Obstetrical Triage Area

Goal: Evaluate obstetrical patients in a timely manner and Triage them to the appropriate area.

No patient will remain in Triage longer than 4 hours.

Obstetrical Triage is a high volume clinic run in conjunction with Labor and Delivery. It is used to evaluate any pregnant patient and make an appropriate disposition. This includes discharging the patient, extended monitoring, admission, or making the appropriate referral. The key is to evaluate the patient quickly, thoroughly and make a disposition. In order to accomplish this goal, prompt attention is needed by both the nursing and medical staff.

Personnel:

Nursing: Certified Nurse Midwife
M.D. Ob/Gyn Attending
Ob/Gyn Residents PGY 1,2,3,4
ER Resident

Protocol:

Each patient presenting to Triage will have a history and vital signs performed as soon as possible.

1. This should be performed in a Triage room. However, if it is busy, this may be done in a private, confidential area.
2. Patients deemed emergent will be taken to a Labor Room and monitored as quickly as possible. The PGY4 will immediately be notified and asked to come and evaluate the patient.
3. Once the patient is in the room, the nursing staff will immediately contact the PGY2 resident to evaluate the patient. If low risk, the PGY1, nurse midwife or ER resident will do the evaluation. If high risk, the PGY3 will be contacted. If emergent the PGY4 will be contacted.
4. The resident should evaluate each patient within an hour, or if emergent, within 5 minutes.
5. The nurse should ask the resident after three hours if a plan has been established.
   If no plan is yet in place, the PGY4 is notified. Once the residents have made the assessment, the faculty should be called to assess the patient.
6. All efforts should be made to have a disposition made and the patient be moved out of the area within 4 hours. After 4 hours, if no disposition has been made, the Triage nurse will admit the patient for 23-hour observation.
7. All action times will be kept on patient’s progress including:
   a. Time presented
   b. Time assessed by nurse
   c. Time resident notified
   d. Time resident evaluated patient
   e. Time PGY4 notified
   f. Time Attending notified
   g. Time of disposition

All of these steps are being taken to improve patient care for all of our patients and to better utilize resources.