



**COLLEGE OF NURSING  
UNIVERSITY OF THE PHILIPPINES  
MANILA**



Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

**POSTPARTUM ASSESSMENT**  
(In the community setting)

**I. PATIENT'S DATA**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Case No. \_\_\_\_\_

Civil Status: S M W Address: \_\_\_\_\_

Education: None \_\_\_\_\_ Elem. \_\_\_\_\_ H.S. \_\_\_\_\_ College \_\_\_\_\_ Postgraduate: \_\_\_\_\_

Occupation: \_\_\_\_\_

**II. MOST RECENT PREGNANCY**

Date of delivery \_\_\_\_\_ Place of delivery: Lying-in / Hospital / others

Manner of delivery \_\_\_\_\_ High risk pregnancy: \_\_\_\_ yes \_\_\_\_ no

Complications (maternal/ fetal): \_\_\_\_\_

Infant's GA at birth: \_\_\_\_\_ Infant's BW: \_\_\_\_\_

Infant's condition after birth: \_\_\_\_\_

Planned pregnancy: \_\_\_\_ yes \_\_\_\_ no

Father's attitude toward this pregnancy \_\_\_\_\_

**III. PREVIOUS PREGNANCIES**

G \_\_\_\_\_ P \_\_\_\_\_ T \_\_\_\_\_ P \_\_\_\_\_ A \_\_\_\_\_ L \_\_\_\_\_

No.	Date & Place of Delivery	AOG Wks.	Duration of Labor	Manner of delivery	Complication	Birth weight	Sex and Condition of baby

**IV. FAMILY PLANNING PRACTICE**

Resumption of sexual intercourse \_\_\_\_\_

None \_\_\_\_\_ Reason \_\_\_\_\_

Yes \_\_\_\_\_ Purpose: \_\_\_\_\_ Limit Children

\_\_\_\_\_ Space children

Method: \_\_\_\_\_ pill \_\_\_\_\_ IUD

\_\_\_\_\_ natural family planning \_\_\_\_\_ others

\_\_\_\_\_ condom

**V. MENSTRUAL HISTORY**

LMP \_\_\_\_\_ Frequency \_\_\_\_\_ Duration \_\_\_\_\_ Amount \_\_\_\_\_



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**VI. PAST PERSONAL/ FAMILY HISTORY** (specify nature of condition and date when applicable)

	Personal	Family
Measles		
Mumps		
Other communicable diseases		
Gynecological problems		
Cardiopulmonary		
Gastro-intestinal		
Metabolic		
Hematologic		
Allergies		
Surgical operations		

Smoker: \_\_\_yes \_\_\_no      Packs/day: \_\_\_\_\_ No. of years \_\_\_\_\_

History of Drug Use: \_\_\_yes \_\_\_no      Current Drug Use: \_\_\_yes \_\_\_no

Positive drug screen for: \_\_\_\_\_

**VII. MEDICATIONS:**

**VIII. PHYSICAL EXAM**

General condition:

Appearance \_\_\_\_\_ Nutritional state \_\_\_\_\_

Emotional state \_\_\_\_\_ (\*note for any signs of domestic abuse)

T \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_

Pre-pregnancy weight \_\_\_\_\_

Pregnancy weight: \_\_\_\_\_

Present weight: \_\_\_\_\_

Height: \_\_\_\_\_ BMI: \_\_\_\_\_

**Breasts:**

(shape, contour, symmetry, nipples, nodules, temperature, tenderness, bra, breastmilk production, engorgement, mastitis)



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Breastfeeding: ( <i>positioning, latching, timing, nutrition, knowledge, beliefs, support groups</i> )
Uterus (Fundal height, position, consistency, tenderness)
Bladder (distention, difficulty voiding, perineal hygiene and perineal pain)
Bowel (bowel sounds, bowel movement, hemorrhoids, stool softeners)
Lochia (Rubra, Serosa, Alba, amount, odor, clots)
Episiotomy (redness, edema, ecchymosis, drainage, approximation, healing)
Homan's Sign (peripheral edema, varicosities)
Emotional Status (child-birth experience, taking-in, taking hold, letting go, postpartum blues, PPD, communication with significant others, family or other social support, living with whom, stress, coping strategies)



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## IX. HEALTH RISK ASSESSMENT

Were you checked by a doctor, nurse or midwife immediately after giving birth?

Are you experiencing any of the following danger signs?

- |                                                          |                                                                                        |
|----------------------------------------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Difficulty breathing            | <input type="checkbox"/> Difficulty in urinating                                       |
| <input type="checkbox"/> Paleness                        | <input type="checkbox"/> Severe vaginal pain                                           |
| <input type="checkbox"/> Severe headache                 | <input type="checkbox"/> Vaginal discharge (pus)                                       |
| <input type="checkbox"/> Fever                           | <input type="checkbox"/> Breast inflammation (one breast with redness, swelling, pain) |
| <input type="checkbox"/> Foul-smelling vaginal discharge | <input type="checkbox"/> Heavy vaginal bleeding                                        |

## X. ROLE CHANGES AND ADAPTATION

What has changed in your regular day to day activities since you gave birth?

More frequently	Less frequently	No longer done	Tasks/Roles
			Taking care of the baby: feeding, burping, bathing, establishing sleep routine
			Household chores
			Self-care (exercise, sleep, diet, time for self)
			Taking care of other children (preparing for school, bathing, dressing, sending to and fetching from school, assisting in homework)
			Caring for the partner (giving time, support)
			Caring for and supporting parents/other relatives
			Work
			Free time/leisure

Others:

What are the things that you are no longer able to perform? How important are these for you?

1	2	3	4
Absolutely unimportant	Unimportant	Important	Very Important

How do you set your daily priorities?

How confident are you in doing these?

1	2	3	4
Not at all confident	Not confident	Confident	Very Confident

How successful do you feel when you have completed these?

1	2	3	4
Not at all successful	Rarely successful	Successful	Very Successful



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## XI. Significant Findings:

### References:

DOH. (n.d.). Family Health Guide. Department of Health Republic of the Philippines.

[1FamilyHealthGuideversion102211.pdf \(doh.gov.ph\)](https://doh.gov.ph/family-health-guide-version-102211.pdf)

King, I. (1981). *A theory of nursing: systems, concepts, process*. Michigan: JWiley.

WHO Department of Maternal and Newborn, Child and Adolescent Health (2015). *Post Natal Care for Mothers and Newborns Highlights from the WHO 2013 Guidelines*. Retrieved from [https://www.who.int/maternal\\_child\\_adolescent/publications/WHO-MCA-PNC-2014-Briefer\\_A4.pdf](https://www.who.int/maternal_child_adolescent/publications/WHO-MCA-PNC-2014-Briefer_A4.pdf)