# Obstetric Discharge Summary

## Maternal/Newborn Record System

To order call: **1.800.245.4080**  
Re-order No. **5717N**

### Admitting Diagnosis
- [ ] IUP  
- [ ] Wks  
- [ ] Time

### Reasons For Admission on
- [ ] Onset of Labor  
- [ ] Induction of Labor  
- [ ] Spontaneous Abortion  
- [ ] Cesarean Section  
- [ ] ROM  
- [ ] Premature  
- [ ] Prolonged

### Prenatal Procedures
- [ ] None

#### No Prenatal Care
- [ ] Late Prenatal Care

#### Cerclage
- [ ] Management of Medical Complications
- [ ] Management of Obstetric Complications

#### Ultrasound
- [ ] NST  
- [ ] CST  
- [ ] Fast  
- [ ] Amniocentesis

#### Chronic Villi Sampling (CVS)
- [ ] Percutaneous Umbilical Blood Sampling (PUBS)

### Intrapartum Procedures
- [ ] Del Date  
- [ ] Time  
- [ ] Undelivered

- [ ] Multiple Birth

#### Spontaneous Vaginal Delivery
- [ ] VBAC

#### Episiotomy
- [ ] Forceps (Low) (Mid)

#### Vacuum Extraction
- [ ] Cesarean Section
- [ ] Cesarean: Low Cervical, Transverse
- [ ] Cesarean: Low Cervical, Vertical
- [ ] Cesarean: Classical
- [ ] Cesarean: Hysterectomy

#### Forceps to Extract Breech
- [ ] Uterine Atony

#### Cesarean: Classical
- [ ] Cesarean: Hysterectomy
- [ ] Cesarean: Low Cervical, Transverse
- [ ] Cesarean: Low Cervical, Vertical

#### Rotation
- [ ] Breech Extraction (Partial) (Total)

#### Forceps to Extract Breech
- [ ] Curettage
- [ ] Curettage

### Postpartum Procedures
- [ ] None

#### Transfusion
- [ ] Tubal Ligation

#### Curettage
- [ ] RHo (D) Ig

#### Rubella Ig

#### Antibiotics

### Postpartum/Operative Complications
- [ ] None

#### 5° Perineal Laceration
- [ ] Incompetent Cervix

#### Vaginal (Cervical) Laceration
- [ ] Retained Placenta

#### Infection
- [ ] Hemorrhage
- [ ] Morbitity (undetermined)

#### Abdominal Labor
- [ ]sworth

#### Spinal Headache
- [ ] Uterine Atony

#### Psychological Maladaptation
- [ ] Febrile

#### Drug/Transfusion Reaction
- [ ] Eclampsia

### Discharge Diagnosis
- [ ] Term Pregnancy-Delivered

#### Amnionitis
- [ ] Preterm Labor

#### Antepartum Bleeding
- [ ] Premature Delivery

#### Failed Induction
- [ ] Postterm Delivery

#### False Labor
- [ ] PROM

#### Hyperemesis Gravidarum
- [ ] Spontaneous Abortion

#### Placenta Previa
- [ ] Incompetent Cervix

#### Postterm Pregnancy
- [ ] Preeclampsia

### Newborn Data
- [ ] Female  
- [ ] Male  
- [ ] Other

- [ ] See Newborn Discharge Summary

#### Weight

#### Discharge
- [ ] With Mother  
- [ ] Other

#### Accompanied by________________________

### Discharge Information
- [ ] None

#### Medications
- [ ] (or)________________________

#### Diet
- [ ] General

#### Activity
- [ ] Unrestricted

#### Instructions
- [ ] See Education/Discharge Planning Sheet

#### Discharge to
- [ ] Home

- [ ] Follow up in Wks at

- [ ] Accompanied by

- [ ] Referred to

#### Discharge Date: _______/______/______

#### Signature________________________

---

**OBSTETRIC DISCHARGE SUMMARY**