

# Case Narrative

**CDC** Centers for Disease Control and Prevention  
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Case Narrative **UNDO** **SAVE**

new-last-name, new-first-name

**Death Certificate**

Reviewer's Notes

**Birth/Fetal Death Certificate- Parent Section**

Reviewer's Notes

**Birth/Fetal Death Certificate- Infant/Fetal Section Reviewer's Notes**

Note: 1

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Note: 1

**Autopsy Report**

Reviewer's Notes

Terminal Event / Autopsy Narrative Summary:  
(Briefly describe in chronological fashion the events immediately preceding the terminal event. Include critical symptoms, treatments, referrals, labs, and vitals.)

She expired at \_\_\_\_\_ (weeks gestation OR days postpartum) at \_\_\_\_\_ (time) in the \_\_\_\_\_ (facility). The case was or was/not reported to the Medical Examiner/Coroner. Autopsy was OR was not performed. Core findings from the autopsy

**Prenatal Care Record**

Reviewer's Notes

Prenatal Care Record: Narrative Summary Template

She was a gravida \_\_\_\_\_ para \_\_\_\_\_ with a past obstetric history of \_\_\_\_\_ (Identify any complications or high risk factors) OR state no significant past OB history. Prior surgical history includes \_\_\_\_\_. Her family medical history was positive for \_\_\_\_\_. Pre-existing medical conditions included \_\_\_\_\_. She was \_\_\_\_\_ (height) and weighed \_\_\_\_\_. Her pre-pregnancy BMI was \_\_\_\_\_. In the sentinel pregnancy she entered care at \_\_\_\_\_ weeks gestation and weighed \_\_\_\_\_. She attended \_\_\_\_\_ # \_\_\_\_\_ visits at a

### ER Visits and Hospitalizations Reviewer's Notes

Note: 1

[Fill out separate summary for each hospital visit and label each different facility by number or letter to differentiate facilities.]

She presented at \_\_\_\_ (weeks gestation) to the \_\_\_\_\_ (ED or L&D triage or other) in a \_\_\_\_\_ (hospital level of OB care or trauma /trauma level) via \_\_\_\_\_ (method of transportation) at \_\_\_\_\_ (time). Her chief complaint was \_\_\_\_\_. Her weight on admission was \_\_\_\_\_ and her presenting vital signs were \_\_\_\_\_. She was screened for \_\_\_\_\_ (describe type of screening i.e. Embolism, hemorrhage, ectopic, influenza, domestic violence, etc.)

### Other Medical Office Visits Reviewer's Notes

Note: 1

### Medical Transport Reviewer's Notes

Note: 1

Transport was notified at \_\_\_\_\_ (time) for \_\_\_\_\_ (reason). Upon arrival at \_\_\_\_\_ (place of origin) she was found to be \_\_\_\_\_ (weeks gestation OR days postpartum) with \_\_\_\_\_ (briefly describe condition). Procedures during transport included \_\_\_\_\_. She was taken to \_\_\_\_\_ (describe place/level of care).

### Mental Health Profile

Reviewer's Notes

### Informant Interviews Reviewer's Notes

Note: 1

Case Narrative- Use the pre-fill text below, and copy and paste from Reviewer's Notes above to create a comprehensive case narrative. Whatever you type here is what will be printed in the Print Version.

She was a (age, place of birth, race/ethnicity, marriage status, level education, occupation). She was a gravida \_\_\_\_ para \_\_\_\_ who died with cause of death \_\_\_\_ days /months, before, during or after delivery. Medical history was significant for \_\_\_\_ (Pre-pregnancy risk factors or pre-existing medical conditions). Pre-pregnancy BMI was \_\_\_\_\_. Life course issues significant for \_\_\_\_\_ (psychosocial factors).

Entry into prenatal care was at \_\_\_\_\_ weeks with # visits at a \_\_\_\_ (describe location) with a \_\_\_\_ (provider type). Prenatal history was significant for \_\_\_\_ (include identified obstetric risk factors). Referrals during prenatal period were to \_\_\_\_\_ at \_\_\_\_\_

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### Medical Transport Reviewer's Notes

Note 1

Transport was notified at \_\_\_\_\_ (time) for \_\_\_\_\_ (reason). Upon arrival at \_\_\_\_\_ (place of origin) she was found to be \_\_\_\_\_ (weeks gestation OR days postpartum) with \_\_\_\_\_ (briefly describe condition). Procedures during transport included \_\_\_\_\_. She was taken to \_\_\_\_\_ (describe place/level of care).

### Social and Environmental Profile

Reviewer's Notes

### Mental Health Profile

Reviewer's Notes

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Case Narrative: Use the pre-fill text below, and copy and paste from Reviewer's Notes above to create a comprehensive case narrative. Whatever you type here is what will be printed in the Print Version.

She was a \_\_\_\_\_ (age, place of birth, race/ethnicity, marriage status, level education, occupation). She was a gravida \_\_\_\_\_ para \_\_\_\_\_ who died with cause of death \_\_\_\_\_ (days/months, before, during or after delivery). Medical history was significant for \_\_\_\_\_ (pre-pregnancy risk factors or pre-existing medical conditions). Pre-pregnancy BMI was \_\_\_\_\_. Life course issues significant for \_\_\_\_\_ (psychosocial factors).

Entry into prenatal care was at \_\_\_\_\_ weeks with # visits at a \_\_\_\_\_ (describe location) with a \_\_\_\_\_ (provider type). Prenatal history was significant for \_\_\_\_\_ (include identified obstetric risk factors). Referrals during prenatal period were to \_\_\_\_\_ at \_\_\_\_\_ weeks gestation.

Health events prior to delivery included \_\_\_\_\_. She presented to clinic/hospital/other \_\_\_\_\_ at \_\_\_\_\_ weeks gestation. Delivery was by a (provider title) \_\_\_\_\_ method was \_\_\_\_\_ with \_\_\_\_\_ anesthesia. Obstetric complications included \_\_\_\_\_. She presented to clinic/hospital/other \_\_\_\_\_ at \_\_\_\_\_ weeks gestation. Delivery was by a (provider title) \_\_\_\_\_ method was \_\_\_\_\_ with \_\_\_\_\_ anesthesia. Obstetric complications included \_\_\_\_\_. Fetus/infant was \_\_\_\_\_ weeks gestation and weighed \_\_\_\_\_ pounds/ounces. Apgar scores were \_\_\_\_\_ and complications were \_\_\_\_\_. Postpartum period (before discharge) significant for developing \_\_\_\_\_. Mother and infant were/were not discharged (if applicable) to \_\_\_\_\_. At \_\_\_\_\_ weeks postpartum she presented to (describe location) \_\_\_\_\_. Postpartum period (after discharge) significant for \_\_\_\_\_.

(Summarize terminal event). Autopsy was done by a \_\_\_\_\_ or was not done. Significant findings included \_\_\_\_\_.

(Describe if any bereavement services were offered.)

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