Transfer process for patients cared for by midwives who require hospital services outside of the intrapartum period and the first 48 hours postpartum

Patients requiring hospital care or services may fall into one of the following three categories: stable, urgent, or emergent. Stable patients are those who require services as a routine part of their prenatal care (ex. Advanced Maternal Age requiring scheduled NST’s). Urgent cases are those that require evaluation for a concern (ex. placenta previa, elevated BP, or potential need for an induction such as post-dates). Emergent transfers are those that require immediate evaluation or treatment (ex. Severe hypertension sbp ≥160 or dbp≥110). These transfers will be accommodated in the following ways.

**Stable**

1. The midwife may call New Life OBGYN at 509-517-5777 to arrange for the patient to be seen by Dr. Chavez or Dr. Showalter.
2. Relevant records can be faxed to 509-317-9547.

**Urgent**

1. The midwife may call New Life OBGYN at 509-517-5777 and request a stat appointment for the patient to be seen by Dr. Chavez or Dr. Showalter.
2. Relevant records can be faxed to 509-317-9547.
3. Patients requiring evaluation that are unable to be seen by Dr. Chavez or Dr. Showalter in a timely manner may be sent to the OBED to be seen by an OB Hospitalist. Call the Family Birthplace at 509-575-8233 and ask to speak to the OB Hospitalist. Relevant records can be faxed to 509-575-8791.

**Emergent**

1. Any patient requiring immediate evaluation outside of labor may be sent to the OBED to be seen by an OB Hospitalist. Patients requiring hospital services during labor can be transferred by following the Smooth Transitions process. Communicate with the OB hospitalist directly, if possible, by calling the Family Birthplace at 509-575-8233 and asking to speak to the OB Hospitalist. Relevant records can be faxed to 509-575-8791.
2. If the patient is coming by private vehicle, please communicate this with hospital staff so arrangements can be made for staff to meet the patient on arrival.

If a patient is admitted, prior to discharge, a discussion should occur regarding recommendations for outpatient follow-up. Some patients may be good candidates and may prefer to return to midwifery care, while others may be recommended to follow-up with or transfer care to a doctor.

Consider offering patients the opportunity to consult with New Life OBGYN as a part of routine prenatal midwifery care. Having a consultation completed prior to birth may provide an added level of assurance to the patient that they know who will be caring for them in the event an intrapartum transfer is needed.