



Prenatal Tests

My Estimated Due Date _____ (based on ____ LMP ____ ultrasound ____ both)

My Prenatal Labs

Blood type _____

Antibody Screen _____

Hepatitis B _____

HIV _____

Rubella _____

Hemoglobin _____

Pap Smear _____

Chlamydia/Gonorrhea _____

Genetic screening tests _____

My 28-week labs

One hour glucose _____

Hemoglobin (iron) _____

RhoGam (if Rh negative) date given _____

TDAP given _____

My 35 to 36-week labs

Group Beta Strep (GBS) _____

Flu Shot (in season) _____

TDAP (whooping cough) vaccine _____

COVID vaccine _____