CLINICAL POLICY

Triage of the Obstetrical Patient

A. **EFFECTIVE DATE:**
   July 31, 2020

B. **PURPOSE:**
   To appropriately triage obstetrical patients through 6 weeks postpartum in either the Emergency Department (ED) or in Labor & Delivery (L&D)

C. **POLICY:**
   All pregnant patients and patients through 6 weeks postpartum will be evaluated in the Emergency Department (ED) by the Emergency Department (ED) attending or in Labor & Delivery (L&D) by the OB-GYN service.

D. **SCOPE:**
   This policy applies to the Emergency Department (ED) and Labor & Delivery (L&D)

E. **DEFINITIONS:**
   None

F. **MATERIAL(S) NEEDED:**
   None

G. **PROCEDURE:**
   1. When a pregnant patient less than 16 weeks gestational age presents to the Emergency Department (ED), the patient is registered to the Emergency Department (ED) and evaluated by the Emergency Department (ED).
   2. When a pregnant patient 16 weeks or greater gestational age presents to the Emergency Department (ED) with a chief complaint directly related to pregnancy, L&D charge nurse is notified by the Emergency Department (ED) triage nurse and the patient transported directly to L&D.
   3. When a pregnant patient 16 weeks or greater gestational age presents to the Emergency Department (ED) with a chief complaint not directly related to pregnancy (examples include but not limited to – trauma, chest pain, and acute respiratory distress) the patient will be registered and evaluated by the Emergency Department (ED). The Emergency Department (ED) triage nurse will call the L&D Charge RN upon patient arrival for notification.
   4. When a pregnant patient 16 weeks or greater gestational age presents to the Emergency Department (ED) and it is unclear to the triage nurse as to where the patient will be evaluated, the Emergency Department (ED) attending should be consulted.
   5. When a patient presents up to 6 weeks postpartum the Emergency Department (ED) Triage nurse will notify the L&D Charge Nurse of the patient arrival and the location of care will be determined on a case by case basis.
   6. The admitting service and level of care for pregnant patients 16 weeks gestation or greater who are evaluated in the Emergency Department (ED) and who need admission will be determined by the Emergency Department (ED) attending in consultation with the OBGYN service.
H. ATTACHMENTS:
   None

I. REFERENCES:
   None

J. SEARCH WORDS:
   Triage, OB, ED

K. ENFORCEMENT:
   Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:
   1. Scott Allen (Signed) 2/23/2020
      Scott Allen, MD, Interim Chief Medical Officer
   2. Caryl Ryan (Signed) 2/22/2020
      Caryl Ryan, Chief Nursing Officer
   3. Kathleen Zacherl (Signed) 2/23/2020
      Kathleen Zacherl, MD, Asst. Professor/Clinical Obstetrics & Gynecology
   4. Alise Frallicciardi (Signed) 2/23/2020
      Alise Frallicciardi, MD, Medical Director Emergency Medicine

M. COMMITTEE APPROVALS:
   None

N. FINAL APPROVAL:
   1. Andrew Agwunobi, MD (Signed) 07/28/2020
      Andrew Agwunobi, MD, MBA
      UConn Health Chief Executive Officer
   2. Anne D. Horbatuck, RN, BSN, MBA (Signed) 08/13/2020
      Anne D. Horbatuck, RN, BSN, MBA
      Clinical Policy Committee Co-Chair
   3. Scott Allen, MD (Signed) 08/13/2020
      Scott Allen, MD
      Clinical Policy Committee Co-Chair
   4. Caryl Ryan, MS, RN (Signed) 08/14/2020
      Caryl Ryan, MS, RN
      VP Quality and Patient Service & Chief Nursing Officer
O. **REVISION HISTORY**:
   Issued: 1/1990
   Revised: 9/1997 & 7/31/2020