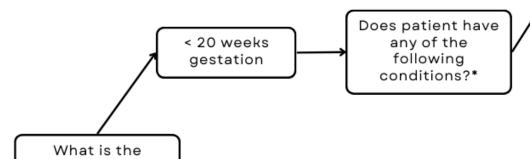


## Maternal Health

## ED Discharge Flowchart to Determine Follow-up Time

The most acutely ill and injured patients will likely be admitted to the hospital. For all others, follow the workflow outlined below:



≥ 20 weeks

gestation

patient's

gestational age?

Does patient have any of the

following

conditions?\*

\*Not all conditions listed.
This is an abridged list of
conditions where patient
is often sent home, but
follow-up is needed

- Ruptured ectopic pregnancy
- Complications of induced abortion (hemorrhage, infection)
- Active suicidal ideation or homicidal ideation
- · Sudden onset mania

**Admit to Hospital** 

No further followup by ED staff needed

- Placenta previa
- Vasa previa
- · Placental abruption
- Preeclampsia
- · Preterm labor
- Hypertension
- · Prelabor rupture of membranes
- Active suicidal ideation or homicidal ideation
- · Sudden onset mania
- Other medical, surgical emergencies
  - e.g., appendicitis, cholecystitis, pyelonephritis,
  - cardiomyopathy, PE, amniotic fluid embolus, MI, aortic/coronary dissection, CVA

- Pregnancy of unknown location (rule out ectopic)
- Threatened/spontaneous abortion
- · Gestational diabetes
- Hyperemesis gravidarum
- Passive suicidal or homicidal ideation (new onset or increased intensity)
- Recent onset hypomania or potential psychosis symptoms
- 1st trimester bleeding

Follow-up within
48 hours

- Passive suicidal or homicidal ideation (new onset or increased intensity)
- Recent onset hypomania or potential psychosis symptoms
- Non-obstetric issue in 2nd or 3rd trimester

- Planning pregnancy or need to establish prenatal care
- Daily prenatal vitamin
- Substance use cessation
- Hyperglycemia
- Follow-up with mental health provider if:
  - Chronic passive suicidal ideation or homicidal ideation
  - History of mania, bipolar disorder
  - Panic attacks

Follow-up within
7 days

- Hyperglycemia
- · Ensure prenatal care is established
- Ovarian pathology found during pregnancy needing follow-up
- Follow-up with mental health provider if:
  - Chronic passive suicidal ideation or homicidal ideation
  - History of mania, bipolar disorder
  - Panic attacks