1. Last Name		First Name							MI	
2. Patient Number										
3. Date of Birth (MM/DD/YYYY)		Month		Day			Year			
4. Race ☐ American Indian or Alaska Native ☐ Asian ☐ Black/African American ☐ Native Hawaiian/Other Pacific Islander ☐ Unknown ☐ White										
5. Ethnic Origin ☐ Hispanic Cuban ☐ Hispanic Mexican American ☐ Hispanic Other ☐ Hispanic Puerto Rican ☐ Not Hispanic/Latino ☐ Unreported										
6. Gender ☐ Female ☐ Male										
7. County of Residence										

N.C. Department of Health and Human Services
Women's and Children's Health Section

PRENATAL WEIGHT GAIN CHART

Pre-Pregnancy Underweight
BMI <18.5

Weight Gain Recommendations (singleton):

- 2.2–6.6 lb. gain 1st trimester
- 1 lb. gain per week 2nd and 3rd trimesters
- 28–40 lb. total weight gain

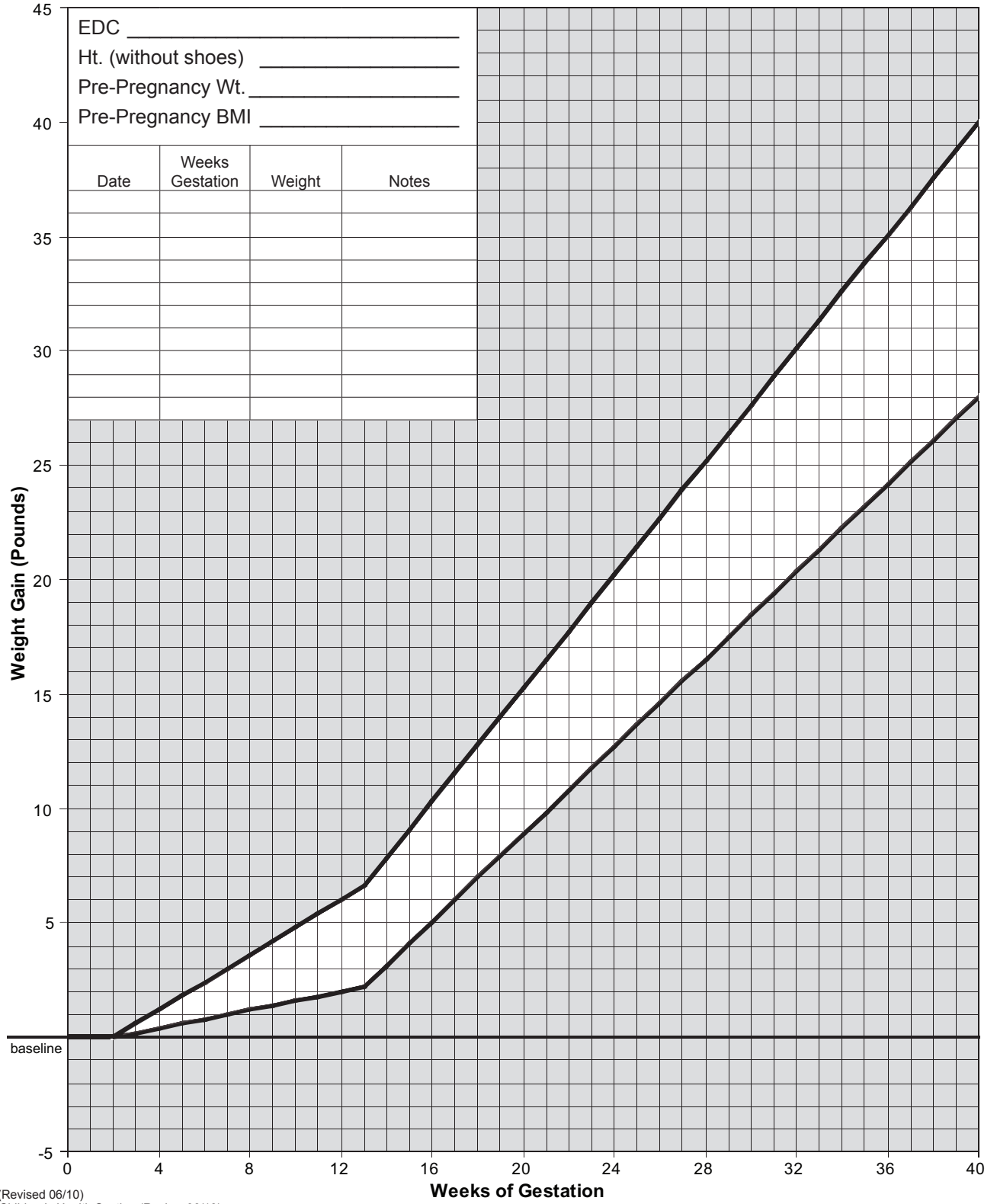
EDC _____

Ht. (without shoes) _____

Pre-Pregnancy Wt. _____

Pre-Pregnancy BMI _____

Date	Weeks Gestation	Weight	Notes



DHHS 2388A (Revised 06/10)
Women's and Children's Health Section (Review 06/13)

Source: Institute of Medicine, 2009. *Weight Gain During Pregnancy: Reexamining the Guidelines.* Washington, DC. National Academies Press; Committee to Reexamine IOM Pregnancy Guidelines.