

FAST-M DECISION TOOL



| | | | |
|--------------|--------------------|--------------|-------------|
| Patient name | Tiamika Tembo | Staff name | |
| DOB / Age | 26/02/1988 | Role / Cadre | |
| Patient ID | C A S E 3 | Signature | |
| Date | ____ / ____ / ____ | Time | ____ : ____ |

**START
HERE**

- ☒ Abnormal vital signs or MEOWS Chart trigger?
(Respiratory rate / Temperature / Heart rate / Blood pressure / Urine output / Mental state / Looks unwell)
- OR ☐ Concerned about a potential maternal infection?
- OR ☐ Fetal heart rate of 160 beats per minute or more

COULD THE PATIENT HAVE AN INFECTION?

| PELVIS | ABDOMEN | CHEST | WOUND | OTHER |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Offensive vaginal discharge <input type="checkbox"/> Vaginal bleeding <input type="checkbox"/> Delay in uterine involution | <input type="checkbox"/> Abdominal pain <input type="checkbox"/> Urinary symptoms <input type="checkbox"/> Vomiting / diarrhoea | <input type="checkbox"/> Cough / shortness of breath / sore throat <input type="checkbox"/> Breast erythema / pain | <input checked="" type="checkbox"/> Discharging wound / wound dehiscence <input type="checkbox"/> Swollen / painful cannula site | <input type="checkbox"/> Fever / rigors / malaise <input type="checkbox"/> Headache / neck stiffness / rash <input type="checkbox"/> Other: <input type="text"/> |

ARE ANY SEPSIS **RED** FLAGS PRESENT?

☐ **Respiratory rate**
25 breaths per minute or more
☐ **Heart rate**
120 beats per minute or more
☐ **Systolic blood pressure**
89 mmHg or less
☐ **Diastolic blood pressure**
39 mmHg or less
☐ **Not passed urine**
in over 18 hours (less than 0.5 ml/kg/hr if catheterised)
☐ **Mental state**
Not altered

ARE TWO OR MORE SEPSIS **YELLOW** FLAGS PRESENT?

☐ **Respiratory rate**
21 – 24 breaths per minute
☒ **Temperature**
35.9 °C or less OR 38°C or more
☐ **Heart rate**
100–119 beats per minute
☐ **Systolic blood pressure**
90 – 99 mmHg
☐ **Last passed urine**
12 – 18 hours ago
☒ **Looks unwell**

REVIEW BY NURSE / MIDWIFE / CLINICIAN

Continue to monitor maternal vital signs **HOURLY** and **REVIEW** the patient within three hours

Review taken place within three hours? ☐ YES ☐ NO

Date / / Time :

Recognise infections **EARLY** and start appropriate antibiotics.

Are antibiotics required? ☐ YES ☐ NO

**START FAST-M
TREATMENT
BUNDLE NOW**

Urgent review by nurse / midwife / clinician and take action within **ONE HOUR**

IF ANY RED FLAGS DEVELOP

LOW RISK OF SEPSIS

- Review and manage appropriately: treat non-severe infections early to prevent sepsis.
- Continue to monitor inpatients using the MEOWS Chart.
- Educate patients on warning signs of infection when discharged.

SUSPECT SEPSIS, START FAST-M