

All Wales Neonatal Network Guideline

Early Onset Sepsis Risk Assessment for Infants >37 Weeks Gestation Born in Midwifery led settings with total duration rupture of membranes >24 hours.

Where a woman is in established labour within 24 hours of rupture of membranes (ROM) and is otherwise suitable for midwifery led intrapartum care, a midwifery led setting is a safe birthing environment and no additional monitoring is recommended during labour or in the postnatal period. The chance of early onset neonatal sepsis (EOS) is very low^{1,2}.

Where a woman is not in established within 24 hours of ROM (pre-labour rupture of membranes) obstetric led care is appropriate with birth recommended in a unit where there is access to neonatal services¹. This is standard care and women should be informed of this recommendation in the antenatal period.

When birth occurs in a midwifery led setting and total duration rupture of membranes is more than 24 hours, the EOS risk assessment will not be applied to these infants. Current routine postnatal care will be provided in line with national guidance^{1,2,3,4}, this will include routine neonatal observation and early discharge at 2-3 hours of age where appropriate. Parents will need to be informed of the different EOS risk assessment that would be applied when compared to birth in obstetric led secondary care environment, and provided with the opportunity to make an informed choice about the sepsis risk assessment and newborn observations.

Midwifery actions in the case of total duration of rupture membranes of more than 24 hours at birth, with no co-existing complication:

- Babies with this history will be identified at birth.
- Parents of identified babies will be provided with the Parent Information leaflet, and should be informed that; in a healthy term baby the risk of EOS in this instance is low < 1/1000. In healthy babies where no red flag/non red flag events are identified as per NICE (2021) 'enhanced' neonatal observation, screening or antibiotic therapy would not be required, the guideline would recommend routine postnatal care (NICE 2021b). Within the EOS risk assessment guideline initial review by the neonatal team would be recommended and observation for 24 hours would be offered.
- If parents wish to be referred to the neonatal team for initial assessment as per EOS risk assessment guideline,
- Transfer to nearest obstetric / neonatal hospital unit should be arranged in after discussion with the neonatal /midwifery team.
- Observation of the baby will be completed, in the midwifery setting, and documented on a NEWTTS chart at 1 and 2 hours of age.
- Where all observations are within normal parameters, transportation will be via parents own car or hospital taxi, a midwife will not need to accompany the baby during transfer from the FMU or home birth.

Reference list

- 1.National Institute for Health and Care Excellence (2014).*Intrapartum care: care of healthy women and their babies during childbirth*. Retrieved from: <https://www.nice.org.uk/guidance/cg190/resources/guidance-intrapartum-care-care-of-healthy-women-and-their-babies-during-childbirth->
- 2.National Institute for Health and Care Excellence (2021) Neonatal infection : antibiotics for prevention and treatment. Retrieved From: <https://www.nice.org.uk/guidance/ng195>.
- 3.National Institute for Health and Care Excellence (2021b). Postnatal Care. Retrieved from: <https://www.nice.org.uk/guidance/ng194>
- 4.Welsh Government (WG) (2020) The All Wales Clinical Pathway for Normal Labour. Cardiff: Welsh Government

