Maternal Health Clinic Follow Up Form



LAST NAME			FIRST NAME		OHIP NUMBER	VERSION COD	E	MOTHERS PROGRAM ID
DATE OF BIRTH (DD/N	MM/YYY0			HOME TELE	PHONE NUMBER		FAMILY PHYSICIAN	CR NUMBER
		ADDRESS		UNIT NUMBER		CITY	PROVINCI	E POSTAL CODE

Pregnancy-Related Cardiovascular Risk Indicators

Risk Indicator	Notes	Previous Pregnancy	Index Pregnancy	
Preeclampsia	Preeclampsia, eclampsia or HELLP syndrome.			
Gestational Hypertension	Hypertension in pregnancy without proteinuria.			
Gestational Diabetes or Gestational Impaired Glucose Tolerance	Diagnosis of gestational diabetes is based on 2 or more abnormal values on a 75g Oral Glucose Tolerance Test. Gestational Impaired Glucose Tolerance is based on a single abnormal value on a 75g OGTT.			
Abruption	The occurrence of a clinically significant abruption leading to delivery or adverse maternal/fetal outcome.			
Excessive Weight Gain	Excessive weight gain during pregnancy indicates increased risk. It is determined based on the patient's pre-pregnancy (pp) BMI. The criteria are as follows; ppBMI <18.5 and >18.0 kg gained, ppBMI 18.5 - 24.9 and >16.0 kg gained, ppBMI 25.0 - 29.9 and >11.5 kg gained, ppBMI >29.9 and >9.0 kg gained.			
Preterm Birth	Preterm birth at <37 weeks gestation			
IUGR	Any birth <5 th %tile for gestational age or term baby <2500g			
Total Number of Pregnancy Related Cardiovascular Risk Indicators				

History and Examination

	Risk Indicator	Notes	Risk Factor
1	Age (Years)	Current age. Risk increases with age.	
	Height (cm)	Weight measured pre-pregnancy or during early pregnancy. BMI = (Weight/ (Height*Height))*10,000.	
2	Pre-pregnancy Weight (kg)	Underweight BMI <18.5, Ideal BMI 18.5-24.9,	
	Pre-pregnancy BMI (kg/m²)	Overweight BMI 25.0-29.9, Obese BMI >29.9.	
3	Current Weight (kg)	Weight at 6 months postpartum. BMI = (Weight/ (Height*Height))*10,000. Underweight BMI <18.5,	
3	Current BMI (kg/m²)	Ideal BMI 18.5-24.9, Overweight BMI 25.0-29.9, Obese BMI >29.9.	
4	Weight at Delivery (kg)	Excessive weight gain during pregnancy indicates increased risk. It is determined based on the patient's pre-pregnancy (pp) BMI. The criteria are as follows; ppBMI <18.5 and >18.0 kg gained, ppBMI	
4	Weight Gained in Pregnancy (kg)	18.5 - 24.9 and >16.0 kg gained, ppBMI 25.0 - 29.9 and >11.5 kg gained, ppBMI >29.9 and >9.0 kg gained.	
5	Pregnancy Weight Retention (kg)	At 6 months postpartum. Pregnancy Weight Retention = Current Weight – Pre-pregnancy Weight. It is recommended that women attempt to return to their pre-pregnancy weight by 6 months postpartum.	
6	Current Waist Circumference (cm)	At 6 months postpartum. Measure just above the uppermost lateral border of the right iliac crest. The plane of the tape should be parallel to the floor. The tape should be snug, but not compress the skin. Take measurement at the end of normal expiration.	
	Pre-pregnancy Blood Pressure (mmHg)	Blood pressure taken pre-pregnancy or during early pregnancy.	
7	Pre-pregnancy Antihypertensive Medication Usage (Yes/No)	Systolic blood pressure greater than 130 mmHg or diastolic blood pressure greater than 85 mmHg indicates increased risk.	
	Current Blood Pressure (mmHg)	Blood pressure taken at 6 months postpartum. Systolic blood	
8	Current Antihypertensive Medication Usage (Yes/No)	pressure greater than 130 mmHg or diastolic blood pressure greater than 85 mmHg indicates increased risk.	

History and Examination Continued

Risk Indicator			Notes	Risk Factor
	Smoking (Yes/No)			
9	If yes, number of cigarettes per day		Smoking indicates increased risk.	
Ever Smoked (Yes/No)				
10	If yes, number of years smoked		A history of smoking indicates increased risk.	
	Alcohol Consumption (Yes/No)			
11	If yes, number of drinks per week		Alcohol consumption may increase your risk.	
	Breastfeeding (Yes/No)		Breastfeeding may affect a woman's ability to return to	
12	If yes, duration in months		her pre-pregnancy weight.	
	Physically Active (Yes/No)		The federal guidelines of 30-60 minutes of moderate	
13	If active, number of times per week		activity.	
14	Ethnicity South Asian, African and Metis/First Nations/Inuit are increased risk.		South Asian, African and Metis/First Nations/Inuit are at increased risk.	
15	Patient History of Major Cardiac Event (Yes/No)		Patient history of MI or stroke indicates increased risk.	
16	Patient History of Diabetes (Yes/No)		Patient history of diabetes predating pregnancy indicates increased risk.	
17	Patient History of Chronic Hypertension (Yes/No)		Patient history of chronic hypertension indicates increased risk.	
18	Family History of Hypertension/Preeclampsia in pregnancy (Yes/No)		Any female family member on the maternal side with a self-reported history may indicate increased risk.	
19	Family History of Hypertension (Yes/No)	Earnily history of hyportansian may indicate increased		
20	Family History of Major Cardiac Event (Yes/No)		Family history of MI or stroke (<55 years of age in male relative and <65 years in a female relative may indicate increased risk).	
21	Family History of Diabetes (Yes/No)	Family history of diabetes (type 1, type 2 or gestational) may indicate increased risk.		
22	Medications	Some medications may affect a woman's risk of heart disease and/or may need to be taken into consideration when interpreting her biochemical test results. List current medications below.		
Total Number of Other Risk Factors				

Biochemical Testing

Biochemical Test	Result	Biochemical Test	Result
2 Hour 75g OGTT (Fasting)	Fasting: mmol/L	Total Cholesterol (Fasting)	mmol/L
Indicated only for women with a history of gestational diabetes.	2 Hour: mmol/L	HDL (Fasting)	mmol/L
HbA1C	%	LDL (Fasting)	mmol/L
Glucose (Fasting)	mmol/L	Triglycerides (Fasting)	mmol/L
Urine Microalbumin: Creatinine	mg/mmol	High Sensitivity CRP	mg/L

Lifetime CVD estimate

Risk Factor	Stratification (Risk Level)	Patient's Risk Level (Please Circle)	
	<4.65 (optimal)		
Total Chalasteral (compa)/()	4.65-5.15 (not optimal)	Optimal / Not Optimal /	
Total Cholesterol (mmol/L)	5.16-6.19 (elevated)	Elevated / Major	
	>6.20 (major)		
	<120 (optimal)		
Systolic Blood Pressure (mmHg) OR Currently	120-139 (not optimal)	Optimal / Not Optimal /	
Taking an Antihypertensive Medication	140-159 (elevated)	Elevated / Major	
	≥160 or Taking an Antihypertensive Medication (major)		
	<80 (optimal)		
Diastolic Blood Pressure (mmHg) OR Currently	80-89 (not optimal)	Optimal / Not Optimal / Elevated / Major	
Taking an Antihypertensive Medication	90-99 (elevated)		
	≥100 or Taking an Antihypertensive Medication (major)		
Elevated Fasting Glucose (mmol/L) OR Previous	≤6.88 (optimal)	Optimal / Major	
Diagnosis of Type 1 or 2 Diabetes			
Consisten	No (optimal)	Optimal / Major	
Smoking	Yes (major)	Optimal / Wajor	
Women's Lifetime CVD estimate (Lloyd-Jones et al.	, Circ 2006;113:791-798)		
 All Optimal (8%) ≥1 Not Optimal 	l (27%) • ≥1 Elevated (39%) • 1 Major (39%)	• ≥2 Major (50%)	
Lifetime CVD Risk Estimate:			
	%		

Other Suggested Risk Calculations

(1) 30 Year CVD Risk Estimate

Your risk of developing cardiovascular disease at some point in the next 30 years is _____%.

(2) Metabolic Syndrome Calculation

Risk Factor	Scoring Cut Offs	Yes/No
Elevated Blood Pressure	≥ 130/85 mmHg	
Abdominal Obesity	> 88 cm waist circumference (>80 cm for Asian Ethnicity)	
Elevated Triglycerides	> 1.7 mmol/L	
Decreased HDL	< 1.3 mmol/L	
Elevated Fasting Glucose	> 5.6 mmol/L	
The metabolic syndrome criteria is r		