ANTEPARTUM HAEMORRHAGE : SUBSEQUENT MANAGEMENT

Maternal Assessment

On Admission
- Full set of observations*, Urinalysis, Vaginal loss, uterine activity/tone tenderness, pain or rigidity

First 24 hours
- Full set of observations*, Vaginal loss, uterine activity/tone, tenderness, pain or rigidity

4 hourly
- Vaginal Loss, Uterine activity/tone, tenderness pain or rigidity

Daily
- Full set of observations* Bowel activity

Avoid digital vaginal examination

Overnight
- Observe and perform observations only as required between 22:00 and 06:00

Fetal Assessment

4 hourly
- Fetal Movement (FHR 1st 24 hrs)
  - Report any decrease in movement or change in usual pattern of movements

BD
- FHR
  - Report abnormalities promptly

CTG
- As ordered
  - Immediately if bleeding/contracting or complaints of pain/tenderness

This Quick Reference Guide must be used in conjunction with its respective Clinical Guidelines, Antepartum Haemorrhage (APH). It pertains to care of women who have had an APH and are no longer actively bleeding.

Assessments and care recommended in this guideline must be re-evaluated and adjusted if required, in the event of a change in maternal or fetal condition. Document and report any change to the medical team.

* Full set of observations includes Blood Pressure, Temperature, Respiration, Oxygen Saturation, pulse and conscious state.
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Assessments and care recommended in this guideline must be re-evaluated and adjusted if required, in the event of a change in maternal or fetal condition. Document and report any change to the medical team.

**PROCEDURES TO BE CONSIDERED**
- IV bung with 6 hourly normal saline flushes until no fresh bleeding for 24 hours. Medical review prior to removal.
- Blood taken for group and hold OR cross-match 4 units
- Corticosteroids
- Anti-D

**EDUCATION**
- Antepartum Haemorrhage
- Plan of care, tests and procedures
- Caesarean birth
- Preterm birth
- Special Care Nursery
- Breastfeeding

**ACTIVITY**
- Rest in bed with toilet privileges until there is no fresh bleeding for 24 hours.
- Encourage compression stocking until fully mobile.

**DOCUMENTATION**
- MR 004 - Obstetric Special Instruction Sheet
- MR 285 - Observation Chart
- MR 810 - Medication Chart
- MR 250 - Progress Notes
- MR 410 - Neonatal History Sheet
- Baby notes prepared
- Perinatal Database record (Stork) updated

**REFERRALS TO BE CONSIDERED**
- Neonatologist
- Anaesthetic department
- Psychological Medicine
- Dietitian
- Physiotherapist
- Social Worker
- Diabetes Educator
- Parent Educator
- Aboriginal Liaison Officer
- Activities Coordinator