AIM RPC Process Measures Data Dictionary

The purpose of the AIMRPC Data Dictionary is to develop consistency in data entry. The Data Dictionary refers to all elements on the AIMRPC Data Collection Forms.

Inclusion criteria: all nulliparous, singleton, vertex patients delivering a live fetus at greater than or equal to 37 0/7 weeks gestation.

Process Measure Data Collection

1) What cumulative percent of OB physicians and midwives have completed an education program (within the last 2 years) on the ACOG/SMFM labor management guidelines that includes teaching on the Safe Reduction of Primary C/S: Support for Intended Vaginal Birth bundle and the unit standard protocol? Report estimate in 10% increments (round up) __________ %: Education provided to OB physicians and midwives must have been completed in the prior two years and include a review of the Safe Reduction of Primary Cesarean section safety bundle and the unit standard protocol for labor management. If no unit standard protocol is in place, cumulative percentage is 0. Report estimates in 10% increments (round up).

2) What cumulative percent of OB nurses have completed an education program (within the last 2 years) on the ACOG/SMFM labor management guidelines that includes teaching on the Safe Reduction of Primary C/S: Support for Intended Vaginal Birth bundle and standard unit processes? Report estimate in 10% increments (round up) __________ %: Education provided to OB nurses must have been completed in the prior two years and include a review of the Safe Reduction of Primary Cesarean section safety bundle and the unit standard protocol for labor management. If no unit standard protocol is in place, cumulative percentage is 0. Report estimates in 10% increments (round up).

3) Maternal Safety Bundle Compliance:
   a. Labor Dystocia/Failure to Progress: (all criteria should be present to meet definition)
      - 6-10 cm dilated
      - membranes ruptured
      - no cervical changes after at least 4 hours with adequate uterine activity (> 200 MVU) or at least 6 hours with inadequate uterine activity (< 200 MVU) with oxytocin
• No descent or rotation for 3 hours or more of active pushing (4 hours with an epidural)

b. **Induction (all criteria should be present to meet definition)**

• Less than 6 cm dilation (if ≥ 6cm use dystocia criteria)

• Bishop score of ≥ 6 before the start of elective induction

• Oxytocin administered for at least 12 hours after membrane rupture without achieving cervical change and regular contractions

c. **Fetal Concern**

• **Category II tracing:** Category II FHR tracings includes all FHR tracings not categorized as Category I or Category III. Category II tracings may represent an appreciable fraction of those encountered in clinical care. Examples of Category II FHR tracings include any of the following:

  1. Baseline rate
     
     Bradycardia not accompanied by absent baseline variability
     
     Tachycardia

  2. Baseline FHR variability
     
     Minimal baseline variability
     
     Absent baseline variability with no recurrent decelerations
     
     Marked baseline variability

  3. Accelerations
     
     Absence of induced accelerations after fetal stimulation

  4. Periodic or episodic decelerations
     
     Recurrent variable decelerations accompanied by minimal or moderate baseline variability
     
     Prolonged deceleration more than 2 minutes but less than 10 minutes
Recurrent late decelerations with moderate baseline variability

Variable decelerations with other characteristics such as slow return to baseline, overshoots, or “shoulders”

- **Category III tracing:** Category III FHR tracings include either:
  1. Absent baseline FHR variability and any of the following:
     - Recurrent late decelerations
     - Recurrent variable decelerations
     - Bradycardia
  2. Sinusoidal pattern

**d. No labor**

- **Suspected macrosomia:** Cesarean delivery performed for concern of estimated fetal weight > 5000 gm in a non-diabetic mother or 4250 gm in a diabetic mother

- **Previous myomectomy:** Cesarean delivery performed on a woman who has had a previous myomectomy where the uterine cavity has been entered

- **Third trimester bleeding:** Cesarean delivery performed for vaginal bleeding (abruption or placenta previa)

- **Active Herpes Simplex Virus infection:** Cesarean delivery performed due to an active genital HSV lesion or prodromal symptoms of an HSV lesion