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| **STRESS MEASUREMENT SCREENING TOOL** | | | | | | | | |
| **INSTRUCTIONS: 1. Please complete this screening tool for all patients by reviewing their medical record. 2. For all patients who are eligible for this study, please call: Kaitlin Wolfe at (312) 503-5543 or page Kaitlin at (312) 695-4188.** | | | | | | | | |
| **Inclusion Criteria: (must answer YES to all)** | | | | | | | | |
|  |  |  |  |  |  |  | **Yes** | **No** |
| 1. Maternal age >=18.0 Years. | | |  |  |  |  | □ | □ |
| 2. Gestational age < 21 weeks based on clinical information and first ultrasound. | | | | | | | □ | □ |
|  | |  |  |  |  |  |  |  |
| 3. Singleton intrauterine pregnancy. | | | |  |  |  | □ | □ |
| 4. English speaking. | |  |  |  |  |  | □ | □ |
| **Exclusion Criteria: (must answer NO to all)** | | | | | | | | |
|  |  |  |  |  |  |  | **Yes** | **No** |
| 1. Presence of known fetal congenital anomalies (lethal anomaly or anomalies that may lead to early delivery or increased risk of neonatal death). | | | | | | | □ | □ |
| 2. Presence of known chromosomal abnormalities. | | | | |  |  | □ | □ |
| 3. Progesterone treatment during the current pregnancy after 14 weeks. | | | | | | | □ | □ |
| 4. Chronic corticosteroid (i.e. Prednisone or steroid) treatment during the current pregnancy (not including inhalers or topical) | | | | | | | □ | □ |