



<b>Policy Title: Well Mother and Baby Assessment Home Health</b>		<b>POLICY #: 10.2.35</b>	
		<b>Line of business: MCAL</b>	
<b>Department Name:</b> Utilization Management	<b>Original Date</b> 2/98	<b>Effective Date</b> 5/19	<b>Revision Date</b> 12/18, 9/22
<b>Department Head: Sr. Director, UM</b> 			<b>Date: 10/22</b>
<b>Medical Services/P&amp;T Committee: (If Applicable) PHP CMO</b> 			<b>Date: 10/22</b>

**PURPOSE**

To establish a process for Blue Shield of California Promise Health Plan's (Blue Shield Promise) Utilization Management and provide emotional and educational support to postpartum mothers, as well as a maternal and newborn physical assessment.

**POLICY**

Blue Shield Promise Health Plan shall arrange a home health visit on all post-partum mothers and infants within 48 hours of discharge from the hospital. The home health visit performed in the patient's home will meet all requirements of this document.

**PROCEDURE**

**A. Maternal Assessment**

- a. Physical Assessment
  - i. Health History
    - 1. Allergies
    - 2. Medical history
    - 3. Prior pregnancy history
    - 4. Prenatal vitamins
    - 5. Birth history
    - 6. Postpartum course
  - ii. Vital signs
  - iii. Breast/nipple changes (soft, filling, engorged, tender, redness, sore, cracked, bleeding)
  - iv. Uterine involution (fundal height & position, firm, boggy)
  - v. Perineum/Incision healing, if applicable (approximation, redness, drainage, swelling)
    - 1. Episiotomy
    - 2. Wound check for cesarean section or tubal
  - vi. Extremities (Homan's sign, edema, erythema, tenderness)
  - vii. Lochia (amount, color, presence of odor, rubra or serosa)
  - viii. Bladder/bowl function (odor, color, dysuria, frequency, urgency, hemorrhoid discomforts, BM patterns, loose, formed or hard)
  - ix. Level of pain and relief with medication and other comfort measures

- x. Proper use of medication by mother in care of breast feeding
- b. Maternal Adaptation Assessment
  - i. Activity level
  - ii. Maternal-infant attachment/consoling abilities
  - iii. Postpartum depression
  - iv. Social support
  - v. Parenting issues
  - vi. Environmental risks
  - vii. Father of baby involvement
- c. Reportable Signs to Physicians
  - i. Elevated blood pressure (>140/90 or rise of 30 Hg systolic or 15mm Hg diastolic of patient's normal blood pressure)
  - ii. Signs and symptoms of wound infection or dehiscence
  - iii. Change in pattern or excessive lochia
  - iv. Signs and symptoms of wound infection
  - v. Signs and symptoms of thrombophlebitis
  - vi. Pain not relieved by pain medication/measures
  - vii. Any signs of abuse or neglect to either mother or infant

## B. Newborn Assessment

- a. Physical Assessment
  - i. Vital signs (cardiac, respiratory, circulatory, neurological)
  - ii. Skin integrity (color, turgor, evidence of jaundice)
  - iii. Head circumference
  - iv. Fontanelles – presence of molding, caput or hematoma
  - v. Eyes (Discharge or infection)
  - vi. Abdomen
    - 1. Abdominal circumference
    - 2. Presence of bowel sounds
    - 3. Evidence of distention
    - 4. Umbilical cord site (evidence of erythema, odor or drainage)
  - vii. Nutrition
    - 1. Weight
    - 2. Feeding (frequency and amount)
    - 3. Elimination pattern (6-10 diapers/day); stool patterns consistent with feeding
    - 4. Sleep/wake cycle
    - 5. Genitalia
      - a. Circumcision without bleeding or drainage
      - b. Female without edema or discharge
- b. Reportable Signs to a Physician
  - i. Signs and symptoms of infection (temp >101, erythema, drainage, lethargy, poor feeding)
  - ii. Jaundice, pallor, cyanosis or bruising
  - iii. Diarrhea, constipation, projectile vomiting
  - iv. Weight loss, poor skin turgor, poor feeding
  - v. Poor respiratory effort (<30 or >60 breaths/min)
  - vi. Heart rate <110 or > 160 beats or if a murmur is noted
  - vii. Signs of abuse or neglect

### **C. Parent and Family Education**

- a. Maternal Self Care
  - i. Expected postpartum physical and emotional changes
  - ii. Contraception
  - iii. Perineal/wound care
  - iv. Breast care
  - v. Review warning signs to report to health care provider
  - vi. Reinforcement of postpartum follow-up appointments
- b. Newborn Care and Safety
  - i. Review normal appearance and behavior of the newborn
  - ii. Care of umbilical cord
  - iii. Care of circumcision
  - iv. Bathing/diapering/skin care
  - v. Review warning signs to report to provider
  - vi. Reinforcement of pediatric follow-up appointment and immunizations
  - vii. Infant safety
    - 1. Safety in the home
    - 2. Proper use of car seat
    - 3. Proper position for sleeping
    - 4. Proper handling of infant
    - 5. Smoking around infant
- c. Newborn Feeding
  - i. Lactation
    - 1. Advantages of breast feeding
    - 2. Proper positions of newborn while feeding
    - 3. Duration and frequency
    - 4. Identification and correction of lactation problems
    - 5. Patterns of wet diapers and stool consistency
  - ii. Bottle feeding
    - 1. Types of formula
    - 2. Proper positions of newborn while feeding
    - 3. Duration and frequency
    - 4. Patterns of wet diapers and stool consistency
  - iii. Normal Newborn Behavior and Capabilities
    - 1. Developmental stimulation
    - 2. Consoling Techniques
    - 3. Family Adaptation
    - 4. Use of immunization card

### **D. Documentation**

- a. Assessment of mother and infant during visit on Early Discharge Postpartum Progress note (proposed)
- b. Education/care provided to patient/infant/family
- c. Response by client/family of teaching/care provided
- d. Notification of physician of any reportable problems
- e. Six-week follow-up appointment or additional referrals made for patient/infant