

Obstetrics Baby	ObstetricsMother	Obstetrics - Processes
UndiagnosedSignificant Abnormality	Anaesthetic Complications	Delay in response to a call for assistance
Apgar less than 5 at 5 mins	Failure to give anti D	Obstetric conflict over case management
Meconium Aspiration	Bowel/Bladder Complications	Potential Complaint
UndiagnosedBreech	Unexplained Maternal Collapse	Poor Communication - written or verbal
Cord PH Venous <7.1 Cord PH Arterial <7.05	Latrogenic Cord Prolapse	Inappropriate Delegation
Neonatal death	Maternal death	EquipmentIssue
Undiagnosed intra-uterine growth retardation	Delay in over 30 minutes for decision to delivery for LSCS	Guideline/Protocol Violation
Unexpected term admission to neonatal unit	ShoulderDystocia	Unlabelled Infant
Cardiac massage or		
medication 10 mins of birth	Fulminating PIH/Eclampsia	Staffing
Neonatal seizure in term		
baby	FailedForceps/Ventouse	Needlestick injury
Intrapartum still birth	Laparotomy/Hysterectomy	Unavailable health records
Birth trauma	ICU Admission	
Fetal laceration at LUSCS	Acute Fatty Liver	
Stillbirth >22 weeks	Haemaglobin less than 80g/litre post delivery	
	Miscarriageafteramniocentesis	
	Over 1 hour for 2nd stage multipara	
	Post Partum Haemorrhage >1500ml	
	Pressure Sores	
	Over 3 hours for 2nd stage primagravida	
	Prolonger labour over 18 hours established	
	Post Natal Readmission	
	Pulmonary Embolism	
	Uterine Rupture	
	Retained Swab	
	3rd/4th Degree Tear	
	Thromboembolism	
	Blood Transfusion > 2 units	
	Unplanned delivery outside labour ward	
	VulvalHaematoma	
	Perineal/Abdominal wound complications	
	Medication Error	
	Return to theatre	
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Approval

Dr C. Bain, Clinical Director Obstetrics, GGC 20th April 2017