



## Partnering to Improve Health Care Quality for Mothers and Babies

### Obstetric Hemorrhage Initiative

#### Hospital Quality Improvement Data Collection and Display Form

The workbook is set up on a calendar year basis (January – December). All cells except those designated for data entry are locked, and therefore, cannot be modified. The Excel spreadsheet is made up of several tabs, which you can switch between.

#### List of Data Display Tabs:

- 1) Data Entry Tab
- 2) Hemorrhages
- 3) Blood Products transfused
- 4) Transfusions\_any
- 5) Transfusions >3
- 6) Debriefs
- 7) Hand-off reports
- 8) Hysterectomies
- 9) QBL-Vaginal
- 10) QBL-Cesarean
- 11) Risk Assessment
- 12) Active Management

**Data Entry Tab:** This is where you will enter all the data. There are 12 questions. Question 2 – 12 correspond to the subsequent tabs in the workbook with question 1 functioning as the denominator for many equations. Note: number of charts audited will automatically sum.

Enter the data on the data entry tab and the tables and graphs on tabs 2 - 12 will be auto populated with these data. Once the data have been entered, click on the subsequent tab to view the tables and graphs. The month and quarter data will be auto populated.

All cells on tabs 2 – 12 are locked. To modify data on these tabs, the data must be edited on the data entry tab.

**Graphs:** The graphs are set up to display the first 6 months and the first two quarters of the year. To adjust this display click on the line or bar in the graph (it will be easier to select if data are present in at least one cell). A blue box will appear in the table. Select a corner of the box to include or exclude the months that appear in the graphs.

To copy a graph to another document, left click on the graph (a corner is best to select so that the entire graph is selected), right click, and select copy. The graph can be pasted in a Word, Excel, or PowerPoint document. All or part of the table can be selected and copied in a similar fashion. To paste the values (vs. the formulas) in the table, right click and paste 'values'.

You may download as many copies of the Excel spreadsheet as you need.

Questions: [FPQC@health.usf.edu](mailto:FPQC@health.usf.edu)



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### Monthly Data Entry

- 1) Total number of women giving birth ( $\geq 20$  0/7 weeks gestation).
  - 2) Total number of women with documented blood loss of greater than or equal to 1000 cc blood loss (**hemorrhages**) this month.
  - 3) Total units of **blood products transfused** during birth admission this month.
  - 4) Number of women (who gave birth  $\geq 20$  0/7 weeks gestation) **transfused with any blood product** during the birth admission this month.
  - 5) Number of women who were **transfused with > 3 units** (4 or more) of any blood product during the birth admission this month.
  - 6) Number of **debriefings** for women with greater than or equal to 1000 cc blood loss.
  - 7) Number of documented **hand off reports** tracking cumulative blood loss for all women with 1000 cc blood loss or greater.
  - 8) Number of unplanned **hysterectomies** (not planned prior to hemorrhage).
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- 9a) Number of Vaginal birth charts that indicated - **Blood Loss not measured**.
  - 9b) Number of Vaginal birth charts that indicated - **EBL**.
    - (Any Estimation of Blood Loss including mixed methods)
  - 9c) Number of Vaginal birth charts that indicated - **QBL**.
    - (Quantification of Blood Loss - Only used quantification methods)

The sum of the previous three rows should equal the number of vaginal charts audited (recommended: 20 charts). [auto]

- 10a) Number of Cesarean birth charts that indicated - **Blood Loss not measured**.
- 10b) Number of Cesarean birth charts that indicated - **EBL**.  
(Any Estimation of Blood Loss including mixed methods)
- 10c) Number of Cesarean birth charts that indicated - **QBL**.  
(Quantification of Blood Loss - Only used quantification methods)

The sum of the previous three rows should equal the number of cesarean charts audited. [auto]

- 11) Number of women out of total charts audited who were assessed for **risk of obstetric hemorrhage** at admission/before delivery.
- 12) Number of women out of total vaginal delivery charts audited who received **active management of the third stage**.