

FAST-M DECISION TOOL



Patient name	Grace Matola	Staff name	
DOB / Age	13/05/1986	Role / Cadre	
Patient ID	C A S E 5	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 checked="" 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 type="checkbox"/> Discharging wound / wound dehiscence <input type="checkbox"/> Swollen / painful cannula site	<input checked="" 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

