Name: Williams, Cynthia Outpatient	Triage
DOB: 05/06/XXXX	31 y/o F
OP - MR # 547683190	
Dr. Baby Delivery	

Situation	**Reported Concern:** Patient arrives to OB Triage Pregnancy at 38 2/7 weeks, reporting decreased fetal movement
Background	**Allergy:** Morphine **Code status**: Full **Pertinent Medical History:** 31 y/o G3 P2, L 1, EDC 08/10/XX, 1st pregnancy, history of pre-eclampsia 2nd pregnancy stillborn at 39 weeks **Diagnosis** Pregnancy at 38 2/7 weeks • Prenatal care began at 8 weeks • 3rd trimester diagnosed gestational diabetes, controlled with insulin • Scheduled NST weekly at 32 wks. and bi-weekly since 36 wks. • Bedrest for the past 3 weeks due to elevated B/P • Last prenatal visit B/P was 146/94, VE 3cm / 90% / Cephalic / O station **Home Medications:** Prenatal vitamins, Insulin **Pertinent *RECENT* History:** Patient reports decrease fetal movement
Assessment	**Pending:** L&D Triage nurse's assessment and evaluation
Recommendation	**Enter room; prioritize care according to subjective and objective data** • Implement and maintain universal competencies. • Perform obstetrical nursing assessments. • Prioritize and implement nursing interventions. • Provide patient teaching related to assessments and interventions.

Name: Williams, Cynthia Outpatient Triage
DOB: 05/06/XXXX 31 y/o F
OP - MR # 547683190
Dr. Baby Delivery

OB Outpatient Triage Protocol Orders

Allergies: Morphine

1. Observe patient in OB Triage assessment center
2. Perform a physical assessment
3. Vital signs hourly
4. Apply Fetal Heart Monitor upon arrival if gestational appropriate otherwise FHT with Doptone
5. Non-Reassuring Fetal Heart Rate Patterns:
    a. Change the maternal position.
    b. Administer a 500 ml LR bolus.
    c. Oxygen @ 10L/min via non-rebreathing mask.
    d. Notify physician of FHR pattern, interventions, and response
6. Evaluate patient based of the reported concern
7. Notify provider of assessment for further orders

Physician Signature: *Baby Delivery, MD* **Date &Time: Today @ 0600**