Antenatal Checklist



Congratulations on your pregnancy and welcome to Alana Obstetrics!

The following checklist is designed to help you through your antenatal care and prepare for your new arrival. Should you require any assistance with any of the items on the checklist our friendly admin team at Alana will be more than happy to guide you.

Antenatal Checklist		
	ltem	Due (gestation)
	 I have completed a cover check with my health fund and have confirmed the following: That I am covered to deliver my baby (MBS items 16519 or 16522) as a private patient, including accommodation, theatre cover and special care nursery, ensuring that I am financial with my health fund on my due date; The correct process to add my baby to my health insurance policy. 	8-12 Weeks
	I have completed the <i>Edinburgh Postnatal Depression Scale</i> form and <i>Antenatal Risk Questionnaire</i> returned it to my Alana Obstetrician.	12-16 Weeks
	I have completed the <i>Photography Consent Form</i> and returned it to the Alana Healthcare admin team.	12-16 Weeks
	 I have either: booked my confinement with the Prince of Wales Private Hospital via their online eAdmissions portal at https://healthscope.eadmissions.com.au/; or confirmed my preference to deliver at the Royal Hospital for Women with my obstetrician/ the Alana admin team 	18 Weeks
	I have signed my <i>Obstetric Fee Disclosure</i> and returned it to Alana Healthcare.	20 Weeks
	I have paid my 2/3 pregnancy and planning management deposit to Alana Healthcare.	22 Weeks
	I have scheduled the remainder of my antenatal appointments at Alana Healthcare.	24 Weeks
	I have the important phone numbers in a prominent place: Alana Healthcare 9009 5255 Alana Healthcare On Call 0499 525 000 POWP Hospital Delivery Suite 9650 4444 RHW Delivery Suite 9382 6100	30 Weeks
	I have paid the remaining balance of my pregnancy and planning management fee to Alana Healthcare.	32 Weeks
	I have packed my hospital bag and I'm ready to go!	36 weeks

Attached

- Obstetric Fee Disclosure
- Edinburgh Postnatal Depression Scale form
- Antenatal Risk Questionnaire Client
- Photo Consent Form
- RHW fee information **if applicable**