

*For Debate . . .***Should women carry their antenatal records?**

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Abstract

A study of women's views on carrying their medical records during their pregnancy was conducted in Cambridge in 1982. Eighty eight women who were given their full records were compared with a control group of 83 women who carried the traditional cooperation card, both groups answering postal questionnaires about the advantages and disadvantages of carrying their respective records. Most women found advantages in carrying the complete record, although it was too large to carry for practical purposes. Both groups experienced difficulty in understanding what was written on their cards.

Introduction

Most women in Britain carry the familiar cooperation card with them during pregnancy, on which medical staff record details of the pregnancy. This card has been criticised: the space on it is limited, and results of investigations may not be recorded. A few maternity units have given women the main hospital antenatal record to carry throughout pregnancy, and they reported it as successful, although no control group was incorporated in their studies.^{1,2} We therefore studied women's views on carrying their complete record and compared them with views of a control group of women receiving traditional antenatal care.

Patients, methods, and results

We studied 96 women attending a community antenatal clinic in 1982. We asked them several questions by postal questionnaire about their view on carrying records at 26 weeks of pregnancy and some retrospective questions six weeks after delivery. Eighty eight women completed the two questionnaires, which contained fixed choice and open ended questions. Results were analysed with the statistical package for the social sciences and by hand.³ A similar method was used to obtain the views of a control group of 83 women receiving traditional shared care (J Draper *et al*, unpublished report).

Women were asked whether they liked carrying their records: 71 did and 83 thought there were advantages in this policy. They were then given a list

of advantages and disadvantages of carrying the main record and asked to indicate which they agreed with. Seventy seven women thought that there were advantages for women in reading their records; 20 found that which was written in their notes was difficult to understand or worrying (although a similar proportion of the control group also found the cooperation card difficult to understand); 30 thought there were advantages for relatives and friends to be able to read the records; and 42 considered that carrying the records gave them a more responsible part to play in their pregnancy. Forty four women found difficulties in carrying the records around and 11 in remembering to take them to each visit. Only 12 (13%) women in the study carried their records with them whenever they left the house. In comparison half of the control group carried the cooperation card with them constantly. Seven women, all of whom were either admitted to hospital or had complications during pregnancy, found particular advantages in carrying the complete record.

Few women mentioned disadvantages of carrying the records other than their size—namely, A4, so they were too large for a handbag. Three, however, were worried that their notes might contain something they would rather not know, particularly about the baby. Although this had worried practitioners when the experimental clinic was first set up, it was not a problem, although one general practitioner wondered how to record a suspected abnormality. No women reported that they wished to keep factors in their history confidential, although the midwife running the clinic remembered two or three women who had asked that information about previous terminations be excluded from the records or written in code.

There was no statistical relation between women finding their records difficult to read, being worried by what they read, or having difficulties carrying their records around and their social class or parity.

Only half of the 50 multiparous women thought that carrying the main antenatal record was better than carrying the traditional cooperation card.

Discussion

These results show that most women found advantages in carrying their complete records. Women did not lose their notes or forget to take them to antenatal visits, but a quarter of them found them difficult to read or worrying, as did a similar proportion in the control group who carried cooperation cards. Only half thought that carrying them gave them a more responsible part to play in their pregnancies. Evidence suggested that practitioners did not explain what they were writing in the records. Thus it does not necessarily follow that giving women their records results in their being able to play a more informed, active part in their pregnancy. This contrasts with Silverman's findings.⁵

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References

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