





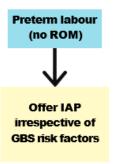
Wessex Intrapartum Care Network Pathways

University Hospital Southampton WHS Portsmouth Hospitals WHS



Isle of Wight NHS Hampshire Hospitals

No 2: Known GBS risk factors at the point of birth - Nov 2024



*GBS Risk factors

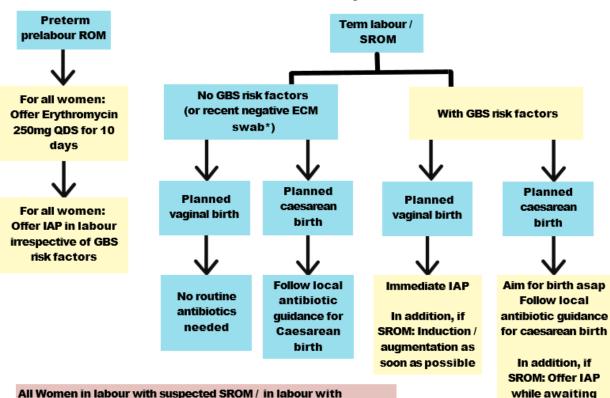
Maternal: Current or previous GBS carrier (detected PV or in urine)

Fetal: Previous infant GBS (colonised or invasive disease)

Postnatal neonatal observations

- If observations required document on NEWTT chart alongside behaviours and feeding pattern.
- · Follow local guidance on observations including recommendation for those that have not had antibiotics >4 hours before birth or declined IAP.

For Pregnancy see 'Antenatal care pathway 19'



All Women in labour with suspected SROM / in labour with

- PYREXIA (>37.5°C on 2 occasions 2 hours part or >38°C at any point)
- · or SUSPECTED SEPSIS

Follow local SEPSIS guideline and offer broad spectrum antibiotics including antibiotics for preventing early onset GBS infection

Women with GBS either declining IAP or birthing at home require individualised discussion of care.

ROM = rupture of membranes

IAP = intrapartum antimicrobial prophylaxis

- Benzylpenicillin recommended.
- If mild penicillin allergy, a cephalosporin can be used.
- · If severely allergic, vancomycin/ clindamycin dependent on local quidelines)

Offer ASAP once labour has started.

*ECM = enriched culture medium (if offered locally)

Screening for GBS for women who have tested positive in a previous pregnancy and not had an affected infant can be performed by ECM swab around 3 weeks before expected birth. If negative treat as no GBS

transfer to theatre