Antenatal Experiences – examples at various gestations

Antenatal Experience: 10 weeks (Booking appointment)

Label: AN10 Date: xx/xx/xxxx

Woman's Initials	CJ
Gravida/Parity	4:2
Weeks (gestation)	10+2
Weight (if recorded)	63 (BMI 21)
Fundal Height (cms)	Not performed. Early gestation
BP (seated)	120/80
Urinalysis (if required)	+ trace of leucocytes. Asymptomatic for UTI. Urine sample sent to pathology for MC&S
Presentation	Early gestation, not required
Fifths above the brim	Early gestation, not required
Fetal Movements	Not yet felt FM
Fetal Heart(s) (bpm)	Not undertaken due to early gestation.
Screening/ Investigations results	Bloods were not undertaken with the GP prior to the appointment. Provided with the necessary forms for required blood tests.
Next Visit	21 Weeks

Midwifery Management and Education: (examples below)

- Welcomed CJ to *** Hospital and congratulated on the pregnancy. First booking appointment.
- Screening tests have not been organised through GP pathology forms provided.
- Taken a thorough health, pregnancy and medical history as documented in the handheld record. (*Please highlight any deviations from the normal here in your record*)
- Dating scan undertaken, confirmed due date as ***
- Declines First trimester screening
- Low risk pregnancy prefers group practice. Referral made
- Forms provided for morphology scan. CJ is aware to undertake prior to her next appt.
- EDPS 2 and ANRQ 3. Low risk. Is aware of support services. Planned pregnancy good family support.

Signature and designation of the supervising midwife or doctor. Date of signature and date of the episode of care must match *(retrospectively signed records will not be counted).*

Antenatal Experience: 28 weeks

Label: AA52 Date: xx/xx/xxxx

Woman's Initials	CJ
Gravida/Parity	4:2
Weeks (gestation)	28
Weight (if recorded)	Not recorded as not required at this appointment
Fundal Height (cms)	31
BP (seated)	110/70
Urinalysis (if required)	Not performed. Did not disclose urinary symptoms
Presentation	Early gestation, not required
Fifths above the brim	Not engaged
Fetal Movements	FMF. Regular pattern mainly at night
Fetal Heart(s) (bpm)	150. Accelerations auscultated. Baby active at the time of auscultation
Screening/ Investigations results	Organised USS for measuring larger for gestation OGGT Fasting: 5, 1 hour, 8, 2 hour 7. Negative for GDM A Negative blood group HB 120 VIT D 40
Next Visit	32 weeks

Midwifery Management and Education: (examples below)

- CJ measuring large for gestational age. Senior midwife checked fundal height measurement. Consultation
 with the doctor and CJ has been asked to get a growth scan prior to the 32-week appt. CJ consented and
 agrees. Forms provided.
- Educated on Anti-D. Consent forms signed, and then Anti-D administered
- Recommended vitamin D supplements for low vitamin D results. (Supplements required for <60)
- Discussed whooping cough immunisation and flu vaccination. CJ has asked to think about it and decide at her next appointment.
- Discussed frequency, expectation, and pattern of fetal movements. Aware of when and who to call if changes to the pattern.

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Antenatal Experience: 36 Weeks

Label: AA73 Date: xx/xx/xxxx

Woman's Initials	CJ
Gravida/Parity	4:2
Weeks (gestation)	36+5
Weight (if recorded)	Not measures as not required at this appointment
Fundal Height (cms)	37cm
BP (seated)	120/80
Urinalysis (if required)	Not performed. Was not indicated, did not disclose urinary symptoms
Presentation	Cephalic
Fifths above the brim	3/5
Fetal Movements	Fetal Movements Felt (FMF). Regular pattern mainly at night
Fetal Heart(s) (bpm)	FHH doppler- 145. Accelerations auscultated
Screening/ Investigations results	GBS swab is pending.
Next Visit	38 weeks

Midwifery Management and Education: (examples below)

- Self-taken, GBS screening performed (with consent) before this appointment. Results are currently pending.
- Feeling well however states that she is more tired at night. Blood form to re-check ferritin and HB provided. CJ is aware to undertake this before the next appointment
- Discussed birth plan, (state the preferences)
- Finished work education
- Discussed the signs of labour. Discussed who and where to call if SROM, pain, bleeding, decreased movements.
- Experiencing back pain physio referral undertaken with consent

Signature and designation of the supervising midwife or doctor. Date of signature and date of the episode of care must match *(retrospectively signed records will not be counted).*