

Newly pregnant? Important elements of your history

Please complete to the best of your knowledge. Most questions aim to identify factors which increase risk to you or baby— feel free to ask if you don't understand a question or the reason for asking it.

How do you feel about being pregnant?

When was your last period? Was it a normal period?

Have you done a pregnancy test? If so, when was the first time it was positive?

How long have you been trying to fall pregnant for?

Are your periods usually regular or irregular?

Have you been having any fertility treatment to help you become pregnant?

Have you ever been pregnant before? If so, how many times and what were the outcomes each time? Were there any complications during the pregnancy, during the birth or afterwards for you or for baby?

Do you have any medical conditions that might affect your pregnancy? e.g diabetes, thyroid disease, high blood pressure, epilepsy, low platelet count, asthma, heart, lung or kidney problems and mental health.

Do you take any medications? This includes prescription medication such as asthma puffers as well as over the counter, herbal or alternative medications & supplements e.g. folic acid & pregnancy vitamins.

Have you had any surgical operations? If yes, what did you have, when & were there any complications?

Do you ever smoke? If yes, what do you smoke, how much and how often? Do others smoke near you?

Do you drink alcohol? If yes, what do you drink, how much and how often?

Do you use drugs? If yes, what do you take, how do you take it, how much and how often?

Do you follow any particular diet such as vegan, vegetarian or dairy-free?

What types of exercise do you like? Do you exercise regularly? If yes, what types of exercise do you do?

Have you ever had a Pap Smear or Cervical Screening Test? If yes, when was it and what was the result?

Have you ever had a sexually transmitted infection?
Did you have vaccinations as a child? Have you had any as an adult e.g. for travel, whooping cough?
Have you had chicken pox? If not, have you been vaccinated for it? (Available 2000 & funded since 2005)
Are you at risk of Vitamin D deficiency? e.g. if you don't get much sunlight onto your skin.
Are you in a healthy weight range?
Do you have regular dental checks? When was your last one? Any problems with your teeth?
Do you feel safe at home and at work?
Do you live & work in a healthy environment? Does your partner live & work in a healthy environment?
What sort of work do you do? What sort of work does your partner do?
So we can understand the risk of inherited conditions better, would you please identify your ethnic background? The ethnic background of baby's father?
Did your mother and/or your sisters have any problems in pregnancy?
Are there any medical conditions that run in your family? Any that run in the family of baby's father?
Have there been a repeated number of pregnancy complications or babies born with specific medical conditions in your family? Conditions such as recurrent miscarriages, stillbirth or early death, intellectual disability, thalassaemia, cystic fibrosis, fragile X or spinal muscular atrophy may be important.
Is there a family history of mental illness? e.g. anxiety, depression, nervous breakdown or bipolar disorder?
Do you plan to travel? If yes, where, when and for how long?
Have you thought about how you will feed your baby?
Have you thought about where you want to have your baby? Do you have private insurance?