

Early detection of clinical deterioration in the pregnant and postpartum woman

Key notes on: Clinical Deterioration

- Early recognition of clinical deterioration may prevent further morbidity and even death
- Clinical deterioration is a change in clinical status that increases the chance of morbidity
- Pregnant and postpartum women may appear well with only subtle signs of illness before sudden severe deterioration – signs and symptoms that are mistaken for ‘discomforts of pregnancy’ lead to a delay in diagnosis
- Respiratory rate is consistently found to be a clinically relevant vital sign regarding deterioration
- Failed or delayed recognition of clinical deterioration is a repeat finding in maternal death reports – along with a poor understanding of severity of illness in maternity patients
- **All maternity services** should be using ‘**track and trigger**’ charting to document regular assessment – E.g. early warning charts/charts using ‘human factors’ to ‘track and trigger’ a response to an abnormal finding – with an associated **process for escalation of care**
- Rapid Response Teams/Medical Emergency Teams/Critical Care Outreach/ICU liaison nurses – may play an important role in responding to an evolving emergent clinical problem – and members of these teams need to have an understanding of maternity physiology and pathophysiology
- Request senior staff involvement early if a woman deteriorates/becomes sick – obtain a second opinion if you feel the response to the woman’s condition is inadequate

Key resources/recommended reading

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