

Patient Label Here



# Antenatal General Encounter, History and Pregnancy Tabs

**Demographics:**  Per patient label OR

Mother Family Name \_\_\_\_\_ Given Name \_\_\_\_\_

Maternal Date of Birth: dd / mmm / yyyy Chart Number : \_\_\_\_\_ Postal Code: \_\_\_\_\_

No Fixed address  Expected date of Birth: dd / mmm / yyyy

**Language Spoken at Home :**  One  English  French  Other (specify): \_\_\_\_\_  Unknown

## Maternal Health Conditions: (LIST)

**Mental Health Conditions:**  None  Anxiety  Depression  History of PP Depression  Addiction  Bipolar  Schizophrenia  
 Other: Please Specify \_\_\_\_\_  Unknown

**Women Abuse :**  One  No Disclosure  Disclosure  Unable to ask

**First Trimester Visit:**  One  Yes  No  
 Unknown

**Antenatal Health Care Provider:**  None  
 Obstetrician  Family Physician  Midwife  
 Nurse Practitioner (APN/CNS)  Other  
 Unknown

**Obstetrical History:** Gravida: \_\_\_\_\_ # of Previous Term Births: \_\_\_\_\_ # of Preterm Births \_\_\_\_\_

# of Previous Abortions: \_\_\_\_\_ # of Living Children: \_\_\_\_\_ # of Previous Stillbirths: \_\_\_\_\_

# of Previous Vaginal Births: \_\_\_\_\_ # of Previous C/S: \_\_\_\_\_ # of Previous VBACs: \_\_\_\_\_

**Height:** \_\_\_\_\_  Unknown **Pre-pregnancy weight:** \_\_\_\_\_  Unknown

**Number of fetuses:** \_\_\_\_\_

**EDB:** dd / mmm / yyyy **EDB determined by:**  One  Last Menstrual Period  First trimester dating ultrasound  
 Second trimester ultrasound  Assisted reproductive technology  
 Obstetrical clinical estimate (includes SF height)  Unknown

**Type of conception:**  Spontaneous  
 Intrauterine Insemination (IUI) alone  
 IUI with ovulation induction but no IVF  
 Ovulation induction without IVF (i.e. Clomid, FSH)  IVF  IVF ICSI  Surrogate  
 Vaginal Insemination  Unknown

**Prenatal Classes:**  One  Yes  No  Unknown

**Intention to Breastfeed:**  One  Yes, intends to exclusively breastfeed  
 Yes, intends to combination feed (use breast milk and breast milk substitute)  No, does not intend to breastfeed  
 Mother unsure  Unknown, intent not collected

**Folic Acid Use:**  One  None  Pre-conception only  During pregnancy only  Pre-conception and during pregnancy  Unknown

**Smoking at First Trimester Visit:** One None < 10 cigarettes/day 10-20/day >20/day Amount unknown Unknown

**Resides with smoker at first trimester visit:** One Yes No Unknown

**Alcohol Exposure in Pregnancy:** One None < 1 drink/month 1 drink/month 2-3 drinks/month 1 drink/week More than 1 drink/week  
 Episodic excessive drinking (binging)  Exposure prior to pregnancy confirmed, amount unknown  Unknown

**Drug and Substance Exposure in Pregnancy:** None Cocaine Gas/Glue Hallucinogens Marijuana Opioids Other Unknown

**Medication Exposure in Pregnancy:** None Amphetamines Antibiotics  
Anticonvulsants Anti-emetics Antihistamines Anti-inflammatory Anti-retrovirals  
Anti-rheumatic Antiviral Cardiovascular Chemotherapeutic Agents  
Contraceptives Gastrointestinal agents General anaesthetic Herbal or  
homeopathic remedies Insulin Methadone/Subutex Opioids Other over the counter  
medications Other prescription Psychotropic Selective Serotonin Reuptake Inhibitors  
Thyroid medications Vitamin A and Congeners Vitamins Other  
Unknown

**Infection & Pregnancy:** None C-Difficile Chlamydia  
Gonorrhea Group B Streptococcus Hepatitis A  
Hepatitis B Hepatitis C Herpes Simplex Virus HIV HPV  
Seasonal Influenza Syphilis Trichomonas  
Methicillin-resistant staphylococcus aureus (MRSA)  
Suspected Chorioamnionitis Urinary Tract Infection (UTI)  
Viruses-other Other infections Unknown

**Diabetes and Pregnancy:** One None Gestational Insulin Gestational No Insulin Type 1 Type 2 - Insulin Type 2 - No Insulin  
Type Unknown Unknown

**Hypertensive Disorder in Pregnancy:** None Gestational Hypertension Preeclampsia Preeclampsia requiring magnesium sulfate  
Pre-existing Hypertension with superimposed preeclampsia Eclampsia HELLP Unknown

**Complications of Pregnancy:** None Unknown

**Complications of Pregnancy – Fetal:** Anomaly(ies) Isoimmunization/Alloimmunization Intrauterine Growth Restriction (IUGR) Large for Gestational Age (LGA) Oligohydramnios Polyhydramnios Other

**Complications of Pregnancy - Maternal:** Anemia unresponsive to therapy Antepartum bleeding (persistent and unexplained)  
Gestational diabetes Hyperemesis Gravidarum (Requiring Hospital Admission) Hypertensive Disorder of Pregnancy  
Preterm pre-labour rupture of membranes (PPROM) Preterm labour prior to this admission Prelabour rupture of membranes(PROM) Other

**Complications of Pregnancy – Placental:** Placenta accreta Placenta increta Placenta percreta Placenta Previa Placental abruption Other