## Obstetric Pathways WAHT-TP-094



### GUIDELINES FOR THE TRANSFER OF SICK POSTNATAL MOTHERS WITH/WITHOUT THEIR BABIES TO OTHER HOSPITALS

Key Document code:	WAHT-TP- 094		
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Approved by:	Maternity Governance Meeting		
Date of Approval:	24 <sup>th</sup> October 2025		
Date of review:	24 <sup>th</sup> October 2026		

**Key Amendments** 

Date	Amendments	Approved by
4 <sup>th</sup> June 2024	Document extended for another 12 months whilst under review	Maternity Governance
24 <sup>th</sup> October 2025	Document reviewed and approved for 12 months	Maternity Governance Meeting

The purpose of the guideline is:

- To ensure that mother/and baby are transferred safely to their destination.
- To ensure that continuity of midwifery care is provided.
- To ensure that all information is provided prior to transfer.

#### Guideline

The decision to transfer a sick postnatal woman to another hospital should be made by on-call consultant obstetrician who should assess the woman regarding her suitability to travel.

Midwife/ on-call paediatric SHO/ registrar will assess the suitability of transferring her baby with her.

The on-call obstetric registrar will ensure that facilities are available for the mother and baby to stay at the receiving hospital and that all transfer information and documentation is communicated to the receiving hospital staff. Relevant information from the woman's hospital notes should be printed or photocopied and sent to the receiving hospital along with her postnatal hand held record.

The on-call obstetric registrar/ consultant decide upon the woman's condition to determine the mode of transport and the level of escort required (Doctor/Midwife/Paramedic).

It will depend on the mother's condition but normally the baby will not travel with her in the ambulance if that is the chosen method of transfer.

The outcome of all discussions will be documented in the mother's hospital notes.

If appropriate, all postnatal information and advice will be discussed prior to the mother leaving hospital and documented in the mother's postnatal hand held notes.

If the woman was booked under consultant care in the antenatal period, the woman's consultant should be informed of her transfer, on the next working day by the delivering professional.

If postnatal follow up appointment is required with the consultant, the relevant details should be passed on to the consultant's secretary to arrange the appointment by the delivering professional.

The ambulance control should be given clear and concise information regarding the condition of the woman to be transferred and the equipment and staff which will be going with her. Copies of

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any documentation raised by the ambulance should be filed in the woman's notes at the receiving hospital.

A suitably equipped paramedic ambulance should transfer the mother if her condition warrants. All equipment should be checked and sent with appropriate leads connections etc.

If the baby is not transferred with its mother arrangements for the care of the baby will be made on an individual basis

If the baby is going home the midwife will ensure that ongoing midwifery care has been arranged for the baby by contacting the relevant community team either by email or telephone. The Midwife will also inform the GP.

The midwife will ensure that any TTOs for the baby are issued to the family with instructions for their administration.