



**Queensland
Government**

**Vaginal Birth Clinical
Pathway ongoing Care
(Additional Page)**

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

Every person documenting in this clinical pathway **must** supply a sample of their initials in the signature log

Postpartum Vaginal Birth

Instructions: Initials - care attended to, Rule out - not applicable, V - variance (record and sign all variances on sheet provided or progress notes)

⚡ Key ▲ Midwife / Nursing ■ Medical / GP ★ Physiotherapist ⊕ Pharmacy ◆ Allied Health 🏥 QCG

	⚡	Date: / / to Date: / /	Initial	Time	V
		<input type="checkbox"/> Hospital care <input type="checkbox"/> Home care			
Review	■	Midwife / Medical Officer			
	▲	Medical Officer Specialist / Treating Physician referral required			
		Discharge arranged			
		Referral to other Allied Health not required			
Physiotherapist	★	Bladder / bowel function, posture / ergonomics / back care, rectus diastasis check and muscle co-activation / rehabilitation assessed with consent			
Enter shift that will occur predominately within the next 8 hours				Time	V
Pain management	⊕	Minimal discomfort, managed with prescribed / simple analgesia			
Observations	▲	Observations of vital signs as per local protocol and recorded on Q-MEWT <input type="checkbox"/> Epidural <input type="checkbox"/> Diabetes <input type="checkbox"/> Other (specify):			
		IV therapy patent, no signs of inflammation			
Fundus	▲	Firm and central, ≥1–2cm ↓ umbilicus			
Lochia	▲	Dark red - pink, ≤1 pad / 2 hours			
Perineum	▲	Perineum inspected 🏥			
Breasts / nipples	▲	Breasts soft, nipples intact			
Infant feeding	▲	Safe feeding discussed 🏥 Breast feeding - requires minimal assistance Formula feeding - requires minimal assistance and understands increasing formula volumes required by infant			
Elimination	▲	No dysuria, no urinary incontinence or voiding difficulties No haemorrhoids Bowels opened			
Legs	▲	No calf tenderness 🏥			
Nutrition	▲	Self caring			
Hygiene	▲	Self caring			
Falls risk	▲	Standard falls prevention strategies implemented and recorded Mobilising independently			
Pressure injury	▲	Conduct a skin inspection if "at risk" Standard pressure injury prevention and management strategies implemented and re			
Emotional state	▲	Emotional needs identified including labour and birthing concerns			
Education	▲	Education plan updated			
Discharge	▲	Discharge plan updated / completed			
Expected outcomes	▲	Mother states: A - Achieved V - Variance			A V
	2.1	Mother has a sound understanding of care of herself and baby			

Variance:

DO NOT WRITE IN THIS BINDING MARGIN





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Variance:

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