### OB MATERNAL SEPSIS SCENARIO

#### Preparation:
- Mannequin, delivered with baby skin to skin
- Patient name DEBRA HULAHOOPE
- Add patient band on mannequin with MRN/DOB/name
- Labor in bed broken down for delivery/repair
- Del table set up- repair in progress
- IV LR w Pitocin infusing, Magnesium infusing
- 2 extra Pumps available for IV Tylenol and Abx
- Tylenol IV labeled in Pyxis drawer
- MD to start in room at start of scenario
- WOW at Bedside for practice if EMR component
- For order set 601 use “NURSE Order set”
- For order set 600 use “MD Order set”
- Have Sepsis Kits readily avail/ discuss before SIM

#### Scenario #1:
34 yo G1 P1 s/p vaginal delivery
Was admitted for induction of labor for postdates
developed preeclampsia with severe features(mild BPs, inc Cr & AST), treated with magnesium sulfate, continues with MAG running at start of scenario, She was AROM @ 0000, 2nd stage of labor 3 hrs
Delivers @ 11:05 am, and has a complex 4th degree laceration, She is being repaired at the start of the scenario
Her QBL was 705ml. She also had Uterine atony and was treated with St. misoprostol 400 mcg
It is 11:45am at the start of scenario and the Physician is still repairing the patient

<table>
<thead>
<tr>
<th>Time</th>
<th>Scenario Flow</th>
<th>Actions by team</th>
<th>Reactions by mannequin/simulationist</th>
</tr>
</thead>
<tbody>
<tr>
<td>0:00</td>
<td>Shaking after delivery</td>
<td>Continue repair</td>
<td>Shaking, “i really don’t feel well”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Anesthesia -&gt; Demerol</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Not able to get vital signs</td>
</tr>
<tr>
<td>0:05</td>
<td>Shaking improved</td>
<td>MD continues repairing</td>
<td>T 38.6 temp oral, 40 axillary HR 124,</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>BP 147/68, RR 26</td>
</tr>
<tr>
<td>0:05-0:15</td>
<td>SIRS alert- TIME ZERO</td>
<td>Notify MD</td>
<td>The MD says “it’s because of the</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>sublingual misoprostol that her temp</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>is high”</td>
</tr>
</tbody>
</table>

**PAUSE**

SIRS ALERT
Talk through the criteria that triggered the alert
LEAD THEM TO ORDER SET 601-RN order set
*complete PAUSE if they have not performed these steps*
- Draw labs (CBC, BMP, lactic acid)
## OB Maternal Sepsis Scenario

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<tr>
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<td>Pt starts to shake again</td>
<td>MD continues with repair</td>
<td>“I really don’t feel well”</td>
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</table>
| 0:25 | Facilitator reports 10 minutes from Labs sent | Labs returned  
   Labs: WBC 23.8, Hgb 12.5, Hct 38, plt 167, lactic acid 5.8  
   RRT NOT in room although notified of lactic acid >4 | MD to enter order set 600-MD order set  
   Rapid response called/Sepsis RN  
   IV fluid bolus (30 ml/kg over 3 hours)  
   Blood cultures | T 38.6 temp oral, 40 axillary, HR 124, BP 123/57, RR 26 |
| PAUSE | LAB RESULTS | LEAD MDs TO ORDER SET 600  
   *Complete pause if they have not performed these steps*  
   • Is RRT at 85  
   • Has CHG RN been notified | Blood cultures (unable to get blood cultures after attempting for >45 minutes)  
   Antibiotics ordered (start abx after attempting blood cultures for 45 minutes, then continue to attempt blood cultures) |
| PAUSE | What if you weren’t able to get blood cultures within 45 min of TIME ZERO what do you do? | | |
| 0:45 | Pharmacy technician delivers Antibiotics | Hang Antibiotics  
   Reassure Patient and family regarding patient status and baby status | “What’s going on? Where is my baby?” |
| 1:10 | Consider transfer to ICU, pressors, central venous access | | Patient confused (change in AMS)  
   T 38.2 temp oral, 40 axillary, HR 132, BP 85/53, RR 28 |

Debrief using tool to ensure all elements are discussed