

# Preconception Personal Assessment Questionnaire

This questionnaire will help you get the information and answers you need to plan a happy and healthy pregnancy. It helps you identify questions to ask and areas where you'd like more information or resources. Bring this completed form with you to your first preconception appointment and review it together with your doctor or midwife.

Your name: \_\_\_\_\_ Age: \_\_\_\_\_

Spouse's name: \_\_\_\_\_ Age: \_\_\_\_\_

## When are you planning to become pregnant?

- As soon as possible; we're trying now
- In the next 3-6 months
- In the next 6-12 months
- In the next few years

## Why is this time right?

---

---

What's influencing your decision to have a baby (e.g., parents, family, friends, your partner/spouse, or your career)?

---

---

Number of previous pregnancies: \_\_\_\_\_  
Number of miscarriages or stillbirths: \_\_\_\_\_  
Number of terminations: \_\_\_\_\_

Has your partner ever fathered a pregnancy/child? No Yes

Are you going to school? No Yes

What are you studying? \_\_\_\_\_

Are you working? No Yes

What do you do? \_\_\_\_\_

Do you plan to continue this while you're pregnant? No Yes

After delivery? No Yes

How long have you lived in the SF Bay Area? \_\_\_\_\_

Where did you grow up? \_\_\_\_\_

How would you describe your cultural/ethnic background? \_\_\_\_\_

How does your background influence the decision or process of getting pregnant and having a baby?

\_\_\_\_\_

What are your biggest concerns (emotional, physical, financial, etc.)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which areas would you like more information about:

**Fertility**

- Talking to my partner about becoming pregnant
- The best ways to become pregnant
- Finding a fertility specialist

**Sex & Relationship**

- Decreasing pain with intercourse
- Getting help for sexual concerns
- Finding a couple's counselor

**Diet & Health**

- Managing or losing weight before getting pregnant
- Diet, vitamins and other nutrition information
- International travel concerns, including risks of Zika and eating well during travel
- Genetic testing for conditions and diseases that run in my family
- Genetic testing for conditions that might affect my baby

**Which areas would you like to receive recommendations or resources?**

- Dealing with work/school stress
- Managing my parents' and in-laws' expectations/pressures
- Handling a behavioral health condition, such as anxiety, depression or an addiction
- Getting more sleep
- Quitting smoking
- Being more mindful
- Locating classes related to breastfeeding, caring for my newborn, etc.
- Finding a healthcare provider to manage my medical condition (such as diabetes, high blood pressure, heart disease, etc.)
- Getting help for my partner's anxiety or depression
- Managing a troubled relationship with my partner