Purpose

- To assess women antenatally and provide information and education regarding their elective Caesarean section.
- To prepare notes for theatre

Criteria

- All women who have been booked for an elective Caesarean section within 7 days of the Pre-Admission Clinic (PAC) date.

Exclusion criteria

- All women with a medical / obstetric reason which requires admission prior to day of surgery.
- Patients who are currently inpatients

Professional attendance

- Anaesthetic registrar
- Midwife
- Researchers who have had their attendance approved by the Medical Ethics Committee
- Resident Medical Officer
Medical pre requisites for appointment
Antenatal Clinic Medical Officer has arranged that:

- Operating theatre is booked and the booking form has been completed.
- Caesarean section consent form (MR295) has been signed
- Pathology request forms are completed for pre-surgery investigations
- Medical admission assessment and medical records are completed.

Outcomes
Anaesthetic Registrar will ensure:

- anaesthetic assessment completed
- premedication ordered on MR810
- recruited for research, as required.

Midwives will ensure:

- An antenatal assessment is performed to identify potential problems.
  - The woman is palpated in PAC by a midwife, and if unsure of position
    (or if the woman’s only reason for elective caesarean is breech
    presentation and fetus is now cephalic), discuss with the PAC RMO,
    and the woman is sent to MFAU or scanned in clinic depending on the
    RMO in PAC.
- Completion of the Elective Caesarean Section Pre admission Checklist
  Pathway form
- Inclusion of relevant documentation as per the PAC checklist
  - Birth plan: Midwife to arrange any necessary further discussion of
    extra-ordinary birth plan requests with appropriate professional

Midwife has explained:

- fasting guidelines
- the patient is to ring Day Surgery the evening prior to the day of caesarean
  section to confirm the admission and fasting times
- procedure during admission and Clinical Guidelines for Caesarean section
- what to expect in theatre
- discharge planning, including
  - length of stay
  - Visiting Midwifery Service
- Enhanced recovery after surgery (ERAS) principles (e.g. encourage
  mobilisation, eating and drinking as soon as possible)
- rooming-in policy
- visiting hours
- physiotherapy guidelines and benefits of mobilisation
- use of TED anti-embolism stockings
- pain relief options
- options for / importance of
  - skin-to-skin contact with newborn as soon as possible
  - early breastfeed (in recovery if appropriate)
  - limited separation of mother and baby when possible
- vitamin K administration
- Allied Health referrals if required
- blood testing required within 6 days of surgery date
- Interpreters are booked for day surgery as required.

**Phlebotomist has taken blood for:**
- full blood picture
- group and hold
- antibodies (if required)
- other (as requested).

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**Related WNHS policies, procedures and guidelines**

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<tr>
<th>KEMH Clinical Guideline, O&amp;G: Caesarean Section</th>
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