



If there is
infection,
"Think SEPSIS"

(Exercising Clinical Judgment)

Maternal Sepsis is a life-threatening condition defined as organ dysfunction resulting from infection during pregnancy, childbirth, post-abortion or postpartum period (WHO 2016).

Clinical suspicion of infection?

YES



Sepsis Screen Required

Identify which of the following 4 groups the woman belongs to and escalate appropriately.
Always exercise clinical judgement.

1

IMEWS
trigger for
immediate
review, i.e.
**>2
YELLOWs
or
>1 PINK**

2

Any 1 of the following signs
of **acute organ dysfunction**:

- Altered Mental State
- RR > 30 rpm
- O₂ sat < 90%
- SBP < 90 mmHg
- HR ≥ 130 bpm
- Fetal heart rate > 160 bpm
- Mottled or ashen appearance
- Non-blanching rash
- Other organ dysfunction

3

**SIRS Response, i.e. ≥2
modified SIRS criteria listed
below.**

- Respiratory rate ≥ 20 bpm
- Heart rate ≥ 100 bpm
- Temperature < 36°C or ≥ 38.3°C
- Bedside glucose > 7.7 mmol/L
(in the absence of diabetes
mellitus)
- WCC < 4 or > 16.9 x 10⁹/L

4

**At risk of
neutropenia**
(bone marrow
failure, autoimmune
disorder or
treatment including
but not limited to,
**chemotherapy and
radiotherapy**)

Screen Positive

**START SEPSIS FORM
and escalate to medical review**

None apply

Screen Negative
**Follow usual IMEWS
escalation protocol**

Have a lower index of suspicion
for infection or sepsis in the
unwell women with risk factors

Risk factors

Pregnancy Related

- Cerclage
- Pre-term/prolonged rupture of membranes
- Retained products
- History pelvic infection
- Group A Strep. infection in close contact
- Recent amniocentesis

Non Pregnancy Related

- Age > 35 years
- Minority ethnic group
- Vulnerable socio-economic background
- Obesity
- Diabetes, including gestational diabetes
- Recent surgery
- Symptoms of infection in the past week
- Immunocompromised e.g. Systemic Lupus
- Chronic renal failure
- Chronic liver failure
- Chronic heart failure

