

McLaren Print System Order

Order No: 68558 Reprint Previous Order No: 59847
 Order Date: 2022-03-23
 User: Kristy Suerwier
 Phone: 989-672-5111

Ship Location: McLaren Caro Region
 401 North Hooper St
 Caro, MI 48723

Forms

Quantity: 100
 Paragon Dept No: 27290
 Dept Name: Ultrasound
 Company Number: 510

Order Total Price: 0.00

Item Number: US 18
 Item Description: BIOPHYSICAL PROFILE - PARTIAL EXAMINATION-MEASUREMENTS
 Revision Date: 11/2019
 Print: 1 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: None
 Misc Info: SS; BLACK; BOND PAPER

McLaren
CARO REGION

Biophysical Profile/Partial Examination-Measurements

Name: _____ Birth Date: _____ Date: _____
 Physician: _____ Diagnosis: _____
 G: _____ P: _____ AB: _____ Miscarriage: _____ LMP: _____

EDC: _____ EDC by Current US: _____
 AGE by EDC: _____ Age by Current US: _____

Biophysical Profile

Fetal Movements (3-in 30 min.)	0	2
Fetal Tone (any flex or extension)	0	2
Fetal Breathing (minimum 30 sec.)	0	2
Quantitative AFI (minimum 3cm pocket)	0	2
Total	7/8	

FETUS

Fetal Number: _____
 Est Fetal Wt: _____ +/- _____ lb _____ (kg/10)
 EFW (Hadlock) _____ %
 BPD: _____ cm MA _____ wk _____ D(+/-)
 HC: _____ cm MA _____ wk _____ D(+/-)
 AC: _____ cm MA _____ wk _____ D(+/-)
 FL: _____ cm MA _____ wk _____ D(+/-)
 CI: _____
 FL/BPD: _____
 HC/AC: _____ Heart Rate: _____
 FL/AC: _____

UTERUS

Placenta: _____ Grade: _____
 previa: _____
 AFI: _____

MATERNAL PELVIS

Cervix Length _____ Open Closed
 Left Ovary: _____
 Right Ovary: _____

ADDITIONAL COMMENTS: _____

Sonographer: _____

FORM US 28
 REV: 11-20-19