

HIGH-RISK OBSTETRICAL PROGRAM MANUAL





High-Risk OB Program Mission

To reduce the morbidity of obstetrical complications by proactive perinatal surveillance, education, resource support and management of chronic health conditions in an individualized care model that optimizes the patient experience.

CommuniCare's Mission and Vision

Mission

To improve the health of those we serve with a commitment to excellence in all we do.

Vision

Be the premier primary health care system of choice.









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ROLES AND EXPECTATIONS OF THE PATIENT CARE TEAM

Team Members

PROVIDER

The provider will identify and assess potential patients for the High-Risk OB program. Will provide the plan of care and direction of patient care. Will task the RN with enrolling patients into the program.

REGISTERED NURSE

The RN will ensure patient enrollment into the program to provide patient education and coordinate care, provide telehealth screening and assessments, identify and recognize the progression of high-risk disease processes and escalate care per CommuniCare guidelines. The RN will also provide and anticipate barriers to care and offer education and resources when indicated, screen for Social Determinants of Health and provide information regarding resources as needed.

LICENSED VOCATIONAL NURSE (CLINICAL COORDINATORS)

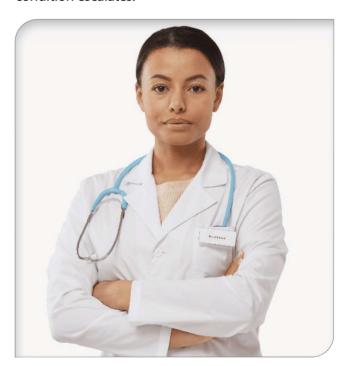
The Licensed Vocational Nurse will be able to provide patient guidance on obstetrical, gynecological and postpartum questions, assist the patient with lab results and medication instructions, and coordinate resources for high-risk or poor compliant patients. LVNs will also assist with coordinating care with OB/GYN and Maternal Fetal Medicine. When possible, can assist with high-risk OB patients to decrease any foreseen barriers in care to optimize patient care and experience.

MEDICAL ASSISTANT

The medical assistant (MA) will screen the patient using the High-Risk OB Screening Questionnaire to determine the patient's eligibility to be enrolled into the program. If a screen is positive, the MA will alert the patient provider and the high-risk OB RN.

PATIFNT

When possible, the patient will attend in-person clinic appointments and, if possible, follow up with the RN over the phone during their enrollment in the program. Be open to education and resources to overcome identified barriers in care. The patient will also notify the patient care team or 911 if their condition escalates.





Patients Eligible for Program

New patients can only be referred by a primary provider, registered nurse or medical assistant.

Diabetic High-Risk Patients

- 1. Pre-existing diabetes
- 2. Failing Glucose Tolerance Test (GTT) or glucose screen

Hypertensive High-Risk Patients

- 1. Hypertension diagnosis during pregnancy
- 2. Hypertension diagnosis before pregnancy



Increased Risk for Preterm Labor

- 1. History of preterm delivery <37 weeks
- 2. Receiving Makena injections
- 3. Has a cerclage in place

Management of Chronic Conditions: Will monitor patients' post-birth to encourage compliance of chronic conditions

Current Chronic Conditions Include

- 1. Obesity
- 2. Hypertension
- 3. Diabetes



High-Risk OB Screening Questionnaire

QUESTION	RESPONSE	
Have you ever been told you have diabetes by a doctor?	☐ Yes	□ No
Have you ever been told you have high blood pressure?	☐ Yes	□ No
Have you ever had a baby before 20 weeks, used Makena (progestin) injections or had a cerclage?	☐ Yes	□ No
Is your BMI greater than 40?	☐ Yes	□ No

High-risk pregnancies are those with concurrent disorders, pregnancy-related complications or external factors that endanger the health of the woman and fetus. Nurses must have the awareness regarding these diseases so they can act swiftly during these emergencies.

Identifying a High-Risk OB Patient

Things to consider and look for in a High-Risk OB pregnancy

- 1. More than one factor can contribute to the classification of a high-risk pregnancy.
- 2. Women who already have a disorder before the pregnancy are termed to have a greater-than-normal risk.
- 3. The factors that categorize the woman's pregnancy as high risk were classified into minimal, moderate or extensive.
- 4. Psychological, social and physical factors also break down the factors that categorize a high-risk pregnancy.

PSYCHOLOGICAL FACTORS

- 1. History of drug dependence
- 2. History of intimate partner abuse
- 3. History of mental illness
- 4. Loss of support person
- 5. Poor acceptance of pregnancy
- 6. Severely frightened by labor and birth experience
- 7. Inability to participate because of anesthesia
- 8. Illness in newborn

Social Factors

- 1. Occupation involving handling of toxic materials
- 2. Environmental contaminants
- 3. Isolated
- 4. Low economic status
- 5. Poor access to transportation
- 6. Poor housing

- 7. Refusal or neglected prenatal care
- 8. Disruptive family incident
- 9. Conception less than one year after last pregnancy
- 10. Lack of support person
- 11. Inadequate home for infant care
- 12. Lack of access for continued health care

PHYSICAL FACTORS

- 1. Pelvic inadequacy or misshape
- 2. Uterine incompetence, position or structure
- 3. Secondary major illness
- 4. Poor gynecologic or obstetric history
- 5. Obesity
- 6. Underweight
- 7. Pelvic Inflammatory Disease (PID)
- 8. Potential of blood incompatibility
- Younger than 18 years old and older than 35 years old
- 10. Cigarette smoker
- 11. Substance abuser
- 12. Subject to trauma
- 13. Bleeding disruption
- 14. Gestational diabetes
- 15. Nutritional deficiency
- 16. Infection
- 17. Hemorrhage
- 18. Cephalopelvic disproportion
- 19. Retained placenta

High-risk pregnancy may not happen in most childbearing women, yet there many factors that could lead to this condition. Early education for couples who want to get pregnant is essential to ensure that mother and baby have a safe pregnancy journey throughout.

Enrollment Process

- 1. Medical assistant will screen each patient using the High-Risk OB questionnaire
 - Medical assistant will notify provider of positive screen
 - Place screening form on top of patient's chart
- 2. Provider will task high-risk OB RN, to enroll patient
 - · Initiate tasking to RN for patient enrollment

3. RN will

- Acknowledge tasking
- Ensure alert is active in patient's chart
- Ensure patient is enrolled into program
- Make contact with patient within three days of enrollment

RN Assessment Components

Ensure patient is enrolled in program

Complete

- Initial face-to-face education or telephone education
- 2. Social Determinant of Health (SDoH) screen
- 3. Chart nursing assessment in NextGen nursing template
 - Via telephone or in person

Provide Equipment, if applicable

- 1. Glucometer and lancets (order provided by MD)
- 2. Glucose log
- 3. At-home blood pressure cuff (order needed)

Follow-up weekly via telephone or more as indicated

- Identify barriers to care and associated resource needs
- Provide education as needed related to disease process
- 3. Assess for disease progression and signs and symptoms
 - Chart in NextGen nursing template tool per consultation
- 4. Escalate care if needed
- 5. Provide encouragement as needed

Identify barriers to care and resources

- 1. Re-screen for SDoH, if indicated
- 2. Provide resources related to SDoH

Increased Perinatal Surveillance

DIABETES DURING PREGNANCY

- 1. RN will initiate consultation within three days of diagnosis of diabetes during pregnancy
 - Consultation will be in person or via telephone
- 2. RN will educate patients weekly via telephone and/or in person during clinic appointments

Hypertension during Pregnancy

- 1. RN will meet with and educate patient at inperson clinic appointments
- 2. RN will initiate consultation within three days of patient enrollment
 - If possible, during in-person appointment
 - Initiate telehealth consults if no face-to-face education occurs





RESOURCES

Equipment

DIABETES

- Glucometers
- Lancets
- Syringes (if needed)
- Education pamphlets on proper syringe disposal
- Education materials for diet, exercise and medication management

Hypertension

- Home blood pressure cuff (if ordered)
- Education pamphlets on preeclampsia signs and symptoms and healthy eating



Social Determinants of Health - Community Resources

2-1-1 TEXAS

Website: https://www.211texas.org/contact-2-1-1/

- 1. Enter search terms (ex: food, housing, etc.)
- 2. Enter zip code
- 3. Search

For information about services in your area, dial 2-1-1 or 877-541-7905, select your language, then choose Option 1

For information about state benefits, visit YourTexasBenefits.com or dial 2-1-1, select your language, then choose Option 2

To register for the State of Texas Emergency Assistance Registry (STEAR), dial 2-1-1, select your language, then choose Option 4





Housing

(check online for most current available resources)

Haven for Hope

1 Haven for Hope Way San Antonio, TX 78207 Phone: 210-220-2100

Website: https://www.havenforhope.org/

Guadalupe Home

2102 Buena Vista Street San Antonio, TX 78207 Phone: 210-476-0707

Website: https://www.ccaosa.org

Visitation House 945 W. Huisache

San Antonio, TX 78201 Phone: 210-735-6910

Website: https://www.visitationhouseministries.

org/



FOOD

(check online for most current available resources)

San Antonio Food Bank

5200 Enrique M. Barrera Pkwy

San Antonio, TX 78227 Phone 210-337-3663

Website: https://safoodbank.org

Special Supplemental Nutrition Program for Women,

Infants, and Children (WIC) 2315 Buena Vista Street San Antonio, TX 78207 Phone: 210-207-4906

Website: https://texaswic.org/apply

FINANCIAL ASSISTANCE

(check online for most current available resources)

Medicaid

Phone: 1-800-252-8263

Website: https://yourtexasbenefits.com/Learn/

Home#login

Email: medicaid@hhsc.state.tx.us

CHIP Perinatal

Phone: 1-800-990-8247

Website: https://www.yourtexasbenefits.com/

Learn/Home#login

Prescription Assistance

(check online for most current available resources)

Any Baby Can of San Antonio

217 Howard

San Antonio, TX 78212 Phone: 210-227-0170

Website: https://www.anybabycansa.org/services/

prescription-assistance/

Prescription Assistance Program Agency: Texas Rx

Card

Phone: 877-321-6755

Website: https://texasrxcard.com

Transportation Assistance

(must set up appointment three days in advance)

Assistance may be provided to patients through the medical transportation program which provides non-emergencymedical transportations ervices for people who don't have a way to get to covered health care services. To get a ride through MTP, you can't have any other means of transportation. You must also be enrolled in one of the following programs:

- 1. Medicaid
- 2. Children with Special Healthcare needs
- 3. Transportation for Indigent Cancer Patient

Phone: 877-633-8747

Website:https://hhs.texas.gov/services/health/medicaid-chip/programs-services/medical-transportation-program

CHILD NECESSITIES

(check online for most current available resources)

Texas Diaper Bank/ Healthy Women Period 1803 Grandstand Dr., Suite 150 San Antonio, TX 78238

Phone: 210-731-8118

Website: https://www.texasdiaperbank.org/ programs/#diaper_assistance_section Email: help@texasdiaperbank.org

RESOURCES FOR TRANSITION OF CARE

CommuniCare Primary Care Provider

Phone: 210-233-7000

Texas Women's Health

Website:https://www.yourtexasbenefits.com/Learn/Home

Items required:

- Proof of Identity
- · The amount of money you make
- · Money spent on childcare and child support
- · Your citizenship and immigration status

EXAMPLES OF PROOF NEEDED

- · Proof of money received
- · Pay Stub
- · Letter from employer
- Court papers that show child support
- Unemployment benefit award letter
- SupplementalSecurityIncomeawardletterorpay stub

Proof of how much you pay

- Receiptsorincometaxreturnsthatshowswhatyou pay for daycare costs
- Courtpapers, canceled checks orwage with holding statements that show how much you pay for child support

Proof of citizenship and identify

- · U.S. passport
- Certificate of naturalization
- · Certificate of U.S. citizenship

Proof of Identity

- Current driver's license with photo
- · DPS ID card with photo
- · Work or school ID card with photo

Proof of immigration status

- · Alien registration card
- Document from the Bureau for Citizenship and Immigration Services



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Mail or Fax Your Application

Healthy Texas Women P.O. Box 149021 Austin, TX 78714-9021

Fax (toll-free): 1-866-993-9971

By phone

You can apply for Healthy Texas Women over the phone by calling 2-1-1, between the hours of 8 a.m. and 6 p.m. Central Time, Monday to Friday.

In person

Pick up an application form at a Women, Infants, and Children (WIC) Nutrition Program office. Call 1-800-942-3678 (toll-free) to find a WIC office.

You can also apply at a clinic that offers Healthy Texas Women services. You can find a participating clinic by using the Find a Doctor tool: https://www.

healthytexaswomen.org/healthcare-programs/healthy-texaswomen/htw-how-apply







APPENDIX

Patient Education Material

WELCOME LETTER

ACOG SOCIAL DETERMINANTS OF HEALTH (SDOH) QUESTIONNAIRE

DIABETES EDUCATION

- Types of diabetes
- Exercise
- Proper diet
- Blood sugar testing
- Administering insulin
- Sharps disposal

HYPERTENSION

Preeclampsia

PRETERM LABOR

• Signs and symptoms of preterm labor

HEALTHY LIVING

• Benefits of exercise





Dear Patient,

First and foremost, congratulations on your pregnancy!

We would like to welcome you into the High-Risk OB Initiative. The initiative was established to help expecting mothers with diabetes, hypertension, risk of preterm labor, and for other medical conditions to achieve a healthy pregnancy and delivery.

Our highly educated nurses will set an appointment with you either in person or via telephone every week to provide education, assess for any complications and answer any questions you may have. This service will be available throughout the remainder of your pregnancy.

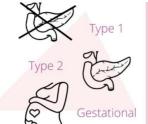
We know you have many choices and greatly appreciate you selecting Communi-Care during this amazing time in your life. Please let us know if there is anything we can do to accommodate your needs and make this experience as pleasant as possible.

We look forward to assisting you during this special time in your life.

The Doctors, Nurses, and Staff at CommuniCare

DIABETES EDUCATION

Diabetes During Pregnancy



Signs &
Symptoms of
Low Blood
Sugar

Weakness Headache Blurred Vission Increased Thirst Dry Mouth

Prevention



Types of Diabetes

Sweating Irritability Sleepiness Hunger Lack of Color

Signs &
Symptoms of
High Blood
Sugar



Treatment

Sources:
Center for Disease Control & Prevention (2018
American Diabetes Association (2020)

Exercise Facts



In general, 30
minutes of
moderateintensity aerobic
exercise at least 5
days a week is
recommended (or
a minimum of 150
minutes per
week).



Exercise helps
keep blood sugar
levels in the
normal range. You
and your Ob-Gyn
can decide how
much and what
type of exercise is
best for you.



Walking is a great exercise for all women. Talk with your Ob-Gyn before you start an exercise regime.

Source: The American College of Obstric & Gynecologists (2020)

Diabetic Food List

Lean Proteins

Chicken

Turkey Eggs

Fish like Salmon & Tuna Lean Beef or Pork

Low Fact Cheese

(Pasturized)

Carbohydrates

Whole wheat Flour Whole Wheat Pasta Whole Wheat Crackers

Quinoa

Brown Rice

Graham Crackers

Winter Squash

Corn-on-the-Cob

Potatoes

Plant-Based Proteins

Falafel

Hummus

Legumes (beans)

Lentils

Nuts & Nut Butters

Edamame

Tofu and Tempeh

Plant-based meat

substitutes

Low-Calorie Drinks

Water

Milk (Nonfat/Skim)

Unsweetened Tea

Unsweetened Coffee

Sparkling Water/Club Soda

Flavored water without

added sugar

Diet Sodas

Non-Starchy Vegetables

Artichoke

Asparagus

Brussels sprouts

Broccoli

Carrots

Cauliflower

Celery

Cucumber

Eggplant

Green Beans

Mushrooms

Peppers

Radishes

Rutabaga

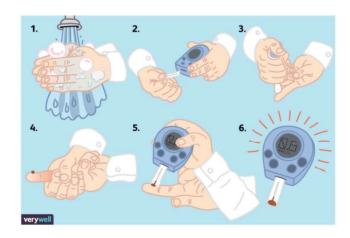
Salad greens

Tomato



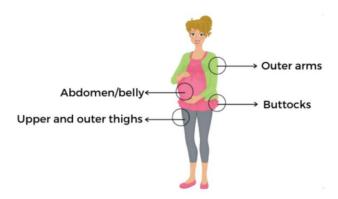
How Do I Test?

- 1. Wash your hands.
- 2. Insert test strip into the machine.
- 3. Use the lancing device on side of your finger to obtain a drop of blood.
- 4. Wipe off the first drop of blood.
- 5. Hold the edge of the testing strip to the fresh drop of blood.
- 6. Wait for the results.



Source: Verywell Health (2017

How to Administer Insulin



- 1. Select a site. Do not overuse one particular site.
- 2. Make sure the skin is clean.
- 3. Pinch the skin.
- 4. Push the needle into the skin.
- 5. Inject the insulin.
- 6. Pull out the needle.
- 7. Dispose of the needle

Source:
American Association of Diabetic Educators

Talk with Your Provider

Preeclampsia

What is It?

Preeclampsia is a serious blood pressure disorder that can happen to any pregnant woman during her pregnancy or up to six weeks after delivery.

Preeclampsia is the leading cause of death worldwide for women, fetuses, and newborns.

Risk to You

- Risk to Your Baby
- Seizure
- JCIZUI
- Stroke
- Organ Damage
- Death
- Premature Birth
- Death

Warning Signs

Pain in stomach or shoulder

Headache that won't go away





Nausea and vomiting

Blurred vision or seeing spots





Gaining more than 5 pounds in a week

Swelling of your hands and face





Shortness of breath

What you should do?

Call your provider right away. Finding preeclampsia early is important for a healthy pregnancy and a healthy baby.

Source:

American College of Obstetricians and Gynecologists

HYPERTENSION DURING PREGNANCY

Pre/Post Questionnaire

QUESTION	RESPONSE	
A blood pressure over 140/90 is considered hypertension.	☐ True	☐ False
High blood pressure may potentially cause harm to me or my baby.	☐ True	☐ False
Having high blood pressure increases my chance of developing preeclampsia.	☐ True	☐ False
Shortness of breath, a headache that won't go away, and sudden swelling of face or hands are all signs of preeclampsia.	☐ True	☐ False
I should call my doctor or 911 if I experience any of the above symptoms.	☐ True	☐ False

DIABETES DURING PREGNANCY

Pre/Post Questionnaire

QUESTION	RESPONSE	
Signs and symptoms of low blood sugar include sweating, irritability, lack of color and sleepiness.	☐ True	☐ False
Signs and symptoms of high blood sugar include headache, dry mouth and increased thirst.	☐ True	☐ False
Exercise helps keep blood sugar levels in the normal range.	☐ True	☐ False
You do not need to wash your hands before testing your glucose.	☐ True	☐ False
You should use the same site to administer insulin every time.	☐ True	☐ False



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This publication is available in alternate format by request. To request an alternate format, please contact Dr. Holly DiLeo at 210-829-3173. 7/21 6



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