

Maternity Patient



Fathers Name
 First Name
 DOB/Age
 Ward

		Date														
A Any airway threat is a medical emergency		Time														
		Score ↓														
Looks Unwell		1													1	
B Breathing	30	3													3	
	25	2													2	
	20	0													0	
	Respiratory Rate	15														
	Write the number if >30 or <5	10	3													3
		5	E													E
SaO ₂ %	>95	0													0	
	94-92	2													2	
	<91	3													3	
O2 Flow Rate write L/Min (Mask O2 must be >5L/min)	None	0													0	
Mode	N,prongs/Mask															
C Circulation	140	3													3	
	130	2													2	
	120															
	110															
	Heart Rate	100	1													1
	Write the number if >170 or <40	90	0													0
		80														
		70														
		60	1													1
		50	3													3
		40	E													E
Put ONLY the Systolic Blood Pressure in this box	200	E													E	
	190															
	180															
	170															
	160	3													3	
	Write the number if >200 or <60	150	2													2
		140														
		120	0													0
		100	1													1
		90	2													2
E = Emergency	80	3													3	
	70															
	60	E													E	
	Put ONLY the Diastolic Blood Pressure in this box	110	3													3
		100														
90		2													2	
80		0													0	
70																
60																
Write the number if >110 or <40	50	2													2	
	40															
D Disability	Alert	0													0	
	Voice	3													3	
	Pain	3													3	
Unresponsive	E													E		
E Exposure	39.0	3													3	
	38.0	1													1	
	Temperature	37.0														
	Write the number if >39.9 or <35.5	36.0	1													1
		35.0	3													3
Total K-MEWS score:																
Pathway Actions:		Done ✓														
Weight	kg															
Pain Score	0-10															
Lochia flow	Slight/Moderate If Large call Dr															

Check and document Fasting blood sugar, regular blood sugar, urinalysis and presence of oedema on back side of chart. Also note fetal heart rate and K-CEWS

Mandatory Escalation Pathway:

If Total K-MEWS score:	Do these Actions:
1-3: Normal to low level response to an illness	Manage pain, fever or distress and check fetal heart rate. Repeat vitals and fetal heart rate in 30 minutes. If K-MEWS score remains elevated discuss with Sister or midwife, consider increasing frequency of vitals, otherwise continue with 6 hourly vital signs until K-MEWS 0. Document plan of care from your discussion in the patients clinical notes
4-5: Unstable acute illness	Call Intern to review within 60 minutes. Use ISOBAR to help
6-7: Patient likely to deteriorate quickly	Call Registrar to review within 30 minutes. Use ISOBAR to help & Repeat the vitals and Fetal heart rate in 15 minutes, if K-MEWS remains 4-7 also discuss patient with SNO or Nurse in Charge if after hours. Increase frequency of vitals (30 minutely, 1, 2 or 4 hourly). Document this discussion and request for review in the patients notes. Dr to document their review
8+ Or any vital sign in 📞 zone: Patient critical. E=Emergency	Call Doctor for help immediately. Stay with the patient Support Airway, Breathing and Circulation. Give oxygen and start CPR as needed, consider status of the baby and life saving measures that can be done for it also. Document Outcome
Drs additional instructions:	

Anytime you are concerned about your patient call a Dr or talk to your SNO, regardless of vital signs or K-MEWS

