



Pat Quinn, Governor  
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**ILLINOIS DEPARTMENT OF PUBLIC HEALTH**  
**PERINATAL HEALTH SYSTEM OF ILLINOIS**  
**MATERNAL MORTALITY REVIEW COMMITTEE**

**October 7, 2009**

**10:30 A.M.**

**Michael Bilandic Center**  
**160 North LaSalle Street**  
**Room N505**  
**Chicago, Illinois**

Minutes

**Chair:** Robin L. Jones, MD

**Attendees:** Harold Bigger, MD, Louise Simonson, , Trish O'Malley, Patricia Prentice, J. Roger Powell, MD, Cynthia Wong, MD, Deborah Boyle, MD, Sarah Kilpatrick, MD, Jerome Loew, MD, Kevin Madsen, MD, John Paton, MD, Pat Schneider, CNM, Stacie Geller PhD, Deborah Boyle, MD

**Absent,** John Gianopolous MD, (excused) Mark Flotow, (excused) Andrea Kemp, MD,

**IDPH Staff:** Charlene Wells, RN, BS

**GUESTS:** Amanda Bennett, MPH, Deborah Rosenberg, Ph.D, Myrtis Sullivan, MD

**I. Review and Approval of Minutes – June 10, 2009**

Dr. Powell moved acceptance of the minutes of the June 10, 2009. Dr. Kilpatrick seconded the motion, the minutes were approved as written. Dr. Jones welcomed the guests

## **II. Update on Obstetric Hemorrhage Education Project**

Dr. Robin Jones discussed the fact that the project has been in effect for over one year.

Today's discussion will address future plans for process once the December 31, 2009 deadline for implementation passes.

The Management of Obstetric Hemorrhage: Hospital Assessment Form was presented with proposed revisions to ask pertinent questions about the program.

Louise Simonson discussed the request to have revised Assessment Form sent out for completion to all birthing hospitals in February 2008.

**MOTION – Dr. Geller moved that the Hospital Assessment Form be accepted with the changes suggested by Dr. Madsen. Seconded by Louise Simonson. The motion was unanimously approved.**

**MOTION – Dr. Powell moved the Director be requested to send a letter accompanying the assessment form as was done in 2007. Dr. Kilpatrick seconded, the motion was approved unanimously.**

Dr. Jones asked members to review the minutes of the workgroup

Louise Simonson asked that pre and post tests scores be saved for data review.

Charlene discussed the letter that she created for each administrator that described the process for evaluation due January 15, 2009. Members voiced their thanks for the letter.

Dr. Kilpatrick asked how deaths and near misses will be traced. She requested measurable end points. Baseline data needs to be collected. Dr. Madsen asked that debriefing data be collected using the forms in the OBHEP book.

Dr. Geller asked if ICU admissions and use of blood products data was being collected. She asked if there have been any comparisons pre and post implementation of the OBHEP. This has not been done formally at this time. Illinois does have baseline numbers of maternal deaths and those due to hemorrhage pre and post OBHEP.

The evaluation process after the project is completed discussion continued after an evacuation drill at the Bilandic Center.

Trish O' Malley indicated she was going to review critical items being discussed and will have a response.

Dr. Wong indicated the need to document a shift to the left. Amanda Bennett suggested using hospital outcome data and look at hysterectomy, death, LOS for a Statewide look at data.

Dr. Loew indicated reduction in hospital days and reduction in deaths would indicate improved efficiency. Dr. Geller indicated that LOS was not high in specificity.

What can be done? All Networks are expected to be collecting 3 or more units and ICU admission. Dr. Geller is currently working with New Zealand will be doing OBHEP for the entire country.

Dr. Kilpatrick stated that this must be able to be published. IRB approval has been obtained from each Network Hospital at University of Illinois Network. Dr. Jones indicated that Charlene would need to have this approved. Dr. Bigger indicated that IRB's may not approve at every hospital.

IDPH would get credit for putting the program into place. Dr. Kilpatrick stated that academic publications must be the focus to get academicians to do the project for no cost.

**MOTION – Every Perinatal Center formally needs to collect data on ICU Admissions and 3 or more units of blood products administered. Dr. Kilpatrick moved and Louise Simonson seconded. The motion was approved unanimously.**

### **III. Letter to Coroners and Medical Examiners:**

Dr. Jones indicated that Dr. Loew and Dr. Gianopolous have developed a letters and guide for autopsies. Many cases have not had autopsies and on review this Committee felt that autopsies were indicated.

The letter and checklist were reviewed.

Dr. Kilpatrick indicated that uterine atony needs to be removed. Asked if this list is what is standard. Dr. Loew indicated that there are no current standards for autopsies in maternal deaths. The checklist includes basic items except for possible heart dilatation and testing for viruses.

Dr. Kilpatrick asked that liver be included to address possible acute fatty liver disease. Dr. Boyle asked about medications, drug screen as an option – medication screen – Toxicology screen is typical out of hospital medications – drugs of abuse.

Many Maternal Deaths occur several days after entry into the medical care system and are not automatic coroners' cases.

The Committee indicated the next step would be revision with the changes recommended.

MOTION – Submit this to IDPH – SQC – no state mandated system for coroners???

Medical examiner or coroner members of county government. Also sent to hospital pathologists. 1-2 maternal deaths in career. Would be helpful to allow this

List of recipients Perinatal Centers to distribute to Network Hospitals. Hopefully close this item by the end of December.

## **NEW BUSINESS**

**Proposal for the MMRC to be a subcommittee of PAC.** Currently charts come directly to the MMRC from the Perinatal Centers but any action taken by this Committee must go through the Statewide Quality Council.

There was a suggestion that discussion occur within this committee to address the possibility of the MMRC reporting directly to the PAC.

PAC must amend the by-laws in order to do this. Dr. Jones would need to be a member of the PAC to remain Chair. This would also necessitate a Rules change.

**MOTION – Move the MMRC to be a subcommittee of the PAC. Dr. Geller motioned, Pat Schneider seconded. The motion was approved unanimously.**

**Amanda Bennett presentation:** Ms. Bennett is a CDC fellow working with DHS and IDPH in Maternal Child Health Epidemiology. The Committee welcomed her and thanked her for her work.

Similar to the EIS program – evaluation of a surveillance system  
Nancy Martin was recognized for her work with Amanda Bennett.

An excellent presentation was given that defined the current status and considerations for advancement of the MMRC. The membership acknowledged the excellent presentation.

**IV. Case Review:** Dr. Bigger motioned that the MMRC go into closed session to accomplish case review, Dr. Powell seconded. MMRC Closed

- V. Adjournment:** Dr. Bigger motioned the MMRC commence open session. The next meeting will be December 9, 2009. Meeting adjourned 12:57pm.