UC11: Health Center Worker assesses for high risk conditions during pregnancy and refers to district hospital for treatment

Description: There are a host of conditions that place a mother at higher risk for morbidity/mortality during her pregnancy. Some of these are of an acuity that would encourage the mother’s triage to a district hospital for more tertiary care services. Some conditions, however, such as early anemia, can be supported through counseling and behavioral modification suggestions. This use case describes work flows and behaviors consistent with referral of high risk issues to a district hospital secondary to a scheduled or out of cycle antenatal visit…

Actors: Community Health Worker, Health Center Worker, Patient, patient record system (OpenMRS), District Health Worker, and Shared Health Record (SHR)

Pre-Conditions: Mother has been checked into the health center, and has been identified during the visit as having a high-risk health care condition.

Post-Conditions:

Special Requirements:

Event Flow Chart:

Ideal Pathway: While entering the clinical encounter into OpenMRS, health center worker notes a high risk condition which requires referral, appropriate contextual information about immediate treatment suggestions for that condition are generated and pushed to health center worker (clinical reminders/guidance, referral instructions), patient is registered in SHR as having this high-risk condition, for others to be aware of. SMS alert sent to CHW of this high-risk condition. “Alert” (not clear of the technology available in a district hospital?) sent to district hospital about impending high-risk visit.

Technology Navigation:

State Diagrams (if applicable):

Alternative Pathway(s):

* **Contextual information not available to clinician in real time**: While entering the clinical encounter into OpenMRS, patient is registered in SHR as having this high-risk condition, for others to be aware of. SMS alert sent to CHW of this high-risk condition. Alert also sent to district health center.
* **Data Entry Clerk vs. Nurse/Midwive direct entry:** real-time alerts could not be generated in this case either, given that forms are typically entered following the encounter, which is too late.
* **No patient manangement system at district hospital:** unclear how alerts could be sent to district hospital about pending transfer in this case. Need more information about technology in district hospital.

Extension Points (other use cases that link):