



Welcome!

You will soon have your first appointment at La Cigogne family medicine group (GMF) for your pregnancy follow-up.

We thank you in advance for taking the time to fill up this survey.

We ask you to **bring it** at your first appointment as well as:

- Your up-to-date medication list
- Your immunization record

Be prepared to **answer these questions**:

1. First day of your last period _____

2. Is your cycle :

☐ Regular every _____ day

☐ Irregular

3. Date of your first positive pregnancy test _____

4. Measurements (before pregnancy) Height _____ Weight _____

5. Allergies?

☐ Yes : _____

☐ No

6. Native country _____

7. Personal health problem:

Heart disease, high blood pressure, renal disease, thyroid disease, diabetes, epilepsy, psychological follow-up, depression, anxiety, past surgeries, asthma, hepatitis B or C, herpes (for you OR your sexual partner), History of deep vein thrombosis or pulmonary embolism or other blood problems, history of blood transfusion

Specify _____



8. Did you have chicken pox as a child ☐ Yes ☐ No ☐ Vaccinated

9. Health problems in your family

Chronic health problems

Pregnancy issues, Child defects or hereditary disease, hearth malformation

Specify _____

Pregnancy history

	Date of childbirth	Location	#weeks at delivery	Vaginal birth or c section	Pregnancy issues or child health problem	Child
1						Gender: Birth weight :
2						Gender: Birth weight :
3						Gender: Birth weight :
4						Gender: Birth weight :

☐ Number of miscarriage(s) _____ Abortion(s) _____

Information about the child's father

- ☐ Name _____
- ☐ Occupation / Profession _____
- ☐ Health problem(s) _____
- ☐ Family health problem(s) _____
- ☐ Native country _____



Do you or the baby's father have a biological relative that is from one of the following region: Saguenay–Lac-Saint- Jean, Charlevoix, Haute-Côte-Nord?

If yes please visit (only in French) <https://www.quebec.ca/sante/conseils-et-prevention/depistage-et-offre-de-tests-de-porteur/tests-de-porteur-maladies-hereditaires-recessive/>

Now that you've fill up the survey please:

1. Open your online portal
2. Make sure you know how to register for the walk-in clinic
3. Get information about Trisomy 21 prenatal screening and check with your insurances if they cover for private screening test **BEFORE** your first appointment

<https://www.quebec.ca/sante/conseils-et-prevention/depistage-et-offre-de-tests-de-porteur/programme-de-depistage-prenatal-de-la-trisomie-21/>

If you have more question please contact us at info@gmflacigogne.com

Please visit our website for more information : www.gmflacigogne.com

Hope to meet you,

La Cigogne's team