Maternity Sepsis Algorithm
(Exercising Clinical Judgment)

**Sepsis Screen**
Likely infection
Check for 1, 2, 3 or 4

1. **IMEWS trigger for immediate review, i.e. >2 YELLOWS or >1 PINK**
2. **SIRS Response, i.e. ≥2 modified SIRS criteria**
3. **At risk of neutropenia, e.g. on chemotherapy/ radiotherapy**
4. **Clinical evidence of new onset organ dysfunction**

**Actions**

**Screen Positive**
1. Request immediate medical review
2. Place sepsis form with documentation. Sepsis form can be found in the ad-hoc tab in (MN-CMS)

**Screen Negative**
1. Follow usual management pathway
2. Usual IMEWS escalation protocol

**Medical Review**
History & examinations supports infection as likely cause of presentation
This is Time Zero

**Start Sepsis**
6+1 Bundle
Ad-hoc in (MN-CMS)

**Assess fetal well-being**
Give antimicrobials as per local antimicrobial guideline
Assess for source control

**Anaesthetic/Critical Care review for:**
Fluid resistant Shock,
Respiratory failure,
Purpuric rash
or any other organ dysfunction. Inform Consultant Obstetrician

**Assess patient’s clinical status**

- Infection and organ dysfunction – This is SEPSIS
- On pressors – This is SEPTIC SHOCK
- Infection no organ dysfunction – This is INFECTION

**Complete and sign the Sepsis Form**

**Assess clinical, haematological and biochemical response to treatment**

**Follow local antimicrobial guideline**

- **Improving**
  - Follow “Start Smart then Focus” policy

- **No change**
  - Review diagnosis and treatment, check for source control

- **Deteriorating**