



## ALPQC Obstetric Hemorrhage Initiative: Data Measures Form

[www.alpqc.org/initiatives/obh](http://www.alpqc.org/initiatives/obh)

Data Measures – Reported Monthly		Outcome Measures
<b>Process Measures</b>	<b>Outcome Measures</b>	
<p><i>To be reported monthly for L&amp;D and postpartum patients during the birth admission, including by race/ethnicity*. Monthly, <b>randomly</b> 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 the Data Resources menu).</i></p>		<p><i>To be reported monthly including by race/ethnicity for all deliveries during the previous month using the associated ICD-10 codes SMM = Severe Maternal Morbidity.</i></p>
<p><b>P1. Hemorrhage Risk Assessment</b> Did the patient have a hemorrhage risk assessment completed with risk level assigned, performed at least once between admission and birth?</p>	<p>Y/N – Please specify Unknown – Please specify</p>	<p><b>O1. Severe Maternal Morbidity (SMM)</b> <i>Denominator:</i> All qualifying pregnant and postpartum people during their birth admission <i>Numerator:</i> Among the denominator, those who experienced severe maternal morbidity, excluding those who experienced transfusion alone</p>
<p><b>P2. Quantified Blood Loss</b> Was the patient’s blood loss from birth through the recovery period measured using quantitative and cumulative techniques?</p>	<p>Y/N – Please specify Unknown – Please specify</p>	<p><b>O2. SMM among patients who received an ICD-10 diagnosis related to Obstetric Hemorrhage</b> <i>Denominator:</i> All qualifying pregnant and postpartum people during their birthing admission who received an ICD-10 diagnosis related to obstetric hemorrhage <i>Numerator:</i> Among the denominator, those who experienced severe maternal morbidity, excluding those who experienced transfusion alone</p>
<p><b>P3. Patient Support After Obstetric Hemorrhage:</b> For all patients with blood loss of ≥1,000 mL and <i>qualified*</i> vaginal deliveries with blood loss of 500-999mL, did the patient receive a verbal briefing on their obstetric hemorrhage by their care team before discharge?</p>	<p>Y/N Did not qualify* Unknown – Please specify</p>	<p>*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 <a href="http://www.alpqc.org/initiatives/obh">www.alpqc.org/initiatives/obh</a>. ** See “Obstetric Hemorrhage Codes” document under <i>the</i> Data Resources menu on the website. <i>Data lag of 1-3 weeks may exist due to medical coding delays.</i></p>
<p><b>P4: PPH Protocol:</b> Was the patient placed on a PPH protocol?</p>	<p>Y/N – Please specify Unknown – Please specify</p>	
<p><b>P5A: Transfusions:</b> Did the patient receive a blood transfusion? (Y/N/Refused /Unknown – Please specify)</p>	<p><b>P5B -</b></p> <ul style="list-style-type: none"> <li>• L&amp;D / OR</li> <li>• MBU</li> <li>• ICU</li> <li>• Other - Please Specify</li> </ul>	
<p><b>P5B -</b> Of the patients that received a transfusion, where were they <i>initially</i> transfused?</p>	<p>• L&amp;D / OR</p> <p>• MBU</p> <p>• ICU</p> <p>• Other - Please Specify</p>	



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<i>Reported Quarterly</i>		
Process Measures		Structure Measures
<p><b>P6. OB Provider Education</b>  <i>During this quarter, what cumulative proportion of <u>delivering physicians and midwives</u> has completed within the last 2 years:</i>            A: An education program on Obstetric Hemorrhage that includes the unit-standard protocols and measures?            B: An education program on respectful and equitable care?</p>	<p>For parts A and B:  <i>Report estimate in 10% increments, round up</i></p>	<p><b>S1. Patient Event Debriefs</b>            Has your department established a standardized process to conduct debriefs with patients after a severe event?</p> <p>Notes:</p> <ul style="list-style-type: none"> <li>Include patient support networks during patient event debriefs, as requested</li> <li>Severe events may include The Joint Commission sentinel event definition, severe maternal morbidity, or fetal death.</li> </ul>
<p><b>P7. OB Nursing Education</b>  <i>During this quarter, what proportion of <u>OB nurses (including L&amp;D and postpartum)</u> has completed within the last 2 years:</i>            A: An education program on Obstetric Hemorrhage that includes the unit-standard protocol and measures?            B: An education program on respectful and equitable care?</p>	<p>For parts A and B:  <i>Report estimate in 10% increments, round up</i></p>	<p><b>S2. Clinical Team Debriefs</b>            Has your department established a system to perform regular formal debriefs <u>with the clinical team</u> after cases with major complications?</p> <p>Note:</p> <p>Major complications will be defined by each facility based on volume, with a minimum being The Joint Commission Severe Maternal Morbidity Criteria</p>
<p><b>P8. Unit Drills</b>            A: During this quarter, how many OB drills (In Situ and/or Sim Lab) were performed on your unit for any maternal safety topic?            B: What topics were covered in the OB drills?</p>		<p><b>S3. Multidisciplinary Case Reviews</b>            Has your hospital established a process to perform multidisciplinary systems-level reviews on cases of severe maternal morbidity (including, at a minimum, birthing patients admitted to the ICU or receiving <math>\geq 4</math> units RBC transfusions)?</p>



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<p><b>Note</b>  <i>Structure measures reported as:</i>  <i>Not started</i>  <i>In progress</i>  <i>Fully in place</i></p> <p>For a sample checklist of obstetric hemorrhage risk factors, please visit ACOG’s Obstetric Hemorrhage Risk Assessment Table (also listed under the “Resources” tab on the ALPQC’s Obstetric Hemorrhage Bundle site).</p>	<b>Structure Measures</b>
	<p><b>S4. Hemorrhage Cart</b>            Does your hospital have obstetric hemorrhage supplies readily available in a cart or mobile box?</p>
	<p><b>S5. Unit Policies &amp; Procedures</b>            Does your hospital have obstetric hemorrhage policies and procedures (reviewed and updated in the last 2 years) that contain the following:</p> <ul style="list-style-type: none"> <li>A. An obstetric rapid response team appropriate to the facility’s Maternal Level of Care</li> <li>B. A standardized, stage-based, obstetric hemorrhage emergency management plan with checklists and escalation policy.</li> <li>C. Emergency release and massive transfusion protocols</li> <li>D. A protocol for patients who decline blood products but may accept alternative approaches</li> </ul>
	<p><b>S6. Patient Education Materials on Urgent Postpartum Warning Signs</b>            Has your department developed/curated patient education materials on urgent postpartum warning signs that align with culturally and linguistically appropriate standards?</p>
	<p><b>S7. Quantitative Blood Loss</b>            Does your facility have the resources and supplies readily available to quantify cumulative blood loss for both vaginal and cesarean births?</p>