



High Risk Pregnancy Appointment Calendar

Due Date: _____

Primary Physician: _____

Appointments

Date/Physician

Schedule up to 26 Weeks at your first OB Visit.

Week 7

- o Blood work

Date: _____

Week 11-13

- o 1st Trimester Genetic Screening (ultrasound & bloodwork)
- o **Be sure to drink 20 oz. of water 1 hr prior to ultrasound**

*ultrasound @ suite 207 _____

office visit: _____

Week 16-17

- o Visit with other MD
- o Other Genetic Screening or AFP
- o Early Diabetes Screening *if required*
- o If needed, schedule repeat C-Section with your MD
- o

office visit: _____

Week 20-21

- o Anatomical survey Ultrasound
- o **Be sure to drink 24 oz. of water 1 hr prior to ultrasound**

*ultrasound @ suite 207 _____

office visit: _____

Week 25-26 (1 hour visit)

- o Diabetes Test

Test: _____

Schedule remaining OB visits at your 26-week appointment.

Week 30

- o Ultrasound
- o Visit with other MD; **Rhogam & tdap** (if needed)
- o Start kick counts, pediatric information provided

*ultrasound @ suite 207 _____

office visit: _____

Week 32

NST two times weekly

1st NST _____ 2nd NST _____

Week 33

- o Growth ultrasound **if diabetic or hypertensive
- o Visit with other physician
- o NST two times weekly

*ultrasound @ suite 207 _____

office visit: _____

1st NST _____ 2nd NST _____

Week 34

- o NST two times weekly
- o Office Visit

1st NST: _____ 2nd NST _____

office visit: _____

Week 35

- o NST two times weekly
- o Office Visit

1st NST _____ 2nd NST _____

Office visit: _____

Week 36

- o Group B Strep test
- o NST two times weekly
- o office visit

Test: _____

1st NST: _____ 2nd NST _____

office visit : _____

Week 37

- o Ultrasound
- o NST two times weekly
- o Office Visit

*Ultra Sound @ suite 207 _____

1st NST _____ 2nd _____

Office Visit: _____

Week 38

- o NST
- o Visit with other physician
- o C section or Induction Date

NST: _____

Office Visit _____

Date: _____

Week 39

- NST
- Office visit
- C section or induction date

NST: _____

office visit : _____

Date: _____

Delivery Date:

Date: _____

Postpartum Visit

Date: _____

- 4 weeks after delivery for C-Section
- 6 weeks after delivery for vaginal delivery

Acceptable medications in pregnancy as well as other information may be obtained on our website:
www.rushcopley.com/whca
(630) 978-6886