

OTAS	Level 1 (Resuscitative)	Level 2 (Emergent)	Level 3 (Urgent)	Level 4 (Less Urgent)	Level 5 (Non-Urgent)
Time to Secondary Health Care Provider	Immediate	≤ 15 minutes	≤ 30 minutes	≤ 60 minutes	≤ 120 minutes (2 hours)
Re-assessment	Continuous Nursing Care	Every 15 minutes	Every 15 minutes	Every 30 minutes	Every 60 minutes
Labour/Fluid	<ul style="list-style-type: none"> Imminent birth 	<ul style="list-style-type: none"> Suspected preterm labour/PPROM < 37 weeks 	<ul style="list-style-type: none"> Signs of active labour > 37 weeks 	<ul style="list-style-type: none"> Signs of early labour/SROM > 37 weeks 	<ul style="list-style-type: none"> Discomforts of pregnancy
Bleeding	<ul style="list-style-type: none"> Active vaginal bleeding with/without abdominal pain 	<ul style="list-style-type: none"> Bleeding associated with cramping (> spotting) < 37 weeks 	<ul style="list-style-type: none"> Bleeding associated with cramping (> spotting) > 37 weeks 	<ul style="list-style-type: none"> Spotting 	
Hypertension	<ul style="list-style-type: none"> Seizure activity 	<ul style="list-style-type: none"> Hypertension > 160/110 and/or headache, visual disturbance, RUQ pain 	<ul style="list-style-type: none"> Mild Hypertension > 140/90 with/without associated signs and symptoms 		
Fetal Assessment	<ul style="list-style-type: none"> Abnormal FHR tracing No fetal movement 	<ul style="list-style-type: none"> Atypical FHR tracing, abnormal BPP, abnormal dopplers Decreased fetal movement 			
Other	<ul style="list-style-type: none"> Acute onset severe abdominal pain Altered level of consciousness Cord prolapse Severe respiratory distress Suspected sepsis 	<ul style="list-style-type: none"> Major trauma Shortness of breath Unplanned and unattended birth 	<ul style="list-style-type: none"> Abdominal/back pain greater than expected in pregnancy Flank pain/hematuria Nausea/vomiting and/or diarrhea with suspected dehydration 	<ul style="list-style-type: none"> Ongoing assessment from outpatient clinic (for hypertension, blood work) Minor trauma (minor MVC/fall) Nausea/vomiting and/or diarrhea Signs of infection (ie. dysuria, cough, fever, chills) 	<ul style="list-style-type: none"> Anything that does not seem to pose threat to mother or fetus Cervical Ripening Outpatient placenta previa protocol Pre-booked visits (ie. Rh and progesterone injections, NST) Assessment for version Rashes

Obstetric Triage Guidelines

**Liam Donaldson, Walter
Ricciardi, Susan Sheridan, Riccardo
Tartaglia**

Obstetric Triage Guidelines

Obstetric Triage and Emergency Care Protocols Diane J. Angelini, EdD, CNM, FACNM, FAAN, Donna LaFontaine, MD, FACOG, 2012-07-27 Named a 2013 Doody's Core Title 2012 Second Place AJN Book of the Year Award Winner in Maternal and Child Health This up to date handbook of narrative practice guidelines for use in obstetric triage and emergency settings provides speedy access to critical information needed by healthcare providers in obstetrics midwifery emergency medicine and family care medicine It includes narrative practice protocols that offer point of service management guidelines diagnostic parameters ultrasound imaging and other diagnostic modalities and easy to follow algorithms and tables in each chapter This information will enable practitioners to easily recognize and understand symptomatology lab results diagnostic imaging and clinical workings Chapters address over 30 clinical conditions and are consistently organized to include presenting symptomatology history and data collection physical exam findings lab and imaging studies differential diagnosis and clinical management and follow up The book disseminates the contributions of expert midwives nurse practitioners obstetricians gynecologists and radiologists who evaluate more than 30 000 obstetric visits each year Key Features Pocket sized and easy to use Includes current guidelines for more than 30 clinical situations requiring obstetric triage or emergency care Offers plentiful diagnostic and imaging guidelines with accompanying figures and images Presents algorithms diagnostic images and best evidence for each condition

Obstetric Triage and Emergency Care Protocols Diane J. Angelini, EdD, CNM, FACNM, FAAN, Donna LaFontaine, MD, FACOG, 2017-10-20 First Edition Named a 2013 Doody's Core Title First Edition Second Place AJN Book of the Year Award Winner in Maternal and Child Health With more women than ever seeking obstetric triage and emergency services in obstetric triage units obstetric providers need to be aware of triage assessment and evaluation protocols This prize winning pocket guide containing management guidelines for obstetric triage emergency settings delivers critical information on obstetrics midwifery emergency and family care for both students and seasoned clinicians As with the first edition all of the newly revised chapters take a strong collaborative and interprofessional approach to clinical conditions in the obstetric triage setting With specific clinical protocols for more than 30 clinical situations this fully updated second edition includes two completely new chapters on sepsis in pregnancy and triage acuity tools along with updated guidelines for hypertension sepsis and postpartum complications Each protocol comprises presenting symptomatology patient history and data collection physical exam findings laboratory and imaging studies differential diagnosis and clinical management protocol follow up Plentiful figures and images reference tables and standardized forms for reference and usage algorithms and clinical pathways illustrate chapter content Esteemed contributors include midwives nurse practitioners obstetricians gynecologists and maternal fetal medicine faculty who evaluate nearly 30 000 OB visits per year New to the Second Edition New chapters on sepsis in pregnancy and triage acuity

tools Key updates on ectopic pregnancy nausea and hyperemesis in pregnancy severe preeclampsia sexually transmitted and other infections substance abuse and psychiatric disorders in pregnancy Expanded information on periviable obstetric management Information on Zika and Ebola Clinical callouts in each chapter highlighting key points Enhanced narrative protocols Key Features Provides interprofessional triage protocol guidance for ED and OB triage settings Delivers protocols and guidelines for over 30 emergent care situations Includes plentiful diagnostic and imaging guidelines with accompanying figures Formatted consistently for quick access Offers algorithms protocols diagnostic imaging and best evidence for each condition

Telephone Triage for Obstetrics & Gynecology Vicki Long, Patricia McMullen, 2018-03-05 Provide top level obstetrics and gynecology telephone triage that is safe efficient and effective with Telephone Triage for Obstetrics Gynecology 3rd Edition This at your fingertips guide offers a wide range of current evidence based protocols backed by proven patient questioning techniques quick reference charts and real life patient scenarios Adaptable to private practice hospital clinic or call center this invaluable guide will help ensure that your telephone triage standards stay high while your practice serves individual patient situations with empathy and accuracy right from the start Be expertly guided through the telephone triage rigors of data gathering protocols and patient education with these vital features NEW chapter on incorporating internet research into advice on specific protoc NEW and expanded protocols that offer updated content on preconceptual screening infectious disease impacts on pregnancy infertility management and emergency contraception Quick reference sections that arrange protocols alphabetically for fast locating Easy to follow data gathering flowchart format that helps you quickly determine the nature and urgency of the caller s problem and choose the appropriate intervention Easy to explain patient education sections after each protocol Basic Triage Assessment Forms that address specific problems and require vital patient data Guidance on developing telephone charisma and the power of sympathetic listening Effective patient questioning techniques pertinent questions to ask types of questions time management getting clarification Real life call scenarios that point out problems with not listening fully to the patient skipping relevant questions or exerting judgments Covers telephone triage basics including logistical and legal considerations assessments telephone communication basics and challenges and more Offers obstetric protocols including overviews of preconceptual and infertility early management of unintended pregnancy fetal prenatal screening early pregnancy evaluation and surveillance and more Offers gynecologic protocols including overviews of abnormal bleeding and spotting amenorrhea barrier contraceptives breast complaints emergency contraception injectable contraceptives intrauterine contraception menopausal concerns and more Vital guidance for all gynecologic nurses obstetric nurses certified nurse midwives OB GYN nurse practitioners all triage nurses and health professionals at call centers

Telephone Triage for Obstetrics and Gynecology Vicki E. Long, Patricia C. McMullen, 2010 This telephone triage book is designed for use by professional nurses assessing and advising patients over the telephone on topics related to obstetrics and gynecology It is designed to crystalize

the professionals existing knowledge base and to provide clear guidance on handling a wide variety of patient situations about which the triage nurse might need to work through the protocols are organized alphabetically by major topic areas and outline the salient medical legal and practical considerations involved important educational points are highlighted to reinforce important points to stress

Telephone Triage for Obstetrics and Gynecology Vicki E. Long, Patricia C. McMullen, 2003 This easy to use manual provides telephone triage protocols to nurses involved with obstetrics and gynecology It offers suggestions for asking appropriate questions in a flowchart format to ascertain the assessment and severity of the problem and need for medical intervention This guide serves as a decision making tool for the nurse to easily identify and prioritize who needs immediate medical attention who needs to be seen within twenty four hours and who can be monitored at home Includes topics that cover basics protocols symptoms and issues that occur within the scope of this specialty The forms in the guide may be duplicated and used as patient handouts

Telephone Triage for Obstetrics & Gynecology Vicki Long, Patricia McMullen, 2018-04-27 Provide top level obstetrics and gynecology telephone triage that is safe efficient and effective with Telephone Triage for Obstetrics Gynecology 3rd Edition This at your fingertips guide offers a wide range of current evidence based protocols backed by proven patient questioning techniques quick reference charts and real life patient scenarios Adaptable to private practice hospital clinic or call center this invaluable guide will help ensure that your telephone triage standards stay high while your practice serves individual patient situations with empathy and accuracy right from the start Be expertly guided through the telephone triage rigors of data gathering protocols and patient education with these vital features NEW chapter on incorporating internet research into advice on specific protocol NEW and expanded protocols that offer updated content on preconceptual screening infectious disease impacts on pregnancy infertility management and emergency contraception Quick reference sections that arrange protocols alphabetically for fast locating Easy to follow data gathering flowchart format that helps you quickly determine the nature and urgency of the caller s problem and choose the appropriate intervention Easy to explain patient education sections after each protocol Basic Triage Assessment Forms that address specific problems and require vital patient data Guidance on developing telephone charisma and the power of sympathetic listening Effective patient questioning techniques pertinent questions to ask types of questions time management getting clarification Real life call scenarios that point out problems with not listening fully to the patient skipping relevant questions or exerting judgments Covers telephone triage basics including logistical and legal considerations assessments telephone communication basics and challenges and more Offers obstetric protocols including overviews of preconceptual and infertility early management of unintended pregnancy fetal prenatal screening early pregnancy evaluation and surveillance and more Offers gynecologic protocols including overviews of abnormal bleeding and spotting amenorrhea barrier contraceptives breast complaints emergency contraception injectable contraceptives intrauterine contraception menopausal concerns and more Vital guidance for all gynecologic nurses obstetric nurses certified

nurse midwives OB GYN nurse practitioners all triage nurses and health professionals at call centers Your book purchase includes a complimentary download of the enhanced eBook for iOS Android PC and Mac Take advantage of these practical features that will improve your eBook experience The ability to download the eBook on multiple devices at one time providing a seamless reading experience online or offline Powerful search tools and smart navigation cross links that allow you to search within this book or across your entire library of VitalSource eBooks Multiple viewing options that enable you to scale images and text to any size without losing page clarity as well as responsive design The ability to highlight text and add notes with one click About the Clinical Editors Vicki E Long DNP RN CNM is an Assistant Professor at the School of Nursing University of South Carolina Aiken Patricia C McMullen PhD JD WHNP BC RN FAANP FAAN is a Professor and Dean of the School of Nursing The Catholic University of America Washington DC Telephone Triage of the Obstetric Patient Deborah E. Swenson,1998-06-01 *Birth Settings in America* National Academies of Sciences, Engineering, and Medicine,Health and Medicine Division,Division of Behavioral and Social Sciences and Education,Board on Children, Youth, and Families,Committee on Assessing Health Outcomes by Birth Settings,2020-05-01 The delivery of high quality and equitable care for both mothers and newborns is complex and requires efforts across many sectors The United States spends more on childbirth than any other country in the world yet outcomes are worse than other high resource countries and even worse for Black and Native American women There are a variety of factors that influence childbirth including social determinants such as income educational levels access to care financing transportation structural racism and geographic variability in birth settings It is important to reevaluate the United States approach to maternal and newborn care through the lens of these factors across multiple disciplines *Birth Settings in America Outcomes Quality Access and Choice* reviews and evaluates maternal and newborn care in the United States the epidemiology of social and clinical risks in pregnancy and childbirth birth settings research and access to and choice of birth settings **Guidelines for Perinatal Care** American Academy of Pediatrics,American College of Obstetricians and Gynecologists,1997 This guide has been developed jointly by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists and is designed for use by all personnel involved in the care of pregnant women their fetuses and their neonates AWHONN's High-Risk & Critical Care Obstetrics Nan H. Troiano,Patricia Witcher,Suzanne Baird,2018-02-16 Develop top level guidelines for high risk and critically ill pregnancy women with AWHONN High Risk Critical Care Obstetrics 4th Edition an official publication of the Association of Women s Health Obstetric Neonatal Nurses AWHONN This comprehensive analysis of critical care obstetrics concepts offers summary of research findings and top notch clinical expertise This is the expert guidance you need to navigate complex patient conditions and promote safe effective perinatal care Emergency Triage Assessment and Treatment (ETAT) World Health Organization,2005-10-25 The Manual for participants is also available separately ISBN 9241546875 Obstetric Triage Improvement Whitney DePaoli,2016 The objective of the obstetric triage improvement project is to

decrease the average length of stay for perinatal patients presenting to the obstetric triage The setting is a university hospital in a large urban city The population includes pregnant patients with obstetric complaints presenting to triage for further evaluation Methods used include a root cause analysis process mapping lean transformation methodology and standardization of workflow The results of the project include reducing the average length of stay in obstetric triage from a baseline of 152 minutes to 120 58 minutes which represents a 21% decrease The creation of standard workflows the addition of dedicated triage staff and improved communication methods will continue to improve the triage process Indirect results include increased throughput increased patient satisfaction reduced treatment wait times and increased employee satisfaction Future steps include the implementation of a maternal fetal triage index and the creation of nursing driven protocols and order sets

Textbook of Patient Safety and Clinical Risk Management Liam Donaldson, Walter Ricciardi, Susan Sheridan, Riccardo Tartaglia, 2020-12-14 Implementing safety practices in healthcare saves lives and improves the quality of care it is therefore vital to apply good clinical practices such as the WHO surgical checklist to adopt the most appropriate measures for the prevention of assistance related risks and to identify the potential ones using tools such as reporting learning systems The culture of safety in the care environment and of human factors influencing it should be developed from the beginning of medical studies and in the first years of professional practice in order to have the maximum impact on clinicians and nurses behavior Medical errors tend to vary with the level of proficiency and experience and this must be taken into account in adverse events prevention Human factors assume a decisive importance in resilient organizations and an understanding of risk control and containment is fundamental for all medical and surgical specialties This open access book offers recommendations and examples of how to improve patient safety by changing practices introducing organizational and technological innovations and creating effective patient centered timely efficient and equitable care systems in order to spread the quality and patient safety culture among the new generation of healthcare professionals and is intended for residents and young professionals in different clinical specialties

Telephone Triage Protocols for Nurses Julie K. Briggs, 2012 Performing telephone triage requires the ability to make quick and effective decisions based on limited information This rapid access resource delivers over 200 triage protocols for evaluating patients symptoms over the telephone Each symptom entry lists questions grouped by urgency level to determine whether the caller should seek emergency care immediately seek medical care the same day call back for appointment or follow home care instructions Detailed home care instructions are then provided Simple direct and useful this is the most comprehensive and user friendly telephone triage book available This new edition features several new protocols swine flu H1N1 virus bedbug problems tattoo problems and emergency contraception as well as new information in the introductory chapter about program development management issues and staff development including training Other features include a new reminder about documentation in each protocol a new anatomic Table of Contents and expanded home care instructions

Telephone

Triage for Obstetrics and Gynecology Vicki E Long, Msn, Cnm, Patricia McMullen, 2015-04-24 American Journal of Nursing
AJN Book of the Year Award 2009 in the category of Maternal and Child Health This telephone triage book provides nurses with clear guidance on assessing and advising patients over the telephone on topics related to obstetric and gynecology The introductory section outlines the key medical legal counseling and practical aspects of telephone triage and includes a new chapter on the use of online information retrieval Subsequent sections present specific protocols for a wide variety of obstetric gynecologic and women s health problems that the triage nurse might need to work through New and expanded protocols in this edition include updated infertility management and medications additional contraceptive methods such as NuvaRing and Implanon current abnormal Pap smear management hormone therapy advice and emergency contraception options

Emergency Triage Kevin Mackway-Jones, Janet Marsden, Jill Windle, 2014-02-03 The Manchester Triage System MTS is the most widely used triage system in the UK Europe and Australia with tens of millions of patients being processed through hospital emergency departments It is also used in hospitals throughout Brazil Emergency Triage is the core text for the MTS which utilises a risk averse system of prioritisation for patients in all unscheduled care settings As such it is an essential text for all emergency department staff using the MTS in particular triage nurses The book is both a training tool and a reference for daily use in the Emergency Department and prehospital settings This edition features revised protocols that reflect new approaches to prioritisation with accompanying revised flowcharts the core part of the book Table of Contents Presentation flow charts index 1 Introduction 2 The decision making process and triage 3 The triage method 4 Pain assessment as part of the triage process 5 Patient management triage and the triage nurse 6 Auditing the triage process 7 Telephone triage 8 Beyond prioritisation to other applications This Edition was updated in 2023 to Version 3 8

Obstetric Triage and Emergency Care Protocols Donna LaFontaine, 2012-07-27 Print CourseSmart

Emergency Triage Manchester Triage Group, 2008-04-15 The Manchester Triage System MTS is the most widely used triage system in the UK Europe and Australia with tens of millions of patients being processed through hospital emergency departments Emergency Triage is the core text for the MTS which utilises a risk averse system of prioritisation for patients in all unscheduled care settings and as such it is an essential text for all emergency department staff using the MTS in particular triage nurses themselves The second edition has been revised throughout and takes in the changes in practice introduced into MTS since the book was first published These include Redesigned and expanded flow charts Additional charts for allergy and palpitations New practices such as the possibility of revascularisation for patients with stroke New discriminators for example acute neurological deficit and significant respiratory history Redefinition of existing discriminators Also new to this edition is the incorporation of sections on the use of the risk averse system in telephone triage in settings where streaming takes place and as an early warning score for patients in all unscheduled care settings The tone of this edition reflects the more up to date modified approach to triage while retaining the principles of clinical prioritisation which in the authors words remains a

central plank of clinical risk management in emergency care Emergency Triage is an essential handbook for all clinicians involved in unscheduled care settings such as emergency care walk-in centres minor injury units primary care out of hours services

Obstetric Clinical Algorithms Errol R. Norwitz, George R. Saade, Hugh Miller, Christina M. Davidson, 2016-12-19 Clinical management algorithms for common and unusual obstetric problems have been developed to help guide practitioners to the best treatment options for patients In this quick reference guide clear diagrams and concise notes show treatment options and evidence for over 80 high risk obstetric complications presented in two page full color spreads to promote quick decision making in time pressed situations This new edition includes sections on obesity late preterm and early term delivery and pregnancy termination As a clinical manual the book provides guidance to many common and less common obstetric situations in which either the mother or her fetus is at risk An algorithm for each situation provides obstetric care providers with a step by step guide of necessary actions for any given clinical case Written by internationally renowned experts Clinical Obstetric Algorithms enables all obstetrics care providers to ensure delivery of a healthy mother and a healthy baby

The Impact of Evidence-Based Guidelines on Utilization of First-Trimester Fetal Ultrasounds Performed by Certified Nurse-Midwives and Advanced Practice Registered Nurses in an Obstetric Triage Setting Sarah DeLong, 2022 The scope of practice for Certified Nurse Midwives CNMs and Advanced Practice Registered Nurses APRNs has expanded to encompass the performance of obstetrical ultrasounds in a variety of settings including obstetric triage The focus of this Doctor of Nursing Practice DNP project evaluated the impact of implementation of evidenced based guidelines on the utilization of first trimester ultrasound by CNMs and APRNs in an obstetric triage unit The project took place over a six month period of time and data collection included three consecutive months of retrospective data prior to implementation of guidelines followed by three consecutive months post implementation of guidelines A two sample test of proportions using Stata 17 StataCorp College Station TX was performed The rate of first ultrasounds performed pre implementation of evidence based practice guidelines was 89.2% and post implementation was 80.3% This difference was not statistically significant with $p = 0.108$ and $z = 1.240$ There was not a statistically significant difference in the rate of first trimester ultrasounds being performed by CNMs and APRNs pre implementation versus post implementation of evidence based practice guidelines However best practices were identified and included improved consistency and accuracy in ultrasound documentation utilization of first trimester ultrasounds based on clinical indications and adoption of the evidenced based protocol by the institution as part of assessing ongoing quality of care First trimester ultrasounds within obstetric triage are now being performed based on medical indications outlined by the guidelines that were implemented through this DNP project

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