

Incidents and Near Misses to be Reported: Obstetrics

The following list of incidents represents those, which MUST be reported under the Risk Management Reporting System, as outlined in the Risk Management Framework. This list is not exhaustive but should be seen as a minimum dataset.

Delivery Suite

- Unexplained stillbirth
- Intra-partum death - mother / baby
- Birth trauma to baby - nerve damage/bony injury
- Trauma to bladder and other organs
 - 3rd/4th Degree Tears
- Failed forceps / Ventouse in delivery room leading to LSCS.
- X2 Instrumental deliveries (sequential forceps)
- Ruptured uterus / dehiscence of previous scar.
- PPH > 1000mls
- Cases requiring admission to ITU.
- Second trip to theatre (may not require further investigation once nature of return trip is identified)
- Delay in delivery of second twin – that leads to an adverse outcome.
- Shoulder Dystocia - bony injury, brachial plexus injury, delay in delivery of more than five minutes.
- Eclamptic fit.
- Low Apgar score – 6 and below at 5 minutes at 37+ weeks.
- Low pH at delivery (< 7.05, BE > -8)
- Undiagnosed breech
- Unexpected admission to NICU
- Cord prolapse
- Any significant severe infection
- Second stage of labour > 4 hrs primips or > 3 hrs multips
- Emergency LSCS > 30 min decision-to-delivery interval
- Urgent LSCS > 4 hours decision-to-delivery interval
- Intrapartum transfer from home to hospital

Antenatal/Postnatal Ward

- Readmission following delivery of mother or baby
- Neonatal readmission for weight loss / feeding problems
- Transfer to Delivery Suite post delivery - Secondary PPH/↑BP
- Severe infection / wound breakdown (LSCS/Perineum)

- Suspected thromboembolic disease
- Antenatal APH
- Eclamptic fit (antenatal/postnatal)
- Maternal Collapse
- Admission to NICU
 - Neonatal death
- Low postnatal Hb < 8g/dl
- Postnatal psychosis / depression

Fetal Medicine Unit/Day Assessment Unit

- Any significant congenital abnormality detected that was missed at the anomaly scan.
- IUD / Cat 1 LSCS after any invasive procedure.
- Repeated invasive test for any reason apart from failed culture.
- IUD following attendance at DAU
- Neonatal septicaemia following PROM
- Severe PET requiring admission to HDU

Community

- Unplanned Homebirth / BBA

Antenatal Clinic

- Late or unbooked women
- Missed or incorrect diagnosis in antenatal period

General

- Misidentification of patients e.g. results, notes
- Abnormal results not being recognised, resulting in delay in treatment
- Drug errors
- Unavailability of health records
- Unavailability of facilities or equipment e.g. Theatres
- Inability to contact appropriate medical staff.
- Staffing levels
- Loss of clinical material e.g. swabs
- Delays due to shortage of staff/ beds, e.g. when transferring mothers from Ward to Delivery Suite.
- Any other adverse event