No	Form	INDONESIAN							No	Form	ENGLISH						
		Label	Type	Choices	Constraint	Unit	Required				Label	Type	Choices	Constraint	Unit		
1	Profile (below "Ada kondisi masa lalu atau kronis)	Riwayat kesehatan ibu sekarang	MC (select multiple)	Hipertensi			Yes		1	Profile (after "Ada kondisi masa lalu atau kronis/ past health conditions or chronics)	Current medical information	MC (select multiple)	Hypertension			Yes	
				Jantung									Heart disease				
				Tiroid									Tyroid				
				Alergi									Allergic				
				Autoimun									Autoimun disease				
				Diabetes									Diabetes				
				Asma									Asthma				
				TB									TB				
				Hepatitis B									Hepatitis B				
				Jiwa									Mental health issue				
				Sifilis									Syphilis				
2	Profile (below #1 Riwayat kesehatan ibu sekarang)	Riwayat penyakit keluarga	MC (select multiple)	Hipertensi			Yes		2	Profile (after #1 Riwayat kesehatan ibu sekarang)	Family member health history	MC (select multiple)	Hypertension			Yes	
				Jantung									Heart disease				
				Jiwa									Mental health issue				
				Diabetes									Diabetes				
				TB									TB				
				Kelainan darah									Blood disorder				
				Sesak nafas									Asthma				
				Alergi									Allergic				
				Hepatitis B									Hepatitis B				
				Lainnya, sebutkan:									Other, mention:				
3	Profile_status imunisasi_choose dalam proses imunisasi: https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	Status imunisasi TT	MC (select one)	TT ke-1			Yes		3	Profile_status imunisasi_choose dalam proses imunisasi: https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	TT vaccine dose	MC (select one)	TT 1			Yes	
				TT ke-2									TT 2				
				TT ke-3									TT 3				
				TT ke-4									TT 4				
				TT ke-5									TT 5				
4	Profile_before asupan kafein harian **(this is asked only in the first visit but appears in the next visit with thicked answer)**	Riwayat perilaku berisiko 1 bulan sebelum hamil	MC (select multiple)	Pola makan berisiko			Yes		4	Profile_before asupan kafein harian	History of risky behavior 1 month before pregnancy	MC (select multiple)	Risky diet			Yes	
				Aktivitas fisik kurang									Less physical activity				
				Obat teratogenik(obat-obat yang bisa menyebabkan kecacatan pada janin)									Teratogenic drugs (drugs that can cause defects in the fetus)				
				Kosmetik yang mengandung zat berbahaya									Cosmetics containing harmful substances				
				Lingkungan berisiko: pestisida/ lainnya									Environmental risks: pesticides/others				
5	Profil_Riwayat obstetri **(this is asked only in the first visit but appears in the next visit with thicked answer)**	Riwayat keguguran	Integer		2 digits		Yes		5	Profil_Riwayat obstetri **(this is asked only in the first visit but appears in the next visit with thicked answer)**	Abortion	Integer		2 digits		Yes	This is already in the BUNDA App
		Riwayat lahir mati	Integer		2 digits						Stillbirth	Integer		2 digits			
		Riwayat kehamilan kembar	Integer		2 digits						Pregnancy	Integer		2 digits			
6	Profil_Riwaya obstetri (if select number of pregnancy, there will be follow up field) **(this is asked only in the first visit but appears in the next visit with thicked answer)**	Tahun	Integer		4 digits		Yes		6	Profil_Riwaya obstetri (if select number of pregnancy, there will be follow up field) **(this is asked only in the first visit but appears in the next visit with thicked answer)**	Year	Integer		4 digits (19 and 20)		Yes	
		Berat lahir (gram)	Integer		4 digits						Birth weight (gram)	Integer		4 digits			
		Jenis persalinan	MC (select one)	Persalinan normal							Delivery method	MC (select one)	Vaginal delivery				
				Persalinan pervaginan berbantu									Assisted vaginal delivery				
				Sectio caesaria									Cesarean				
		Penolong persalinan	MC (select one)	Keluarga							Birth attendant	MC (select one)	Family				
				Dukun									Traditional birth attendant				
				Bidan									Midwife				
				Dokter umum									Medical doctor				
				Dokter spesialis									Specialized doctor/ OB/GYN				
				Tidak ada									None				
				Lain-lain								Text	Other				
		Komplikasi	MC (select multiple)	Tidak ada komplikasi kebidanan							Pregnancy complication	MC (select multiple)	None				
				Distosia bahu									Dystocia				
				Hipertensi dalam kehamilan									Hypertension in pregnancy				
				Perdarahan postpartum									Postpartum hemorrhage				
				Infeksi									Infection				
				Sepsis maternal									Maternal sepsis				
				Preeklampsia									Preeclampsia				
				Eklampsia									Eclampsia				
				Lain-lain								Text	Other				
7	Pemeriksaan fisik	**Pemeriksaan khusus: Inspeksi/ Inspekulo**					No		7	Pemeriksaan fisik (physical exam)	~~**Special examination: Inspection/ inspekulo**~~					No	
		Vulva	MC (select one)	Normal							Vulva	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Uretra	MC (select one)	Normal							Urethra	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Vagina	MC (select one)	Normal							Vagina	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Fluksus	MC (select one)	+							~~Fluxus~~	MC (select one)	+				
				--									--				
		Flour	MC (select one)	+							~~Flour~~	MC (select one)	+				
				--									--				
		Porsio	MC (select one)	Normal							~~Porsio~~	MC (select one)	Normal				
				Tidak normal									Abnormal				
8	Pemeriksaan fisik_after field ibu pucat	**Trimester I atau Trimester III**					No		8	Pemeriksaan fisik_after field ibu pucat/ pale	**Trimester I (1st contact) or Trimester III (4th contact)**					No	
		Konjungtiva	MC (select one)	Normal							Conjunglitva	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Sklera	MC (select one)	Normal							Sclera	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Kulit	MC (select one)	Normal							Skin	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Leher	MC (select one)	Normal							Neck	MC (select one)	Normal				
				Tidak normal									Abnormal				
		Gigi mulut	MC (select one)	Normal							Tooth mouth	MC (select one)	Normal				
				Tidak normal									Abnormal				
		THT	MC (select one)	Normal							Ear, nose, and throat	MC (select one)	Normal				
				Tidak normal									Abnormal				
9	Pemeriksaan fisik_below "field pemeriksaan panggul pernah dilakukan?"	Tungkai	MC (select one)	Normal			No		9	Pemeriksaan fisik_below "field pemeriksaan panggul pernah dilakukan?/ pelvic exam	Limbs	MC (select one)	Normal			No	
				Tidak normal									Abnormal				
10	Tes_tes USG (add results) https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	**Hasil USG Trimester I**					No		10	Tes_tes USG (add results) https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	**Trimester I**					No	**Trimester I**
		GS (Gestational Sac)									GS (Gestational Sac)						**Trimester III**
		CRL (Crown-rump Length)									CRL (Crown-rump Length)						
		DJJ (Detak Jantung Janin)									FHR (Fetal heart rate)						
		Sesuai usia kehamilan	MC (select one)	Ya							Same with gestational age	MC (select one)	Yes				
				Tidak									No				
		Letak kantong kehamilan	MC (select one)	Intrauterin							The location of the gestational sac	MC (select one)	Intrauterine				
				Ekstrauterin									Extrauterine				
		Taksiran persalinan	Date								Expected date of delivery	Date					
11	Tes_tes USG (add results) https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	Hasil USG Trimester III					No		11	Tes_tes USG (add results) https://drive.google.com/file/d/13DhsHRwMTbMxQ4jhSJcaL46Zrd_eR7rA/view?usp=sharing	**Trimester III**					No	
		Janin	MC (select one)	Hidup							Fetus	MC (select one)	Alive				
				Tidak hidup									Death				
		Jumlah janin	MC (select one)	Tunggal													
				Gianda													
		Letak janin	MC (select one)	Intrauterin							Fetal location	MC (select one)	Intrauterine				
				Ekstrauterin									Extrauterine				
		Presentasi	MC (select one)	Kepala							Presentation (existing field)	MC (select one)	Kepala				
				Bokong									Bokong				
				Letak lintang									Letak lintang				
		Berat janin (gram)	Integer			gram					Fetal weight (gram)	Integer		4 digits	gram		
		Plasenta	MC (select one)	Normal							Placenta	MC (select one)	Normal				
				Tidak									Abnormal				
		Lokasi plasenta (existing field)									Placenta location (existing field)						
		BPD (cm)	Integer		2 digits						BPD (cm)	Integer		2 digits			
		HC (cm)	Integer		2 digits						HC (cm)	Integer		2 digits			
		AC (cm)	Integer		2 digits						AC (cm)	Integer		2 digits			
		FL (cm)	Integer		2 digits						FL (cm)	Integer		2 digits			
		SPD cairan ketuban (cm)	Integer		2 digits						SPD amnion (cm)	Integer		2 digits			
		Usia kehamilan (minggu)	Integer		2 digits						Gestational age (week)	Integer		2 digits			
12	Tes_Tes urin (add new option below "Tes dipstick urin"	Urin reduksi	MC (select one)	Negatif			Yes		12	Tes_Tes urin (add new option below "Tes dipstick urin"	Reducing substances in urine	MC (select one)	Negative			Yes	
				+1									+1				
				+2									+2				
				+3									+3				
				+4									+4				
13	Konseling dan tindakan (below "Konseling persalinan dan kesiapan komplikasi) https://drive.google.com/file/d/13D-aVzc_J2eMxKQk7WPhGrRt8Xpv/view?usp=sharing	Rencana jenis persalinan	MC (select one)	Persalinan normal			No		13	Konseling dan tindakan (below "Konseling persalinan dan kesiapan komplikasi) https://drive.google.com/file/d/13D-aVzc_J2eMxKQk7WPhGrRt8Xpv/view?usp=sharing	Expected delivery method	MC (select one)	Vaginal delivery			No	
				Persalinan pervaginan berbantu									Assisted vaginal delivery				
				Sectio caesaria									Cesarean				

Label	Info icon	Due	Relevance	Name	Description	Type	Choices	Calculation	Constraint(s)	Default?	Required	OpenMRS entity parent	OpenMRS entity	OpenMRS entity ID	
Current medical information	Procedure: - Manage according to the local protocol for assessment and management		(current_medical_information) = "Hypertension" OR "Heart disease" OR "Tyroid" OR "Allergic Autoimun disease" OR "Diabetes" OR "Asthma" OR "TB" OR "Hepatitis B" OR "Mental health issue" OR "Syphilis"		Woman is having pregnancy with hypertension or heart disease or tyroid or allergic or autoimun disease or diabetes or asthma or TB or hepatitis B or mental health issue or syphilis must be referred for further investigation.										
Family member health history	Procedure: - Manage according to the local protocol for assessment and management		(family_member_health_history) = "Hypertension" OR "Heart disease" OR "Mental health issue" OR "Diabetes" OR "TB" OR "Blood disorder" OR "Asthma" OR "Allergic" OR "Hepatitis B"		Woman's family member was or has diagnosed with hypertension or heart disease or mental health issue or diabetes or TB or blood disorder or asthma or allergic or hepatitis B must be referred for further investigation.										
History of risky behavior 1 month before pregnancy	Procedure: - Manage according to the local protocol for assessment and management		(history_of_risky_behavior_one_month_before_pregnancy) = "Risky diet" OR "Less physicial activity" OR ."Teratogenic drugs (drugs that can cause defects in the fetus)" OR "Cosmetics containing harmful substances" OR "Environmental risks"		Woman had risky behavor one month before pregnancy, including risky diet or less physical activity or teratogenic drugs or cosmetics containing harmful substances or environmental risiks must be referred for further investigation.										
Pelvic exam	Procedure: - Manage according to the local protocol for assessment and management		(Pelvic_exam) = "Abnromal vulva" OR "Abnormal urethra" OR "Abnormal vagina" OR "Positive vaginal bleeding" OR "Positive vaginal discharge" OR "Abnormal cervical portio"		The woman's pelvic exam was abnormal and she should be managed according to the local protocol.										