



Monthly Data Measures		Outcome Measures	
Process Measures		Outcome Measures	
<p>To be reported monthly to the data portal for L&D inpatients with persistent (twice within 15 minutes) severe hypertension. * [use HTN Data Collection Spreadsheet – Process Measures (found under Data Resources menu) as guide].</p>		<p>To be reported monthly to the data portal for all deliveries during the previous month using the associated medical codes (data lag of 1-3 weeks might exist due to medical coding delay) (SMM = Severe Maternal Morbidity):</p>	
P1. Time to Treatment of Severe HTN	<p>Denominator: Number of patients with persistent severe HTN* _____</p> <p>Numerator: Among the denominator, cases who were treated within 1 hour with IV Labetalol, IV Hydralazine, or PO Nifedipine _____</p>	O1. Number of patients each month** with persistent severe hypertension*	<p>Denominator: All patients during their birth admission, excluding ectopics and miscarriages _____</p> <p>Numerator: Among the denominator, patients with codes for severe preeclampsia, eclampsia, preeclampsia superimposed on pre-existing hypertension _____</p>
P2. Follow-up appointment scheduled within 7-14 days for women with persistent severe HTN*	<p>Denominator: Number of patients with persistent severe HTN* _____</p> <p>Numerator: Among the denominator, patients with follow-up appointment scheduled within 7 – 14 days</p>	O2. SMM	<p>Denominator: All patients during their birth admission, excluding ectopics and miscarriages _____</p> <p>Numerator: Among the denominator, all patients with any SMM code _____</p>
P3. Did your hospital provide education (including in written form) to the patient and their family, including the designated support person whenever possible, on the signs and symptoms of severe hypertension/ preeclampsia during hospitalization and after discharge?	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	O3. SMM (excluding transfusion codes)	<p>Denominator: All patients during their birth admission, excluding ectopics and miscarriages _____</p> <p>Numerator: Among the denominator, all patients with any non-transfusion SMM code _____</p>
<p>*Persistent severe hypertension defined as ≥ 160 systolic or ≥ 110 diastolic twice within 15 minutes antepartum or postpartum, excluding: readings during pushing, >20 min after epidural, or in the presence of another known etiology for elevated BP (e.g. sickle cell pain crisis, chemotherapy, etc.). Severe values do not need to be consecutive. Any severe range BP indicates the need for frequent monitoring of BP.</p> <p>**Cases can be identified using medical codes provided for Measure #O1, or by using an L&D logbook, building onto EHRs triggers and ability to query for severe range BPs, or searching pharmacy logs for antihypertensive medications. Use of at least two methods recommended.</p>		O4. SMM among Preeclampsia Cases	<p>Denominator: All patients during their birth admission, excluding ectopics and miscarriages, with one of the following diagnosis codes:</p> <ul style="list-style-type: none"> ● Severe Preeclampsia, Eclampsia, Preeclampsia superimposed on pre-existing hypertension _____ <p>Numerator: Among the denominator, all patients with any SMM code _____</p>
		O5. SMM (excluding transfusion codes) among Preeclampsia Cases	<p>Denominator: All patients during their birth admission, excluding ectopics and miscarriages, with diagnosis codes:</p> <ul style="list-style-type: none"> ● Severe Preeclampsia, Eclampsia, Preeclampsia superimposed on pre-existing hypertension _____ <p>Numerator: Among the denominator, all patients with any non-transfusion SMM code _____</p>



Quarterly & Once per Initiative Data Measures			
Process Measures		Structure Measures	
To be reported quarterly through the data portal :		To be reported once per initiative through the data portal :	
P4. Provider Education a: % OB physicians and midwives who completed (within last 2 years) an education program on Severe HTN/ Preeclampsia b: % OB physicians and midwives who completed (within last 2 years) an education program on the Severe HTN/ Preeclampsia bundle elements and the unit-standard protocol	Report estimate in 10% increments (round up) a: ____ b: ____	S1. Unit Policy and Procedure Does your hospital have a Severe HTN/Preeclampsia policy and procedure for pregnant and postpartum patients (reviewed and updated in the last 2 years) that provides a unit-standard approach to measuring blood pressure, treatment of Severe HTN/Preeclampsia, administration of Magnesium Sulfate, and treatment of Magnesium Sulfate overdose?	Completion date: _____
P5. Nursing Education a: % OB nurses who completed (within last 2 years) an education program on Severe HTN/ Preeclampsia b: % OB nurses who completed (within last 2 years) an education program on the Severe HTN/Preeclampsia bundle elements and the unit-standard protocol	Report estimate in 10% increments (round up) a: ____ b: ____	S2. Debriefs Has your hospital established a system in your hospital to perform regular formal debriefs after cases with major complications?	Start Date: _____
P6. Unit Drills a: Number of OB drills (In Situ and/or Sim Lab) performed in your unit for any maternal safety topic b: Topics covered in the OB drills	a. # of Drills ____ b. Drill topics _____	S3. Multidisciplinary Case Reviews Has your hospital established a process to perform multidisciplinary systems-level reviews on all cases of severe maternal morbidity (including women admitted to the ICU, receiving ≥4 units RBC transfusions, or diagnosed with a VTE)?	Start Date: _____
		S4. Patient, Family & Staff Support Has your hospital developed OB specific resources and protocols to support patients, family and staff through major OB complications?	Completion Date: _____
		S5. EHR Integration Were some of the recommended Severe HTN/Preeclampsia bundle processes (i.e. order sets, tracking tools) integrated into your hospital's EHR system?	Completion Date: _____