NON SPECIFIC ABDOMINAL PAIN: MATERNAL FETAL ASSESSMENT UNIT - QUICK REFERENCE GUIDE

Keywords: Abdominal pain, MFAU QRG abdominal pain

Note: All women presenting with abdominal pain must be reviewed by an obstetric registrar or above after the initial assessment.

ASSESSMENT

1. Document the history of abdominal pain noting:
   - The duration and nature of pain
   - Any urinary and bowel symptoms
   - The presence of any vaginal bleeding or discharge
   - Any precipitating events.

2. Perform and record baseline maternal temperature, pulse and blood pressure measurements.

3. Confirm the presence of fetal movements and auscultate the fetal heart. If on auscultation the fetal heart rate is abnormal, commence a CTG.
   
   Note: If the women is ≤ 24 weeks gestation, consultation with the obstetric registrar is necessary before commencement of the CTG.

4. Collect a MSU. If on dipstick there is > 1+ proteinuria or if there are positive nitrates or leucocytes, send for MC&S.

5. Perform an abdominal palpation noting:
   - any tenderness or ‘rigidity’
   - the symphysis fundal height
   - the lie
   - the presentation
   - any uterine activity or irritability.

6. If there is any fresh vaginal bleeding arrange urgent review with obstetric registrar or above.

7. If there is any vaginal discharge (other than fresh bleeding) or uterine tenderness / irritability perform a sterile speculum examination noting any cervical dilatation or discharge and take a HVS for MC&S.

8. If there are any signs of vaginal bleeding or infection i.e. maternal pyrexia or tachycardia then:
   - obtain IV access
   - collect blood for FBP, G& H
   - collect a clotted serum sample for U&E’s and/or LFT’s.

   Note: This specimen will only be sent to the laboratory when directed by medical staff.
   - Perform blood cultures if the maternal temperature is ≥ 38°C, as directed by medical staff.

9. Arrange review by an Obstetric Registrar or above.

FLOW CHART FOR THE MANAGEMENT OF WOMEN PRESENTING WITH ABDOMINAL PAIN

Women presents to Maternal Fetal Assessment Unit at ≥ 20 weeks gestation with non-specific abdominal pain

Perform maternal baseline observations and auscultate FH

Are baseline observations and FH rate normal?

YES

• Commence CTG
• Obtain IV access
• Perform FBP, G&H and clotted serum sample

NO

Does the women have:
• a rigid abdomen? or
• hard / tender uterus? or
• any fresh vaginal bleeding?

YES

Arrange urgent review by obstetric registrar or above

NO

Collect MSU and perform urinalysis

Is there:
• proteinuria >+? or
• +ve leucocytes? or
• +ve nitrites?

YES

Send MSU for MC&S

NO

Is there any:
• vaginal discharge? or
• uterine tenderness / irritability?

YES

Perform speculum and HVS

NO

• Arrange review by obstetric registrar.
• Registrar may discharge the woman home if there are no concerns.
REFERENCES /STANDARDS

National Standards – 1- Care provided by the clinical workforce is guided by current best practice
Legislation - Nil
Related Policies - Nil
Other related documents –

RESPONSIBILITY

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