

PRENATAL APPOINTMENT MILESTONE CHART

Mother's Name: _____

Due Date: _____

OB/GYN Name: _____

Hospital: _____

TIMING	KEY MILESTONES & TESTS	QUESTIONS FOR DOCTOR	DATE / DONE
1ST TRIMESTER 8-12 Weeks	Confirmation Ultrasound, NIPT Screening, Blood Work, Lifestyle Review.	Prenatal vitamins? Exercise safety? List of "no-go" foods?	___/___
16 Weeks	Fetal Heartbeat Check, Quad Screen (optional), Growth Review.	Feeling movement yet? Normal weight gain?	___/___
2ND TRIMESTER 20 Weeks	Anatomy Scan (Big Ultrasound), Gender Reveal (optional).	Organ development? Placenta position?	___/___
24-28 Weeks	Glucose Tolerance Test (GD), Rh Factor Check, Tdap Vaccine.	How to manage swelling? Kick count tracking?	___/___
3RD TRIMESTER 30-34 Weeks	Biophysical Profile, Growth Measurement.	Birth plan preferences? Signs of preterm labor?	___/___

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36 Weeks	Group B Strep (GBS) Swab, Position Check (Head down?).	Hospital bag essentials? Pediatrician choice?	__/__
38-40 Weeks	Cervical Checks, Weekly Monitoring.	Induction protocol? Pain management options?	__/__

Additional Notes & Reminders: