MATERNITY UNIT
GUIDELINE:

POST CAESAREAN SECTION INFECTION SCREEN

SCOPE:
All midwives, nurses and obstetricians working in the maternity unit

AUTHOR:
Core Midwife and Infection control coordinator

PURPOSE:
To identify post caesarean (c/s) infections

GUIDELINE: Wound infection generally develops four to seven days after the caesarean. Early wound infections (in the first 24 to 48 hours) are usually due to group A or B beta-hemolytic Streptococcus and are characterised by high fever and cellulitis. Later infections are more likely to be due to Staphylococcus epidermis or aureus, Escherichia coli, Proteus mirabilis, or cervicovaginal flora (Up to date, 2016).

<table>
<thead>
<tr>
<th>ACTION</th>
<th>RATIONALE</th>
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<td>Follow the immediate post-operative care of women and babies following a caesarean section of the initial 12-24 hours and then continue with 4 hourly temperatures to be taken post c/s for at least 4 days (not during the night if asymptomatic unless woman is awake – take early in the morning so that there is a recording ready for the obstetrician) The observations recordings should be documented in the maternity clinical information system (MCIS) Temperature taken as per Genius 2 tympanic thermometer.</td>
<td>To monitor for any signs of infections post c/s So the pattern and any changes are obvious For consistency and accuracy of temperature recordings</td>
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<td>If a woman has a pyrexia of 38°C or above on any occasion, inform the obstetrician on call and repeat her observation more frequently.</td>
<td>To obtain a management plan</td>
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<td>Blood cultures are to be taken. If there is ooze from the incision a wound swab should also be taken for culture. Urine, CBC and other tests may also be ordered by the obstetrician. Obtain samples before commencing any treatment and identify the obstetrician as the acknowledger on the request form.</td>
<td>To ascertain if there is an infection present</td>
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Blood cultures: Ideally take two sets at different times when the woman is spiking a temperature. Any positive blood culture should be phoned to the on call obstetrician stat.

- The best place to attach the patient’s sticky label is around the neck of the bottle. Both the bar code on the blood culture label and the disk in the bottom of the bottle are used by the Bactec Analyser and need to be kept unobscured.

**Note - Blood Cultures must be taken by someone who has had the appropriate training e.g. O & G, House Officer, ED nurse, midwife, as per TDH intravenous Therapy Manual and TDH Blood Collection Recommended Devices**

The person taking the infection screen is to ensure that there is ongoing checking of results through i-Soft and reporting results to the obstetrician on call as soon as possible.

**Laboratory times and procedures**

The laboratory is manned 8.00 a.m. to 5.00 p.m. Monday to Friday and ‘on call’ hours only on Saturday and Sunday. The **CUT-OFF** time for accepting specimens on weekdays is 1600 hours. At the **WEEKEND THE CUT-OFF TIME IS 0930 FOR MICROBIOLOGY SPECIMENS**.

For any urgent work outside of these hours, please contact the on call technologist.

If the sample is not urgent:
- Urine – store in the fridge.
- Blood cultures can be held in incubator in laboratory lobby.
- The CBC/differential haematology blood specimen should be kept in the fridge and preferably processed within 6 hours.

**ASSOCIATED DOCUMENTS:**

Hauora Tairāwhiti - Intravenous therapy manual
Hauora Tairāwhiti - Blood collection recommended devices
Maternity guideline - Preparation and care of caesarean sections
Maternity guideline - Postnatal care of caesarean sections
Up To Date Caesarean Delivery: Postoperative issues. November 2016

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**Next Review Date:** 01/02/2020