

## Perinatal Communication Guidelines – Zayed 8 East

Clinical Situation	Provider to Contact	Mode
<b>Acute Concern</b>		
<ul style="list-style-type: none"> <li>- Chest pain or Shortness of breath</li> <li>- Heavy bleeding: vaginal (pregnant or PPH) or post-op</li> <li>- Wants to leave AMA</li> </ul>	Z8E APP vs PGY2 OB Resident (by time of day)	Phone call or RED Staff Emergency Button
<b>Critical Concern</b>		
<ul style="list-style-type: none"> <li>- Hypertensive emergency</li> <li>- ICU-level patient (s/p c-hyst, severe cardiac disease, etc)</li> <li>- Respiratory distress</li> <li>- Seizure or stroke</li> <li>- Uterine rupture</li> </ul>	PGY4 Chief Resident	Phone call or RED Staff Emergency Button
<b>Delivery</b>		
- Ready for vaginal delivery	PGY1 OB Resident	Phone call
- Ready for cesarean delivery (neuraxial finished)	PGY2 OB Resident	Phone call
<b>Fetal Heart Rate</b>		
<ul style="list-style-type: none"> <li>- Equivocal NST</li> <li>- Category 2 tracing or any tracing needing attention</li> </ul>	Z8E APP vs PGY2 OB Resident (by time of day)	Secure Chat
- Category 3 tracing	PGY4 Chief Resident	Phone call
<b>Labor Management</b>		
<ul style="list-style-type: none"> <li>- Cervical exam needed</li> <li>- Intervention question (Pitocin, AROM, IUPC, FSE)</li> </ul>	Z8E APP vs PGY2 OB Resident (by time of day)	Secure Chat if non-urgent, Phone call if urgent
<b>Medication Management</b>		
- Pepcid, Tums, Benadryl, Dermoplast, etc.	Z8E APP vs PGY2 OB Resident (by time of day)	Secure Chat
<b>Pain</b>		
- Acute, requiring immediate evaluation	Z8E APP vs PGY2 OB Resident (by time of day)	Phone call
- Non-acute, needs evaluation but not immediate.		Secure Chat
<ul style="list-style-type: none"> <li>- Within 24 hours post-op</li> <li>- Desires epidural or needs epidural adjustment</li> </ul>	OB Anesthesia Resident	Phone call
<b>Vitals</b>		
<ul style="list-style-type: none"> <li>- Blood pressure: SBP 140-159 or DBP 90-109</li> <li>- Heart rate &gt;110 but &lt; 120</li> </ul>		Secure Chat
<ul style="list-style-type: none"> <li>- Blood pressure: SBP ≥ 160 or DBP ≥ 110</li> <li>- Blood pressure: SBP &lt; 80 or DBP &lt; 50</li> <li>- Heart rate &lt;60 or &gt;120</li> <li>- Fever ≥38C</li> <li>- Oxygen requirement (SpO2 &lt;95%)</li> </ul>	Z8E APP vs PGY2 OB Resident (by time of day)	Phone call

Provider Role (Jabber Name)	Hours	Jabber Phone (Static)
Z8E APP (Sejal Thaker, Brooke Edwards, Jennifer Piaskowski)	<b>Monday – Thursday, 7a – 11p. Friday, 7a – 6p</b>	No static number, please call the APP directly by name
PGY1 OB Resident (JHH Intern, OB)	24/7 except Friday 1-4p	667-776-6630
PGY2 OB Resident (JHH Resident 2, OB)	24/7, except Friday 1-4p. <i>First call for Z8E: Monday – Thursday, 11p – 9a. Weekends (Friday 6p – Monday 9a) &amp; Holidays</i>	667-776-6665
PGY4 Chief Resident (JHHChiefResident, OB)	24/7, except Friday 1-4p	667-776-6056
PGY1 Emergency Med Resident	3 weeks per month, off Friday mornings	No static number
Anesthesia Resident (OBAnesResident)	24/7 (Absent 2 Thursdays per month during daytime)	667-776-6143

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### General Guidance:

- If no response to Phone Call → Face to Face or escalate chain of command via phone
- If no response to Secure Chat in 30 minutes→ Phone Call or escalate chain of command via Secure Chat
- Never use Secure Chat to reach a doctor, APP, RN, PNP, or CT/ST if you need an immediate response.
- Notify the assigned RN by phone or face to face for all STAT or urgent orders/ interventions.
- Do not assume a secure chat message has been read unless the recipient has responded.
- Avoid sending messages via CORUS or via personal cell phones (including calls).
- Contact assigned PNP for all newborn issues with modality appropriate for level of concern.
- Contact assigned RN for patient specific questions / requests.
- Use CODE button for no pulse/no breathing or impending cardiac or respiratory failure (for mom or baby).
- Use RED staff emergency button for immediate help for any critical situations.