**Congratulations on your pregnancy and welcome to the University Hospitals Leicester Maternity Services**

No that you are pregnant we hope our maternity services can offer you the support and guidance you need in the coming months.

Leicester hospitals are able to offer you:

* A 24-hour Home Birth Service
* A stand-alone Midwifery Led Birth Centre at St Mary’s Birth Centre Melton Mowbray
* A Midwife led Birth Centres at Leicester General & Leicester Royal Infirmary
* Two obstetric led units who are able to support women with medical issues or concerns that may arise.

During your booking appointment the midwife will take a detailed history of any past pregnancies, any medical problems and any social circumstances that may be affecting you.

**What you need to do now:**

* Complete the form with this letter and hand it back to the receptionist **today**; this is important as the midwife will not be able to complete your first appointment unless this has been done.
* You will be given a booking appointment for when you are 8-10 weeks pregnant, the midwife will inform you of where this will take place. If you are more than 10 weeks now, we will make this appointment as soon as possible.
* Read the information about the screening tests for you and your baby on the You tube video. Follow the link: <https://www.youtube.com/watch?v=afr5ollpTM> If you have any questions make a note of them and your midwife will be able to answer them during your appointment.
* If you have not already done so, commence taking Folic Acid 400mcgs daily and Vitamin D 10mcgs (or a pregnancy specific vitamin)
* **Please bring a urine sample to every community midwife appointment**

If you have any concerns or wish to speak to a midwife before your appointment, please call the community midwife office on 0116 258 4834.

We look forward to meeting you soon.

**Essential Information for the Midwife**

Form to be completed by all newly pregnant women needing to be booked an appointment with the midwife. The information must be passed to the midwife as soon as possible and she will contact the patient with an appointment.

 **It is essential you complete all questions on this form.**

**Any urgent referrals please ring the community midwifery team on 0116 258 4834.**

Miss / Mrs / Ms / First Name ………………………………Surname ……………………………...

Date of Birth …………………………………………………NHS Number…………………………

Full address ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..Post code…………………

Telephone Number…………………………………………...Ethnicity……………………………...

Registered GP………………………………………………………………………………………….

First day of your last period…………………………………

Email…………………………………………………………………………………………………….

Where would you like to have the bay? Home / LRI / LGH / SMBC / Other…………………….

Is an interpreter required? Yes / No. If yes which language is required? ……………………….

Ethnicity of babies father ……………………………………………………………………………..

**Next of kin (Not necessarily partner)**

Miss /Mrs /Ms /Mr First Name …………………………… Surname……………………………….

Full Address …………………………………………………………………………………………………………………………………………………………………………Post code ………………………………….

Telephone Number ………………………………..

Relationship to mum to be…………………………………………………………………………….

**MIDWIFE USE ONLY**

* **Appointment Date……………………………………………..**
* **E3 requested ? Yes / No Date requested ………………………………**