10A NCAC 14E .0313 POST-OPERATIVE CARE

(a) Patients A patient whose pregnancy is terminated on an ambulatory basis shall be observed in the abortion clinic for a reasonable number of hours, not less than one, to insure that no immediate post-operative complications are present. Thereafter, patients may be discharged according to a physician’s order and the clinic’s protocols. such patients may be discharged if their course has been uneventful.

(b) Any patient having an adverse condition or complication known or suspected to have occurred during or after the performance of the abortion shall be transferred to the back-up hospital for evaluation or admission.

(c) The following criteria shall be documented prior to discharge:
   (1) the patient shall be ambulatory with a stable blood pressure and pulse; and
   (2) bleeding and pain shall be controlled.

(d) Any non-ambulatory patient shall be accompanied by an attending medical or nursing staff member during any transfer within or outside the facility.

(e) Written instructions shall be issued to all patients in accordance with the rules orders of the physician in charge of the abortion service procedure and shall include the following:
   (1) symptoms and complications to be looked for; and
   (2) activities to be avoided.

(f) A dedicated telephone number to be used by the patients should any complication occur or question arise. This number shall be answered by a person 24 hours a day, seven days a week. [A recorded phone message only is unacceptable.]

(g) The clinic shall have a defined protocol for triaging post-operative calls and complications. This protocol shall establish a pathway for physician contact to ensure ongoing care of complications that the operating physician is incapable of managing.

History Note: Authority G.S. 14-45.1(a); 143B-10;
Eff. February 1, 1976;
Readopted Eff. December 19, 1977;
Amended Eff. October 1, 2015; December 24, 1979.