CONCLUSIONS

Heart Rate > 90
WBC > 12,000 or <
Heart Rate > 110 or < 50
WBC > 15,000 (prior to > 20,000 (in labor and up
Known or Suspected
Blood Glucose > 140
The Women’s and Newborns Service Line
SBP < 90  or MAP < 65
Acute mental status
Fetal Heart Rate > 160
Acute mental status
SBP <90 or MAP <65
Respiratory Rate >
Temperature > 100.9 F or
OB Resource Council
Known or Suspected
Temperature > 100.9 F
6 hour
Blood Glucose > 140
2019
than 60 minutes by June 30,
positive sepsis screen to
attain a median time from a
Service Line quality goal was to
identify sepsis and severe sepsis
and validate specific criteria to
Support the collaboration of
nurses and physicians and
Motor Sepsis Study, the
American College of
Obstetricians and Gynecologists (ACOG),
and the Association of
Women’s Health, Obstetric, and
Neonatal Nurses (AWHONO)
recommendations for early
identification and management of
maternal sepsis to decrease the
incidence of maternal morbidity
and mortality related to sepsis.
In February 2019, subject matter
experts across the Baptist Health
System collaborated to develop
and validate specific criteria to
identify sepsis and severe
sepsis in the maternal population.
This project resulted in an evidence-
based screening tool, treatment
criteria and standing orders to
support the collaboration of
nurses and physicians and
eliminate barriers to early
intervention.

The Women’s and Newborns
Service Line quality goal was to
attain a median time from a
positive sepsis screen to
antibiotic administration of less
than 60 minutes by June 30,
2019.

CONTACT
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INPATIENT MATERNAL SEPSIS SCREENING TOOL IN EPIC

INPATIENT NURSE BPA TO PLACE STANDING ORDERS

1. The Women’s and Newborns Service Line at Baptist Health
2. OB Resource Council
3. Dr. John R. Barton, MD, FACOG, & Chair, Kentucky Maternal Mortality Review Committee
4. Baptist Health Pharmacy Review Committee

SPECIAL THANKS