruption
□ Postpartum hemorrhage
□ Preterm birth (< 37 weeks)
□ Rh isoimmunization (affected infant)

☐ Rh isoimmunization (unaffected infant)

☐ Stillbirth

MEDICAL HISTORY

DIABETES

- $\hfill \Box$ Controlled by diet only
- ☐ Insulin dependent
- ☐ Retinopathy documented

HEART DISEASE

- Asymptomatic (no effect on daily living)

HYPERTENSION

- ☐ 140/90 or greater
- ☐ Anti-hypertensive drugs
- ☐ Chronic renal disease

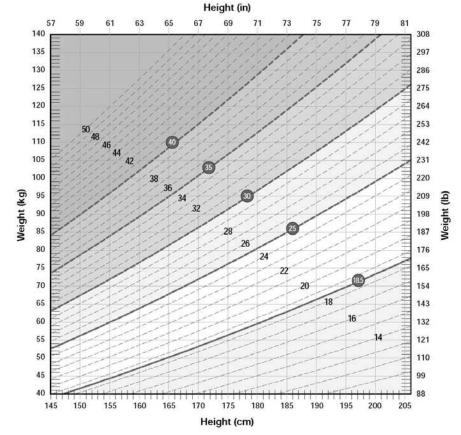
OTHER

- ☐ Age under 18 at delivery
- ☐ Age 35 or over at delivery
- ☐ Alcohol and/or drugs
- ☐ BMI less than 18.5 (Underweight)
- ☐ BMI over 30 (Obesity)
- Depression
- ☐ Height (under 152 cm or 5 ft. 0 in.)
- ☐ Smoking
- ☐ Other medical/surgical disorders eg. epilepsy, severe asthma, Lupus etc.

PROBLEMS IN CURRENT PREGNANCY

- ☐ Abnormal maternal serum screening (HCG or AFP > 2.0 MOM)
- ☐ Alcohol and/or drugs
- ☐ Anemia (<100 g per L)
- ☐ Antepartum bleeding
- ☐ Blood antibodies (Rh, Anti C, Anti K etc.)
- □ Decreased fetal movement
- □ Depression
- ☐ Diagnosis of large for dates
- ☐ Diagnosis of small for dates (IUGR)
- ☐ Gestational diabetes
- ☐ Hypertensive disorders of pregnancy
- Malpresentation
- ☐ Membranes rupture before 37 weeks
- ☐ Multiple pregnancy
- ☐ Polyhydramnios or oligohydramnios
- ☐ Poor weight gain 26 36 weeks (<0.5 kg/wk or weight loss)
- ☐ Pregnancy > 42 weeks
- □ Preterm labour
- □ Proteinura 1+ or greater
- ☐ Smoking any time during pregnancy

To estimate Pre-pregnancy BMI, locate the point on the chart where height and weight intersect. Read the number on the dashed line closest to this point.



Health Risk Classification According to BMI

		3
Classification	ВМІ	Risks of developing health probems
Underweight	< 18.5	Increased
Normal	18.5 - 24.9	Least
Overweight	25 - 29.9	Increased
Obese I	30 - 34.9	High
Obese II	35 - 39.9	Very High
Obese III	> = 40	Extremely High

Source: Health Canada. Canadian Guidelines for Body Weight Classification in Adults. Ottawa: Minister of Public Works and Government Services Canada; 2003.