Zeit für gute Vorsorge ...

Dr. med. Bodo Grahlke
Facharzt Gynäkologie u. Geburtshilfe FMH
Kilchbergstrasse 19
CH-8134 Adliswil
Telefon +41 43 377 09 77
Fax +41 43 377 09 79
Termine online unter www.doctena.ch
info@gynadliswil.ch
www.gynadliswil.ch

in the case of a newly established pregnancy:

Name: First Name: Date of Birth:

when was the first day of the last menstrual period: .....

how long does a menstrual cycle take for you? ..... days

(1st day of menstruation until the 1st day of the next menstruation)

did you take a pregnancy test?: ☐ yes ☐ no

do you want to stay pregnant?: ☐ yes ☐ no ☐ ?

it was a natural fertilization? ☐ yes ☐ no

it was an insemination? ☐ yes ☐ no

it was artificial insemination? ☐ yes ☐ no

in the case of artificial fertilization: .....

remarks: .....

.....

other mode: .....

in case of artificial fertilization - date of Embryo transfer?: .....

are you taking folic acid? ☐ yes ☐ no

if you take folic acid – which preparation and since when?: .....

other Pregnancy vitamins - which preparation and since when?: .....

other food supplements - which preparation?: .....

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Medication - what preparation?: .....

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