

<b>Site ID:</b>		<b>CONSENT</b>					
FN:	LN:	DOB:	ZIP:				
Race:	Ethnicity:	EDC:	SourceEDC:				
ED:	Religion:	Gender:	SexO:	Partnered:	Partgender:		
Planned Place of Birth/Entry to care		MedicaidElig	Payor:	Payor Details:			
PrepregWt:	Ht:	FinalWt:	FinalWtDT:				
<b>Pre-preg Dx/Infec:</b>							
Hx/Timing of preeclprev pg				Hx Dep prevpg			
PrenatalMW:		TrimStartPNC:	Date1st PNVisit:				
DepScreen 1st PN Visit/Other Visit /PostPartum Visit							
IPV	HxSex Abuse	Food	Transp	Housing	Refforsupport	EarlyHbA1c	GBS
G:	Term:	Ptm:	SA:	TA:	L:	SB:	
HxCS	#CS	Ind1stCS	OtherUterineSurg				
<b>1st Trim US Date (if any):</b>		IVF					
Pre-Delivery-HTN/Preec		GA HTN/Preec Dx:		GDM	GDMtx:		
ASA	Cholestasis	Previa	Anemia	FGR/IUGR	SMM	SMMspec	
Antepartum-MH: Referral for Soc/Psych Support:							
Other PN Complics:							
Breech >36 w	ECVtry	ECVsuccess:	Otherturn:				
PN Consult/Ref for ComplicsPg:				Rsn 4 prenatal consults:			
Transf OUT b4 labor:		Transf TO-Provider type		Rsn transB4 labor:			
DT trans OUT of MW care (last appt w MW)							
Did client return4 MW care after transf							
Planned site type at initiation of labor:			<b>DTm MW and stayed 4labor:</b>				
CX:	EFF:	Station:	Bishop:				
LaborInduced		InducIndic:					
Labor Encouragement/Ripening Methods:							
<b>DTm ROM:</b>		AROM/SROM	MEC	MEC1st observed-stage		GBS	ABX4GBS
Any HTN in labor?		AcuteSevHypertension?			Chorio?		
Doula/Pain Relief Methods:							
Malpos/presentation?			HowMalpositionManaged?				
IP Transfer	DTm Trans Dec:		DTm Trans Call:		DTm left planned site:		
DTm arrival at hospital		CxDilatTransfer:		Reportgiven/Recordsprovided/			
TUrgency:		TMode:	TRsn-Mat/Fetal/both		DelayofCare		
Prim rsn IPtrans:			FacilityName:		cervdil:	Epidural	
Pit							

<b>DTm Complete:</b>		<b>DTm start Pushing:</b>							
EPIS:	EPIS Type:	LAC:	Repair:	Timing of cordclamp (mins):					
ActiveMgmt3stg:		OtherhemMgmt:		AddUterotonics:					
ManRemoval	BldLoss:	QBL/EBL:							
PP Transf	DTm PPtransf decision:		DTmPPcall:						
DTmLeftSite:		DTm PPHospAdmit-Mom							
PP Transf TO:									
PrimarRSNPPtrans:		Urgency:	Mode:	Reportgiven/Recordsprovided					
PP HospAdmit30	AdmitRSN:								
PPMentalHealthconcerns/Referrals:									
DTLastPPVisit:		#PP visits	#other PP contacts	Return to MW care after TOC					
<b>NEWBORN</b>									
Surrogate/Adoption NBFN:		NBLN:		NBRec#:					
BirthLocation:		BirthCenterName:							
DelPrac:			PracType:	CPM	CNM	CM	MW	LPM	LM
Secondary Attendnat			PracType:	CPM	CNM	CM	MW	LPM	LM
Shoulder Dystocia	Delay in seconds:		ManeuverstoResolve:						
BPPositionAtBirth:		Waterbirth		DCC					
Fetal presentation:		NB Cephalic Postion:		FinalMode of Del:		Ind4OVD:			
<b>DTm of Delivery:</b>		<b>DTm Placenta:</b>							
Apgar1:	Apgar5:	BW in grams:		BW in LBS and Oz:					
Resuscitation:		NBComplications:							
NICU admit reason:			NICU Level:						
NB Transf	HospName:			TransferMode:					
DTmTransfDecsion:		DTm TransfCall:							
DTmemsarrival:		DTmdepartedsite:		DTmarr@hosp:					
Rsn4Transf:		Urgency:							
Report/Records		Delay of Care							
EligExclusive BM feeding?		ExclusiveBM feed?							
AnyHumanMilkfeed		FeedModes/Aids 1st 48hrs:							
ExclusiveHumanMilkFeed6weeks?		Allfeedingmodes6weeks:							
Ankyloglossia	Frenotomy	HepBVaccine							
NB Complics 1st 14days:									
NBHospAdmit30	NBAdmitRSN:								