Key notes on: Obstetric Triage

- Triage is a 2-5 minute process of ordering unscheduled patients to be seen based on clinical urgency
- In Australia, the Australasian Triage Scale is used in every emergency department – however, it was not developed with any pregnancy focus
- It is common for women who present unscheduled to hospital in the second half of pregnancy, to be directed to the maternity unit
- Maternity units do not usually follow a triage procedure – number of women, waiting times, and potential clinical risk is unknown and unmanaged in many hospitals
- The Obstetric Triage Decision Aid is a valid, structured approach to conduct triage on a woman’s unscheduled presentation to hospital at any gestation and with any clinical condition
- All body systems are affected by pregnancy and physiological changes begin once conception occurs
  - These changes impact on how clinical information is interpreted
- For example, cardiac and respiratory systems are dramatically affected
  - Cardiac output increases 30-50% - small ↑ in HR, larger ↑ in stroke volume
  - Increase in circulating volume by 40-50%
  - Minute volume increases 40-50% with resultant reduction in PaCO₂ 28-32mmHg
  - ~ 75% of pregnant women experience ‘breathlessness’ during pregnancy
  - Increase in some clotting factors – doubling of fibrinogen by term
- Women who are pregnant may experience a delay in care, or different care because they are pregnant, compared to a non-pregnant patient presenting with similar signs and symptoms
- There are obstetric conditions that are uncommonly managed in the emergency department
- Most maternity units focus on obstetric conditions and are less familiar with non-obstetric clinical conditions
- Pregnant and postpartum women may present to hospital with any clinical condition at any stage of their partuition
- Knowing the right question to ask and the consequent clinical implications can be guided by a decision aid

Electronic Resources & Guidelines


Key references/recommended reading

Obstetric Triage


**Adapted physiology of pregnancy**


Cardiac presentations
Nottingham University Hospital NHS Trust. Chest Pain in Pregnancy Guideline. Available at: https://www.nuh.nhs.uk/download.cfm?doc=docm93jjjm4n984.pdf&ver=2664


RCOG Cardiac Disease and Pregnancy (Good Practice No. 13) (2011). Available at: https://www.rcog.org.uk/en/guidelines-research-services/guidelines/good-practice-13/


Sepsis related


**Headache**


**Early pregnancy presentations**


**Other**


