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Contact: Clinical_Pathways_Program@health.qld.gov.au

Queensland Government

Maternal Birth Clinical Pathway Community Extension

Facility: .....

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth: Sex: ☐ M ☐ F ☐ I

Tick to indicate care attended to. Rule out if not applicable. Record and sign all variances in progress notes. 🗝 Key ▲ Midwife / Nursing

Category	🗝	**Date of birth:** ... / ... / ... **Birth method:** ☐ Vaginal ☐ Assisted birth ☐ LSCS **Visit type:** ☐ Home ☐ Phone ☐ Other
Review	▲	• Today's date: ... / ... / ... • Proceeding according to discharge plan
Mother Observations	▲	• (R) Breast: ☐ Soft ☐ Comfortable ☐ Filling ☐ Full ☐ Engorged ☐ Lumpy ☐ Red areas ☐ Pain ☐ Mastitis ☐ Signs of infection Comments: ..... • (R) Nipple: ☐ Intact ☐ Grazed ☐ Cracked ☐ Bleeding ☐ Pain ☐ Signs of infection Comments: ..... • (L) Breast: ☐ Soft ☐ Comfortable ☐ Filling ☐ Full ☐ Engorged ☐ Lumpy ☐ Red areas ☐ Pain ☐ Mastitis ☐ Signs of infection Comments: ..... • (L) Nipple: ☐ Intact ☐ Grazed ☐ Cracked ☐ Bleeding ☐ Pain ☐ Signs of infection Comments: ..... • ☐ Breastfeed observed: ◯ Full assist ◯ Partial assist ◯ Optimal positioning and attachment ◯ Education ◯ Suppressing lactation • Perineum: ☐ Intact ☐ Sutured ☐ Healing ☐ Not healing ☐ Pain ☐ Signs of infection • LUSCS wound: ☐ N/A ☐ Intact dressing ☐ Clean ☐ Dry ☐ Moist ☐ Bruised ☐ Reddened ☐ Oozing ☐ Poor skin union ☐ Pain ☐ Signs of infective process Comments: ..... • Vaginal loss: ☐ "Completed" ☐ Increasing ☐ Decreasing Colour / Comments: ..... • Uterine fundus: ☐ Palpated ☐ Not palpated Comments: ..... • ☐ VTE prophylaxis ☐ TED stockings
Pelvic Floor	▲	• Urine: ☐ Normal postnatal ☐ Incontinence ☐ Urgency ☐ Dysuria ☐ Difficulty in voiding ☐ Stress leakage • Bowel habits: ☐ Normal ☐ Constipation ☐ Incontinent • ☐ Pelvic Floor exercises discussed / demonstrated / observed
Emotional Health	▲	• ☐ Usual, no concerns ☐ Identified issues • ☐ EPDS repeat required, referral to (if necessary): .....
Nutrition	▲	• ☐ Eating healthy diet key information given • ☐ Physical activity
Education	▲	• ☐ SIDS / SUDI 3 key recommendations safe settling, wrapping and settling reinforced • ☐ Smoking cessation discussed (if applicable) referral to Quitline and NRT if required • Referred to: .....

Midwife Comments:

Print name:	Designation:	Signature:	Date:

DO NOT WRITE IN THIS BINDING MARGIN

MATERNAL BIRTH CLINICAL PATHWAY COMMUNITY EXTENSION

v6.00 - 09/2019
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