

Labour Case Record

Serial No.

Hosp. No.

Date of admission:

Date of discharge:

Name:

Age:

Obs.score:

L.M.P :

E.D.D :

P.O.G :

Height :

Weight :

BMI :

Blood Group & Rh

Complaints:

Information about present pregnancy

Trimester	Date	BP	Weight	Urine	Clinical Findings	Remarks
First						
Second						
Third						

Bladder

Bowel Habits:

Menstrual History: Menarche _____ Years, _____ / _____ Days Cycle Regular / Irregular

Marital History:

Obstetrical History

No. of pregnancy	Date & Place of delivery	Duration of pregnancy	High Risk	Nature of labour	Puerperium	Baby		
						Alive / Stillborn	Sex Birth Weight	Present Health

Investigations

Hb : VDRL:
PCV : HIV:
Bl Grouping: HbsAg:
Rh Typing : BT, CT:

Urine Albumin:

Sugar :

Pus cells :

Personal History

Hypertension / Diabetes

STD / TB / Br. Asthma

Epilepsy

Family History

Hypertension / Diabetes / TB

Multiple pregnancy / others

Examination

General

Breasts

Pulse

B.P.

Respiration

Systemic Examination

CVS

CNS

RS

Obstetrical Examination

(A) Abdominal:

Fundal Height

Presentation

Position

Engaged / Non engaged

Foetal Heart Rate

Any other Findings:

(B) Vaginal Examination:

Cervix

Effacement

Dilatation (in cm.)

Membranes: Present / Absent

Presenting part

Level of presenting part in relation to ischial spines (in cm.)

Pelvic assessment

Diagnosis

