



# Jefferson Einstein Philadelphia Hospital

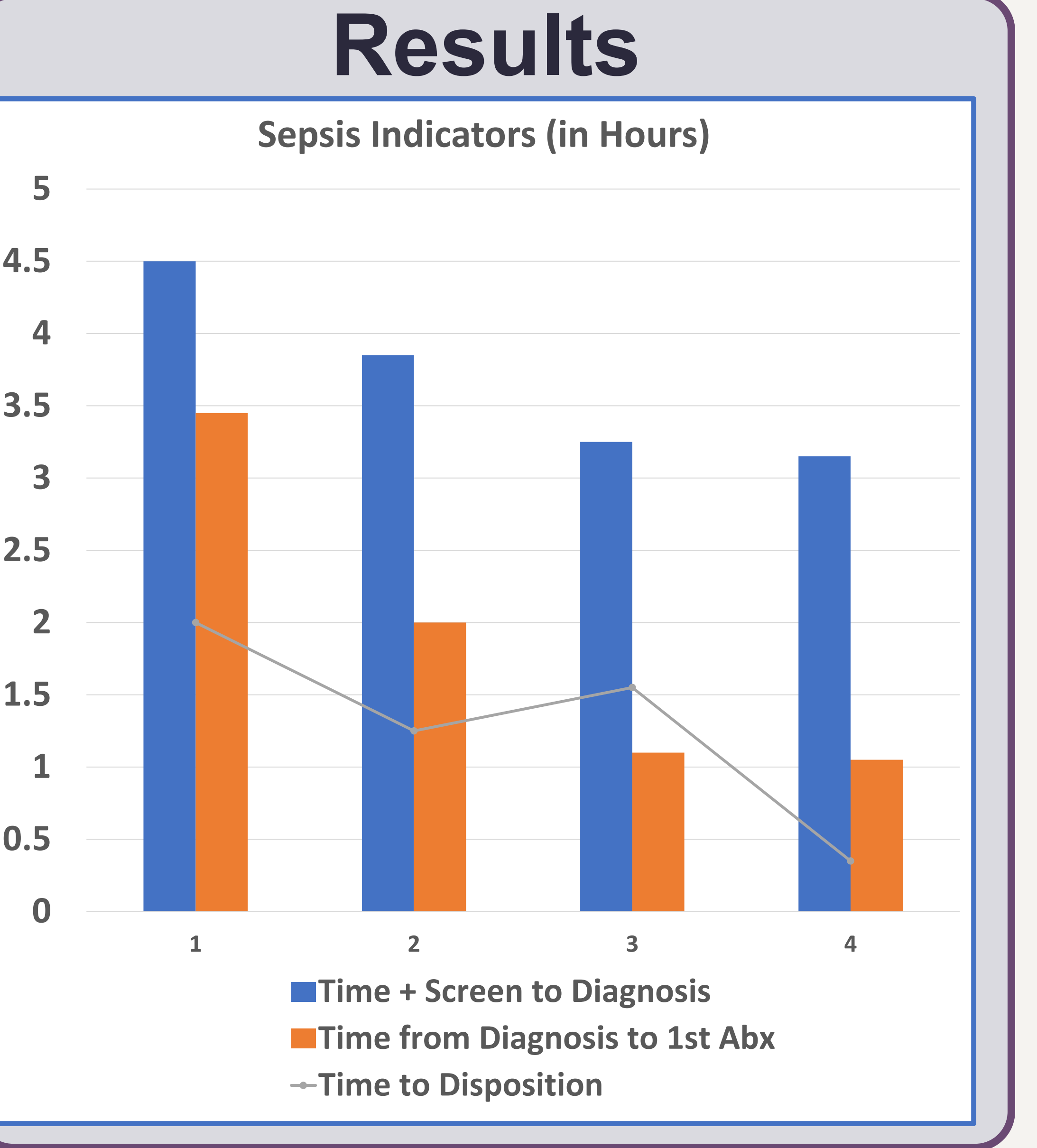
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## Problem Statement

Jefferson Einstein Philadelphia Hospital (JEPH) did not have a standardized identification or management process for patients with maternal sepsis. The PA PQC Sepsis Sprint provided the impetus to develop a process for maternal sepsis oversight.

Based on the PA PQC focus on sepsis, the legacy Jefferson Evidence Based Practice Council (EBPC) decided to adopt a sepsis guideline developed by Thomas Jefferson University Hospital (TJUH) for all five legacy Jefferson delivering hospitals. This guideline was based on the CMQCC sepsis framework.

- ## Key interventions
- Created a multi-disciplinary team consisting of Maternal Fetal Medicine, Obstetrics, and Nursing
  - Participated in the PA PQC Sepsis Sprint
    - Increased awareness of Urgent Maternal Warning Signs (UMWS) through placement of posters in every out-patient OB office exam room, Antenatal Testing unit rooms, in-patient ante/intra/post partum rooms, and the ED
    - Placed UMWS information in new obstetric patient packets in the out-patient OB offices and in the antepartum in-patient packets
  - Educated all provider and nursing staff on the EBPC sepsis guidelines/algorithm
  - Worked with Pharmacy to ensure understanding of new antibiotic protocols
  - Developed audit tool with focus on timing of identification, diagnosis, initiation of treatment, and proper disposition of patient to a higher level of care if warranted
  - Go-live date 2/17/2026
  - PDSA #1 – added timing of first antibiotic administration to audit tool
  - PDAS #2 – working with Pharmacy to add initial antibiotics to Omnicell



## Focus Area

Develop and implement a standardized maternal sepsis identification and management algorithm

- ## Measures
- Time from positive screening to diagnosis of sepsis (Goal = 3 hours)
  - Time from diagnosis of sepsis to first antibiotic administration (Goal = 1 hour)
  - Time from diagnosis of sepsis to proper disposition to higher level of care (if warranted) (Goal = 3 hours)

## Peer Learning

On this topic, our team would most like to learn from our peers how to hardwire the data collection, that currently is initiated by the primary RN.

- ## Recognitions
- A special thank you to Karley Dutra, MD, and Jessica Abrams, MSN, RNC-OB, C-EFM, CBC, for developing the initial sepsis guideline at TJUH, without which this work would have been extremely delayed
  - Thank you to the JPEH Sepsis Workgroup for their continued investment in this work