



Appendix 4: Triage for antenatal, intrapartum, and post-natal care

The healthcare provider responsible for initial reception of pregnant individuals and newborns should be competent to conduct triage and to start resuscitation if required.

The healthcare facility should have a clear policy on:

- when to refer, and
- the referral procedure, including:
 - agreement with suitable facilities for upward referral
 - transport arrangements including who should accompany the client
 - copies of record card or notes
 - follow-up of those clients referred for care in other facilities

Key principles

- Assess the general condition of any pregnant, labouring, or post-partum individual arriving at the facility (see details below).
- If the client is unable to speak because they are too unwell, ask the accompanying person to describe the client's condition and needs and refer to written health records.
- Repeat the assessment periodically until medical issues are resolved.

Clinical assessment

History: Why did you come? Is it for yourself or the baby? What is the concern? How old is the baby?

Examination:

- Assess the client's general condition.
- Assess the baby's condition.
- Observe vital signs: take temperature and blood pressure.

What to do	
Adult pregnant or post-partum individual	Newborn
TREAT AS EMERGENCY IF <ul style="list-style-type: none"> • unconscious (unable to talk) • bleeding vaginally • convulsing • severe abdominal pain • fever • headache and visual disturbance • severe difficulty breathing • severe vomiting 	TREAT AS EMERGENCY IF <ul style="list-style-type: none"> • very small • having convulsions • difficulty breathing • heavy hypotonia • hypothermia (moderate <36°C; severe <32°C) • just been delivered • any maternal concern
ACTION <ul style="list-style-type: none"> • call for help • transfer immediately to treatment room for full assessment and management • ensure that the client and/or companion are fully informed • transfer to delivery room for assessment if in labour or delivery is imminent 	ACTION <ul style="list-style-type: none"> • ask parent to stay with the baby • transfer the baby to the treatment room for immediate newborn care
TREAT AS ROUTINE IF <ul style="list-style-type: none"> • no danger signs 	TREAT AS ROUTINE IF <ul style="list-style-type: none"> • no danger signs or maternal complaints

Source: Adapted from World Health Organization, United Nations Population Fund, World Bank and United Nations Children's Fund. Pregnancy, childbirth, postpartum and newborn care: a guide for essential practice. Third edition. Geneva: WHO; 2015. <https://apps.who.int/iris/handle/10665/249580>. Accessed 26 November 2019.