AIM

ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

AIM Obstetric Emergency Readiness

Measurement Strategy

Version 1 – July 2025

AIM Obstetric Emergency Readiness
Measurement Strategy

Measurement Statement

The **AIM Obstetric Emergency Readiness Resource Kit** is intended to promote implementation of broad structures and processes in obstetric care alongside patient safety bundle implementation, particularly in non-obstetric and emergency care settings. The Obstetric Emergency Readiness Measurement Strategy is intended to support implementation of the AIM Obstetric Emergency Readiness Resource Kit by providing foundational outcome, process, and structure measures to collect and track data as part of quality improvement efforts. These data can be used internally to track quality of care or can be reported as part of a quality improvement collaborative that focuses on AIM patient safety bundle implementation and its alignment with non-obstetric and emergency care settings.

Data for measures marked as "ALL" should be collected regardless of the obstetric emergency topic(s) of focus. Obstetric emergency topics of focus can then be selected for targeted quality improvement efforts based on facility priority, or in alignment with a national, state, or hospital-based collaborative's AIM patient safety bundle implementation.

Unless otherwise specified, outcome and process measurement should be inclusive of pregnant and postpartum people up to 12 months postpartum.

Outcome

Measure Name	PSB	Measure Description	Notes
Repeat ED Visit for Care	ALL	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** All patients with documentation of current pregnancy or pregnancy in the last 12 months **Numerator:** Among the denominator, patients who returned to the facility within 72 hours of the previous presentation for care	

Process

Measure Name	PSB	Measure Description	Notes
Screening for Current or Recent Pregnancy	ALL	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** Females ages 12 – 55 presenting to the Emergency Department **Numerator:** Among the denominator, those with documentation of having been screened for current pregnancy or pregnancy in the last 12 months	• Sample patient charts to support data collection, as necessary • See **AIM Pregnancy Screening Statement**

PSB – Patient safety bundle

Measure Name	PSB	Measure Description	Notes
Staff Education & Simulation Participation	ALL	**Report N/D** **Denominator:** Emergency department providers, nurses, and direct patient care staff **Numerator:** Among the denominator, those who have completed at least one type of education, simulation, or training on obstetric emergency topics within the last 6 months	• Obstetric emergency topics may include hemorrhage, hypertension, sepsis, cardiac conditions, and mental health and substance use • Didactic or simulation-based education would be most beneficial. However, this could include case reviews at huddle and integration into pre-existing educational pathways. • Refer to AIM's **Obstetric Simulation Scenarios for the Emergency Department**
Timely Treatment of Persistent Severe Hypertension	HTN	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** Pregnant and postpartum people with acute-onset severe hypertension that persists for 15 minutes or more, including those with preeclampsia, gestational or chronic hypertension **Numerator:** Among the denominator, those who were treated within 1 hour. The 1 hour is measured from the first severe range BP reading, assuming confirmation of persistent elevation through a second reading.	• Full measurement specifications can be found in this **SMFM Special Statement**
Mental Health Safety Protocol Activation	PMHC	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** Pregnant and postpartum people with a chief complaint of a mental health concern, or those who had positive mental health screen using a validated screening tool at any time during the care encounter **Numerator:** Among the denominator, those who received an appropriate risk assessment or referral based on acuity of presenting concern	

PSB – Patient safety bundle
HTN – Severe Hypertension in Pregnancy
PMHC – Perinatal Mental Health Conditions

Measure Name	PSB	Measure Description	Notes
Offering or Provision of Substance Use Disorder Treatment	SUD	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** Pregnant and postpartum people with a chief complaint of a substance use concern, or those who had positive substance use screen using a validated screening tool at any time during the care encounter **Numerator:** Among the denominator, those who received appropriate offering or provision of substance use disorder treatment	
Timely Treatment with Antibiotics for Patients Diagnosed with Sepsis	SOC	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** All pregnant and postpartum patients with a diagnosis of sepsis **Numerator:** Among the denominator, those with appropriate antibiotic administered within 1 hour of sepsis diagnosis (if more than one is ordered, all must be given within one hour)	• ICD-10 codes for sepsis may include A32.7, A40.x, A41.x, I76, O85, O86.04, R65.20, R65.21, T81.12XA, T81.44XA
Cardiovascular Disease Assessment Among Pregnant and Postpartum People	CCOC	**Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** All pregnant and postpartum people triaged or admitted for care **Numerator:** Among the denominator, those with documentation of having received a cardiovascular disease assessment using a standardized tool	• Sample patient charts to support data collection, as necessary • Refer to **Cardiovascular Disease Assessment in Pregnant and Postpartum Women** developed by CMQCC for an example of a standardized tool

Structure

Measure Name	PSB	Measure Description	Notes
Obstetric Protocol or Policy Availability	ALL	**Rate progress (not yet started, in progress, fully in place) towards putting and keeping the structure measure fully in place** Does your Emergency Department have written, accessible, and up-to-date policies and protocols for managing key obstetric emergencies?	• This may include hemorrhage, hypertension, cardiac conditions, and sepsis at minimum. • ACOG has **Emergency Department algorithms and resources** for review and use.

PSB – Patient safety bundle
SUD – Care for Pregnant and Postpartum People with Substance Use Disorder
SOC – Sepsis in Obstetric Care
CCOC – Cardiac Conditions in Obstetric Care

Measure Name	PSB	Measure Description	Notes
Transfer Readiness	ALL	**Rate progress (not yet started, in progress, fully in place) towards putting and keeping the structure measure fully in place** Does your Emergency Department have the following: A. Written, accessible, and up-to-date policies and procedures for obstetric transport B. Written and up-to-date transfer agreements with hospitals with obstetric care services	• These should be measured as two sub-measures, not as a single combined measure.
Patient Education Materials on Urgent Maternal Warning Signs	ALL	**Rate progress (not yet started, in progress, fully in place) towards putting and keeping the structure measure fully in place** Has your department developed/curated patient education materials on urgent maternal warning signs that align with culturally and linguistically appropriate standards?	• Refer to **Urgent Maternal Warning Signs** for an example.
Obstetric Chart Reviews	ALL	**Rate progress (not yet started, in progress, fully in place) towards putting and keeping the structure measure fully in place** Does your Emergency Department have a process for regularly reviewing instances of obstetric care to identify opportunities for improvement?	• Refer to the Obstetric Care for Resource Limited Environments tool for an example.
Obstetric Hemorrhage Emergency Supplies	HEM	**Rate progress (not yet started, in progress, fully in place) towards putting and keeping the structure measure fully in place** Does your Emergency Department have immediate, on-unit access to the following to support rapid response to an obstetric hemorrhage: A. Immediate access to bundled uterotonic medications and tranexamic acid (e.g., bundled in pyxis or Omnicell) B. Immediate access to non-surgical hemorrhage control devices	• These should be measured as two sub-measures, not as a single combined measure.

PSB – Patient safety bundle
HEM – Obstetric Hemorrhage

Optional – As Facility Priorities Allow

Measure Name	PSB	Measure Description	Notes
Bias-Free Obstetric Chart Documentation	ALL	Percentage of obstetric charts reviewed with no stigmatizing or judgment language **Report N/D** ***Disaggregate by race and ethnicity, payor*** **Denominator:** All patient charts with documentation of current pregnancy or pregnancy in the last 12 months **Numerator:** Among the denominator, charts containing no stigmatizing or judgment language	• Sample patient charts to support data collection, as necessary • See **Negative Patient Descriptors: Documenting Racial Bias in the Electronic Health Record** for examples of stigmatizing and judgment language

PSB – Patient safety bundle