

# POSTPARTUM ENCOUNTER (HIGH RISK) 21-60 DAYS POSTPARTUM

Instructions: If encounter is completed prior to DHCP postpartum visit and patient is still breastfeeding, you must contact the patient at or following the DHCP postpartum visit to discuss the status of breastfeeding at the time of the DHCP postpartum visit and document in designated space on this form. If the patient quit smoking during the pregnancy, you must verify the patient has remained quit at her DHCP postpartum appointment and document in designated space.

Name: \_\_\_\_\_ Delivery Date: \_\_\_\_\_ Delivering Provider: \_\_\_\_\_

High Risk Criteria: \_\_\_\_\_

Status of Identified Needs: \_\_\_\_\_

Type of Delivery: \_\_\_\_\_ Anesthesia: \_\_\_\_\_ Birth Weight: \_\_\_\_\_ Sex: \_\_\_\_\_

Complications: \_\_\_\_\_

Postpartum Appt. Date: \_\_\_\_\_ Postpartum Appt. Kept: \_\_\_\_\_

Pediatric Provider: \_\_\_\_\_ Newborn Appointment Kept : \_\_\_\_\_

Patient 1<sup>st</sup> Program Reviewed: \_\_\_\_\_

Medicaid Worker Notified of Birth/Applying at Birth: \_\_\_\_\_

Importance of Immunizations/Checkups Discussed: \_\_\_\_\_

Infant Danger Signs/Medical Care in Emergency: \_\_\_\_\_

Infant Care Discussed: \_\_\_\_\_

Safe Sleeping Methods Discussed: \_\_\_\_\_ Shaken Baby Syndrome: \_\_\_\_\_

Breastfeeding: \_\_\_\_\_

Breastfeeding at Postpartum Appointment? \_\_\_\_\_ Date Verified: \_\_\_\_\_

WIC: \_\_\_\_\_

Current Tobacco status: (N/A, No Chg, Reduced, Quit) If Smoking-Danger Discussed: \_\_\_\_\_

Quit smoking during pregnancy and remained quit at DHCP postpartum visit: \_\_\_\_\_ Date Verified: \_\_\_\_\_

Smoking Cessation/Referral to Quitline: \_\_\_\_\_

Dangers of second hand smoke discussed: \_\_\_\_\_

Current Alcohol status: (N/A, No Chg, Reduced, Quit) If Using-Danger Discussed: \_\_\_\_\_ Referral: \_\_\_\_\_

Current Drug status: (N/A, No Chg, Reduced, Quit) If Using-Danger Discussed: \_\_\_\_\_ Referral: \_\_\_\_\_

Postpartum Depression Signs and Symptoms Reviewed: \_\_\_\_\_

Birth Control Method Given: \_\_\_\_\_ When: \_\_\_\_\_

Understands Importance of using BC as directed (i.e. pills daily, while breastfeeding, etc.) \_\_\_\_\_

Family Planning/Plan 1<sup>st</sup> Services Available: \_\_\_\_\_

Planning Future Pregnancies/Birth Spacing Discussed: \_\_\_\_\_

Importance of Folic Acid in Planning Future Pregnancies: \_\_\_\_\_

Other needs identified during encounter/referrals: \_\_\_\_\_

CC Name: \_\_\_\_\_ Date: \_\_\_\_\_