

SAMPLE STRENGTHS LIST

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| <ol style="list-style-type: none"> 1. High school education 2. Support system 3. Motivated 4. Emotionally stable 5. Wanted/accepted/planned pregnancy 6. Adequate shelter/clothing 7. Employed | <ol style="list-style-type: none"> 8. Financially stable 9. Adequate transportation 10. Adequate food 11. Refrigerator/stove 12. Ability to cope 13. Experience/knowledge of pregnancy/delivery/infant care/parenting | <ol style="list-style-type: none"> 14. Ability to comprehend and make decisions 15. Interest/willingness to participate in individual/group classes |
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SAMPLE PROBLEM/NEED LIST

Obstetrical

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| <ol style="list-style-type: none"> 1. Hx. of C-Section/Uterine Surgery 2. Hx. of Incompetent Cervix 3. Hx. of <2500 gram infant 4. Hx. of >4000 gram infant 5. Hx. of Stillbirth 6. Hx. of Preterm birth (<36 weeks) or SGA (Wt: _____) 7. Hx. of neonatal death 8. Hx. of abnormal infant 9. Hx. of DES exposure 10. Hx. of hospitalization(s) 11. Preg. Interval <1 year 12. Genetic risk 13. Hypertension/chronic 14. Pregnancy induced hypertension 15. Cardiovascular disorders 16. Diabetes, pre-existing, Type 1 17. Diabetes, pre-existing, Type 2 18. Diabetes, gestational this pregnancy 19. Hx. gestational diabetes (insulin/diet controlled) | <ol style="list-style-type: none"> 20. Chronic renal disease 21. GI disorders 22. Seizure disorder 23. Hypo/Hyperthyroid 24. Pulmonary Disease/TB 25. Hepatitis B (date pos. test _____) 26. Dysplasia/GYN malignancy 27. Anemia/Hemoglobinopathy 28. Multiple gestation 29. Rh hemolytic disease 30. HIV risk 31. STD: _____ 32. Vaginal bleeding started @ _____ weeks 33. Substance use/abuse _____
 Alcohol (_____ drinks/week)
 Cigarettes (_____ cigs/day)
 Smokeless tobacco _____
 Illicit drug(s) _____
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Nutrition

1. Anemia
2. Hypovolemia
3. Abnormal glucose
4. Previous obstetrical complications
5. Underweight (<90% desirable wt.)
6. Moderately overweight (>120% desirable wt.)
7. Very overweight (>135% desirable wt.)
8. Inadequate wt. gain during pregnancy
9. Excessive wt. gain during pregnancy (>6.5 lbs/month)
10. Less than 3 years since menarche
11. High parity
12. Short interpregnancy interval
13. Currently breast feeding
14. Low income
15. Food Insecure
16. Substance Abuse
17. OTC medicine _____
18. Vitamin/min. supplement _____
19. Caffeine _____

SAMPLE PROBLEM/NEED LIST

Psychosocial

- 1.Excessive worries/fears regarding damage to self during pregnancy; fears related to fetus; fear of dying during labor; fears of inability to parent; etc.
- 2.Extreme difficulty or resistance to complying with medical recommendations or restrictions.
- 3.Severe emotional problems.
- 4.Previous pregnancy loss; fetal demise, TAB, SABS, miscarriage, etc.
- 5.Pregnancy complicated by detection of fetal anomaly.
- 6.Previous psychological history of depression, suicidality; psychosis, hospitalization.
- 7.History or current indication of domestic violence.
- 8.Frequent somatic complaints for which no diagnosis can be found.
- 9.*Excessive* difficulty coping with crisis that interfere with self care.
- 10.Ambivalence, rejection, or denial of pregnancy after 20 weeks gestation.
- 11.Perception that pregnancy will cause the mother permanent physical harm or damage.
- 12.*Unrealistic* positive or negative feelings about pregnancy/motherhood/parenthood.
- 13.Lack of resources to assist in maximizing pregnancy, labor and delivery, and parenting (e.g., lack of financial resources, medical insurance, transportation, food, clothing, shelter for self and newborn).
- 14.Relationship discord or absence of a support person.

Health Education

- 1.Substance use (smoking; alcohol; prescription, over-the-counter, and street drugs; home remedies).
- 2.HIV risk status
- 3.Noncompliance with medical advice
- 4.Failed appointments
- 5.Age less than 17 or greater than 35
- 6.Late initiation of prenatal care
- 7.Primagravida or multi-gravida ≥ 5 .
- 8.Previous pregnancy problems
- 9.Nutritional status
- 10.Occupational risk
- 11.Diabetes
- 12.Hypertension
- 13.Cardiovascular problems
- 14.Hepatitis
- 15.Tuberculosis
- 16.STD history
- 17.Uterine problems
- 18.Kidney problems
- 19.Pulmonary disease
- 20.Epilepsy
- 21.Blood problems
- 22.Preterm labor
- 23.Preeclampsia
- 24.Mental disabilities
- 25.Physical disabilities (speech problems, severe hearing or vision problems).
- 26.Inability to read or write or low reading level
- 27.Incompatible language between client and provider.
- 28.Low education level
- 29.Low motivation or interest
- 30.Negative attitude about pregnancy
- 31.Little or no experience with U.S. health care
- 32.Lack of social support structure
- 33.Inability to reach decisions or with comprehension.
- 34.Extreme anxiety or emotional problem (fear, denial, excessive shyness).
- 35.Conflict scheduling class times
- 36.Transportation
- 37.Family problems/abuse
- 38.Economic/housing problems

Informed Consent Needs regarding any medical procedures or tests about which the client will need education and counseling.

Combination of other medical conditions, behaviors, barriers to learning and/or other factors.