Hx.

↱ Introduction hx :-
  1. name = عشان تواصل   7. Race
  2. Age
  3. married status
  4. Residancy (Living)
  5. Occupation (Job)
↱ 6. Blood group   for [woman and husband] ← Rh
                                              → ABO
                                              → Mollar

↱ CC = main complain + duration (how much is the duration prior to addmision ?)
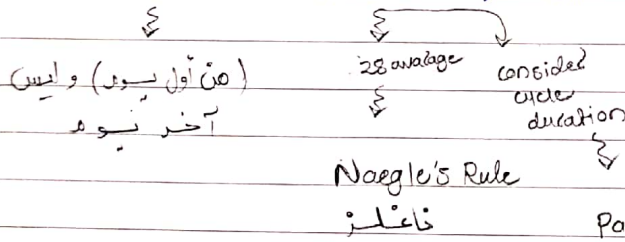 ↱ Obs ⟿ HO the current pregnancy
    Gyne. ⟿ HOPI

1 - Date of addmition
2 - Gravid   / parity   / Miscarrages   ↱ Note :- In multigestation
  # of preg. despite   # of preg. that   # of preg. that   G2 P2 → previous preg. was twins
  of the out come   1. reach 24 w   1. doesn't reach 24w   OR
  (مجرد أنها فحصت إيجابي-ve) 2. delivered   2. delivered   G2 P1 (twins)

                                                              ↱ Note :- miscarrage Vs molar, ectopic
                                                                miscarrage (+) تتعارض في parity لأنها في
                                                                فاذا كانت اشي تاني حطه من قوسين
                                                                P +1 +1 (molar, ectopic)
                                                              miscarrage مافي داعي تكتب معه قوسين

3 - LMP   / EDD   / GA
     ⟨   ⟨   ⟨
  (من أول يوم) و اليس   28 avalage consided   ↱ Note :- to be able to
  آخر يوم   ⟨   oide   calculate the EDD you should
                                duration   eaclude 3 things
              Naegle's Rule   ⟨ بارك   [Lactation, Contraception, irregular]
              تاكد   Parikh's formula   period

↱ History of the current pregnancy
  1) hx of pregnancy ⟿ planned or not ?
                      ↳ How did it start ? and when ?
                      ↳ How did it confirm ?

  2) S/S of pregnancy

  3) new hx [from this addmision] + what have been done to ?
                                    ↳ what exam you do !
                                    ↳ what test you order !
                                    ↳ what ttt you give !

- This pregnancy started as (missed period), (numtt of days) from the LMP (التاريخ) which was (planned OR not), confirmed by (pregnancy test) then confirmed more by antenatal care (on US which show....) then the doctor prescribe for her (....

- Morning sickness Vs Emesis gravidarum Vs hyper emisis gravidarum

وحام الحمل $\updownarrow$ $\updownarrow$

$\updownarrow$ vomiting   Recurrent vomiting, + which affect the

only nausea   general condition of the women

[acid base, disterbances]

- Quickening = 1st fetal movement   recollection of the GA يفيد في

(- NIP = 16-18) (PG = 18-20)

- Enlargment of the Abdomen

~> and this pregnancy pull with uneventfull event tell (date of addmission) as addmitted via (ER, Clinic) as presented with (CC)

                                          ↳ say detailes

CC (اشتكت على)   watery vaginal → Color, amount, smell

                discharge ↳> onset, continous or intermitant

                     ↳ Fever, abdominal pain, bleeding (association)

                      ↳chorioamionitis   ↳ separation of placenta

                           Labour pain

↟ past Obstetric ha

   ↳ask about each para

     1. Related maternal ~> date

Complication (intra-   < ↳ Complication during pregnancy (HTN, DM, Thyroid / Bleeding, ROM)

       post)   ③ mode of delivary

          Doesit (need induction or Augman. / Instrumental / episiotomy)

                ↳ term

     2. Related to baby ②↳ weight

                 ③↳ Sex   if yes

                 ④↳ Enter ICU ~> why! + شو سبب

                 ⑤↳ lactation OR not

                 ⑥↳ now !

- Abortion ~> When started → When it end (which trimester)

   (miscarriage) ↳ Spontanous OR not ?

                ↳ need surgical intervention !!

                ↳ Complication after that

⇨ Gynecological hx :-

1. Menestrual hx
   ↳ menacche = 1st cycle
   [↳ ducation of menses   (2 - 7 d)
   ↳ periodisity [Regular or not]   (21 - 35 d)
   ↳ amount   (Less than 80 mL) ⇝ normally 1 box use
   ↳ Clot

2. Gynecological procedures or surgeries
       (myomectomy , cyst, ...)

3. pap smear

4. Contraception

   (period of infectility , maternal + 1st degree of twins]

5. hx of (breast / ovarian / endometrial) G   Familial

⇨ past medical   ⇨ Familial hx
   1. Chronic diseases   1. Consanguinity
   2. Any addmissions   2. Conginital anomalies
⇨ Surgical hx (any surgeries)   3. Genetic diseases
                                         (thalassemia , SCD, CF , ...)
⇨ Drugs hx
   1. drugs ⇝ dose
   2. Allergies
   3. Blood transfusion

⇨ Social hx
   1. Smoking , Alcohol
   2. Animal
   3. travel
   4. Insurance