Purpose
To provide a formalized process for the transfer of patients throughout the Obstetrical area to ensure that information is transferred effectively among providers at time of transfer. This process will use documentation records currently in use within the department.

Policy Statement
Obstetrical patients being transferred within the facility between units, will follow this process in order to ensure consistency.

Applicability
This policy is intended for all Covenant Health staff at the GNH & MCH.

Responsibility
Covenant Health staff at GNH & MCH have a commitment to demonstrate safety and good communication when transferring patients.

Principles
This policy outlines the anticipated process for the transfer of obstetrical patients between antepartum, labour and delivery and post partum.

Procedures

1.0 ANTEPARTUM PATIENTS

Phone calls:
Prior to transfer, Unit Clerk or Charge Nurse to call the receiving unit's Unit Clerk or Charge Nurse to:
- Provide a brief history of the patient and reason for transfer and room preference, if applicable.
- Ascertain if the receiving unit can take the patient within a defined time frame and ensure the receiving nurse is available for report in the patient's room.

Transfer information:
At the time of transfer the transferring nurse and the receiving nurse will review together with the patient:*
- Delivery Record Part 1 or Prenatal Sheet, if applicable
- Nursing Admission History
- Medication Reconciliation Form
- Patient Care Orders
- MAR if applicable
- Any other pertinent information
Procedures

Documentation:
- The transferring nurse to document the patient transfer in the nurses' notes
  (i.e. Patient transferred to Unit ____ Report given to ____).
- Receiving nurse to document receiving the patient in the nurses' notes
  (i.e. Patient received to Unit ____ Report received from ____).

POST PARTUM PATIENTS

Phone Calls:
- **Vaginal Delivery**: At the time of delivery, the Labour & Delivery nurse informs the Unit Clerk or Charge Nurse, time of delivery and room preference.
- **Cesarean Section**: Circulating nurse to call Unit Clerk or Charge Nurse, time of delivery and room preference.

- Unit Clerk or Charge Nurse from Labour & Delivery to call Unit Clerk or Charge Nurse on Postpartum to book bed. Provide Postpartum with information regarding delivery type & time and room preference. If baby is not being transferred with Mother please indicate this to Postpartum at this time.
- Postpartum Unit Clerk or Charge Nurse to provide room number. If no room is available at the time of call they are to indicate the reason for the delay and an expected time they will call back with a room number. If a delay in assigning a room number is greater than 15 minutes a call to Labour & Delivery Unit Clerk or Charge Nurse needs to occur identifying the reason for the ongoing delay.
- Unit Clerk or Charge Nurse from Labour & Delivery to let primary nurse or circulating nurse know the room number or in the case of a delay, the reason for the delay.
- Labour & Delivery nurse to notify Unit Clerk or Charge Nurse that the patient is ready to transfer in 15 minutes.
**POST PARTUM PATIENTS**

**Procedure**

**Phone Calls:**
- Unit Clerk or Charge Nurse to call Postpartum with this information and ensure a Postpartum Nurse is able to receive report in the patient's room in 15 minutes.
- If the postpartum staff is unable to take the transfer in 15 minutes they are to identify this to Labour & Delivery and arrange an alternate transfer time within 30 minutes maximum. This information is then passed on to the Labour & Delivery nurse.

**Transfer information:**
At the time of transfer the transferring nurse and the receiving nurse will review together with the patient: *
- Delivery Record Part 1 and Part 2.
- Stage 4 of the Partogram or the Recovery Room Record.
- Medication Reconciliation Form
- Patient Care Orders.
- MAR if applicable.
- Any other pertinent maternal or newborn information.

* Recognizing and respecting patient confidentiality..this may not be possible to do in the room with the patient.

**Documentation:**
- The transferring nurse to document the patient transfer in the nurses' notes
  (i.e. Patient transferred to Unit ____Report given to____).
- Receiving nurse to document receiving the patient in the nurses' notes
  (i.e. Patient received to Unit____Report received from____).
SBAR

It is recommended that communication occur utilizing the principles’ of SBAR.

| S | Situation | A concise statement of the problem  
What is going on now |
| B | Background | Pertinent and brief information related to the situation  
What has happened |
| A | Assessment | Analysis and considerations of options  
What you found/think is going on |
| R | Recommendation | Request/recommend action  
What you want done |

References
