



Perinatal Labor Augmentation Safety

Process to deliver reliable care with special attention at the onset of labor reduces the likelihood of harm to both mother and baby.

Domain



Patient Care Processes:

Clinical processes that ensure delivery of high-quality care to individual patients

Aims



Safe:

Delivery of care in a manner that minimizes any risk of harm to a patient

Process Attributes



Cost to Implement

The monetary resources required to implement this process

Minimal: Just the cost of the improvement effort itself



Time to Implement

The amount of time, from months to years, it will take on average to establish this process

Fewer than 12 months



Difficulty to Implement

The challenges of implementing this process

Most Challenging: Involves multiple units or disciplines AND requires a substantial shift in culture and/or operations



Level of Evidence

The degree to which the actions in this process are supported by research and experience; based on the Cochrane scale

Some Evidence: Level III — Studies published with some control included

Details

Elements

- **Bundle components:**
 - Documentation of estimated fetal weight
 - Recognition and management of tachysystole
 - Pelvic assessment
 - Reassuring fetal status /Normal fetal status (using NICHD 3-Tier System)

Outcomes

- **Harm:** Decreased harm to patient (e.g., Harms per 100 patient days, as measured by the IHI Global Trigger Tool)
- **Cost of Care:** Decreased cost per inpatient case

<http://www.ih.org/imap/tool/#process=adf36aaa-63c5-4e2c-8c8d-e4ae8e9b29c4>

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Service Lines and Critical Functions

- Obstetrics

Key Measures

- All components of the Perinatal Augmentation Bundle completed
 - Numerator: Percent of patients where all components of the Perinatal Augmentation Bundle were completed
 - Denominator: Number of records reviewed
- Percent change in rate of mothers transferred to higher level of care
- Percent change in rate of newborns admitted to neonatal intensive care

Reasons and Implications

Importance for Patients and Families

When mothers in labor require medicines to strengthen labor, it is important that those medicines are used safely. This reduces the chance of harm for both mother and baby and means that separating mother from infant after delivery is less likely.

Requirement, Standards, Policies, and Guidelines

- [National Priorities Partnership \(NPP\)](#)
Safety
- [The Joint Commission \(TJC\)](#)
National Patient Safety Goal 3: High Alert Medications

Financial Implications

- Expense reduction can occur due to decreased length of stay of mother in labor and delivery, and infant in neonatal intensive care.
- Expense increases can occur due to greater throughput in labor and delivery (e.g., nursing time, length of stay).
- Revenue reduction can occur due to the decreased length of stay for mothers and babies.
- Overall, a positive return on investment is reported in the literature because hospitals that have increased the reliability of these components have also reported a decrease in medical malpractice set-asides and overall expenses.

Prerequisites

- Collaboration between nurses and obstetrical care providers in the labor and delivery unit
- Acceptance of standard algorithms for treatment

Resources

Additional Resources

- [American College of Obstetricians and Gynecologists \(ACOG\)](#)
Labor augmentation
- [Map of Medicine](#)
 - Caesarean Section
 - Term Labour

IHI.org Resources

- [Improvement Map Discussion Boards](#)
Join the Improvement Map Discussion Groups to help IHI build dynamic communities of learning and support. Pose questions, offer new ideas, describe your improvement success stories and experiences, and share tips with your peers for taking full advantage of all the Improvement Map has to offer.
- [Reducing Birth-Related Trauma and Liability Exposure](#)
Lehigh Valley Hospital and Health Network (Allentown, Pennsylvania, USA) reduces birth-related trauma through their work as part of a Perinatal Innovation Community.
- [Improving Safety Within the Birth Center](#)
Increased reliability in the Birth Center makes perinatal care safer at HealthPartners Regions Hospital (St. Paul, Minnesota,

<http://www.ihi.org/imap/tool/#process=adf36aaa-63c5-4e2c-8c8d-e4ae8e9b29c4>

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