

NASG TRANSFER



Referring and Transporting
Women in the NASG

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TRAINER

Referring and Transporting Women in the NASG

In this unit, trainees will learn how to refer a woman in the NASG and how to transport a woman wearing the NASG to a higher level facility so that she can receive definitive care.

Referral process and protocols vary from place to place, so be sure to understand the referral process for the system in which you are training. Some systems use a standardized “Referral Form.” If this is the case where you are training, review the Referral Form with the trainees. If the Referral Form has not been revised to include the NASG, teach the trainees to add the time and date the NASG was applied to the Referral Form. If there is no Referral Form in the system, there is a [“Sample Referral Form”](#) at the end of the unit.

It is important to note in this unit that transportation options may vary depending on the location, and the trainer must ensure that instructions are appropriate for the setting.

The trainer should research which hospitals provide Comprehensive Emergency Obstetric Care (CEmOC) before the training and bring a list of those hospitals that provide CEmOC and are using the NASG in the management of obstetric haemorrhage. One activity of the unit is to have the trainees make a list of CEmOC hospitals for referral.

Furthermore, not only does the patient need to be transferred to a CEmOC hospital, but she also should be transferred to a CEmOC hospital where the staff knows how to use the NASG. If the staff have not been trained, they will not know how to monitor the patient or how or when to remove the NASG. Encourage the trainees to either accompany the woman or be sure someone else accompanies the woman. The trainee may need to explain that the woman will return to shock if the NASG is removed before she is stable. Depending on the capacities of the trainees, you could also help them develop a written guide for hospitals that do not use NASGs, if that looks like the only option for referrals. See the [NASG Removal Job Aid](#) for ideas.





OBJECTIVES:

By the end of this session, trainees should be able to:

- Recognize that patients in the NASG must be transported to a higher level CEmOC facility if the NASG is placed at a facility that cannot provide blood, surgery and CEmOC.
- Know the proper way to refer a patient in the NASG to a higher level facility.
- Know which local CEmOC hospitals are prepared to receive patients in the NASG.
- Understand that if the patient must be transported to a hospital that does not have clinicians trained in NASG protocol, the trainee or another person should accompany the patient to the hospital to explain the need to keep the NASG in place until the patient is stable.
- Safely move a patient to a vehicle for transport.
- Inform anyone at a non-NASG-using hospital how to remove the NASG correctly.

At the end of the unit, you will find a section called [Materials for Practice](#), which includes a list of things you will need for the practical session with trainees. You may also want to have:

- At least one NASG for demonstration purposes
- [PowerPoint presentations](#) for this unit
- [NASG Removal Job Aid](#)
- Downloaded copy of [Saving Mother's Lives: The NASG Training Video](#)
- Copies of the [Checklists for Trainers and Trainees](#)
- Any other regular training materials you use

Note: The following material is written so that it may be given directly to trainees if the trainer wishes to give printed materials as trainee handouts.



Referring and Transporting Women in the NASG

Women in the NASG need to go to the hospital. Any patient who needs the NASG is in shock. Patients in shock may die if they do not get proper care. Transfer the patient to a Comprehensive Emergency Obstetric Care (CEmOC) hospital.

Some places use a “Referral Form” when transferring a patient to the hospital. If you use a Referral Form, please fill it in and send it with the patient. If the Referral Form does not have information about the NASG on it, you could write in the time and date when the NASG was placed. If you do not use a Referral Form, you could use the [“Sample Referral Form”](#) (See Pg. 13).

When possible, only send a patient to a hospital that has staff trained on the NASG. If the staff has not been trained, they will not know how to care for the woman. They will not know how to safely remove the NASG. If the NASG is removed too soon the woman could die. If the NASG is removed in the wrong order, the woman could die. The NASG should only be removed starting at the ankles. The NASG should only be removed once the woman has stopped bleeding and her pulse and blood pressure have been normal for two hours.

Sometimes, it is not possible to transfer the woman to a hospital that uses the NASG. If you must transfer a woman to such a hospital, it is best if you or another person goes with the woman to the hospital. Once at the hospital, explain to the staff that the woman will go back into shock if the NASG is removed too soon. You could also bring/send a copy of the [NASG Removal Job Aid](#).



STEP 1

Apply the NASG as shown in the Application Unit.



**Apply the NASG
(See Application Unit)**

STEP 2



Follow Haemorrhage and Shock Protocols for your setting.

For example, start an IV, give uterotonics.

Start an IV, give uterotonics



STEP 3

If you have one, fill out a Referral Form. If there is not a place on the Referral Form with the NASG on it, write down the date and time you applied the NASG. If you do not have a Referral Form, you could use the [Sample Referral Form](#) (See Pg. 13) or you could make your own form by writing on a piece of paper the following useful information:

- Name
- Age
- Date/Time of Delivery (if delivered)
- Cause of bleeding
- Date/Time bleeding began
- Estimated Blood Loss
- Date/Time NASG applied
- IV fluids given
- Drugs or medications given
- Date/Time patient left for referral hospital

STEP 4

Whenever possible, telephone the hospital you are transferring the woman to so they are prepared for her arrival and know what condition she is in.



**Telephone the hospital
where you are transferring
the woman**



STEP 5

- You need at least two people to lift the woman wearing the NASG onto a stretcher.
- Prepare the stretcher and place it close to the patient.
- One person should stand or kneel by the patient's head.
- One person should stand or kneel by the patient's hips.
- The person by the patient's head should use one arm to lift the patient's shoulders and the other arm to lift the patient's head.
- The person by the patient's hips should place one hand under the hips and one hand under the knees.
- On a verbal/spoken signal (like "lift" or "go" or "1, 2, 3") from the person at the head, both people should lift the woman at the same time and move her to the stretcher.



Both people should lift the woman at the same time and move her to the stretcher



STEP 6

The two people should lift the stretcher at the same time. Carry the stretcher to a vehicle for transport. If using an ambulance follow the pictures below.



The two people should lift the stretcher at the same time. Carry the stretcher to a vehicle for transport



Ambulance transfers are best. If there is no ambulance, use other locally available transport



Patients can be monitored while in transit, and IV fluids should be continued



Lift the woman out of the ambulance. Both people should lift the patient's head and feet at the same time



The Patient Must Remain Wearing the NASG During Transport



The patient must remain wearing the NASG during transport

Ambulance transfers are best. If there is no ambulance, other locally available transport options can be used. The NASG is very flexible, so if there is no stretcher, you can carry the woman in a number of ways.



You can lift her and carry her in your arms



You can make a stretcher out of two sticks or boards and some strong material or canvas





If there is no ambulance the woman can ride in the car or in any vehicle



If Sending a Woman to a Non-NASG-Using Hospital

It is safer to send the woman to a hospital uses the NASG. It is most important for the woman's safety that the NASG be removed correctly and at the right time. If you cannot send the woman to a hospital that uses the NASG:

- Try to go with the woman so you can explain that the NASG needs to remain until the woman is stable; and/or
- Send a copy of the [NASG Removal Job Aid](#) with the woman.



Materials for Practice

1. NASG
2. Stretcher or means to move patient from home/lower level facility to transport vehicle
3. At least two people to practice lifting the patient onto the stretcher and practice moving the stretcher to the ambulance/transport vehicle
4. A volunteer or a model
5. Transportation (ambulance when possible) to practice moving a woman into. You do not need to practice actual travel to a hospital
6. NASG Video (transport training is at the 5 minute 18 second mark (5:18) in the NASG training video)

Activity

Make a list of hospitals that provide Comprehensive Emergency Obstetric Care (CEmOC), including blood transfusion and surgery, and are trained in the NASG. Write down the name, location and phone number for each hospital. (There may only be one.)



Trainee Checklist: Learning & Skills Self-Assessment

You can use this checklist to help you learn the steps. You can use the checklist to help you practice the steps. Practice on another health care worker or on a volunteer. Do not practice on a pregnant woman. Once you feel you know how to transport a patient, you can try demonstrating transport and referral on a volunteer or model (without looking at the checklist). Right after you do that, look at the checklist. Did you do all the steps? Did you do them in the right order? If not, practice until you can.

Referring and Transporting a Patient in the NASG [Trainee]	✓ Check If Done
STEPS TO REFER A PATIENT	
1. Fill in a Referral Form or make a “Form” from a piece of paper.	
2. Contact Referral Hospital.	
STEPS TO TRANSPORT A PATIENT	
1. Use two people to lift the patient.	
2. Prepare the stretcher and place it as close as possible to the patient.	
3. One person should kneel or stand at the patient’s head and the other person should kneel or stand beside the patient’s knees.	
4. The person at the head should place one arm under the patient’s shoulders and the other arm under the patient’s head.	
5. The second person should reach under both knees with one arm and under the hips with the other.	
6. Both people should lift the patient at the same time and move the patient onto the stretcher.	
7. Once patient is on the stretcher, both people should lift both ends of the stretcher at the same time.	
8. Do not remove the NASG while in transit.	
9. Take the patient to a hospital where they use the NASG.	
10. If not possible to take the patient to an NASG-using hospital, bring along a copy of the NASG Removal Job Aid.	

Review the checklist. If you left out two or more steps, or did them out of order, practice referring and/or transporting a patient in the NASG again.



Trainer Checklist: Skills Assessment

Use this checklist to assess the skill acquisition of the person you have trained. Tick “Yes” if the person did the step completely and in the right order. If there was anything incorrect, tick “No” and write what was incorrect in the comments box. Review with the trainee after completing the observations.



Referring and Transporting a Patient in the NASG [Trainer]			
STEPS TO REFER A PATIENT	Yes	No	Comments
1. Fills in a Referral Form or makes a “Form” from a piece of paper.			
2. Contacts Referral Hospital.			
STEPS TO TRANSPORT A PATIENT	Yes	No	Comments
1. Uses two people to lift the patient.			
2. Places the stretcher as close as possible to the patient.			
3. One person kneels or stands at the patient’s head and the other person kneels or stands beside the patient’s knees.			
4. The person at the head places one arm under the patient’s shoulders and the other arm under the patient’s head.			
5. The second person reaches under both knees with one arm and under the hips with the other.			
6. Both people lift the patient at the same time and move onto the stretcher.			
7. Once patient is on the stretcher, both people lift both ends of the stretcher at the same time.			
8. Does not remove the NASG while in transit.			
9. Takes the patient to hospital where they use the NASG.			
10. If not possible to take the patient to an NASG-using hospital, prepares to go with the patient or sends a copy of the NASG Removal Job Aid.			



Knowledge Assessment

Trainees should be able to answer the following questions. See below for correct answers. Review any incorrect responses with trainees to ensure they have understood the material.

- 1) Name the hospital where you will transport the woman in the NASG: _____

- 2) Which of the following are ways a woman in an NASG could be transported to a referral hospital? (Tick all that apply)
 - a. Ambulance
 - b. Private vehicle
 - c. Stretcher
 - d. Carried

- 3) At least two people should lift the woman in the NASG onto the stretcher. **(True/False)**

- 4) You should remove the NASG to transport the woman to the referral hospital. **(True/False)**

- 5) All patients who are in shock and are placed in the NASG outside of a referral hospital must be transferred so that they can receive blood, surgery, and definitive care. **(True/False)**



Knowledge Answers

1) Name the hospital where you will transport the woman in the NASG: _____

Answer: This hospital needs to be determined at your site.

2) Which of the following are ways the woman in an NASG could be transported to a referral hospital? (Tick all that apply)

- a. Ambulance
- b. Private vehicle
- c. Stretcher
- d. Carried

Answer: ALL responses are correct. Ideally, a woman should be transported in an ambulance, but if an ambulance is not possible, she can be transported using any of the options listed above or any other means of transportation possible.

3) At least two people should lift the woman in the NASG into the stretcher. **(True/False)**

Answer: True.

4) You should remove the NASG to transport the woman to the referral hospital. **(True/False)**

Answer: False. You should NEVER REMOVE the NASG during transport. The woman stays in the NASG until after she has reached the referral hospital, has been treated, and is stable.

5) All patients who are in shock and are placed in the NASG outside of a referral hospital must be transferred so that they can receive blood, surgery, and definitive care. **(True/False)**

Answer: True.



Sample Referral Form

Try to send a “Referral Form” with important information about the patient in the NASG to the referral hospital. If your health system does not have a standard form, this is an example of what information could be on the form. Adapt this form for your situation.

1. Patient Name _____
2. Age _____
3. Date and Time of delivery (if she is post-delivery) _____
4. Suspected cause of bleeding _____
5. Date and Time bleeding began _____
6. Estimate of amount of blood lost/number of pads soaked/clothes soaked _____
7. Date and Time NASG applied _____
8. IV fluids given (if any) type (example: Ringer’s Lactate, Hartman’s Solution, Normal Saline) and amount (example: 1 liter)
 - a. Type of fluid given _____
 - b. Amount of fluid given _____
9. Drugs given, if any, type (example: oxytocin, misoprostol), dose (example: 10IU), route (example: IM)
 - a. Name _____
 - b. Dose _____
 - c. Route _____
10. Date and Time Patient Left for Referral Hospital _____

