Modified Early Obstetric Warning System Guideline

MEOWS

Guideline Number:	616	Supersedes:		Classification	Clinical

Version No:	Date of EqIA:	Approved by:	Date Approved:	Date made active:	Review Date:
1		Obstetric Written Documentation Review Group	14.9.17	14.9.2017	14.9.2018
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		Obstetric Group - Extended whilst review is finalised	08/02/2022	09/02/2022	08/08/2022
		Obstetric Guideline Group - Extended whilst review is finalised	23.08.2022	25.08.2022	23.02.2023

Brief Summary of Document:	
Scope	

To be read in conjunction with:	

Owning committee/group	Obstetric Written Documentation Group

Reviews and updates		
Version no:	Summary of Amendments:	Date Approved:
1	New guideline	Sept 2017

Keywords	Modified Early Warning Scoring Systems help to improve the detection of life threatening illness

CONTENTS

1. INTRODUCTION

The well documented problem of recognising life threatening illness has led to the introduction of a number of early warning scoring systems. A MEOWS is calculated using 5 simple physiological variables.

- Mental response
- pulse rate
- systolic BP
- respiratory rate
- temperature

The principle is that small changes in these 5 variables combined will be seen earlier using MEOWS than waiting for obvious changes in individual variables.

Of all the variables respiratory rate is the most important for assessing the clinical state of a patient but is the one that is least recorded.

Respiratory rate is thought to be the most sensitive indicatory of a patient's physiological well being.

2. LEARNING POINTS FROM CRITICAL CARE

Modified Early Warning Scoring Systems improve the detection of life threatening illness. However the detection of life threatening illness alone is of little value. It is the subsequent management that will alter the outcome
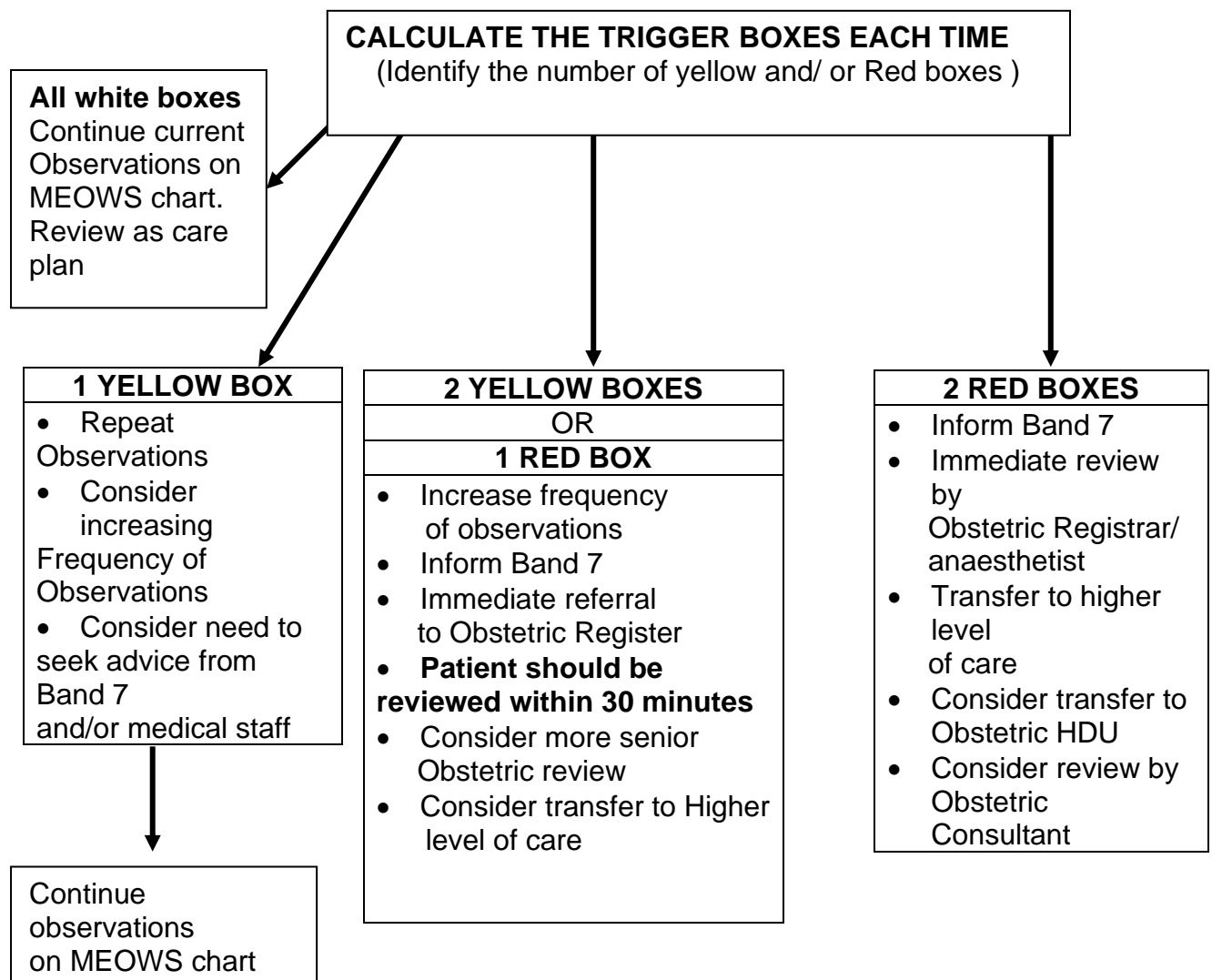
3. CRITERIA FOR USE

- All woman admitted to maternity ward:
- All post natal women , the form to accompany them home in the notes

4. FREQUENCY OF OBSERVATIONS.

Observations to be recorded as required for individual needs and the frequency documented on the form

Date	Time	Frequency of observations document below	Signature	Print
Note: For all LSCS after completion of immediate recovery observations recorded in theatre records perform 30 min for 2 hours then hourly for 6 hours. Then reassess and document frequency below				
		12 hrly □ 6 hrly □ 4 hrly □ _____hrly		
		12 hrly □ 6 hrly □ 4 hrly □ _____hrly		
		12 hrly □ 6 hrly □ 4 hrly □ _____hrly		
Exception Box . **To be signed if Observations decided not appropriate for inpatient admission**				
Date and Time	Comment			Print and sign

5. USING THE MEOWS CHART

CALCULATE THE TRIGGER BOXES EACH TIME
(Identify the number of yellow and/ or Red boxes)

All white boxes
Continue current Observations on MEOWS chart. Review as care plan

1 YELLOW BOX
- Repeat Observations
- Consider increasing Frequency of Observations
- Consider need to seek advice from Band 7 and/or medical staff

Continue observations on MEOWS chart

2 YELLOW BOXES
OR
1 RED BOX
- Increase frequency of observations
- Inform Band 7
- Immediate referral to Obstetric Register
- **Patient should be reviewed within 30 minutes**
- Consider more senior Obstetric review
- Consider transfer to Higher level of care

2 RED BOXES
- Inform Band 7
- Immediate review by Obstetric Registrar/ anaesthetist
- Transfer to higher level of care
- Consider transfer to Obstetric HDU
- Consider review by Obstetric Consultant

6. REFERENCES

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