Appendices 1-3 of Signe Egenberg, Stein Atle Puntervoll, Pål Øian. Prehospital maternity care in Norway
Tidsskr Nor Legeforen 2011; 131: 2347–52.
This appendix has not undergone editorial revision.

Appendix 1

Stavanger/Tromsø, 1 September 2009

Prehospital maternity care and accompaniment service

- Questionnaire for Norway’s 53 maternity institutions

We are three healthcare workers with a common interest in prehospital maternity care and different professional backgrounds. Our experience is that maternity care outside of hospitals varies in organisation, practical solutions and extent. There is little documentation concerning this service. We are therefore asking you to help by answering this questionnaire. The questionnaire has been sent to you as the senior midwife at the institution. It is quite possible that it would be easiest for the midwife in the maternity department to answer the questionnaire. In the event, we hope that you will delegate the task of answering the questionnaire to the most suitable person. If the institution has more than one maternity unit, we request a joint response for all units. A similar form has been sent to Norway’s municipal midwives.

The objective of this survey is to determine the extent of prehospital maternity care and accompaniment service provided by all Norway's maternity institutions and in all municipalities in Norway.

We initially want figures from 2008.
If it is not possible to obtain exact figures, we request figures based on your experience.

Questions concerning the survey may be sent to: Signe Egenberg, signe.egenberg@lyse.net tel. 90767639. Please return completed questionnaires in the stamped, addressed envelope.

Thank you in advance for your kind cooperation!

Yours sincerely

Signe Egenberg
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"Hospital"

STATISTICS

1.

Number of births at your maternity institution in 2008:

Number of turnouts with midwife from your institution to women in labour in 2008:

Number of turnouts with gynaecologist from your institution to women in labour in 2008:

2. Number of turnouts/births in transport/non-planned home births outside institutions with midwives from your department in 2008:

<table>
<thead>
<tr>
<th>Turnout with:</th>
<th>No. Turnouts</th>
<th>Number of births at home</th>
<th>Number of births during transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulance boat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air ambulance – Doctor’s car</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Air ambulance - Helicopter</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air ambulance – Ambulance plane</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rescue helicopter</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Private car</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

3. Accompaniment service provided by local municipal midwives:

Number of arrivals at your maternity institution of patients accompanied by local municipal midwives in 2008:

How many municipalities are there in the catchment area of the maternity institution?

How many of these municipalities have a formal, written agreement concerning an accompaniment service?

4. Which municipalities have organised a support service with accompaniment to hospital?

......................................................................................................................................................

......................................................................................................................................................
5. Is there a formally organised accompaniment service at your institution?
   □ Yes    □ No

If yes, it will be very useful if you could append the written guidelines for the accompaniment service, requirements regarding turnout time, written cooperation agreements, including any intermunicipal agreement, insurance scheme, financial compensation, arrangement for return transportation for midwife etc. All information will be treated as confidential and will not be disclosed.

If no, - who provides an accompaniment service and takes care of deliveries in the municipalities where midwives do not accompany patients to maternity institutions?
   (More than one cross is possible)
   □ Ambulance personnel    □ Air ambulance doctor
   □ GP/A&E    □ Others: ..............................................

6. If your maternity institution does not have a formally organised accompaniment service, why not?
   (More than one cross is possible)
   - □ The municipalities provide the accompaniment service
   - □ Our maternity institution provides the service, but it is not formalised and we improvise each time.
   - □ There is a need, but there is no budget for an accompaniment service
   - □ Not enough midwives at our institution
   - □ There is no need for an accompaniment service
   - □ This is not regarded as the responsibility of our institution
   - □ Other (describe): .................................................................
7. If you carry out support service with accompaniment, what sort of equipment do you take with you? (More than one cross is possible)

- ☐ Special dedicated maternity equipment bag from the maternity department ☐ Transport incubator
- ☐ Maternity equipment bag on ambulance/ helicopter ☐ Neonatal ventilation bag/mask
- ☐ Electronic Doppler ☐ Pinard stethoscope
- ☐ Vacuum (Kiwi) ☐ Outlet forceps ☐ Piper’s forceps
- ☐ Cytotec tbl ☐ Bricanyl inj ☐ Adalat tbl ☐ Syntocinon inj
- ☐ Pethidine inj ☐ Morphine inj ☐ Stesolid inj ☐ Konakion inj
- ☐ Other (describe): .................................................................

8. Are women in labour whose waters have gone offered stretcher transport in the following cases:

☐ Yes, if the head was high and mobile at the last check-up
☐ Yes, if breech or transverse lie at last check-up
☐ Yes, always if the waters break
☐ No, we don’t use stretcher transport for patients whose waters break
☐ Other (describe): .................................................................

9. Who decides on the manner of transport, urgency and expertise necessary when a need is reported for transportation of a premature baby/sick neonatal born outside an institution?

☐ The duty midwife at the maternity department ☐ Duty gynaecologist
☐ Duty paediatrician ☐ Paediatrician at the nearest neonatal intensive care department
☐ Left to EMDC ☐ Handled by A&E
☐ Handled by municipal midwife/GP
10. What measures and procedures are initiated on receipt of a report of a premature birth / sick neonatal born outside a maternity institution?

…………………………………………………………………………………………………….

…………………………………………………………………………………………………….

11. Does the maternity institution have written procedures for when neonatal transportation is needed following a birth outside an institution?

☐ Yes  ☐ No

If yes, please append the applicable procedures

If no, - do you need such procedures?

☐ Yes  ☐ No

If no, - why not: ………………………………………………………………… ...................

12. Where do women in labour turn if they need accompaniment to a maternity institution?
(Responses should be given as percentages if possible)

Women in labour call the EMCD, which in turn contacts the maternity department: %

Women in labour call directly to the maternity department: %

Other (describe): …………………………………………………………………………….

%  

%  

13. Does the maternity institution use the Norwegian Index of Medical Emergencies (the Index) " when assessing the need of women in labour for transportation?

☐ Yes  ☐ No

If yes, - is the Index found to be useful and relevant?

☐ Yes  ☐ No

If no, - why not? ……………………………………………………………………………
"Hospital"
14. If someone reports a need for accompaniment by a midwife from the institution, may the resulting weakened emergency preparedness at the maternity institution be an argument for not turning out to a woman in labour? Estimate how often you do not turn out when a need for accompaniment is expressed, even though you might have “wished” to turn out?

No. in 2008

Comments: ………………………………………………………………………………………………
……………………………………………………………………………………………………………

15. If your midwives, or gynaecologists, take part in an accompaniment service, is there special training for them?

□ Yes □ No

If yes, - what does this training include?
…………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………

If no, - is there a need for such training?
…………………………………………………………………………………………………………………

If there is no special training, but it is needed, what should this training ideally comprise?
…………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………

16. Is prehospital basic training carried out for midwives, or gynaecologists with local introduction course on ambulances/air ambulances, ambulance boats or planes?

□ Yes □ No

If yes, - is this local introduction course found to be useful and relevant?

□ Yes □ No

If no, - why not? ……………………………………………………………………………………………
17. For maternity institutions without a neonatal intensive department:
    What sort of expertise have the staff of the maternity institution with respect to resuscitation/stabilisation of sick neonates/prematures before transportation to neonatal intensive care?

- Course in neonatal resuscitation
- Advanced paediatric life support (APLS)
- Paediatric life support (PLS)
- Other: ...........................................................................................................
- No specialised expertise

If no specialised expertise, what sort of expertise do you need?
Specify: ...........................................................................................................

18. Are courses in acute maternity assistance organised by your maternity institution?

- Yes
- No

If yes, - what sort of topics are included in these courses?

- Shoulder dystocia
- Breech delivery
- Vacuum
- Umbilical cord prolapse
- Haemorrhage
- Neonatal resuscitation
- Cardiopulmonary resuscitation on pregnant women
- Other: ...........................................................................................................

Comments: ...................................................................................................
...........................................................................................................................
"Hospital"

19. In our experience, good cooperation between the maternity department and professions outside the maternity institution is crucial to a good result in prehospital maternity assistance. Do you think that courses in acute obstetrics help to encourage better cooperation?

☐ Yes  ☐ No

If yes - how do you bring this about?  ………………………………

...............................................................................................

20. If courses in acute obstetrics are not organised – is there a need for such courses?

☐ Yes  ☐ No

If yes – who should be invited to attend?

- ☐ Midwives at institutions  ☐ Municipal midwives
- ☐ Gynaecologists  ☐ Paediatricians
- ☐ General practitioners/ municipal doctors  ☐ Ambulance personnel
- ☐ Others;  ……………………………………………………………………………

21. Comments to the survey/questionnaire:

...............................................................................................

...............................................................................................

...............................................................................................

Thank you for taking the time to answer!
Prehospital maternity care and accompaniment service

- Questionnaire to municipal midwives in Norway

We are three healthcare workers with a common interest in prehospital maternity care and with different professional backgrounds. Our experience is that maternity care outside of hospitals varies in organisation, practical solutions and extent. There is little documentation concerning this service. We are therefore asking you to help by answering this questionnaire. A similar form has been sent to maternity institutions in Norway.

This questionnaire is being sent to you in your capacity as municipal midwives. Since many municipal midwives have positions in more than one municipality, we would like to ask you to complete one form for each municipality you represent. If there are two or more municipal midwives in the same municipality, we would like to ask you to answer the questionnaire together.

The objective of this survey is to determine the extent of prehospital maternity care and midwife support service provided by all Norway’s maternity institutions and in all municipalities in Norway.

We initially want figures from 2008.
If it is not possible to procure exact figures, we request figures based on your experience.

Questions concerning the survey may be sent to Signe Egenberg, signe.egenberg@lyse.net tel: 90767639. Please return completed questionnaires in the stamped, addressed envelope.

Thank you in advance for your kind cooperation!

Yours sincerely

Signe Egenberg
Educational Midwife, Stavanger University Hospital
Project manager:

Stein Atle Puntervoll,
Anaesthetics Nurse/Rescueman, Norwegian Air Ambulance / CHC Norway
spuntervoll@chc.ca
STATISTICS

1. Does the municipality have a formally organised service with accompaniment by a midwife to the maternity institution?
   □ Yes        □ No

2. If Yes, is a midwife-based accompaniment service a collaboration between two or more municipalities?
   □ Yes        □ No

If there is intermunicipal cooperation, which municipalities take part in the cooperation?

………………………………………………………………………………………………………………..

What proportion of a position does the individual municipality as part of the intermunicipal service?

- Municipality: ........................................ %: ...............  
- Municipality: ........................................ %: ...............  
- Municipality: ........................................ %: ...............  
- Municipality: ........................................ %: ...............  
- Municipality: ........................................ %: ...............  

If on-call preparedness forms a part of this service, can you describe how it is organised?

………………………………………………………………………………………………………………..

………………………………………………………………………………………………………………..

If Yes, it will be of great value if you could append the written guidelines for the accompaniment service, requirements regarding turnout time, written cooperation agreements, including any intermunicipal agreement, insurance scheme, financial compensation, arrangement for return transportation for midwife etc. All information will be treated as confidential.
3. If there is accompaniment to maternity institution, who qualifies for accompaniment by a midwife?

☐ Everyone  ☐ As needed  ☐ Other criteria: …………………

4. How many women with a residential address in “your” municipality gave birth in 2008: …………..

5. How many women in labour did you accompany to the maternity institution in 2008? ………………..

6. How many unplanned home births did midwives attend in 2008? ……………

7. How many women in labour did you examine before transportation in 2008, without accompanying them to the maternity institution?

……………………………………

8. How many women in labour did you give guidance to by phone before transportation, but without examining them or accompanying them to a maternity institution?

……………………………………

9. Are there often conflicts of priorities because two or more women in labour need transport at the same time?

☐ Yes  ☐ No  - If yes; - number in 2008:

……………………………………

10. Can women in labour choose between two or more maternity institutions?

☐ Yes  ☐ No

If yes, which: …………………………………………………………………………………………………………………

11. What is the typical travel time from home to maternity institution*?

<table>
<thead>
<tr>
<th>Maternity institution:</th>
<th>Maximum:</th>
<th>Minimum:</th>
<th>Average / Typical:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time in hours and minutes</td>
<td></td>
<td></td>
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<tr>
<td>Distance in km</td>
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<th>Maternity institution:</th>
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<tr>
<th>Time in hours and minutes:</th>
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</table>

<table>
<thead>
<tr>
<th>Distance in km:</th>
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</tbody>
</table>

*We are interested in approximate figures to enable us to get an idea of the time taken to reach the maternity institution*
12. Does the municipality have special transport challenges, like roads that are closed in winter, ferries etc.?  

☐ Yes  ☐ No

If yes, what is the main challenge: ………………………………………………………………………

13. Number of births during transportation/unplanned home births in your municipality in 2008:

<table>
<thead>
<tr>
<th>Means of transport to the maternity institution:</th>
<th>Number of transportations with midwife</th>
<th>Number of transportations without midwife</th>
<th>Number of births during transportation with midwife</th>
<th>Number of births during transportation without midwife</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ambulance boat</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Own car</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Taxi</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments: ………………………………………………………………………

…………………………………………………………………………………………………….

14. Can you quantify the results of births during transportation/unplanned home births in the municipality in 2008 (unplanned births outside an institution):

- Number of uncomplicated births with healthy mother and healthy child ............
- Number of neonates with Apgar <7 after 5 minutes .........................
- Number of premature neonates <37 weeks .........................
- Number of other sick neonates .................
- No. of breech deliveries:.....................
- Number of difficult shoulder deliveries .........................
- Number of severe haemorrhages > 1000 ml ..............
- Number of retained placentas .......................
- Number of third and fourth degree tears ...................
- Other complications .................................................................

ORGANISATION

15. If you carry out accompaniment with a midwife, what sort of equipment do you take with you? (more than one cross possible)
- □ Own dedicated maternity equipment bag  □ Neonatal ventilation bag/mask
- □ Electronic Doppler  □ Vacuum (Kiwi)  □ Pinard stethoscope
- □ Cytotec tbl  □ Bricanyl inj  □ Adalat tbl  □ Syntocinon inj
- □ Pethidine inj  □ Morphine inj  □ Stesolid inj  □ Konakion inj
- □ Other (describe): .................................................................

16. Are pregnant women whose waters have broken offered stretcher transportation in the following cases:
- □ Yes, if the head was high and mobile (at the last check-up)
- □ Yes, if breech or transverse lie (at the last check-up)
- □ Yes, always if the waters break
- □ No, we don’t use stretcher transportation for patients whose waters break
- □ Other (describe):.................................................................

17. How are you, in your capacity as municipal midwife, involved in determining the means of transport, urgency and need for expertise in connection with the need for transportation of premature babies/sick neonates born outside an institution?
........................................................................................................
18. Which other municipal personnel are involved in the transportation of premature babies/sick neonates born outside an institution?

☐ Municipal GP

☐ Ambulance personnel

☐ Others, comment: .................................................................

19. How do you transport to the Neonatal Department premature/sick neonates born outside an institution? – describe the means of transport, time spent, personnel involved, use of equipment etc.

........................................................................................................

........................................................................................................

........................................................................................................

20. Do you, as municipal midwife, use the Norwegian Index of Medical Emergencies (the Index) for emergency medical assistance when assessing the need for transportation of women in labour?

☐ Yes ☐ No

If yes, - is the Index found to be useful and relevant?

☐ Yes ☐ No

If no, - why not? .................................................................

21. Are there times when you have to refuse an expressed need for accompaniment?

☐ Yes ☐ No

If yes, why: ........................................................................

Questionnaire Prehospital maternity care with figures form 2008
EXPERTISE

22. If you, as municipal midwives, take part in an accompaniment service, is there special training for this?

□ Yes □ No

If yes, - what does this training include?

………………………………………………………………………………………………………………………………………………………………………………………………………………………………

If no: - is there a need for such training? ………………………………………

23. If you have a need for more advanced specialist expertise, what should this training ideally consist of?

………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Who should be invited to attend in addition to municipal midwives?

- □ General practitioners/ municipal doctors □ Ambulance personnel
  □ Others; …………………………………………………………………………………………………

24. Is there prehospital basic training for municipal midwives with local introduction courses for ambulances/air ambulances, ambulance boats or planes?

□ Yes □ No

If yes, - is this local introduction course found to be useful and relevant?

□ Yes □ No

If no, - why not? ……………………………………………………………………………………………
25. Our experience is that good cooperation between the primary health service, the maternity institution and the EMDC is crucial to a good result in prehospital maternity assistance. Do you think that courses in acute obstetrics could encourage better interaction?

☐ Yes  ☐ No

If yes, - how?: ……………………………………………………………………………………………………………..

26. Comments on the existing organisation of prehospital maternity care

…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………

27. If you need better organisational conditions for the accompaniment service, what should this change involve, ideally?

…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………

28. Comments to the survey/questionnaire:

…………………………………………………………………………………………………………………………
…………………………………………………………………………………………………………………………

Thank you for taking the time to answer!
Prehospital maternity care and accompaniment service

We are three healthcare workers with a common interest in prehospital maternity care and with different professional backgrounds. Our experience is that maternity care outside of hospitals varies in organisation, practical solutions and extent. There is little documentation concerning this service. In order to improve our knowledge of this specialist area, we request that you help by answering this questionnaire. The questionnaire has been sent to all the emergency medical dispatch centres (EMDCs) in Norway. A similar questionnaire has been sent to all the maternity institutions and to the midwife service in all Norwegian municipalities.

The objective of this survey is to determine the extent and practice of prehospital maternity care. In this connection, we need more knowledge about the EMDCs’ procedures, their role in providing guidance and as mediators of resources to women in labour outside maternity institutions. We would like figures and statistics from 2008, if necessary based on experience.

We hope that the survey may be a useful contribution to the discussion on how the service can be designed to meet the challenges in Report no. 12 (2008-2009) to the Norwegian Storting (parliament): En gledelig begivenhet [A joyous occasion], which concerns integrated pregnancy and maternity care.

The results will be published in relevant international/national journals. We believe the results will also be of socio-political interest to the media.
The survey is supported by the Regional Centre for Emergency Medical Research and Development (RAKOS), Stavanger University Hospital (SUS) and the Norwegian Midwives’ Association (DNJ). Questions about the survey can be addressed to: Stein Atle Puntervoll; spuntervoll@chc.ca or tel: 90 19 50 50.

Please return completed questionnaires in the stamped, addressed envelope. Thank you in advance for your kind cooperation!

Yours sincerely

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ORGANISATION – EMDC; Cooperation with municipal midwives

1. Who decides whether a woman who is pregnant > 24th week or in labour needs accompaniment?
   More than one of the below may be crossed off

   □ EMDC       □ Maternity dept.       □ Municipal midwife
2. Does the EMDC have an overview of which municipalities have an accompaniment service with patient accompaniment to maternity institutions?

☐ Yes  ☐ No  ☐ Don’t know

3. Are there established procedures for when a municipal midwife must accompany a patient?

☐ Yes  ☐ No  ☐ Don’t know

If no, who decides whether the municipal midwife should accompany the patient during transport?

..............................................................................................................

4. Are there requirements regarding the turn-out time for municipal midwives?

☐ Yes: number of minutes: .........................  ☐ No

☐ Don’t know
ORGANISATION – EMDC: Organisation and turnout with midwife from maternity institution

5. Who decides whether a woman who is pregnant > 24th week or in labour needs accompaniment?

☐ EMDC    ☐ Maternity dept.    ☐ Municipal midwife

☐ GP    ☐ Others: .................................................................

6. Is there an agreement/established practice concerning attendance by maternity institution midwives at prehospital deliveries?

☐ Yes    ☐ No    ☐ Don’t know

Which maternity institutions, if any, have procedures/practice for this?

7. Are there any written indications for when a midwife from a maternity institution must turn out?

☐ Yes    ☐ No    ☐ Don’t know

If no, who decides whether a midwife should accompany the patient during transportation?
8. Are there requirements regarding the turnout time for a midwife from a maternity institution?

☐ Yes: number of minutes: ……………………  ☐ No

☐ Don’t know
ORGANISATION - Transport

9. In the case of unplanned births outside maternity institutions, how are mother and baby transported to hospital?

□ Mother and child in same ambulance with neonate lying on mother’s stomach

□ Mother and child in same ambulance with neonate lying in baby bag

□ Mother in one ambulance and neonate in transport incubator in second ambulance

□ Other: ………………………………………………………………………….

10. What criteria determine the manner in which women in labour are transported to a maternity institution?

More than one of the below may be crossed off

□ 1. We have no procedures for this

□ 2. Women in labour arrange transport themselves

□ 3. Women in labour are always offered ambulance transport

□ 4. Women in labour are offered ambulance transport for distances of more than .......... km / minutes

□ 5. Women in labour are offered ambulance transport regardless of which municipality they live in

□ 6. Ambulance if waters break, if the head is reported to be high and mobile
7. Ambulance if waters break, if breech or transverse lie

8. Ambulance is always used if waters break

9. We don’t use stretcher transport for patients whose waters break

10. Women in labour are offered an ambulance boat

11. Women in labour are offered an air ambulance helicopter

12. Women in labour are offered an air ambulance plane

13. Women in labour are offered a rescue helicopter

14. Other (describe):

Which 3 are the most usual? .............................................................................

ORGANISATION - Prematurity

11. What is the procedure for reporting premature (24-37 weeks) births?

........................................................................................................................
........................................................................................................................
........................................................................................................................

12. Is there a transport option for preterm births?
☐ Yes  ☐ No  ☐ Don’t know

Is yes, what does it consist of?

·

13. How is transport to the Neonatal Department of premature/sick neonates born outside an institution organised?

·

·

·

14. How is transport of premature/sick neonates born outside an institution to the Neonatal Department at a more intensive care level organised?

·

·

·
EXPERTISE

15. EMDC in connection with telephone communication concerning birth; who decides on the degree of urgency, red/green/yellow?

☐ EMDC  ☐ Maternity dept.  ☐ Municipal midwife

☐ GP  ☐ Others: .........................................................

16. Does the EMDC expect midwives to be familiar with the Norwegian Index of Medical Emergencies (the Index)?

☐ Yes  ☐ No

17. To what extent is the degree of urgency assessed correctly at the beginning of the transport?

Midwife:  ☐ Always  ☐ Occasionally  ☐ Seldom

GP:  ☐ Always  ☐ Occasionally  ☐ Seldom

Comments: ........................................................................................................

18. Do midwives assign a degree of urgency that agrees with the Index?

☐ Yes  ☐ No  ☐ Not relevant
19. Do ambulance personnel have the necessary expertise for providing maternity assistance during transportation?

☐ Yes   ☐ No

If yes, how have the ambulance personnel acquired the necessary expertise?

..............................................................................................................................

If no, proposals for improvements?

..............................................................................................................................

STATISTICS with figures from 2008

(If exact figures are not available, approximate figures can be used)
(If there is more than one maternity institution in the EMDC catchment area, a combined figure can be used)

20. Number of requests for assistance in connection with normal birth on due date?

21. Number of requests for help in connection with women pregnant >24 weeks / < 37 weeks / birth?
22. Number of requests for help in connection with women pregnant Week 25 with threatened premature birth?

23. Number of requests for help in connection with women pregnant in Week 38 with abdominal pains and visual disturbances?

24. Number of requests for help concerning mothers with serious post partum haemorrhage?

25. Number of actions where midwives from maternity institution have turned out to women pregnant in >24th week / in labour?

26. Number of actions where municipal midwife has turned out to women in labour?

27. Total number of transports with women pregnant > 24 weeks / in labour to maternity institution?

28. Number of ambulance transports with women pregnant > 24 weeks / in labour / neonates to maternity institution?

29. Number of ambulance boat transports with women pregnant > 24 weeks / in labour / neonates to maternity institution?

30. Number of helicopter ambulance transports with women pregnant > 24 weeks / in labour / neonates to maternity institution?
31. Number of air ambulance transports with women pregnant > 24 weeks / in labour / neonates?

32. Other types of transport assignments with women pregnant > 24 weeks / in labour / neonates?

33. □ There are no data for answering the above questions

34. Are EMDC doctors used as advisers in connection with preterm birth problems?

□ Yes  □ No

Other practice? ………………………………………………………………………………………………………

35. Experience of existing emergency preparedness and proposals for improvements: quality, cooperation, financial aspects, recruitment

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36. Comments on the existing organisation of prehospital maternity care

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37. Comments to the survey/questionnaire

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Thank you for taking the time to answer!