

PRENATAL RECORD

Patient Name: Marla Trent
 Date of Birth:

Age: 14

Med Record #: 320002
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Patient Information

Street Address:	Home phone #: (616) 555-0000 Cell phone #: (616) 555-0001 Work phone #: None
Marital Status Single: Yes Married: Separated: Divorced: Widowed:	Husband/Father of Baby Name: Involved: Not Involved: X (see note)
Education (last grade completed)	Occupation Homemaker: Student: YES Outside Work:
	Emergency Contact Darla Trent Relationship: mother Phone #: (616) 555- 1001

Reproductive History

LMP	EDC	Gravida	Para		Abortions			Living	Deceased
			Term	Preterm	Spont	Elect	Ectop		

Prior Pregnancies

Date	Gestation	Delivery	Complications	Outcome

Initial Laboratory Data (Date: 1 week ago)

Blood	Rubella	RPR/VDRL	HBsAG	GBS	HIV
Type: Rh:	Immune: Non-Immune:	Positive: Negative:	Positive: Negative:	Positive: Negative:	Positive: Negative: Declined:
Hemoglobin	Hematocrit	Pap Smear		Cultures	
		Date: xx-xx-xx Results: WNL	Type GC Chl	Date xx-xx-xx xx-xx-xx	Results

8-18 Weeks Laboratory Data

Ultrasound	Multiple Markers Test	Amnio/CVS	Karyotype
Date: Results:	Date: 1 st visit Results:	Date: Results:	46, XX 46, XY Other:

History of Substance Use

Use of Tobacco		Use of Alcohol (ETOH)		Street Drugs	
Type of Tobacco Used: Cigarettes	# of Years Smoked:	Number of drinks per day (average)	# of Years Drinking:	Type: Denies Use	# of years Use: None
Prior to PG: Now:		Prior to PG: occasional Now:		Prior to PG: None Now: None	

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Past Medical History [0 = Negative / + = Positive and describe]

Allergies: No Known Allergies (NKA)							
Gonorrhea: 0	Chlamydia: 0	HSV: 0	HPV: 0	Syphilis: 0	HIV: 0	TB: 0	Hepatitis B: 0
STD/HIV Risk	0	States pregnancy result of date rape, no other partners		Pulmonary/Asthma	0		
BCP w/in 90 days of conception	0			Neuro/Epilepsy	0		
Hospitalizations	0			Hepatitis/GI	0		
Surgeries	0			Psychiatric	0		
Transfusions	0			Thyroid	0		
Diabetes	0			Varicosities/Phlebitis	0		
HTN/Vascular	0			Uterine Anomalies Or DES exposure	0		
Cardiac Problems or Disease	0			Abnormal Pap Results	0		
Kidney/ UTI	0			Trauma/Domestic Violence	0		

Immunization Status

Td Booster: xx-xx-xxx (at age 13)	MMR: 3 doses received xx-xx-xx; xx-xx-xx; xx-xx-xx	Varicella: xx-xx-xx
Polio: 3 doses received xx-xx-xx; xx-xx-xx; xx-xx-xx	Hepatitis B: Not immunized	Flu: Not immunized

Initial Pregnancy Examination [N = Negative/Normal/None; P = Positive]

Date: Today	Height: 5' 7"	Pre-Preg Weight: 120 pounds	Current Weight:	Ethnicity: Caucasian
Vital signs	T = 98.6; P = 64; R = 16; BP = 108/64		Gestational Age by LMP	20 weeks
Planned Pregnancy?				
Physical Exam			Present Pregnancy History	
Alert/Cooperative	N		Nausea/Vomiting	N
HEENT	N		Vaginal Bleeding	N
Thyroid/Neck	N		Vaginal Discharge	N
Lungs	N		Urinary S/S	N
Heart/Pulses	N		Constipation	N
Breasts	N		Fever/Rash	N
Abdomen	N		Infection	N
Extremities/Skin	N		Other	N
Pelvic Exam			Assessment/Plan	
Vulva	N	Goodell's/Chadwick's signs noted. Uterus 1 FB below umbilicus		
Vagina	N			
Cervix	P			
Uterus	P			
Adnexa	N			
Rectum	N			

