Prenatal Record

The initial obstetric visit. This is the visit that starts the global package, so what you record here decides how the whole pregnancy gets billed.

Patient / MRN / DOB	
Date of service	*Date _____ · start _____ : _____ · stop _____ : _____ · in person / telehealth*
Pregnancy dating	*LMP _____ · EDD _____ · dating method: LMP / ultrasound _____ · gestational age today ___ w ___ d*
Obstetric history	*G ___ P ___ · T ___ P ___ A ___ L ___ · prior cesarean Y / N · prior preterm birth Y / N*

A History

Medical and surgical	*Chronic conditions, prior surgery, anesthesia history, current medications and supplements*
Family and genetic	*Heritable conditions · carrier screening offered Y / N · genetic counseling referral*
Social and safety	*Tobacco, alcohol, substances · intimate partner violence screen · housing and food security*

B Risk Assessment

Drives visit frequency and what is separately billable

Risk factors identified	*Age · BMI · hypertension · diabetes · multiple gestation · prior loss · other*
Risk level	*Low risk, routine schedule / high risk, additional monitoring anticipated Y / N*

C Baseline Screening

Name the instrument and record the result

SCREEN	INSTRUMENT OR TEST	DATE AND RESULT
Perinatal depression and anxiety		
Initial prenatal labs		
Immunity and infection screen		

D Examination and Plan

Physical examination	*Including BP, weight, and pelvic examination as indicated*
Plan and education	*Visit schedule discussed · warning signs · nutrition · referrals*

The visit that decides the billing. The **initial E/M to diagnose pregnancy is excluded** from the global package and separately reportable **only if the antepartum record was not initiated at that confirmatory visit**, supported by **Z32.01**. Once you start the antepartum record, that visit is part of the package. Perinatal depression and anxiety screening is recommended at the initial prenatal visit, later in pregnancy, and postpartum, using a standardized validated instrument, so name the tool and record the score rather than writing "screened".

Prenatal Visit Flow Sheet

Return visits. Count them as you go, because the visit count is what decides whether this pregnancy bills as a global package or as antepartum-only codes.

E Return Visit Flow Sheet

One row per visit · tick the visit counter

#	DATE	WEEKS	WT	BP	FUNDAL HT	FHT	URINE	FINDINGS, PLAN, NEXT VISIT
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								

F Package Tracker

Complete at transfer, delivery, or end of care

Total antepartum visits provided	____ *visits · care complete through delivery Y / N · transferred in or out Y / N · date* _____
Separately reported this pregnancy	*Ultrasound* ____ *· non-stress tests* ____ *· amniocentesis* ____ *· labs* ____ *· non-pregnancy E/M visits* ____ *· extra visits for complications* ____

Included in the global package, so do not bill it twice: all routine prenatal visits until delivery (**usually about 13** for an uncomplicated pregnancy), initial and subsequent history and physical, weight, blood pressure and fetal heart tones, routine chemical urinalysis, hospital admission, inpatient E/M within 24 hours of delivery, management of uncomplicated labor, the delivery and placenta, IV oxytocin, repair of first- and second-degree lacerations, uncomplicated inpatient visits after delivery, routine outpatient E/M within six weeks of delivery, and breastfeeding and newborn education. **Excluded, and separately reportable:** laboratory tests other than routine chemical urinalysis, maternal and fetal ultrasound, amniocentesis, chorionic villus sampling, contraction stress and non-stress tests, external cephalic version, E/M for conditions unrelated to the pregnancy, and additional visits for complications beyond the typical 13. **If you did not provide the whole package: 59426** for 7 or more antepartum visits, **59425** for 4 to 6, and itemize each E/M if you provided only 1 to 3. Third- and fourth-degree laceration repair is reported with **modifier 22** on the global or delivery code, and the note has to justify it.