

risk factors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

allergies:

\_\_\_\_\_

name \_\_\_\_\_ spouse \_\_\_\_\_

phone \_\_\_\_\_ EDD \_\_\_\_/\_\_\_\_/\_\_\_\_

G \_\_\_\_ P \_\_\_\_ DOB \_\_\_\_\_ blood type \_\_\_\_\_

base weight \_\_\_\_\_ height \_\_\_\_\_ BP \_\_\_\_/\_\_\_\_

third trimester checklist:

- preparing for birth & postpartum
- birth supplies
- labor support
- mommy & baby care
- special needs babies
- breast feeding, breast care, hygiene
- circumcision, vitamin K, newborn screening tests
- newborn supplies, car seat
- sibling preparation
- household pets
- baby safety
- warning signs, PROM, bleeding
- fetal kick counts
- fetal monitoring
- pre-birth home visit
- is it labor?
- post-dates protocol
- when to call

date: \_\_\_\_\_ weeks this visit: \_\_\_\_ w \_\_\_\_ d last visit on: \_\_\_\_\_

fetal activity: \_\_\_\_\_

complaints/concerns: \_\_\_\_\_

headaches: \_\_\_\_\_ rash: \_\_\_\_\_ pain: \_\_\_\_\_

sleep: \_\_\_\_\_ contractions: \_\_\_\_\_

discussion: \_\_\_\_\_

handouts given: \_\_\_\_\_

UA notes: \_\_\_\_\_ weight: \_\_\_\_\_ GBS: y/n + / - H & H: \_\_\_\_\_

US notes: \_\_\_\_\_ birth pool: y/n birth kit: ordered/received

pelvic/ vaginal exam notes: \_\_\_\_\_

swelling/edema: \_\_\_\_\_

abdominal exam notes: \_\_\_\_\_

presentation: \_\_\_\_\_ position: \_\_\_\_\_

BP/vitals notes: \_\_\_\_\_

FHT notes: \_\_\_\_\_

payments up to date?: y/n informed consent on file? y/n pre-birth home visit on: \_\_\_\_/\_\_\_\_/\_\_\_\_

address/directions \_\_\_\_\_ next visit on \_\_\_\_/\_\_\_\_@\_\_\_\_m