

Fast Track Pregnancy related problems (> 6 weeks)

Patient Name:
 Hospital Number:
 Date of last LMP:

Positive home pregnancy test or positive urine
 pregnosticon in the ED
 Baseline observation recorded
 Record results in notes (using stamp)

NEWS ≥ 5 **or** > 2 in any single parameter
 or
 HEAVY PV loss

YES

For assessment in ED

NO

↓

< 16 weeks

YES

Ring **GAU** to refer patient
for assessment on GAU
78855

NO

↓

Ring **ANTU** to refer patient for assessment
78179

Assessor Name:

Date & Time: