



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

**June 11, 2014**

**10:30 a.m. – 1:00 p. m.**

**James R. Thompson Center  
9<sup>th</sup> Floor, 031 Conference Room  
100 West Randolph Street  
Chicago, Illinois**

**Robin L. Jones, MD, Chairperson  
MINUTES**

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

**Attendees:** Shirley Scott, Jerome Loew, J. Roger Powell, Nancy Martin, Kevin Madsen, Harold Bigger, Barb Prochnicki, Robert Abrams, Frank Nagorka, Trish O'Malley, Michael Socol, Pat Prentice, Gary Loy, Joan Briller, Stacie Geller,

**Absent:** Paula Melone Cynthia Wong, Harold Bigger, Deborah Boyle, Robert Gessner, Pat Schneider, Kevin Madsen, Abby Koch - all excused

**IDPH Staff:** Charlene Wells, Brenda Jones,

**Guests:** Roma Allen

- 1. Review and Approval of Minutes-** The minutes of the April 9, 2014 meeting were reviewed, Michael Sokol moved approval, Frank Nagorka seconded, the minutes were approved as written.
- 2. MMRC Case Reviews and Recommendations:** J Roger Powell moved for closure of the meeting, Shirley Scott seconded. The meeting was closed at 10:44 am. Cases were reviewed. Jerome Loew moved that the meeting be opened. Robert Abrams seconded. The meeting was re-opened at 12:16pm.
- 3. Review of the Society of Obstetric Anesthesiology and Perinatology  
Consensus Statement on the Management of Cardiac Arrest in Pregnancy**  
Dr. Jones opened the floor for discussion of the article. There were many elements to consider and the need to develop tools and education that would be based on the resources

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available. A Resuscitation Task Force with members Cynthia Wong, MD, Joan Briller, MD, Shirley Scott, RN MSN and Robert Abrams, MD will convene to discuss. By the October 8, 2014 meeting, the group will present the deliverables to be sought, how they will be operationalized and the timeframe. Stacie Geller commented that cardiac causes of death were the most frequent cause in California

Discussion included the need to review vascular accident cases as well as direct Cardiac issues.

OPTIONS for the Resuscitation Task Force include:

#1 Develop an educational tool

#2 Become an Addendum to the OB Hemorrhage Project

#3 Develop a new tool

The Task Force will look to see with the data says, and try to determine links to indicated what interventions could decrease fatal or “near miss “ outcomes.

Shirley Scott said reviews have indicated difficulty with intubation, identification of cause, IV access, and problems with documentation.

Brenda Jones asked if there would be a cost to implement and the membership all agreed there are costs to be incurred. Brenda asked for the bottom like. Robin L. Jones stated to implement change and monitor in all birthing hospitals would likely approach \$900,000 to \$1M.

Charlene Wells and Robert Abrams stated this project may not be as extensive. Cynthia Wong will be asked to chair the Task Force. Charlene suggested another educator participate on the task force. Dr. Briller will ask TL Vanden Hoek or the Chief of ER department at UIC to see if either would be interested.

#### **4. Maternal Morbidity data proposed for Appendix “A” Gary Loy**

The Grantee Site Visit Task Force asked for a list of Maternal Mortality conditions to be included in “Appendix “A” Gary Loy, MD submitted a proposed a list of morbidity conditions and after discussion with the group the MMRC will send the following list of conditions to the Grantee Site Visit Task Force:

##### **Recommendations for Maternal Morbidity Conditions to be added to Appendix “A”**

- Pulmonary Emboli
- Eclampsia
- Cardiomyopathy/ Cardiac Failure
- Stroke
- Readmission/ Reoperation within 30 days Post Partum
- Cesarean Hysterectomy/Hysterectomy within 30 days Post Partum
- Hemorrhage  $\geq 4$  units (already included)
- ICU Admissions (already included)

The propose list changed and removed wound dehissense requiring re-operation as this would be a re-admission. The members added cesarean hysterectomy or hysterectomy within 30 days.

It was suggested that each condition have a corresponding definitions. The Task Force will define timelines and consult literature including Dr. Grobman's article.

## 5. Goals for 2015

- There is a need to deal with inactivity of some members, this will be done by IDPH
- Stacie Geller indicated that an agreement with IDPH will allow the article to be published under the MMRC with acknowledgement of the authors
- Discussed proposed Federal Bill HR 4216 that would mandate a Maternal Mortality Review Committee in every state. The bill also would mandate a standard abstract form to be used in all case reviews
- To meet the recommendation from the PAC that Perinatal Centers and Hospitals have standards for reviews, abstract tools will be circulated to the members for discussion in October. The PAC requested Administrator Training for M+M's and a Statewide Abstraction form. **Brenda Jones will share a tool on HIV reviews**
- The future of the Obstetric Hemorrhage Education program will be discussed in October

## 6. Adjournment:

Robin L. Jones indicated to the members that this was Barb Prochnicki's last meeting as she will be retiring. Barb Prochnicki moved adjournment, Trish o'Malley seconded. The meeting adjourned at 1:10 pm