## British Columbia Antenatal Record Part 2 (cont'd)

16. Perinatal Considerations & Referrals (cont'd)			
	Confirmed EDD (dd/mm/yyyy)	- Surname	
Lifestyle/substance use		-	
Pregnancy		Address	
Labour & birth		_	
Breastfeeding		_	
Postpartum		Phone number	
Contraception plan		- Personal Health Number	
Newborn		_	

Cont'd from previous page of British Columbia Antenatal Record Part 2.

<b>7. Date</b> dd/mm/yyyy)	GA (wks/days)	BP	Urine (if indicated)	Wt (kg)	Fundus (cm)	FHR (per min)	FM	Pres. & position	Comments Nex visit	t Initial
										_
										_
										+
										-
										_
										_
										_
. Sign-Offs										

1. (name)	(signature)	🗆 MD 🗌 RM 🗌 NP
2. (name)	(signature)	🗆 MD 🗌 RM 🗌 NP
3. (name)	(signature)	🗆 MD 🗆 RM 🗔 NP

## **Privacy Notice**

Perinatal Services BC collects, uses and discloses personal information only as authorized under section 26 (c), 33 and 35 of the BC Freedom of Information and Protection of Privacy Act, other legislation and PHSA's Privacy and Confidentiality Policy. Information is collected for the purposes of supporting health care providers, leaders, researchers, and policymakers in their work to improve maternal, fetal, and neonatal health. This includes work carried out for purposes of research, surveillance, program delivery, and evaluation. We take all reasonable steps to make sure personal information is treated confidentially, is used only for the intended purpose and securely stored. For questions regarding collection, use or disclosure of personal information, please contact the Provincial Director, Informatics and Privacy, at 604-877-2121 extension 223761 or business address: Perinatal Services BC, Suite 260 – 1770 West 7th Avenue, Vancouver, BC V6J 4Y6.