OBSTETRICAL FILE MEDICAL OBSERVATIONS, RISK FACTORS AND TREATMENT PLAN



Family name at birth	Given nam	ne(s)		7					
Health Insurance Number		-							
Address				-					
The desired of the de									
PHYSICAL EXAM									
Height Weight before pre	gnancy (mass) kg		nass) kg	BMI		Blood pressure		Thyroid	
Neck		Heart				Lungs		l	
Breasts	Abdomen			Lower lin	nbs		Perineur	m	
Vagina	Cervix			Uterus			Adnexa		
	TBBI creening:	Gonorrhea	Chlam	ydia	Correspondence volume and age	between utering	ne		
Particularities	creering.			<u>, </u>	voidine and age	or programoy			
RISK FACTORS AND TREATM		N							
Risk factors (des	cription)				Plan (recom	mendations, n	nanagem	nent, etc.)	
Preterm labour - uterine anomalies - incompetent cervix - previous premature - short or dilated cervix - infection - ergonomic risk - multiple pregnancy - ergonomic risk									
- other:									
Restricted intrauterine growth - previous - medical condition (diabetes, HBP) - small size (< 1.50 m) low-weight baby - weight gain < 8 kg at term - pregravidic weight - cigarette smoking - underprivileged socioecono. status < 45 kg									
- other:									
Hypertension									
Diabetes									
Maternal age Adolescent Advanced									
Congenital anomalies									
Presence of STBBI Presence of STBBI risk factors Need for repeat screening									
Need for risk-reduction counseling									
Pregnancy after in vitro fertilization Fertility treatments, etc.									
VBAC									
						Yea	r	Month Da	ay
Signature					Dat	е 🗀 🗀			

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