

1 ANTEPARTUM CARE

1.1 ANTEPARTUM CLINIC VISITS

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1.1.1 Care of the Woman Planning a Non Hospital Birth
Section B
Clinical Guidelines
King Edward Memorial Hospital
Perth Western Australia

1.1.1 GUIDELINES FOR THE CARE OF WOMEN PLANNING A NON-HOSPITAL BIRTH

AIM

To guide KEMH clinicians in the care of women who make an informed choice to give birth at home.

ANTEPARTUM CARE

GENERAL

Women being cared for by the Community Midwifery Program or other midwives in private practice who are intending to use KEMH as their back up hospital shall:

- attend one specialist medical booking clinic visit with an obstetrician, ideally at the time of KEMH booking visits at around 20-22 weeks, but before 30 weeks.
- bring to the clinic visit their antepartum care record with:
 - past history completed by her employed or private non-hospital midwife and
 - results of her antepartum screening blood tests.
- have provided the Women and Newborn Health Service Clinic clerk with the appropriate information to raise a medical record prior to the visit;

BOOKING-IN VISIT

At the booking-in visit

- offer a gynaecological cytology smear (PAP) test if the woman has not had a normal reported test result within the previous 2 years.
- discuss any risk factors specific to the woman or her pregnancy.
- document the visit in the antepartum care record within the medical record and on the hand held record

REVIEW OF ABNORMALITIES ARISING IN THE ANTEPARTUM PERIOD

If abnormalities requiring medical review arise in the antepartum period the non-hospital midwives shall:

- in hours, contact the team registrar or consultant under whom the woman is booked to discuss the problem.
- out of hours, contact the obstetric registrar on duty to discuss the case and arrange review in MFAU or arrange an urgent clinic appointment, whichever is appropriate.
- if the woman is unbooked, discuss with the on duty registrar and make appropriate arrangements for patient assessment.

TRANSFER OF CARE TO KING EDWARD MEMORIAL HOSPITAL OGCCU

If there is a need for the woman to be transferred from the care of non-hospital midwives to the King Edward Memorial Hospital (whether antepartum, intrapartum, or postpartum) the non-hospital midwife:

- will contact the duty senior obstetric registrar to notify them of the intention to transfer care.
- will contact the Hospital Clinical Manager (page 3333) and notify them of the intention to transfer care.
- will accompany the woman to hospital, and provide a written document regarding the need for transfer and details of the progress of care in this pregnancy.
- in the case of a woman booked with the Community Midwifery Programme (CMP), the midwife may remain with the woman as the primary care giver during her continuing care in King Edward Memorial Hospital only if he / she feels comfortable and the management is still within his/her scope of practice. The CMP midwife has the option of declining to be the primary caregiver if fatigued. See clinical guideline [B 5.2.5 Protocol for Admission to Labour and Birth Suite for Women Booked on the Community Midwifery Programme](#)
- private practice midwives may remain with the woman as a support person only if their woman is transferred intrapartum.
- as soon as possible, the duty obstetric registrar should speak to the transferring midwife directly, to ensure proper understanding of the progress of the pregnancy prior to transfer.
- the Obstetrician on call must be informed of the admission of such a woman after initial medical assessment by the duty obstetric registrar (unless the admission is postpartum, for neonatal care purposes only. In this case the neonatal consultant / registrar must be informed regarding care of the neonate).
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- the on-call Director of Medical Services must be informed if the patient rejects medical advice given to her, or rejects medical care.

VISITING RIGHTS

The Community Midwifery Program midwives are approved visitors to the King Edward Memorial Hospital maternity unit, and are welcome to provide care and / or visit their clients or seek advice at any time. They will display an identity card for this purpose.

Private practice midwives may visit their women; however they may not provide care while the woman is an inpatient.