| 1. HOSPITAL / HEALTH CENTRE / BIRTHING CENTRE | | | | | | | | R SUMMARY AN RY RECORD - F | | | |
|---|----------|----------------------|------------|-------------|------------|----------|-------------|-------------------------------|-------|------------------|--|
| Gravida | Term | Preterm | Abortion: | | | Living | Ectopic | | | | |
| | | | Spontaneou | is Thera | peutic | | | | | | |
| EDD DD MM | YYYY | Gest. Age Weeks + | | Blood Gro | oup & Type | Hgb c | n Admission | Surname | (| Given name | |
| 2. RISK F | ACTORS I | BEFORE L | ABOUR G | BBS Status: | Positive | Negative | Unknown | | | | |
| | | | | | | | | | | | |
| 3 DISK F | ACTORS I | DURING L | AROUR | | | | | | | | |
| J. KIOK I | ACTORS | DOMING L | ADOUR | | | | | ADMISSION: | Time: | Date: DD MM VVVV | |

| 6. CONSULTANTS Obstetric / GP Obstetrics | | | | Pediatr | ic | | | | | |
|--|-----|------------|---------------------------|----------------|-----|----|---------------------------|---------|---------|--------|
| 7. BABY | | | | | | | | APGAR S | SCORES: | |
| Weight (g) | Sex | Stillbirth | Antepartum Intrapartum | Fetal Autopsy: | Yes | No | Identification / Band No. | 1 MIN | 5 MIN | 10 MIN |

| 11. DELIVERY | | | | | | |
|---|-------------|--|--|--|--|--|
| Presentation & Position of Fetus: During Labour | At Delivery | | | | | |
| 12. VAGINAL DELIVERY | | | | | | |

LABOUR SUMMARY AND DELIVERY RECORD - PART 2



VBAC Eligible: Yes No ٧--

Surname Given name