

### **Prenatal Risk Assessment Questionnaire**

<b>PURPOSE</b>	Completed for enrolled pregnant moms.
<b>WHO/WHEN COMPLETED:</b>	EHS HV/FW completes at the time of the enrollment.
<b>HOW TO FILL IT OUT:</b>	Complete, interview style, with the pregnant mom.
<b>CHILD PLUS DATA ENTRY:</b>	Health Team enters HDNA.
<b>WHERE TO FILE:</b>	In the health section of the pregnant woman's file.
<b>IMPORTANT NOTES:</b>	<ul style="list-style-type: none"><li>• Follow the interventions on the right hand side of the form.</li><li>• Scan to Health when completed.<ul style="list-style-type: none"><li>○ Each enrolled pregnant woman will receive the handout "How Big is My Baby" and a set of Partners for a Healthy Baby Handouts for Expectant Parents", as well as a county specific resource packet.</li></ul></li><li>• Refer to Registered Dietician if not receiving WIC benefits.</li></ul>