Organisation name Site or unit		POLICY Gynaecological assessment and urgent referral pathway	
Document ID	GYN-POL-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Standards › **Standard 12** › **Policies**

Policy · GYN-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 12.11

At a glance

- Each woman with a gynaecological problem is assessed on GYN-FRM-001.
- Urgent problems (heavy bleeding, severe pain, suspected torsion) are seen within the set time.
- A woman who needs a gynaecologist or surgery is referred the same day.
- Each referral and its time are recorded.
- Stop and get help straight away if: a woman with urgent gynaecological symptoms waits beyond the set time, or is not referred when specialist care is needed.

1. 1. Purpose

To assess gynaecological problems on a defined pathway, with a fast route to specialist care (12.11).

2. 2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility

When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. 3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. 4. Background

Gynaecological emergencies such as heavy bleeding or ovarian torsion can become life-threatening within hours. A defined pathway, with a set time for urgent review and a route to specialist care, protects women who present with them.

5. 5. Responsibilities

Role	Responsibility	Competence
Lead gynaecologist or obstetrician	Owns the pathway and the referral route	Clinician
Nurse in charge	Triages and records each presentation	Nurse

6. 6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. 7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. 9. Procedure

Step 1. Assess.

- Assess each presentation on GYN-FRM-001, and mark urgent problems at once.

Key point: Urgent first.

Step 2. Review in time.

- Review each urgent problem within the set time.

Key point: Within the set time.

Step 3. Refer.

- Refer the same day to a gynaecologist or surgical service where needed, and record it.

Key point: Same day.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. 12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Urgent gynaecology presentations reviewed within the set time	100%	Monthly	Lead gynaecologist or obstetrician	Escalate to medical director

14. 14. Records

Record	Kept in	Retention

Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. 16. Related documents

ID	Title	Use
GYN-FRM-001	Gynaecological assessment and referral record	Record

17. 17. Evidence

Reference	Note
E-009	Based on the WHO Managing complications in pregnancy and childbirth (2017) and ASF Expert Committee consensus.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. 18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

19. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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