12. Intend	natai			ce of birth	(Hospital)	<u> </u>	1					
121	.ou place	0. 0			7 (1011)	ito piat	oo or birar	(i ioopitai)	'			
Antibody titre Results ADD MMYYYYY Rh factor Results			Rubella PP		on indica	ted	Maternal prenatal screening			Surname Given Name		
			S.T.S. HIV test done Yes No HBsAg done Yes No				-			Address		
							Wks DD MM YYYY Result					
2 DD MM												
1 DD MM YYYY 2 DD MM YYYY □ Partner/hc □ NB vaccin.					Resu		☐ Yes	□ No		Phone Number Personal Health Number		
				ner/hous	ehold co	ntact	DD MM YYYY Copy to hospitate Edinburgh Postnate Scale (28-32 week		tal Depression			
										15. Potential or Actual Concerns:		
				her tests (e.g. Hep C, TSH, ricella)			Score DD MM YYYY			Lifestyle		
Urine C 8	s S		1				Follow-up	□Yes	□No	Pregnancy Labour		
										Postpartum		
14. Age Pre-pregnant we			eight G		LMP DD MM Y		YYYY DD		MM YYYY	Newborn		
16. Date	B.P. Urine		Wt.	Gest. Wks.	Fundus cms.	FHF	R FM	Pres. and Pos.		Comments		
			NO					F05.			Visit	
										1 st tri: serum & NT 10 - 13 ⁺⁶ wee	ks	
										2 nd tri: serum 15 - 20 ⁺⁶ wee	ks	
										☐ Copy given to patient ☐ Copy sent to hospital at 20 wee	ks	
										Gest diabetes screen at 24 - 28 wee	ks	
										Discuss fetal movement 26 - 32 wee	ks	
										EPDS at 28 - 32 wee	ks	
									R	eassess diet, physical activity, smoking, substance & alcohol u	se	
										GBS Screen 35 - 37 wee	ks	
										Send Hospital copy at 36 wee	ks	
SYMPHYSIS - FUNDUS HEIGHT (cm) Use a soft tape measure (cm) Top of symphysis to op of fundus 10% 10% 10% 10% 10% 10% 10% 10% 10% 10					17. Second & Third Trimester Topics Discussed: Call schedule Risks/benefits of planned or use of blood/blood products Breastfeeding 18. Other Investigations & Comments 1st US DD MM YYYY GA by US Weeks + days GA by US Weeks + days Hospital admission Doula Back to sleep Birth plan VBAC Infant car seats Pain management Cesarean If maternal prenatal screen above cut off, amnio: Yes							
15	GESTATIO	ON AGE	FOR DATE		SIGNATI	URE				AIS ANN		

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