AFE EMERGENCY STABILIZATION CHECKLIST: 307-END-AFES

BREATHING

Recognition: Acute shortness of breath, increasing respiratory rate and need for oxygen to keep SpO2 at >95%

Response:

- ☐ Activate Rapid Response Team (RRT)
- ☐ Crash cart to bedside
- ☐ Move bed away from headwall
- ☐ Frequent vital signs including respiratory rate
- ☐ Auscultate breath sounds
- ☐ Set up ambu bag and suction
- ☐ Start O2 by non-rebreather face mask
- ☐ Plan for ongoing ventilation if intubated
- ☐ Continuous SpO2

BLOOD PRESSURE

Recognition: Unexplained acute onset hypotension (MAP <65mmHg) or cardiac arrest

Response:

DECLINING BLOOD PRESSURE

- ☐ Activate Active Rapid Response Team (RRT)
- ☐ Frequent vital signs
- ☐ Uterine displacement
- ☐ Functioning 18 g IV
- ☐ IV fluid bolus

CARDIAC ARREST

- ☐ Call Obstertic Code Blue (ensure Neo/Peds team is notified)
- ☐ Note time of pulselessness and begin chest compressions
- ☐ Manual left uterine displacement, remove fetal monitor
- ☐ Assemble ambu bag, begin CPR per BLS guidelines
- ☐ Crash cart to bedside
- ☐ Roll patient to place backboard and apply defibrillator leads
- ☐ Analyze rhythm (can use AED)
- ☐ Follow AED instructions or ACLS algorithm for identified rhythm
- ☐ Prepare for intubation ASAP
- ☐ Deliver within five minutes of pulselessness if >20 weeks gestation or fundus at umbilicus

SPECIMEN RESEARCH

Before transfusion, draw 5mL in a red and purple top and set aside. Consent is not needed to draw labs.

Call the hotline when you are able: 307-END-AFES.

BLEEDING

(SBP-DBP=PP)

Recognition: Pulse pressure <30mmHg or declining blood pressure, maternal tachycardia, bleeding

Response:

- ☐ Notify physician, anesthesiologist, & charge RN or activate Rapid Response Team (RRT)
- ☐ Activate Massive Transfusion Protocol (MTP)

Order Labs:

- ☐ BNP
- ☐ Cardiac enzymes
- ☐ CBC
- ☐ CMP
- ☐ Coagulation panel
- ☐ Fibrinogen
- ☐ Type and Cross

Products Given:

- ☐ 6 PRBC
- ☐ 6 FFP
- ☐ 6 Platelets
- ☐ Cryo as needed
- ☐ TXA as needed