

ALPQC Obstetric Hemorrhage Initiative: Baseline Data Measures Form

BASELINE Data Measures – Reported Monthly		www.alpqc.org/initiatives/obh	
Process Measures		Outcome Measures	
To be reported monthly for L&D and postpartum patient during the birth admission, including by race/ethnicity*. Monthly, randomly sample⁺ 10 charts for vaginal delivery with blood loss of ≥500 ml and 10 charts for cesarean deliveries with blood loss of ≥1,000 ml. See OBH Data Collection Form – Process + Structure Measures (under Data Resources menu).		To be reported monthly including by race/ethnicity for all deliveries during the previous month using the associated <u>ICD-10</u> codes SMM = Severe Maternal Morbidity.	
P1. Hemorrhage Risk Assessment Did patient have a hemorrhage risk assessment completed with risk level assigned, performed at least once between admission and birth?	Y/N – Please specify Unknown – Please specify	O1. Severe Maternal Morbidity (SMM)	Denominator: All qualifying pregnant and postpartum people during their birth admission Numerator: Among the denominator, those who experienced severe maternal morbidity, excluding those who experienced transfusion alone
P3. Patient Support After Obstetric Hemorrhage: For patients with blood loss of ≥500 ml for vaginal deliveries and ≥1,000 ml for cesarean deliveries, did the patient receive a verbal briefing on their obstetric hemorrhage by their care team before discharge?	Y/N — Please specify Unknown — Please specify	O2. SMM among People who Experienced an Obstetric Hemorrhage	Denominator: All qualifying pregnant and postpartum people during their birth admission who experienced an obstetric hemorrhage Numerator: Among the denominator, those who experienced severe maternal morbidity, excluding those who experienced transfusion alone
P5A: Transfusions: For patients with blood loss of ≥500 ml for vaginal deliveries and ≥1,000 ml for cesarean deliveries, did the patient receive a blood transfusion? (Y/N – Please specify /Unknown – Please specify) P5B - Of the patients that received a transfusion, where were they transfused?	P5B - (SELECT ALL THAT APPLY) L&D MBU ICU Other - Please Specify	*Race/ethnicity categories: Asian, Black/African American, Hispanic, Multi racial, Native American, Native Hawaiian/Pacific Islander, White, Other, Unknown, Race not reported. +See "How to use random number Generator" document under the "Data Resources" menu at www.alpqc.org/initiatives/obh . ** See "Obstetric Hemorrhage Codes" document under Data Resources menu on website. Data lag of 1-3 weeks may exist due to medical coding delay.	