

Data Collection Worksheet

Please Note: The Data Collection Worksheet (DCW) is a tool to aid investigators to integrate the collection of PhenX measures in your study. The PhenX measures that you selected and added to your Cart are presented in the DCW in alphabetical order. The DCW includes worksheets for data collection. Variables derived from the collected data are shown in the Data Dictionary (DD) with variable names and unique PhenX variable identifiers. The collection of DCWs produced by the Toolkit is not designed as a data collection instrument. Each investigator will decide how to integrate PhenX measures into data collection for their study.

Most obstetric practices and prenatal clinics use a standardized form to chart prenatal course. The American Congress of Obstetricians and Gynecologists (ACOG, formerly the American College of Obstetricians and Gynecologists) has an Antenatal Record form that is periodically upgraded and available for its members. There are others, such as the POPRAS (Problem Oriented Perinatal Risk Assessment System) forms, which are also in common use. All of the standardized forms have places or spaces to report information on gestational age, pre-pregnancy weight, height, and weights measured during pregnancy at every prenatal visit and dates of examination. For women carrying a singleton fetus, the expected schedule of prenatal visits suggested by ACOG is monthly through the 7th month (28 weeks), every 2-3 weeks through the 9th month (36 weeks), and weekly thereafter until delivery.

Total gestational weight gain is calculated by subtracting the pre-pregnancy weight from the weight at the final prenatal visit, usually within a week of delivery. Weight is occasionally measured at delivery and can be used for this calculation if membranes are still intact at the time of weighing. The weight at delivery can be found in the labor and delivery chart along with the gestational age at delivery.

The information to be abstracted from the records would be a) weight at final prenatal visit (to the nearest 100 g, e.g., 59.1 kg); b) date of final visit; c) pre-pregnancy weight; d) height; e) gestational age at final visit; f) gestational age at delivery.

An example of the relevant section of the **ACOG Antenatal Record Form B** (Initial Physical Exam) which charts date of exam, pre-pregnancy weight, and height:

INITIAL PHYSICAL EXAMINATION			
DATE _____ / _____ / _____	PREPREGNANCY WEIGHT _____	HEIGHT _____	BP _____
1. HEENT <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	12. VULVA <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
2. FUNDI <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	13. VAGINA <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
3. TEETH <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	14. CERVIX <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
4. THYROID <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	15. UTERUS SIZE <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
5. BREASTS <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	16. ADNEXA <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
6. LUNGS <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	17. RECTUM <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
7. HEART <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	18. DIAGONAL CONJUGATE <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
8. ABDOMEN <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	19. SPINES <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
9. EXTREMITIES <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	20. SACRUM <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
10. SKIN <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	21. SUBPUBIC ARCH <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
11. LYMPH NODE <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL	22. GYNECOPELVIC TYPE <input type="checkbox"/> NORMAL <input type="checkbox"/> ABNORMAL		
COMMENTS (Number and explain abnormalities) _____			

EXAM BY _____			
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ACOG ANTEPARTUM RECORD (FORM B)

Gestational age (written with both weeks and days, e.g., 39 weeks and 0 days or 39 + 0) is calculated using the best obstetrical EDD based on the following formula:

$$\text{Gestational Age} = (280 - (\text{EDD} - \text{Reference Date})) / 7$$

An example of the relevant section of the **ACOG Antenatal Record Form C** which contains the date of the woman's last menstrual period (LMP) and estimated due date(s) (EDD) for establishing (or correcting) gestational age at each prenatal visit:

NAME _____														
LAST	FIRST													
MIDDLE														
DRUG ALLERGY _____														
RELIGIOUS/CULTURAL CONSIDERATIONS _____	ANESTHESIA CONSULT PLANNED <input type="checkbox"/> YES <input type="checkbox"/> NO													
PROBLEMS/PLANS	MEDICATION LIST: Start Date Stop Date													
1. _____	1. _____													
2. _____	2. _____													
3. _____	3. _____													
4. _____	4. _____													
5. _____	5. _____													
6. _____	6. _____													
EDD CONFIRMATION														
NITIALEDD: _____ - EDD _____ / _____ / _____ LMP _____ / _____ / _____ WKS - EDD _____ / _____ / _____ INITIALEXAM _____ / _____ / _____ WKS - EDD _____ / _____ / _____ ULTRASOUND _____ / _____ / _____ WKS - EDD _____ / _____ / _____ INITIALEDD _____ / _____ / _____ INITIALEDBY _____														
18-20-WEEK EDD UPDATE:														
QUICKENING _____ / _____ / _____ +22WKS = _____ / _____ / _____ FUNDALHT. ATUMBIL _____ / _____ / _____ +20WKS = _____ / _____ / _____ FHTW/FETOSCOPE _____ / _____ / _____ +20WKS = _____ / _____ / _____ ULTRASOUND _____ / _____ / _____ WKS = _____ / _____ / _____ FINALEDD _____ / _____ / _____ INITIALEDBY _____														
/S/IDATE	WEEKS GEST. (EST)	FUNDAL HEIGHT (cm)	PRESNTATION	FHA	FETAL MOVEMENT	FASTEN LABOUR (SINGLY/MTONS +2 REBENT OR AGENT)	CERVIX EXAM (CL/REF/ETA)	BLOOD PRESSURE	EDFMA	WEIGHT	DRUGS SUCCORBALUMIN	NEXT APPOINTMENT	PROBLEMS (INITIALS)	COMMENTS:
(YEAR)														

Protocol source: <https://www.phenxtoolkit.org/protocols/view/21302#Source>