# Mother and Baby Prenatal Visit Chart

**Due date**  
**My goal weight is**  

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Baby’s age</td>
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<tr>
<td>Weight</td>
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<tr>
<td>Blood pressure</td>
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<tr>
<td>Sugar/protein</td>
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<tr>
<td>Baby’s heart rate</td>
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<tr>
<td>Fundal height</td>
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**Lab results:**  
- Blood type/Rh factor  
- Antibody  
- Hematocrit  
- Rubella  
- Hepatitis B  
- STDs  
- Pap test  
- Other  

- AFP/triple/quad screen  
- Diabetic screen  
- Group B strep  
- Vaccinations  

**Regular visits:**  
- Monthly until 28 weeks  
- Every two weeks from 28-36 weeks  
- Every week from 36 weeks to birth  

**Ultrasound**  
<table>
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<th>Date</th>
<th>Results</th>
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**Notes**  

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**WHEN TO CALL PROVIDER**

**Signs of preterm labor**  
- Bleeding, spotting or fluid leaking from your vagina  
- Contractions: five or more in 1 hour  
- Cramps that may feel like your period  
- Lower backache  
- Pelvic pressure that feels like the baby is pushing down

**Bladder infection**  
- Pain or burning when urinating

**Hypertension**  
- Severe headache  
- Spots in your vision/blurry vision  
- Severe swelling of your hands, feet or ankles

**Baby not moving or moving less**  
Call when your provider has told you to call

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**Important phone numbers**

- Office/Clinic  
- If office or clinic is closed  
- Emergency calls  
- Labor & Delivery

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**Know the directions to your hospital or birth center**

Please call your care provider before leaving for the hospital or birth center.