

# Your Prenatal Checklist

What's your due date? How is your pregnancy progressing? Find out these answers during your prenatal visit. **Complete this form with help from your doctor.**

## Your Medical History

Date of last period \_\_\_\_\_

Prescriptions \_\_\_\_\_  
\_\_\_\_\_

Contraceptive use \_\_\_\_\_

Allergies \_\_\_\_\_  
\_\_\_\_\_

Medical conditions \_\_\_\_\_  
\_\_\_\_\_

Exercise \_\_\_\_\_  
\_\_\_\_\_

Nutrition habits \_\_\_\_\_  
\_\_\_\_\_

## Baseline Tests

Weight \_\_\_\_\_

Blood pressure \_\_\_\_\_

Heart rate \_\_\_\_\_

Urine and  
blood lab work \_\_\_\_\_  
\_\_\_\_\_

A pelvic exam and  
possibly a Pap smear \_\_\_\_\_  
\_\_\_\_\_

## Your Due Date

Due date \_\_\_\_\_

(Knowing your due date helps your doctor more accurately monitor your progress and baby's growth.)

## Your Questions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

