

OTAS	Level 1 (Resuscitative)	Level 2 (Emergent)	Level 3 (Urgent)	Level 4 (Less Urgent)	Level 5 (Non-Urgent)
Time to Secondary Health Care Provider	Immediate	≤ 15 minutes	≤ 30 minutes	≤ 60 minutes	≤ 120 minutes (2 hours)
Re-assessment	Continuous Nursing Care	Every 15 minutes	Every 15 minutes	Every 30 minutes	Every 60 minutes
Labour/Fluid	<ul style="list-style-type: none"> <li>Imminent birth</li> </ul>	<ul style="list-style-type: none"> <li>Suspected preterm labour/PPROM &lt; 37 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Signs of active labour &gt; 37 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Signs of early labour/SROM &gt; 37 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Discomforts of pregnancy</li> </ul>
Bleeding	<ul style="list-style-type: none"> <li>Active vaginal bleeding with/without abdominal pain</li> </ul>	<ul style="list-style-type: none"> <li>Bleeding associated with cramping (&gt; spotting) &lt; 37 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Bleeding associated with cramping (&gt; spotting) &gt; 37 weeks</li> </ul>	<ul style="list-style-type: none"> <li>Spotting</li> </ul>	
Hypertension	<ul style="list-style-type: none"> <li>Seizure activity</li> </ul>	<ul style="list-style-type: none"> <li>Hypertension &gt; 160/110 and/or headache, visual disturbance, RUQ pain</li> </ul>	<ul style="list-style-type: none"> <li>Mild Hypertension &gt; 140/90 with/without associated signs and symptoms</li> </ul>		
Fetal Assessment	<ul style="list-style-type: none"> <li>Abnormal FHR tracing</li> <li>No fetal movement</li> </ul>	<ul style="list-style-type: none"> <li>Atypical FHR tracing, abnormal BPP, abnormal dopplers</li> <li>Decreased fetal movement</li> </ul>			
Other	<ul style="list-style-type: none"> <li>Acute onset severe abdominal pain</li> <li>Altered level of consciousness</li> <li>Cord prolapse</li> <li>Severe respiratory distress</li> <li>Suspected sepsis</li> </ul>	<ul style="list-style-type: none"> <li>Major trauma</li> <li>Shortness of breath</li> <li>Unplanned and unattended birth</li> </ul>	<ul style="list-style-type: none"> <li>Abdominal/back pain greater than expected in pregnancy</li> <li>Flank pain/hematuria</li> <li>Nausea/vomiting and/or diarrhea with suspected dehydration</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing assessment from outpatient clinic (for hypertension, blood work)</li> <li>Minor trauma (minor MVC/fall)</li> <li>Nausea/vomiting and/or diarrhea</li> <li>Signs of infection (ie. dysuria, cough, fever, chills)</li> </ul>	<ul style="list-style-type: none"> <li>Anything that does not seem to pose threat to mother or fetus</li> <li>Cervical Ripening</li> <li>Outpatient placenta previa protocol</li> <li>Pre-booked visits (ie. Rh and progesterone injections, NST)</li> <li>Assessment for version</li> <li>Rashes</li> </ul>

# Obstetric Triage Guidelines

**Nan H. Troiano, Patricia  
Witcher, Suzanne Baird**



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