MATERNITY UNIT

GUIDELINE: UN-BOOKED WOMAN IN LABOUR

SCOPE: All midwives and nurses working in the maternity unit

AUTHOR: Core Midwife

PURPOSE: To provide guidance on the appropriate care and management of women not booked with an LMC who arrive at the maternity unit in established labour.

DEFINITIONS: Un-booked – not currently or previously booked with an LMC during this pregnancy

GUIDELINE
• Establish woman’s name, parity and gestation
• Determine if woman has an LMC. If no LMC booked, consider calling LMCs to see if anyone would wish to take the woman on in labour. If no LMC available, core midwife to care for in labour and arrange LMC for postnatal care.
• Do baseline recordings – Temperature, Pulse, Blood Pressure, Respiratory Rate
• Establish stage of labour:
  o Time since contractions started
  o Duration and strength of contractions
  o Membranes intact or SROM – Time of rupture, colour and consistency of liquor
  o Abdominal palpation
  o Auscultate fetal heart
  o Vaginal examination as clinically appropriate if informed consent obtained
• All un-booked women are to come under the care of the on call Obstetrician for admission purposes. Clearly identify in the birth register that the woman is ‘un-booked’.
• Woman to be cared for by core midwife, with consultant obstetrician involvement as clinically indicated.
• Woman or her attending relative to complete an admission form.
• Obtain an NHI number from maternity receptionist, if out of hours call admissions – 8215 (0800 – 2300hrs) or 0 (2300 – 0800hrs) and request medical notes and to tick the maternity episode so that the woman will be available in the Maternity Clinical Information system (MCIS).
• Open an acute assessment in MCIS and complete an express booking and lifestyle update.
• Bloods as required. Full antenatal screen, group and hold if history unknown with informed consent – use information leaflet.
• Assume Hepatitis B positive until otherwise proven (see Management of babies born to mothers who are Hepatitis B positive guideline).
- Assume Rhesus Negative if birth imminent – take cord blood sample and check laboratory results during daylight hours. If out of normal working hours send to laboratory with relevant clinical details on request form (see guideline Rhesus Negative mothers and their babies – Postnatal blood samples).

ASSOCIATED DOCUMENTS

Antenatal care guideline
HIV screening guideline
Management of babies born to mothers who are Hepatitis B positive
Prevention of GBS
Rhesus Negative mothers and their babies – postnatal blood samples

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Authorised By (HOD Obstetrics)

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Authorised By (Clinical Care Manager Woman, Child & Youth)

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