

# APPENDIX 1: Kaiser Newborn Sepsis Calculator screen shots, 2015.

## RESEARCH

### Probability of Neonatal Early-Onset Sepsis Based on Maternal Risk Factors and the Infant's Clinical Presentation

Predictor	Scenario
Incidence of Early-Onset Sepsis	0.3/1000 live births (KPNC incidence)
Gestational age	<input type="checkbox"/> weeks <input type="checkbox"/> days
Highest maternal antepartum temperature	<input type="text"/> Fahrenheit
ROM (hours)	<input type="text"/>
Maternal GBS status	<input type="radio"/> Negative <input type="radio"/> Positive <input type="radio"/> Unknown
Type of intrapartum antibiotics	<input type="radio"/> Broad spectrum antibiotics $\geq$ 4 hrs prior to birth <input type="radio"/> Broad spectrum antibiotics 2-3.9 hrs prior to birth <input type="radio"/> GBS specific antibiotics $\geq$ 2 hrs prior to birth <input type="radio"/> No antibiotics or any antibiotics < 2 hrs prior to birth

	Risk per 1000/births	Clinical Recommendation
<b>EOS Risk @ Birth</b>		

Clinical Exam	Risk per 1000/births	Clinical Recommendation
Well Appearing		
Equivocal		
Clinical Illness		

Classification of Infant's Clinical Presentation (Hide)

Clinical Exam	Description
Clinical Illness	<ol style="list-style-type: none"> <li>Persistent need for NCPAP / HFNC / mechanical ventilation (outside of the delivery room)</li> <li>Hemodynamic instability requiring vasoactive drugs</li> <li>Neonatal encephalopathy /Perinatal depression               <ul style="list-style-type: none"> <li>Seizure</li> <li>Apgar Score @ 5 minutes &lt; 5</li> </ul> </li> <li>Need for supplemental O<sub>2</sub> <math>\geq</math> 2 hours to maintain oxygen saturations &gt; 90% (outside of the delivery room)</li> </ol>
Equivocal	<ol style="list-style-type: none"> <li>Persistent physiologic abnormality <math>\geq</math> 4 hrs               <ul style="list-style-type: none"> <li>Tachycardia (HR <math>\geq</math> 160)</li> <li>Tachypnea (RR <math>\geq</math> 60)</li> <li>Temperature instability (<math>\geq</math> 100.4°F or &lt; 97.5°F)</li> <li>Respiratory distress (grunting, flaring, or retracting) not requiring supplemental O<sub>2</sub></li> </ul> </li> <li>Two or more physiologic abnormalities lasting for <math>\geq</math> 2 hrs               <ul style="list-style-type: none"> <li>Tachycardia (HR <math>\geq</math> 160)</li> <li>Tachypnea (RR <math>\geq</math> 60)</li> <li>Temperature instability (<math>\geq</math> 100.4°F or &lt; 97.5°F)</li> <li>Respiratory distress (grunting, flaring, or retracting) not requiring supplemental O<sub>2</sub></li> </ul> </li> </ol> <p>Note: abnormality can be intermittent</p>
Well Appearing	No persistent physiologic abnormalities