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How Much Blood Is That? The Use of Scorecard Feedback to Improve Measurement of Blood Loss at Delivery

BACKGROUND

- Obstetric hemorrhage is a common cause of maternal morbidity/mortality
- Measurement of quantitative blood loss (QBL) permits prompt recognition of hemorrhage
- Scorecards as feedback have been used to stimulate performance improvement

PROBLEM

QRL

Not practiced consistently

EBL (Estimated Blood Loss) Most common method of measurement

Underestimation of blood loss

Delay in recognition of hemorrhage

Purpose

Improve practice of QBL measurement by labor and delivery nurses in a community hospital.



METHODS

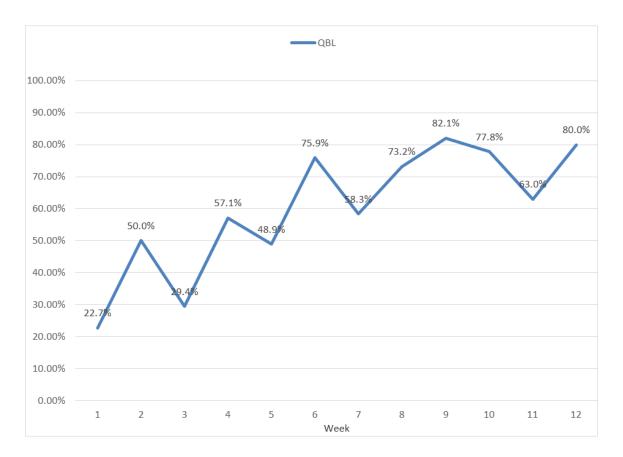
Quality improvement project Review of records of all delivery patients for 12 weeks (522)

Prepare weekly scorecards	 Blinded individual data Aggregate unit data
Display	 Percent of each nurse's deliveries with QBL documented Percent of all deliveries with QBL documented
Present scorecards as feedback	At weekly meetingsPost on unit

Number of patients and number of units of blood products transfused tracked weekly as balancing measures.

RESULTS

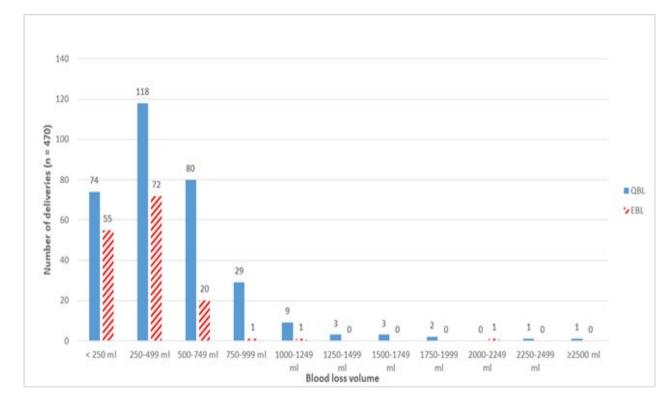
Percent of Patients with QBL Documented at Delivery



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RESULTS

Comparison of QBL and EBL Volumes for Total Deliveries



 470 deliveries with method of measurement of blood loss recorded Significant difference between mean QBL volume (482.20 ml) and mean EBL volume (313.15 ml) , *p* < 0.001

CONCLUSIONS/DISCUSSION

 Scorecard feedback was associated with improvement in performance No increase in transfusions with increasing QBL measurement **FUTURE PROJECTS**

Use scorecard feedback to nurses for other measures they influence: rates of cesarean delivery, breastfeeding,

catheter-associated urinary tract infections

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