SEVERE MATERNAL MORBIDITY

- Severe maternal morbidity (SMM) refers to life-threatening outcomes of labor and delivery. Implement an early warning system to recognize and respond to mothers with deteriorating conditions.\(^1,2\)
- Integrate severe maternal morbidity patient safety tools at your hospital.\(^3\)
- The American College of Obstetricians and Gynecologists and Society for Maternal-Fetal Medicine recommend reviewing cases with transfusion of 4 or more units of blood and any admission of a pregnant or postpartum woman to an ICU.\(^4\)

MATERNAL HEMORRHAGE

- Maternal hemorrhage is a direct cause of maternal morbidity and mortality.\(^5,6\)
- Using the SC BOI OB Hemorrhage tools to develop a comprehensive plan for evaluating and managing maternal hemorrhage at birthing facilities is recommended.\(^7\)
- A blood loss threshold of >500ml should be considered regardless of mode of delivery.\(^8\) Likewise, tracking blood transfusion side-by-side is needed,\(^5\) but should not count against clinical quality.\(^9,10\)

SEVERE MATERNAL HYPERTENSION

- Maternal preeclampsia is a leading cause of maternal morbidity & mortality, prematurity, placental abruption, and low birthweight.\(^11,12\)
- To support your hospital in the early recognition/management of preeclampsia, SC BOI has provided the Severe Hypertension in Pregnancy Bundle.\(^13\)
- Include the ED in hospital protocol and notify patients of warning signs prior to discharge.\(^14,15\) Some hospitals even have postpartum mothers wear bracelets that notify ED personnel to treat immediately.\(^16\)
Sources: