



Wisconsin Association for Perinatal Care Levels of Care Self-Assessment Initiative

Level II Obstetric Services SUPPLEMENTAL

| | | References* | My facility |
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| Level II obstetric services | <p>All basic care services plus care of appropriate women at risk and fetuses, both admitted and transferred from other facilities</p> <p>Care of women with uncomplicated pregnancies with the ability to detect, stabilize, and initiate management of unanticipated maternal, fetal, or neonatal problems that occur during the antepartum, intrapartum, or postpartum period until patient can be transferred to a facility at which specialty maternal care is available.</p> <p>Care of appropriate high-risk antepartum, intrapartum, or postpartum conditions, both directly admitted and transferred from another facility</p> | GPC 10 Menard | Y N |
| A. Administration | | | |
| 1. Medical | Board Certified/Eligible Obstetrician with special interest, experience in obstetric care | GPC 24 | |
| 2. Nursing | RN with demonstrated expertise in obstetric care | GPC 31 | |
| B. Staffing | | | |
| 1. Obstetric care | Qualified physician or certified nurse-midwife or certified midwife should attend all deliveries | GPC 24 | |
| | An obstetric provider with privileges to perform emergency Cesarean delivery available to attend all deliveries | Menard | Y N |
| a. Certified nurse midwife (CNM) | | GPC 10 | |
| b. Family Practitioner | | GPC 10 | |
| c. Obstetrician | Available at all times | GPC 10 | |
| d. Maternal-fetal medicine | Available for consultation onsite, by phone, or by telemedicine, as needed | Menard | Y N |
| e. Physician assistant | | GPC 10 | |
| f. Other (please specify) | | | |
| 2. Nursing | Continuous availability of adequate number of RNs with competence in level II care criteria to identify and respond to the obstetric and medical complications of pregnancy, labor, and delivery | Menard | Y N |
| a. See Appendix I for recommended staffing | | | |
| C. Services | | | |
| 1. Obstetric components | | | |
| a. Perinatal care for uncomplicated obstetrical and fetal patients | | GPC 10 | |
| b. Risk assessment for all obstetric patients available and utilized | | GPC 7 | |

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| c. | Equipment needed to accommodate the care and services of obese women | | Menard | Y | N |
| d. | Patient education programs | | GPC 196 | | |
| e. | Diagnostic and evaluative techniques | | | | |
| 1) | Antenatal fetal testing (e.g., NST, OCT, Biophysical Profile) | | GPC 7 | | |
| 2) | Antenatal fetal evaluation (e.g., amniocentesis) | | GPC 7 | | |
| 3) | Diagnostic ultrasound | Available on a 24 hour basis | GPC 10 | | |
| 4) | Computed tomography scan and ideally magnetic resonance imaging with interpretation | | Menard | Y | N |
| f. | Continuous electronic fetal monitoring capability | | | | |
| g. | Emergency capability | | | | |
| 1) | Arrangement for transport | | GPC 10 | | |
| 2) | Blood typing, cross matching, and availability | Available on a 24 hour basis | GPC 34 | | |
| 3) | Capabilities for massive transfusion, emergency release of blood products, and management of multiple component therapy | | Menard | Y | N |
| 4) | Cesarean-section capability | Within an interval based on the timing that best incorporates maternal and fetal risks and benefits | GPC 10 | | |
| 5) | Personnel qualified to manage obstetric emergencies | | GPC 23 | | |
| 2. | Other medical and surgical | | | | |
| a. | Anesthesia | Anesthesia services available at all times to provide labor anesthesia and obstetric anesthesia | Menard | Y | N |
| | | Board certified anesthesiologist with training or experience in obstetric anesthesia available for consultation | GPC 25 | | |
| b. | Cardiology | Strongly recommended. | GPC 25 | | |
| c. | Endocrinology | Recommended | GPC 25 | | |
| d. | Gastroenterology | Recommended | GPC 25 | | |
| e. | General surgery | Strongly recommended | GPC 25 | | |
| f. | Genetics | Strongly recommended | GPC 25 | | |
| g. | Hematology | Recommended | GPC 25 | | |
| h. | Internal medicine | Strongly recommended | GPC 25 | | |
| i. | Neurology | Recommended | GPC 25 | | |
| j. | Neurosurgery | Recommended | GPC 25 | | |
| k. | Orthopedic surgery | Recommended | GPC 25 | | |
| l. | Otolaryngology | Recommended | GPC 25 | | |
| m. | Pathology | Required | GPC 25 | | |
| n. | Pulmonology | Strongly recommended | GPC 25 | | |
| o. | Radiology | Required | GPC 10 | | |
| p. | Thoracic surgery | Recommended | GPC 25 | | |

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| q. Urology | Strongly recommended | GPC 25 | |
| 3. Support | | | |
| a. Clinical laboratory services | Available on a 24 hour basis | GPC 10 | |
| b. Infection control | Required | GPC 34 | |
| c. Lactation support services | Required | GPC 34 | |
| d. Nutrition services | Registered dietician or nutritionist | GPC 35 | |
| e. Pastoral care | | GPC 35 | |
| f. Pharmacy services | | GPC 35 | |
| g. Radiology technicians | Available in-house on a 24 hour basis | GPC 10, 34-35 | |
| h. Respiratory therapy | | | |
| i. Social work | Master's degree level | GPC 34 | |
| j. Translation support services | | | |
| k. Ultrasound technicians | Available on a 24 hour basis | GPC 10, 35 | |
| D. Education | | | |
| 1. In-service sessions covering diagnosis and management of perinatal emergencies, as well as the management of routine problems and family-centered care | | GPC 35 | |
| 2. Regularly scheduled multi-disciplinary conferences at which patient care issues are presented and discussed | Examples include quality committees for obstetric and pediatric services, discharge or follow-up planning groups, multidisciplinary rounds, case conferences, morbidity/mortality conferences, etc. (Conferences should include representatives from 2 or more disciplines.) | GPC 35 | |
| E. Quality assurance | | | |
| 1. Data collection, storage, and retrieval | | GPC 10, 66 | |
| 2. Initiation of quality improvement programs that include efforts to maximize patient safety | | GPC 10, 66 | |
| 3. Coordinated quality improvement programs with receiving and referring facilities | Strongly recommended | | |
| F. Policies, procedures, and protocols | | | |
| 1. Admitting non-obstetric patients to the obstetric unit | | GPC 39 | |
| 2. Approach and management of VBAC per ACOG | | | |
| 3. Formal arrangement for transfer to receiving hospital | | GPC 79 | |
| 4. Criteria for consults for higher level of care | | GPC 24 | |
| 5. Criteria for practice credentials for attending physicians | | GPC 22 | |
| 6. Criteria for practice of allied health professionals (e.g., nurse midwife, nurse practitioner, nurse anesthetist) | | GPC 22 | |
| 7. Method of risk identification and assessment for consult/transport | | GPC 79 | |
| 8. Disaster preparedness and evacuation plan | | GPC 54 | |

*References:

GPC: American Academy of Pediatrics and American College of Obstetricians of Gynecologists. (2012). *Guidelines for Perinatal Care, 7th Edition*.

Menard: American College of Obstetricians and Gynecologists and Society for Maternal-Fetal Medicine, Menard MK, Kilpatrick S, Saade G, Hollier LM, Joseph GF Jr, Barfield W, Callaghan W, Jennings J, Conry J. Levels of maternal care. Am J Obstet Gynecol. 2015; 212(3):259-271.

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