

O85 Puerperal sepsis

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According to The World Health Organization (WHO), puerperal sepsis is defined as an infection of the genital tract occurring at any time between the rupture of membranes or labour and the 42nd day postpartum, in which two or more of the following are present:

- pelvic pain
- fever (oral temperature 38.5°C or higher on any occasion)
- abnormal vaginal discharge, for example, presence of pus
- abnormal smell/foul odour of discharge
- delay in the rate of reduction of the size of the uterus (<2 cm/day during the first 8 days)¹.



While not a common cause of mortality in Australia, puerperal sepsis is one of the five leading causes of maternal mortality worldwide (the others being hypertension, haemorrhage, obstructed labour and unsafe abortion)².

The International Statistical Classification of Disease and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) Eleventh Edition Tabular information for O85 *Puerperal sepsis* notes:

Puerperal:

- endometritis
- peritonitis

Use additional code ([Chapter 1](#)) to identify sepsis, if applicable — see *Alphabetic Index: Sepsis*

Use additional code to identify localised infection:

- *endometritis* ([N71.-](#)).
- *peritonitis* ([N73.3](#), [N73.5](#)).

Use additional code ([B95–B97](#)) to identify infectious agent in localised infection.

Excludes: obstetric pyaemic and septic embolism ([O88.3](#))
 sepsis during labour ([O75.3](#))

¹ World Health Organisation 1992, 'The prevention and management of puerperal infections. Report of a technical working group. Division of Family Health, Maternal Health and Safe Motherhood Programme Geneva' retrieved 8 January 2021, <http://apps.who.int/iris/bitstream/10665/59429/1/WHO_FHE_MSM_95.4.pdf?.ua=1>

² Lawson, G.W. and Keirse, M.J.N.C 2013, 'Reflections on the Maternal Mortality Millennium Goal' Birth issues in Perinatal Care, Reading online, vol. 40, issue. 2, retrieved 8 January 2021, <<https://doi.org/10.1111/birt.12041>>

The assignment of this code is supported by Australian Coding Standard (ACS) 0110 *SIRS, sepsis, severe sepsis and septic shock*:

When a patient has sepsis classified to O85 assign an additional code from Chapter 1 *Certain infectious and parasitic diseases* ([A00-B99](#)) to indicate the type of sepsis.

A recent data quality review identified a significant number of episodes of care in the Queensland Hospital Admitted Patient Data Collection (QHAPDC) where O85 *Puerperal sepsis* had been assigned without a supporting additional code. These episodes of care have been reviewed and updated.



Why it is important to assign the additional codes?

Data from the Queensland Hospital Admitted Patient Data Collection relating to sepsis are used to develop statewide and national protocols, programs and guide policy. For these protocols and programs to be effective, sepsis data need to be of high quality. Decision making is only as good as the data that support it.

Poor sepsis data quality could result in delayed time to action (such as diverting quality improvement analysis time to understand the inaccuracies in the data) or misallocation of resources (such as poorly targeted quality improvement activities, education audits or interventions on specialties that shouldn't be prioritised).

Ensuring that supporting diagnosis codes are assigned with O85 Puerperal sepsis guarantees that the context of the clinical picture is accurately represented, and the data are of high quality.

For more information about the Queensland Health Statewide Sepsis Program go to <https://qheps.health.qld.gov.au/psu/sepsis/sepsis-program>