Post Pregnancy Care 4/5/6.12.6 **EMT** Version 4, 01/2021 (Including miscarriage and abortion) ≤6 weeks If possibility of on-going pregnancy go to pregnancy CPG Post-partum Consider retained parts of conception as cause Delivery ≥ 20 weeks with; Altered PV Bleeding Sepsis Headache, Visual disturbance, Mood Dyspnoea, Oedema or seizure Measure BP Signs of shock Consider Yes Eclamptic Health seizure or pre-eclampsia CPG suspected (BP >140/90 x 2) to maintain palpable radial pulse (SBP 90 – 100mmHg) Assess home (in NaCl 100 mL over 30 minutes) environment & supports Oxytocin 10 International units IM (report at handover) (even if administered prior to arrival) Uterine massage Tranexamic Acid 1g IV/IO (in NaCl 100mL infusion) Suspect pre-eclampsia if above symptoms present and 2 elevated BP readings 15min apart. Consider breast feeding (If no contraindications) Additional sepsis symptoms Low back pain PV bleed Signs of PV discharge Sepsis No Go to Sepsis CPG To Obstetric Unit To General ED

