

Guidelines for early referral to the Obstetric Anaesthesia Team

Some pregnant patients have medical problems which may benefit from a well defined anaesthetic plan for peripartum care. This plan can be formulated by an Anaesthetist with the patient at any time in advance of their confinement. The list below outlines some conditions which can be referred to the anaesthetic team.

Outpatient antenatal referrals will be accepted from consultant obstetricians only. Patients can be referred to Dr. Richard Laird in writing. Please include a home contact number and advise the woman that she may be contacted on this number.

Inpatients can be referred to the anaesthetist covering labour ward at the delivery suite morning handover or by bleeping 8396 at other times.

Anaesthetic problems	Post dural puncture headache Previous failed or difficult intubation Previous failed spinal or epidural Malignant Hyperthermia Latex allergy
Cardiovascular problems	Valvular heart disease Congenital heart disease Hypertrophic Cardiomyopathy (HOCM) Gestational Cardiomyopathy
Respiratory problems	Severe asthma
Haematological problems	Previous DVT/PE on LMWH Thrombophilia congenital/acquired Von Willebrand's Disease Sickle cell disease
Musculoskeletal problems	Prolapsed vertebral disc with neurology Previous back surgery (eg Harrington Rods) Severe Scoliosis
Connective tissue diseases	Rheumatoid Arthritis Systemic Lupus Erythematosus
Neurological problems	Spina Bifida Muscular Dystrophy Multiple Sclerosis Paralysis Myasthenia Gravis
Infection	Lower Respiratory Tract Infection Chorioamnionitis
Syndromes	Kippel-Feil Syndrome Turner's Syndrome
Endocrine	Poorly controlled Diabetes Obesity BMI >40 with co-morbidity (eg Hypertension, Diabetes or Sleep Apnoea) Obesity BMI>50
Obstetric Problems	Major Placenta Praevia Severe Pre-eclampsia/ HELLP syndrome