OBSTETRIC HEMORRHAGE TEAM DE-BRIEFING FORM

Topic: The de-brief form provides an opportunity for maternity service teams to review then document sequence of events, successes and barriers to a swift and coordinated response to obstetric hemorrhage.

Goal: De-brief completed in 100% of all obstetric hemorrhages that progress to Stage 2 or 3. All de-briefs have at least Primary RN, and Primary MD who participates in the de-briefing session.

Instructions: Complete as soon as possible, but no later than 24 hours after any Stage 2 or 3 hemorrhages. During de-brief, obtain input from participants (all or as many as possible).

Stage 2 or 3 hemorrhages are defined as bleeding that continues after administration of IV or IM Oxytocin, vigorous fundal massage, emptied bladder and Methergine 0.2 mg IM.

PRINT THIS FORM DOUBLE-SIDED; PATIENT STAMP ON BACK OF FORM WILL NOT BE FAXED WITH COMPLETED FORM. - Attach additional pages with notes as needed

Were the following medications, procedures or blood products used? (Check if yes, check all that apply)

Medications
- High dose misoprostol (800-1000 mcg)
- Carboprost tromethamine (Hemobate)
- Blood Volume/Options
- Invasive hemodynamic monitoring
- Blood warmer
- Rapid fluid infuser (level one machine)
- Blood cell salvage machine (cell saver)
- Factor VIIa (non-standard treatment)

Procedures
- Intrauterine balloons
- B-Lynch suture
- Uterine artery ligation
- Uterine artery embolization
- Non-pneumatic Anti-shock Garments (NASG; non-standard treatment)

COMMENTS about medications, procedures, or blood products:

Volume of blood lost: _____ mls
Method of Blood Loss Measurement (Check all that apply)
- Visually Estimated Only
- Formal Estimate using Posters/Pictures
- Formal Measure by weight
- Formal Measure by volume collection

Blood Product Transfusion Ratios - Active Hemorrhage Treatment and Resuscitation Period (~the first 4-6 hours PP)
Units of PRBCs: ______________ Units of FFP: ______________
Units of Platelets: _____________ Units of Cryo: _____________

Thinking about how the obstetric hemorrhage was managed...

Identify what went well (Check if yes, describe)
- Communication went well
- Teamwork went well
- Leadership went well
- Decision-making went well
- Assessing the situation went well
- Other

Briefly describe:

Identify opportunities for improvement: “human factors” (Check if yes, describe)
- Communication needed improvement
- Teamwork needed improvement
- Leadership needed improvement
- Decision-making needed improvement
- Assessing needed improvement
- Other

Briefly describe:

Identify opportunities for improvement: “non-human factors” (Check if yes, describe)
- Delay in blood products availability
- Equipment issues
- Medications issues
- Inadequate support (in-unit or other areas of the hospital)
- Delays in transporting the patient (within the hospital or to another facility)
- Other

Briefly describe:

[Quality Improvement Use Only –not part of the medical record]
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Page 1: No patient identifiers
Page 2: Patient stamp

Page 1 ONLY to CMQCC:

FAX: 650-721-5751

(No patient information is transmitted)