



## REFERRAL GUIDELINES

### Maternity Care

Referral Form: [Maternity booking referral form](#)

This tool is housed in **Medical Director, Best Practice & Genie** software or can be downloaded from <http://www.monashhealth.org/page/Maternity2>

Click on category to advance to that page:

#### Pregnancy

- [Uncomplicated pregnancy](#)
- [Multiple pregnancy](#)
- [Diabetes in pregnancy](#)
- [Morbid obesity \(> 42 BMI\)](#)
- [Previous lower uterine segment caesarean section](#)

#### Perinatal Services

- [Fetal Diagnostic Unit](#)
- [Maternal Fetal Medicine](#)
- [Pre pregnancy counselling](#)
- [Fetal Monitoring](#)

#### Related service pages:

- [Genetics](#)
- [Infectious diseases in pregnancy](#)

#### Services not provided

- High risk anaesthetic reviews for women booked at other health services

#### IMPORTANT:

The following information is mandatory:

#### Demographic:

- Full name
- Date of birth
- Next of kin
- Postal address
- Landline & mobile number
- Medicare number
- Referrer details
- Usual GP (if different)
- Interpreter requirements

#### Clinical:

- Reason for referral
- EDD
- Management to date and response to treatment
- Past medical history
- Current medications and medication history if relevant
- Psychosocial history
- Family history
- Diagnostics as per referral guidelines

**PROGRAM DIRECTOR**  
Professor Euan Wallace

#### ENQUIRIES

Maternity Bookings

**P:** 9594 2239

**F:** 9594 6298

Review June 2016

[BACK to home page](#)

### Patient presentation

- Confirmed pregnancy

### Initial work up

Initial investigations as outlined in the

- [GP initial visit to confirm pregnancy procedure](#)

Discuss

- [Options for care in pregnancy](#)
- [Monash Health Maternity Teams](#)
- [Pregnancy tests investigations and key visit information](#)

### Management options for referrer

- First trimester screening for aneuploidy
- Second trimester morphology scan

## WHEN TO REFER

The National antenatal care guidelines (Department of Health and Ageing 2012) recommend women attend their first antenatal visit **within the first 10 weeks of pregnancy**. This provides an opportunity to identify clinical and other risks to the woman and her baby, as well as develop a care plan that meets the individual health and social needs of the woman throughout her pregnancy and the postnatal period. Late access to pregnancy care is associated with poorer outcomes. <http://www.health.gov.au/antenatal>

- **Uncomplicated pregnancy:** As early as possible in pregnancy to ensure maternity bookings can be better placed to expedite the womans' preference for ongoing care and for place of birth
- **Multiple pregnancy:** On ultrasound confirmation of multiple pregnancy
- **Morbid obesity – BMI > 42:** As early as possible in pregnancy to ensure coordination and linkages with other care professionals
- **Type 1 or 2 diabetes:** As early as possible in pregnancy to enable coordination and linkages within diabetes and endocrinology services
- **Previous lower uterine segment caesarean section:** As early as possible in pregnancy to ensure maternity bookings can be better placed to expedite the womans' preference for ongoing care and for place of birth

## Monash Health Maternity Bookings

- Health Professionals Fax: **9594 6298 completed** [Maternity booking referral form](#)
- Pregnant woman may initiate a booking request - online via: <http://www.monashwomens.org/maternity/index.php/booking-request> [note: a medical referral will still be required at the initial appointment as many of the maternity clinics are MBS]

[BACK to home page](#)

## FETAL DIAGNOSTIC UNIT

[BACK to home page](#)

### Patient presentation

- For advice and pre-pregnancy information and counselling about fetal abnormalities
- For diagnostic procedures in pregnancies identified as being 'at increased risk' following screening tests, and to detect fetal abnormalities
- To assist in management of pregnancies in which there are known or suspected fetal abnormalities
- Advice about fetal risk related to medication, chemical and radiation exposure
- Advice and management regarding fetal complications following maternal infection
- To arrange genetic counselling
- For intrauterine fetal treatments
- Monochorionic twin pregnancies

### Initial work up

Complete referral including:

- Patient contact details
- EDD
- Results of all previous scans and screening tests( i.e. NIPTS, 1<sup>st</sup> or 2<sup>nd</sup> trimester screening)
- Patients' blood group

### Management options for referrer

- FDU referrals are triaged weekly and prioritized according to individual need.

### WHEN TO REFER

- **Fetal Diagnostic Unit** - Level 5 at Monash Medical Centre.  
T : 95942343 or F: 95946226

## MATERNAL FETAL MEDICINE CLINIC

### Patient presentation

- Medical or surgical maternal conditions that is likely to have a significant adverse impact on the pregnancy and its outcome.
- For example: HIV positive, transplant patients, paraplegia/quadriplegia, cystic and pulmonary fibrosis, pulmonary embolism, rare syndromes.
- Multiple pregnancies – triplets or greater.

### Initial work up

Investigations as outlined in the:

- [GP initial visit to confirm pregnancy procedure](#)

Plus

- Estimate due date (EDD) preferably by early ultrasound.
- Pathology reports – recommended prenatal screening.
- Letters from other specialists (e.g. Cardiologist or Infectious Diseases).
- Contact details in-hours /mobile phone numbers.

### Management options for referrer

- [Maternal Fetal Medicine \(MFM\) Amber Team inclusion criteria](#)

### WHEN TO REFER

- As early as possible, refer directly on a [Maternity booking referral form](#) marked '**to the attention of the MFM midwife**'.

[BACK to home page](#)

## PRE-PREGNANCY COUNSELLING – MATERNAL FETAL MEDICINE UNIT

[BACK to home page](#)

### Patient presentation

- Women with a medical or surgical condition that is likely to have an adverse impact on a pregnancy.
- Women who have had a serious adverse pregnancy outcome e.g. stillbirth, severe early onset pre-eclampsia.

### WHEN TO REFER

- Pre-pregnancy counselling - refer direct to the **Maternal Fetal Medicine Unit**  
T: 9594 5276 OR F: 9594 6272 OR E : [Julie.Dunn@monashhealth.org](mailto:Julie.Dunn@monashhealth.org)

### Initial work up

- Letters from relevant specialists regarding current medical or surgical conditions.
- Previous discharge summary or letter.
- Relevant pathology or imaging.

### Management options for referrer

- N/A

## FETAL MONITORING

### Patient presentation

Pregnancy complications e.g :

- decreased movements
- hypertension
- post term fetal surveillance
- other complications

### WHEN TO REFER

- As per [clinical guidelines](#)
  - Refer direct to **Fetal Monitoring** Level 5 @ Monash Medical Centre
  - T: 9594 5276 OR F: 9594 6272 OR [Completed Referral](#)

### Initial work up

- [Complete referral](#)
- [Clinical guidelines](#)

### Management options for referrer

See back of [referral](#) form for guidelines on requesting investigations in the **Maternal Fetal Medicine Unit** (Level 5) MMC.

[BACK to home page](#)