



Name

Address

..... Postcode

Telephone Date of birth / /

Unit No. NHS No.

These **Pregnancy Notes** are a guide to your options during pregnancy, and are intended to help you make informed choices. The explanations in these notes are a general guide only, and not everything will be relevant to you. Please feel free to ask if you have any questions. Additional information is also available on www.preg.info; or in leaflets which you may be given as and when needed.

Communication Needs

EDD / /

Assistance required Yes Details Your preferred name

Interpreter required Language Interpreter

Plan of care

Depending on your circumstances, you and your partner will have the choice between midwifery based care or maternity team based care during your pregnancy. Please discuss your choices/options with your midwife. This will be based on your individual medical and obstetric history.

Date recorded	Planned place of birth	Lead professional	Job title	Reason, if plan changed
/ /				
/ /				
/ /				

Maternity contacts

Named Midwife ☎

Maternity Unit ☎

Antenatal Clinic ☎ Delivery Suite ☎

Community Office ☎ Ambulance ☎

Primary care contacts

Centre ☎ Other (s)

GP(+ initial) ☎

Postcode(GP) ☎

Health Visitor ☎

Next of Kin

Name

Address

☎ Relation

Emergency Contact

Name

Address

☎ ☎