

For MA use only:
check if entered in
medical record

AOQ 1.4

Name _____ Medical Record No. _____ Date _____

PHQ-9 Over the last 2 weeks, how often have you been bothered by any of the following problems? (Circle only one number per line.)	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself down or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you might be better off dead, or hurting yourself in some way	0	1	2	3

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Add the circled numbers in each column; then add the sums: 0 + + + = **A**

0. Feeling nervous, anxious, or on edge	0	1	2	3
1. Not being able to stop or control worrying	0	1	2	3
2. Feeling unproductive at work or other daily activities	0	1	2	3
3. Having trouble focusing on achieving your goals	0	1	2	3

Add the circled numbers in each column; then add the sums: 0 + + + = **B**
Global Distress Score (GDS): TOTAL (A + B) =
GDS
Relationship Review
**Many health problems can be affected by stress in your relationships.
Making the connection can help you take steps toward better health.**

 1. Are you currently in a relationship where your partner hits, slaps,
kicks, or hurts you?

Yes	No
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 Prefer not to answer

 2. Are you currently in a relationship where you feel threatened by
your partner?

Yes	No
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 Prefer not to answer

3. Have you ever had a partner who physically hurt or threatened you?

Yes	No
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 Prefer not to answer



Healthy weight gain during pregnancy

The amount of weight you should gain varies depending on your body mass index (BMI) before you became pregnant. Find your BMI below to see how much total and weekly weight gain is recommended for a healthy pregnancy.

Pre-pregnancy BMI	Recommended Total Gain (lbs)	Rate of Gain in 2nd & 3rd Trimesters (lbs per week)*
<input checked="" type="checkbox"/> Lower than 18.5	28–40	1
<input type="checkbox"/> 18.5–24.9	25–35	1
<input checked="" type="checkbox"/> 25–29.9	15–25	0.6
<input type="checkbox"/> 30 or higher	11–20	0.5

*This assumes a gain of less than 5 lbs during the first trimester.

Gaining more weight than recommended increases your risk of gestational diabetes, high blood pressure, and cesarean delivery (C-section). It also increases your baby’s risk for childhood obesity and diabetes later in life. Healthy eating and regular physical activity can help you maintain a healthy weight during your pregnancy.

Nutrition

- Eat 3 balanced meals per day, plus 1 to 2 healthy snacks. Use “[The Healthy Plate](#)” method to guide meal planning. This prevents your blood sugar levels from going too high.
- Don’t “eat for 2.” Your body only needs an extra 200 to 300 calories a day (about half a peanut butter sandwich and a glass of skim milk). If you have a **BMI of 30 or higher**, eating additional calories isn't necessary for the health of your baby.
- Avoid sweetened drinks (juice, soda, coffee drinks), fried foods, and desserts.



Physical Activity

Exercising is good for you and your baby. Aim for at least 30 minutes of activity per day on most days of the week, unless your doctor tells you otherwise. Moderate intensity means being able to talk in short phrases while exercising. It's OK if your heart rate increases during exercise and you're sweating. Be sure to drink water before, during, and after exercise.

If you're not physically active:

- Start with a 15-minute walk every day and gradually increase to 30 minutes of moderate intensity exercise on most days.
- Try an elliptical machine or stationary bike, water aerobics, swimming, and modified yoga or Pilates.

If you're already physically active:

- Continue moderate intensity exercise throughout your pregnancy.



Tips:

- Find an activity that you enjoy.
- Set a small goal for yourself—it helps keep you motivated.
- Ask a friend or family member to do it with you.
- Have fun—listen to music or a podcast that you enjoy.
- Wear comfortable clothing, athletic shoes, and a supportive bra.

For more information:

- Visit kpdoc.org/nutritionexerciseandweight

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult your doctor. Some photos may include models and not actual patients.



Fetal Anatomy Ultrasound

OB-GYN Department

Congratulations on your pregnancy! This sheet provides information about your fetal anatomy ultrasound, which is done between 18-21 weeks.

What is an ultrasound exam?

An ultrasound (sonogram) exam is a way to look inside your body without using X-rays. Ultrasound uses sound waves that are directed at organs in the body. The sound waves are turned into an image on a monitor, much like a computer screen.

Why is ultrasound used in pregnancy?

Ultrasound is the safest way to get information about your baby before it is born. Ultrasounds have been a part of prenatal care for many years. There are no known risks from prenatal ultrasound to the mother or the baby.

Ultrasound can provide important information about your pregnancy including:

- Show the size of the baby and if it is developing properly
- The location and development of the placenta
- The amount of amniotic fluid
- Detect some birth defects

Do I have to have an anatomy ultrasound?

Any decision about testing during pregnancy is up to you. Information from ultrasound is used to plan for delivery and ensure we are taking appropriate care of you and your baby.

If you decide that you do not want an ultrasound, there is a chance that you might not know if:

- You are having twins or triplets
- Your baby has a birth defect or is not growing normally
- The placement of the placenta is abnormal
- Your baby's estimated due date is incorrect

If you have concerns about having an ultrasound, please talk with your obstetric provider.

Why do you look for abnormalities on ultrasound?

Knowing about any problems allows us to plan for the best treatment for you and the baby. Most babies (over 95%) have normal ultrasounds. Occasionally, a problem is found on an ultrasound. Some abnormalities are very serious, but others are minor.

Not all birth defects can be found by an ultrasound exam. Our ability to see a baby's anatomy can be limited by a person's weight or the baby's position. Some women are asked to return so we can finish the exam.

A normal ultrasound does not guarantee that the baby has no health problems or birth defects.

Is ultrasound the best test for chromosome or genetic conditions?

There are other tests that are better at identifying chromosome or genetic conditions during pregnancy, such as the California Prenatal Screening test or amniocentesis. You will be told of any serious condition or if we recommend additional testing.

Can I find out if I'm having a boy or girl?

Yes. Just let the sonographer know before the ultrasound starts. Sometimes, due to the baby's position, we cannot see the genitals. Please remember that ultrasound is not 100% correct in determining fetal sex.

What happens if I am late?

Your appointment time is when the ultrasound is scheduled to begin. Please arrive early to allow plenty of time to park, walk to the office and get through registration. Since these ultrasounds take 45 – 60 minutes, our flexibility is limited. If you arrive more than 15 minutes late, you will likely be rescheduled. Please check with your local facility's policy.

How many people can I bring to the exam?

We know that seeing your baby on the ultrasound screen is exciting. We understand you may want to share your ultrasound with family, friends, or your other children. Because this is a medical procedure, the sonographer must be able to concentrate while looking at the fetal anatomy. Distractions mean that we may not do our best exam. To reduce distractions, we may need to limit the number of people in the room. Be aware that some children find it hard to sit still during the ultrasound and may be asked to leave.

Please check with your local facility as to the length of the appointment, recommended arrival time, policy on children and number of people who can be with you during the ultrasound.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult your doctor. If you have questions or need more information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse any brand names; any similar products may be used. Herbs and supplements are sold over-the-counter. Kaiser Permanente carries only herb categories for which some evidence exists to show that the herbs may be effective to treat certain medical conditions.