The Safe Motherhood Initiative (SMI) is a project comprised of nurses, midwives, physicians, patient safety specialists, and other partners in New York State working together to standardize care in all obstetric hospitals to prevent obstetric emergencies associated with maternal mortality and morbidity. The SMI focuses on the three leading causes of maternal death – obstetric hemorrhage, severe hypertension in pregnancy, and venous thromboembolism. The universal adoption of standardized clinical protocols to optimize the recognition, management, and prevention of the leading causes of maternal mortality can help reduce the incidence of mortality and morbidity. This is the cornerstone upon which the SMI project is built upon.

Venous thromboembolism is still a leading cause of maternal death. Our goal is to begin using antepartum and postpartum prophylaxis in all patients that require it based on their risk factors. Since 2013 we have looked at all aspects of our care and together with nursing, anesthesia, obstetricians, midwifes and high risk specialists decided on a standardized protocols that will be incorporated into Powerchart and order sets for VTE prevention.

Wednesday, April 21th, 2016 is the anticipated start date when the order sets that we have worked on will be in place. In summary; all antepartum patients admitted to the hospital will receive prophylactic dose of unfractionated heparin. Once a patient has been admitted for 3 days or longer, physical therapy should be consulted to assess the patient and teach them specific exercises that they will be able to perform for the remainder of their stay. This will be modified and tailored based on activity of the patient and their restrictions.

All post caesarian section patients will be receiving prophylactic dose of unfractionated heparin in the recovery room after they have been cleared for transfer to the Mother-Baby Unit. It will be continued until patient is discharged. Any contraindications or concern for receiving heparin whether from ob or anesthesia standpoint will be discussed during the OR debrief and during the recovery time period.

Compression stockings and pneumatic compression devices will be utilized in those patients who have been undergoing long labor inductions or are overweight but had a normal vaginal delivery.

This is a great start to a wonderful project. If any issues arise or if anyone has any questions please don’t hesitate to contact any us.

Sincerely,

Your SMI VTE team

Dr. Kowalska, Dr. Wang, H. Findletar DNP, CNM, H. Johns Harris RN,

L. Underwood RN, G. Gerardi RNC