

MATERNAL TRIGGERS	
Temperature	≥ 38°C (100.4°F) or ≤ 36°C (96.9°F)
Pulse Ox	≤ 93%
Heart Rate	> 110 or < 50
Resp Rate	> 24 or < 12
Systolic BP	> 155 or < 80
Diastolic BP	> 105 or < 45
Altered Mental Status	anytime
Fetal HR	> 160 (Infection pathway only)

MATERNAL ASSESSMENT

Temp, Pulse Ox, HR, RR, B/P

Normal Assessment
(No abnormal triggers)
STOP here and continue to monitor

Abnormal Maternal Assessment
2 or More Triggers

Confirmed (sustained):
REQUEST PROVIDER EVALUATION
Continue toward Critical Care
Assessment Pathway

1 Severe Trigger Present
HR > 130, RR > 30, SBP ≥ 160, DBP ≥ 110,
MAP < 55, O2 sat < 90%, nurse clinically
uncomfortable with patient status*
REQUEST PROVIDER EVALUATION

Suspected Infection and/or
Abnormal Maternal Temp

Infection - Sepsis

Two or more Triggers

Notify Physician, CBC and blood cultures
Consider antibiotics, if appropriate

HR > 110 and/or
MAP < 65

Test for organ dysfunction:
lactic acid, LFTs, total bili,
creatinine, urine output

Signs of acute organ dysfunction:
lactic acid > 2 mmol/L, creatinine
> 2.5 mg/dL, O2 Sat ≤ 93%

Lactic acid > 4mmol/L
and/or MAP remains <
65 after fluids

Consider Severe Sepsis

Consider Septic Shock

Fluid Resuscitation (within 1 hour) with crystalloid bolus
30ml/kg, notify RRT, consider ICU transfer and/or consult
Goal: Map > 65 and HR < 100

Cardiopulmonary

HR > 110, MAP < 65, O2 Sat
≤ 93%, RR > 24 or Altered
Mental Status

Consider Underlying Cause

Cardiomyopathy / CHF
Myocardial Infarction
Pulmonary Edema
Pulmonary HTN
Pulmonary Embolus / DVT
Illicit Drug Use

BNP, cardiac enzymes,
EKG, echo, spiral CT

Consults
(Anesthesia, Medicine,
Critical Care, Perinatology)

**Hypertension in
Pregnancy**

SBP > 155 and/or DBP > 105,
MD notified

Hypertensive Disorders of
Pregnancy Protocol
Sustained BP > 160/110 -
Treatment indicated
(within 1 hour)

Hypertension with severe
features
Magnesium Sulfate - 4gm
Bolus and 2gm per hour,

O2 Sat < 93% or RR > 24 -
consider pulmonary edema

**Obstetrical
Hemorrhage**

**Management of
Obstetrical Hemorrhage
Protocol**

HR > 110, MAP < 65 and
Bleeding or recent surgery

Move to Stage 3
Activate MTP, CBC and
DIC panel, OB and
Anesthesia to bedside

Consider
Overlap

Consider
Overlap