

## Maternity Severity Assessment Code (SAC) examples 2018–19

This list is for guidance only. All events should be rated on actual outcome for the consumer.

See also the Always Report and Review list 2017–18<sup>1</sup> and the SAC rating and triage tool for adverse event reporting<sup>2</sup>.

<b>SAC 1</b> <b>Death or permanent severe loss of function</b>	<b>SAC 2</b> <b>Permanent major or temporary severe loss of function</b>
<ul style="list-style-type: none"> <li>• Unexpected neonatal death – differs from the immediate expected outcome of care.</li> <li>• Unexpected intra-uterine death at term – differs from the immediate expected outcome of care.</li> <li>• Unexpected peripartum hysterectomy – differs from the immediate expected outcome of care.</li> <li>• Maternal death during pregnancy or within 42 days from end of pregnancy (including labour).</li> <li>• Maternal suicide (during pregnancy or within 42 days of birth).</li> <li>• Neonatal hypoxic brain injury resulting in permanent brain damage (or permanent and severe loss of function).</li> <li>• Maternal hypoxic brain injury resulting in permanent brain damage (or permanent and severe loss of function).</li> <li>• Delayed recognition of patient deterioration resulting in permanent disability or death.</li> </ul>	<ul style="list-style-type: none"> <li>• Medication or treatment plan error resulting in major harm (eg, requiring dialysis, intervention to sustain life, anaphylaxis).</li> <li>• Infant fall resulting in fracture or other significant injury.</li> <li>• Maternal fall resulting in fracture or other significant injury.</li> <li>• Perineal trauma – grade 4 tear involving temporary or permanent loss of sphincter function.</li> <li>• Eclampsia following admission in woman with known pre-eclampsia.</li> <li>• Hospital acquired stage 3, 4 or unstageable pressure injury.</li> <li>• Delayed recognition of patient deterioration resulting in cardiopulmonary resuscitation and/or intubation, or unplanned transfer to intensive care unit (ICU)/high dependency unit (HDU)/neonatal intensive care unit (NICU)/1:1 care, or to another hospital for higher acuity care.</li> </ul>

<sup>1</sup> Available at: [www.hqsc.govt.nz/our-programmes/adverse-events/publications-and-resources/publication/2936](http://www.hqsc.govt.nz/our-programmes/adverse-events/publications-and-resources/publication/2936)

<sup>2</sup> Available at: [www.hqsc.govt.nz/our-programmes/adverse-events/publications-and-resources/publication/2937](http://www.hqsc.govt.nz/our-programmes/adverse-events/publications-and-resources/publication/2937)

<p style="text-align: center;"><b>SAC 3</b></p> <p style="text-align: center;"><b>Permanent moderate or temporary major loss of function</b></p>	<p style="text-align: center;"><b>SAC 4</b></p> <p style="text-align: center;"><b>Requiring increased level of care including:</b></p> <ul style="list-style-type: none"> <li>• <b>review and evaluation</b></li> <li>• <b>additional investigations</b></li> <li>• <b>referral to another clinician.</b></li> </ul>
<ul style="list-style-type: none"> <li>• Stage 2 pressure injury.</li> <li>• Sepsis in pregnancy requiring higher level of care.</li> <li>• Maternal influenza requiring ICU/HDU admission.</li> <li>• Medication error requiring additional treatment.</li> <li>• Unanticipated admission to NICU for neonate for longer than 24 hours.</li> <li>• Unplanned return to operating theatre.</li> <li>• Neonate requiring cooling for suspected neonatal encephalopathy.</li> <li>• Postpartum haemorrhage requiring blood transfusion of 3 units or greater.</li> <li>• Perineal trauma – grade 3 tear.</li> <li>• Injury following shoulder dystocia manoeuvres (to infant and/or mother).</li> <li>• Anaesthetic complications requiring ICU/HDU admission.</li> <li>• Pulmonary embolism/deep-vein thrombosis during admission or within 42 days of discharge.</li> <li>• Organ trauma during caesarean section.</li> </ul>	<ul style="list-style-type: none"> <li>• Medication error – no harm.</li> <li>• Stage 1 pressure injury.</li> <li>• Delay in response and/or escalation requiring additional monitoring.</li> <li>• Anaesthetic complication requiring additional monitoring or intervention ie, dural tap or dural puncture headache.</li> </ul>