



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH



Obstetric Hemorrhage (2022)

Core Data Collection Plan Version 1.0

June 2022



Obstetric Hemorrhage (2022)

Core Data Collection Plan

Outcome

Metric	Name	Description	Notes
O1	Severe Maternal Morbidity (excluding transfusion codes alone)	<p>Report N/D 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</p>	Disaggregate by race and ethnicity, payor
O2	Severe Maternal Morbidity among People who Experienced an Obstetric Hemorrhage (excluding transfusion codes alone)	<p>Report N/D 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</p>	Disaggregate by race and ethnicity, payor

Process

Metric	Name	Description	Notes
P1	Hemorrhage Risk Assessment	<p>Report N/D Sample patient charts or report for all patients; report N/D Denominator: All birth admissions, whether from sample or entire population Numerator: Number of birth admissions that had a hemorrhage risk assessment completed with risk level assigned, performed at least once between admission and birth</p>	Disaggregate by race and ethnicity, payor
P2	Quantified Blood Loss	<p>Report N/D Sample patient charts or report for all patients; report N/D Denominator: All birth admissions, whether from sample or entire population Numerator: Number of birth admissions that had measurement of blood loss from birth through the recovery period using quantitative and cumulative techniques</p>	<ul style="list-style-type: none"> Disaggregate by race and ethnicity, payor Pair with S7

Metric	Name	Description	Notes
P3	Patient Support After Obstetric Hemorrhage	<p>Report N/D</p> <p>Denominator: Pregnant and postpartum people with $\geq 1,000$ ml blood loss during the birth admission</p> <p>Numerator: Among the denominator, those who received a verbal briefing on their obstetric hemorrhage by their care team before discharge</p>	<ul style="list-style-type: none"> Disaggregate by race and ethnicity, payor The denominator criteria are established for the purposes of standardized data collection and reporting and are not meant to represent all instances in which a verbal briefing with a patient may be appropriate A verbal briefing for support should include elements such as those described in the CMQCC publication Improving Health Care Response to Obstetric Hemorrhage (version 3.0) on pages 146-162
P4	OB Provider Education	<p>P4A: Provider education on obstetric hemorrhage Report estimate in 10% increments (round up) At the end of this reporting period, what cumulative proportion of OB physicians and midwives has completed within the last 2 years an education program on Obstetric Hemorrhage that includes the unit-standard protocols and measures?</p> <p>P4B: Provider education on respectful and equitable care Report estimate in 10% increments (round up) At the end of this reporting period, what cumulative proportion of OB physicians and midwives has completed within the last 2 years an education program on respectful and equitable care?</p>	
P5	OB Nursing Education	<p>P5A: Nursing education on obstetric hemorrhage Report estimate in 10% increments (round up) At the end of this reporting period, what cumulative proportion of OB nurses (including L&D and Postpartum) has completed within the last 2 years an education program on Obstetric Hemorrhage that includes the unit-standard protocols and measures?</p> <p>P5B: Nursing education on respectful and equitable care Report estimate in 10% increments (round up) At the end of this reporting period, what cumulative proportion of OB nursing staff (including L&D and Postpartum) has completed within the last 2 years an education program on respectful and equitable care?</p>	

Metric	Name	Description	Notes
P6	Unit Drills	<p>Report # of dills and the drill topics</p> <p>P6A: Report integer In this quarter, how many OB drills (In Situ and/or Sim Lab) were performed on your unit for any maternal safety topic?</p> <p>P6B: Report TRUE/FALSE for the following options: Hemorrhage, Hypertension, Other In this quarter, what topics were covered in the OB drills?</p>	

Structure

Metric	Name	Description	Notes
S1	Patient Event Debriefs	Has your department established a standardized process to conduct debriefs <u>with patients</u> after a severe event?	<ul style="list-style-type: none"> • Include patient support networks during patient event debriefs, as requested • Severe events may include The Joint Commission sentinel event definition, severe maternal morbidity, or fetal death
S2	Clinical Team Debriefs	Has your department established a system to perform regular formal debriefs <u>with the clinical team</u> after cases with major complications?	Major complications will be defined by each facility based on volume, with a minimum being The Joint Commission Severe Maternal Morbidity Criteria
S3	Multidisciplinary Case Reviews	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 ≥ 4 units RBC transfusions)?	
S4	Hemorrhage Cart	Does your hospital have obstetric hemorrhage supplies readily available in a cart or mobile box?	
S5	Unit Policies & Procedures	<p>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"> • S5A: An obstetric rapid response team appropriate to the facility's Maternal Level of Care • S5B: A standardized, stage based, obstetric hemorrhage emergency management plan with checklists and escalation policy • S5C: Emergency release and massive transfusions protocols • S5D: A protocol for patients who decline blood products but may accept alternative approaches 	

Metric	Name	Description	Notes
S6	Patient Education Materials on Urgent Postpartum Warning Signs	Has your department developed/curated patient education materials on urgent postpartum warning signs that align with culturally and linguistically appropriate standards?	
S7	Quantitative Blood Loss	Does your facility have the resources and supplies readily available to quantify cumulative blood loss for both vaginal and cesarean births?	

AIM Obstetric Hemorrhage ICD10 Codes List

Variable	Definition
Placenta Previa	O4410, O4412, O4413, O4430, O4432, O4433, O4450, O4452, O4453
Placental Abruption	O45002, O45003, O45009, O45012, O45013, O45019, O45022, O45023, O45029, O45092, O45093, O45099, O458X2, O458X3, O458X9, O4590, O4592, O4593
Antepartum Hemorrhage	O46002, O46003, O46009, O46012, O46013, O46019, O46022, O46023, O46029, O46092, O46093, O46099, O468X2, O468X3, O468X9, O4692, O4693, O4690
Postpartum Hemorrhage	O723, O43212, O43213, O43219, O43222, O43223, O43229, O43232, O43233, O43239, O720, O721, O722

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