Rapid Detection and Response Maternal Observation Chart (20 weeks Gestation - 6 weeks PP) (FORM MR59G)	Affix patient identification label in this box UR Number: Surname: Given name: Second given name:	
Hospital:	D.O.B:/ / Sex:	
		ł

Chart Number:

## **General Instructions**

You must record observations including a minimum of respiratory rate, blood pressure, pulse rate, temperature and level of consciousness/sedation:

- On admission.
- At a frequency appropriate for the patient's clinical state but not less than:
- Antenatal – twice per day if within normal limits.
- Caesarean section - 15 minutely for first hour post - delivery and hourly for up to the 4th hour post delivery and then 4 hourly for first 24 hours, then twice daily thereafter if within normal limits.
- Vaginal delivery 15 minutely for first hour post delivery then twice per day if within normal limits. •
- Hourly respiratory rate and sedation scores for 12 hours and then 2 hourly for up to 24 hours is also required in women with intrathecal or epidural morphine administration.
- As per local procedures and in accordance with SA Health Perinatal Practice Guidelines. •

You must record a set of observations including a minimum of respiratory rate, blood pressure, oulse rate, temperature, oxygen saturation and level of consciousness/sedation:

- If the patient is deteriorating or an observation is in a shaded area
- Whenever you are worried about the patient.

MDT Review is required for unexplained, unresolved, escalating pain, or if you are worried.

When graphing observations, place a dot (•) in the centre of the box which includes the current observation in its range of values and connect it to the previous dot with a straight line. If observations fall above or below graphic parameters, write the value in relevant box. For blood pressure, use the symbols indicated on the graphic chart.

### **Modifications**

Whenever an observation famodification has been made		rea, you must initiate t	the actions required fo	r that colour, unless a	~ <del>T</del>
Modifications					ernal Ot Gestation
If abnormal observations ar rationale (where a response					- 6
	Modification 1	Modification 2	Modification 3	Modification 4	wee
Date					∫ s n
Time	:	:	:	:	P
Duration					P)
Observation(s) and acceptable range					- -
Brief Rationale (Full description in medical record)					
Doctor's Signature					]
Doctor's Name (print)					]
Doctor's Designation					
Midwife/Nurse Signature					
Midwife/Nurse Name (print)					≤.
Midwife/Nurse Designation					MR59G

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Maternal Observation Chart	Sι
(20 weeks Gestation - 6 weeks PP)	Gi

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Hospital:	<u></u>				D.O.B:	//	·	_ Sex:	
Additional C	Observa	tions			1				
Date									
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Initials									
Designation									

# Interventions or Review

If you administer an intervention or review, record here and note letter in ir row over page in appropriate time column.

RDR (20 w

ntervention	Initial	Designation
	Please print	>>

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	Date																Affix patient identification label in this box	
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inu	(%)	92 - 94									92	- 94 Res	sponse Cri	teria			equired ASAP	
		Write ≤ 91									Write	≤91 •	Respiratory	y or cardiac arrest			emergency call and specif	
uo	O <sub>2</sub> Flow Rate	Write ≥ 4									Writ	≥4	Threateneo	d airway		Initiate	basic/advanced life supp	ort
Modifications	(L/min) Write value:	≤ 3										≤3	Significant	bleeding		Notify s	senior doctor responsible	for patient
fic	Delivery Method/Air											•	Any observ	ations in a purple a	zone	Increas	se frequency of observation	ons post
jdi		Write ≥ 200									Write a	200 •	Unexpecte	d or uncontrolled s	eizure	interver	ntion	
ĭ	_	190s												d MDT review				
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	(mmHg)	160s 150s										60s 50s						
	Ì	150s 140s		+					+			40s		Multi D	liscipliner	V Team (M	DT) Review	
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		120s										20s			idwife/nurse	1	doctor - check for modification	ons)
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		Write ≥ 110					V/rite					not attended within 30 mi	30 minutes esca-					
		1005								_		00s			late to MER			
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	Blood Pressure (mmFig) Pulse Rate (beats/min) Temperature (°C)	70s $60s$ $40s$ Write ≤ 39 Write ≥ 140 $130s$ $120s$ $110s$ $100s$ $90s$ $80s$ $70s$ $60s$ $50s$ $40s$ Write ≤ 39 Write ≥ 38.6 $38.1 - 38.5$ $37.6 - 38.0$ $35.1 - 35.5$ Write ≤ 35	Image: Constraint of the sector of								Write :           Write :           Write ≥           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>50s</li> <li>40s</li> <li>50s</li> <li>40s</li> <li>38.6</li> <li>38.6</li> <li>38.6</li> <li>38.6</li> <li>38.6</li> <li>38.6</li> <li>38.6</li> <li>20s</li> </ul>	Any obser New or un You are w * 3 of el of Cons re Difficu respin Easy t st	RM/RN iteria vations in a yellow explained behavior orried about the pa or more observation sciousness/Seda Descriptor It to rouse (severe atory depression)	zone ur change atient ions in the ation Pain, s squ Voice, li	Notify Shift Actions repatient • Register patient • Increas • Manage require yellow zone	Coordinator     quired     ered midwife/nurse must r     se frequency of observation     e anxiety, pain and review     ments     e, escalate to MDT Review     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye	ons v oxygen ew Duration N/A
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	Blood Pressure (mmFig) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/ Sedation	70s $60s$ $40s$ Write ≤ 39 Write ≥ 140 $130s$ $120s$ $110s$ $100s$ $90s$ $80s$ $70s$ $60s$ $50s$ $40s$ Write ≤ 39 Write ≥ 38.6 $38.1 - 38.5$ $37.6 - 38.0$ $35.1 - 35.5$ Write ≤ 35 $37.6 - 35.5$	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>50s</li> <li>40s</li> <li>50s</li> <li>40s</li> <li>50s</li> <li>38.6</li> <li>31</li> <li>21</li> </ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy f st E	RM/RN       F         iteria       vations in a yellow         explained behavior       explained behavior         or more observation       explained behavior         or more observation       explained behavior         sciousness/Seda       explained behavior         bescriptor       explained behavior         It to rouse (severe atory depression)       explained behavior         to rouse, difficulty       explained behavior         asy to rouse       explained behavior	ions in the squee voice, li voice, li	Notify Shift Actions repatient • Registe patient • Increas • Manage require yellow zone shoulder leeze ight touch	Coordinator     aquired     ared midwife/nurse must r     se frequency of observatio     e anxiety, pain and review     ments     e, escalate to MDT Revie     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye     contact	Duration   Duration   N/A   <10 seconds
3	Blood Pressure (mmFig) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/	70s         60s         50s         40s         Write ≤ 39         Write ≥ 140         130s         120s         110s         100s         90s         80s         70s         60s         50s         40s         Write ≤ 39         Write ≥ 38.6         38.1 - 38.5         37.6 - 38.0         36.1 - 37.5         35.6 - 36.0         35.1 - 35.5         Write ≤ 35         3         2         1         0	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>60s</li> <li>50s</li> <li>Lev</li> <li>40s</li> <li>50s</li> <li>38.6</li> <li>38.5</li> <li>38.0</li> <li>37.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>1</li> <li>0</li> </ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy f st E	RM/RN       F         iteria       vations in a yellow         explained behavior       explained behavior         or more observation       explained behavior         sciousness/Seda       explained         Descriptor       explained         It to rouse (severe atory depression)       expression)         to rouse, difficulty taying awake       explained behavior	ions in the squee voice, li voice, li	Notify Shift Actions repatient • Registe patient • Increas • Manage require yellow zone	Coordinator     quired     ered midwife/nurse must r     se frequency of observation     e anxiety, pain and review     ments     e, escalate to MDT Review     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye	Duration   N/A   <10 seconds
2013	Blood Pressure (mmFg) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/ Sedation Wake patient before scoring	70s         60s         50s         40s         Write ≤ 39         Write ≥ 140         130s         120s         110s         100s         90s         80s         70s         60s         50s         40s         Write ≤ 39         Write ≥ 38.6         38.1 - 38.5         37.6 - 38.0         36.1 - 37.5         35.6 - 36.0         35.1 - 35.5         Write ≤ 35         3         2         1         0         Yes	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>60s</li> <li>50s</li> <li>Lev</li> <li>40s</li> <li>50s</li> <li>38.6</li> <li>38.5</li> <li>38.0</li> <li>37.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>1</li> <li>0</li> <li>Yes</li> </ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy f st E	RM/RN       F         iteria       vations in a yellow         explained behavior       explained behavior         or more observation       explained behavior         or more observation       explained behavior         sciousness/Seda       explained behavior         bescriptor       explained behavior         It to rouse (severe atory depression)       explained behavior         to rouse, difficulty       explained behavior         asy to rouse       explained behavior	ions in the squee voice, li voice, li	Notify Shift Actions repatient • Registe patient • Increas • Manage require yellow zone shoulder leeze ight touch	Coordinator     aquired     ared midwife/nurse must r     se frequency of observatio     e anxiety, pain and review     ments     e, escalate to MDT Revie     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye     contact	Duration   Duration   N/A   <10 seconds
Jly 2013	Blood Pressure (mmFg) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/ Sedation Wake patient before scoring Wake patient before scoring	70s         60s         50s         40s         Write ≤ 39         Write ≥ 140         130s         120s         110s         100s         90s         80s         70s         60s         50s         40s         Write ≤ 39         Write ≥ 38.6         38.1 - 38.5         37.6 - 38.0         36.1 - 37.5         35.6 - 36.0         35.1 - 35.5         Write ≤ 35         3         2         1         0         Yes         No	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>80s</li> <li>30s</li> <li>30s</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>37.5</li> <li>36.0</li> <li>37.5</li> <li>36.0</li> <li>37.5</li> <li>36.0</li> <li>37.5</li> <li>38.0</li> <li>37.5</li> <li>36.0</li> <li>37.5</li> <li>38.0</li> <li>38.0</li> <li>39.0</li> <li>39.0</li> <li>30.0</li> <li>37.5</li> <li>30.0</li> <li>30.</li></ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy t st Easy t	RM/RN       F         iteria       vations in a yellow         explained behavior       orried about the paragements         or more observation       or more observation         sciousness/Seda       or         Descriptor       or         It to rouse (severe atory depression)       or         to rouse, difficulty taying awake       or         asy to rouse       or         Awake, alert       or	ions in the squee voice, li voice, li	Notify Shift Actions repatient • Registe patient • Increas • Manage require yellow zone shoulder leeze ight touch	Coordinator     aquired     ared midwife/nurse must r     se frequency of observatio     e anxiety, pain and review     ments     e, escalate to MDT Revie     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye     contact	Duration   Duration   N/A   <10 seconds
-Ar	Blood Pressure (mmFg) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/ Sedation Wake patient before scoring Wake patient before scoring	70s         60s         50s         40s         Write ≤ 39         Write ≥ 140         130s         120s         110s         100s         90s         80s         70s         60s         50s         40s         Write ≤ 39         Write ≤ 38.6         38.1 - 38.5         37.6 - 38.0         36.1 - 37.5         35.6 - 36.0         35.1 - 35.5         Write ≤ 35         3         2         1         0         Yes         No	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>50s</li> <li>Lev</li> <li>40s</li> <li>50s</li> <li>38.6</li> <li>38.5</li> <li>38.0</li> <li>37.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>35.5</li> <li>36.0</li> <li>2</li> <li>36.0</li> <li>37.5</li> <li>38.0</li> <li>37.5</li> <li>39</li> <li>38.6</li> <li>30</li> <li>30.0</li> <li>37.5</li> <li>30</li> <li>31</li> <li>32</li> <li>33</li> <li>34</li> <li>35</li> <li>35</li> <li>36</li> <li>37</li> <li>36</li> <li>37</li> <li>37</li> <li>38</li> <li>38</li> <li>39</li> <li>30</li> <li>30</li> <li>30</li> <li>30</li> <li>30</li> <li>31</li> <li>32</li> <li>33</li> <li>34</li> <li>35</li> <li>36</li> <li>37</li> <li>38</li> <li>38</li> <li>39</li> <li>39</li> <li>30</li> <li>30&lt;</li></ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy f si Easy f si F	RM/RN         iteria         vations in a yellow         explained behavior         or more observati         or more observati         sciousness/Seda         Descriptor         It to rouse (severe atory depression)         to rouse, difficulty taying awake         casy to rouse         Awake, alert         Presentation	zone ur change atient ions in the ation Ation Pain, s squ Voice, li Voice, li	Notify Shift Actions re patient • Registe patient • Increas • Manage require yellow zond	Coordinator     aquired     ared midwife/nurse must r     se frequency of observation     e anxiety, pain and review     ments     e, escalate to MDT Review     Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye     contact     N/A	Duration   Duration   N/A   <10 seconds
Created July 2013	Blood Pressure (mmFg) Pulse Rate (beats/min) Temperature (°C) Level of Consciousness/ Sedation Wake patient before scoring Wake patient before scoring	70s         60s         50s         40s         Write ≤ 39         Write ≥ 140         130s         120s         110s         100s         90s         80s         70s         60s         50s         40s         Write ≤ 39         Write ≥ 38.6         38.1 - 38.5         37.6 - 38.0         36.1 - 37.5         35.6 - 36.0         35.1 - 35.5         Write ≤ 35         3         2         1         0         Yes         No	Image: Constraint of the sector of								Write :           Write :           Write           Write ≥           38.1 -           37.6 -           36.1 -           35.6 -           35.1 -	<ul> <li>39</li> <li>140</li> <li>30s</li> <li>20s</li> <li>10s</li> <li>00s</li> <li>90s</li> <li>80s</li> <li>70s</li> <li>60s</li> <li>50s</li> <li>Lev</li> <li>40s</li> <li>50s</li> <li>80s</li> <li>33</li> <li>38.6</li> <li>38.5</li> <li>38.0</li> <li>37.5</li> <li>36.0</li> <li>22</li> <li>35.5</li> <li>32</li> <li>1</li> <li>0</li> <li>Yes</li> <li>No</li> <li>Neu/Neu/Neu/Neu/Neu/Neu/Neu/Neu/Neu/Neu/</li></ul>	Any obser New or un You are w * 3 of el of Cons re Difficul respir Easy f si Easy f si F	RM/RN         iteria         vations in a yellow         explained behavior         or more observati         or more observati         sciousness/Seda         Descriptor         It to rouse (severe atory depression)         to rouse, difficulty taying awake         casy to rouse         Awake, alert         Presentation	zone ur change atient ions in the ation Ation Pain, s squ Voice, li Voice, li	Notify Shift Actions re patient • Registe patient • Increas • Manage require yellow zond	Coordinator     aquired     ared midwife/nurse must r     se frequency of observatio     e anxiety, pain and review     ments     e, escalate to MDT Revie      Response     Brief eye opening OR     any movement OR     no response     Eye opening and eye     contact     Eye opening and eye     contact	Duration   Duration   N/A   <10 seconds

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