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Waterloo Regional
Health Network

Modified Early Obstetric Warning System (MEOWS) Provider Reference Tool

May 2026





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What is MEOWS?

The Modified Early Obstetric Warning System (MEOWS) is a standardized clinical tool used to improve the detection of, and response to, physiological deterioration in the perinatal population. Its primary goal is to reduce severe maternal morbidity and mortality associated with delayed recognition and response to clinical decline. Unlike assessment approaches that rely on individual parameters alone, MEOWS evaluates all recorded parameters collectively to provide a more comprehensive picture of a patient's condition.

Who Does This Apply To?

MEOWS applies to:

- Pregnant and postpartum inpatients (up to 6 weeks postpartum)
 - excluding ICUs, PACU, OR
- Emergency Department patients that are pregnant and postpartum (up to 6 weeks)

Assessment Parameters

A total MEOWS score is calculated in Cerner from the following parameters:

PARAMETER	NORMAL	YELLOW	RED
Temperature (°C)	36.0-37.9	35.0-35.9 or 38.0-38.4	38.5 or higher
HR (bpm)	50-109	40-49 or 110-129	39 or lower or 130 or higher
SpO ₂ (%)	95-100	90-94	89 or lower
Supplemental O ₂	Room Air		Supplemental O ₂ needed
RR (breaths/min)	10-20	21 - 29	9 or lower or 30 or higher
SBP (mmHg)	90-150	80-89 or 151-159	79 or lower or 160 or higher
DBP (mmHg)	50-95	40-49 or 96-109	39 or lower or 110 or higher
LOC	Alert		Responds to voice, pain
Looks Well	Looks Well	Looks Unwell	
Urine Output	Greater than 60 ml in 2 hours	45-65 ml in 2 hours	Less than 45 ml in 2 hours
Contact MRP if patient triggers greater than or equal to TWO YELLOW or ONE RED score at any one time			



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A MEOWS alert is generated in Cerner if the patient scores **two or more yellow** or **one or more red parameter at any time**.

If a MEOWS alert has been triggered, the nurse or midwife is to follow the actions in the MEOWS discern alert. See Figure 1 for actions.

Figure 1a. Modified Early Obstetric Warning System (MEOWS) Discern Alert for Inpatient Areas and Childbirth

Discern Notification (OBRN)

Subject

MEOWs Criteria Met

MEOWS ALERT
(Modified Early Obstetric Warning System Alert)

NAME: MEOWS, OB TWO
DATE: May 04, 2026 10:16:50 EDT
MRN: 70016158

MEOWS Score: YELLOW = 4
RED = 1

Primary Nurse or Registered Midwife to:

- Complete full MEOWS scoring
- Notify charge nurse
- Primary nurse notify MRP; registered midwife to consult the obstetric provider on call
- Document details of conversation in Provider Notification

MEOWS Criteria:

Temperature Oral : 38.9 deg C
Heart Rate Automatic : 120 bpm
Respiratory Rate : 22
Systolic Blood Pressure : 89 mmHg
MEOWS General Status : Looks unwell

Figure 1b. Modified Early Obstetric Warning System (MEOWS) Discern Alert for Emergency Department

Discern Notification (EDRN)

Subject

MEOWs Criteria Met

Event Date/Time: 04-May-2026 10:31:05 EDT

MEOWS ALERT
(Modified Early Obstetric Warning System Alert)

NAME: MEOWS, ED-FOUR
DATE: May 04, 2026 10:31:05 EDT
MRN: 70016225

MEOWS Score: YELLOW = 2
RED = 1

Primary Nurse to:

- Complete full MEOWS scoring
- Notify charge nurse
- Charge nurse to apply 'see next' flag if appropriate

MEOWS Criteria:

Temperature Oral : 39.0 deg C
Heart Rate Automatic : 120 bpm
Respiratory Rate : 22



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Escalation of MEOWS Score to MRP

Notification of MEOWS score to MRP or OB on call should be communicated through SBAR.

S	Situation What is the situation you are calling for?	
	It's <u>(name)</u> calling from <u>(unit)</u> about patient <u>(name)</u> in room <u>(number)</u> . I am calling because this patient has triggered a MEOWS score of __ yellow and __ red. <i>Describe the triggers and your concerns.</i>	
B	Background Provide pertinent information	
	- Gestational age or Postpartum Day - Mode of delivery (if applicable) and relevant details - Their pregnancy/delivery was uncomplicated or complicated by (hypertension, fever in labour, etc.) - Other relevant information (eg. meds and timing, relevant blood work and timing, etc.)	
A	Assessment Describe your assessment	
	LOC RR SpO2 BP HR	Urine output Looks well/unwell Other (pain, blood loss, diaphoretic, headache, visual disturbances) Any other findings
R	Recommendation Recommend clinical assessment as per MEOWS escalation pathway and any possible interventions.	
	☐ Confirm the plan as determined before ending the call using closed-loop communication. ☐ If MRP is unavailable, consider escalation. ☐ Contact Resource/Charge RN, if not already done.	



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MEOWS Actions for MRP

Acknowledge the call and the concern

Prioritize the call: MEOWS indicates early clinical deterioration

Review available data

Assess the patient promptly to guide clinical decision-making

Initiate a clear plan and escalate care as needed

Close the loop: Ensure shared understanding of plan of care including monitoring frequency, orders and when to call back.

🚨 Important

- MEOWS is not only about scoring - it's about early action and clear communication.
- Respond to MEOWS concerns with respect and clarity. This reinforces a culture of supportive, open communication.
- MEOWS does not replace or automatically activate CCRT. Activate CCRT per criteria, if appropriate.