## British Columbia Antenatal Record Part 2 12. Planned place of birth @ 20 wks Planned place of birth @ 36 wks Referral hospital Copy to hospital Confirmed EDD (dd/mm/yyyy) by: US US IVF 13. Investigations Date (dd/mm/yyyy) Antibody Titre Date RhIg given (dd/mm/yyyy) Hemoglobin (g/L) AB0 Rh factor 1. T3 Results/Follow-up/Comments Test Results Rubella ☐ Imm ☐ Non-imm | Value (IU/mL) Postpartum vaccine required HIV☐ Neg ☐ Pos ☐ T3 repeat if high-risk Syphilis □ N/R □ R 15. Ultrasounds & Other Imaging Investigations Anti-viral therapy required HBV DNA (IU/mL) Date Comments Newborn vaccine required HBsAg □ N/R □ R ☐ Newborn vaccinc required ☐ Newborn HBIg required □ Partner/household contact Gonorrhea ☐ Neg ☐ Pos ☐ T3 repeat if Pos Chlamydia ☐ Neg ☐ Pos ☐ T3 repeat if Pos Urine C&S □ Neg □ Pos Culture GDM (@24-28 wks ☐ GDM test declined ☐ Diet controlled Insulin required 16. Perinatal Considerations & Referrals GCT (50 g) □ Neg □ Pos Value (mmol/L) @ 1 hr Pregnancy type: Singleton ☐ Twin ☐ Multiple (3+) GTT (75 g) □ Neg □ Pos Value (mmol/L) @ 1 hr @ 2 hr VBAC eligible @ 36 wks: ☐ No ☐ Yes □ N/A VBAC planned @ 36 wks: ☐ No Yes □ N/A GBS (@35-37 wks) Neg Pos Date (dd/mm/yyyy)\_ ☐ Copy to hospital Plan to breastfeed: ☐ No ☐ Yes ☐ Undecided Other (e.g. Ferritin, TSH, HepC) Lifestyle/substance use Pregnancy **Prenatal Genetic Investigations** Declined Results Labour & birth ☐ SIPS ☐ IPS ☐ CVS Quad Breastfeeding □ NIPT (MSP) □ NIPT (self-pay) □ Other ☐ Amnio 14. Edinburgh Perinatal/Postnatal Depression Scale\* □ Declined Postpartum Date (dd/mm/yyyy) GA (wks/days) Contraception plan Total score Anxiety subscore (questions 3-5) Self-harm subscore (question 10) Follow-up Newborn **17**. Date FHR Pres. & Urine Fundus Comments\* Initials position Please see the next page, British Columbia Antenatal Record Part 2 (cont'd), to record additional visits.

 1. (name)
 (signature)
 MD RM NP

 2. (name)
 (signature)
 MD RM NP

\* Please refer to **Reference Page 2** on the back of this page for guidance and a list of discussion topics.

18. Sign-Offs

☐ MD ☐ RM ☐ NP