



ASPIRE Obstetric Anesthesia Subcommittee Meeting

May 24, 2023





Agenda



Announcements



February 2023 Meeting Recap



GA-01 & GA-02 Measure Exclusion: Placenta Accreta



Measure Review: ABX-01



BMI Stratification



Use of Second Line Uterotonic Agents



Introductions

Welcome new members:

- Brigham and Women's – Lawrence Tsen and Sharon Reale
- Dartmouth - Johanna Cobb (Congrats to Dr. Joshi on her retirement!)
- Baylor- Uma Munnur and Sonal Zambare
- UCLA –Brittany Burton
- Yale- Aymen Alian

Please introduce yourself: Name, Role, Institution





Announcements

OB Subcommittee Virtual Meeting:

- November 15, 2023 1pm EST

MPOG Retreat

- October 13, 2023 San Francisco, CA



February Meeting Recap

- Last meeting held on February 15th. Slides and recording posted to basecamp.
- ABX-01 QI story shared by Dr. Robert Nicholson from Bronson-Kalamazoo.
- Dr. Mike Mathis, MPOG Research Director shared a brief overview of the PCRC process for those interested in conducting research using MPOG data. Please visit the MPOG website for steps to begin your proposal: <https://mpog.org/write-a-research-proposal/>
- Reviewed oxytocin survey results and determined there is wide variation in oxytocin dosages and rates of administration across sites. More research needed in this area before standardization can occur.



Measure Updates

GA-03-OB – On your [dashboards](#) now!

Percentage of cesarean delivery cases where general anesthesia was administered after epidural injection.

[Measure Spec-](#)

- Departmental only measure
- No threshold, outcome measure lower scores = better performance
- Not available for individual provider feedback emails

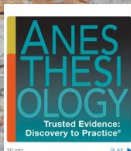


About Sites Research Quality Tools Downloads News/Events

Dashboard Login

Check out this Great Anesthesiology Journal Podcast Featuring Drs. Kai Kuck and Shiraz Ladha on Prolonged Opioid Use (EOS Study)

MORE INFO



Featured Author Podcast: Prolonged Opioid Use and Pain After Surgery
Anesthesiology Journal's podcast

Listen on Apple Podcasts

Hosted by: James T. Kuck, MD, PhD
Presented by: Kai Kuck, MD, PhD and Shiraz Ladha, MD

Article Discussed:

Prolonged Opioid Use and Pain Outcomes and Associated Practices after Surgery Under General Anesthesia: A Prospective Cohort Association Outcomes Study

Uncovering Pain and Opioid Use after Surgery

Questions about how to access your dashboard? Email nicbarri@med.umich.edu

Search:

GA-03-OB : GA administered after epidural for cesareans [Edit](#)

Measure ID [Edit](#)

GA-03-OB

Domain [Edit](#)

Obstetrics

Description [Edit](#)

Percentage of cesarean delivery cases where general anesthesia was administered after epidural injection.

Measure Type [Edit](#)

Outcome

Rationale [Edit](#)

General anesthesia is used in roughly 5% of elective cesarean deliveries and 14-20% of emergent cesarean deliveries.^{1,2} Mothers who receive neuraxial anesthesia report less pain on the day of surgery, show less gastrointestinal stasis, fevers, and coughing on post op day 2, and show earlier mobility and breastfeeding onset than those who receive general anesthesia.³ Mothers who receive general anesthesia during cesarean delivery may also be at increased risk of severe postpartum depression as compared to those who receive neuraxial anesthesia.⁴

Threshold [Edit](#)

Measure Time Period [Edit](#)

[Anesthesia Start](#) to [Anesthesia End](#)

Inclusions [Edit](#)

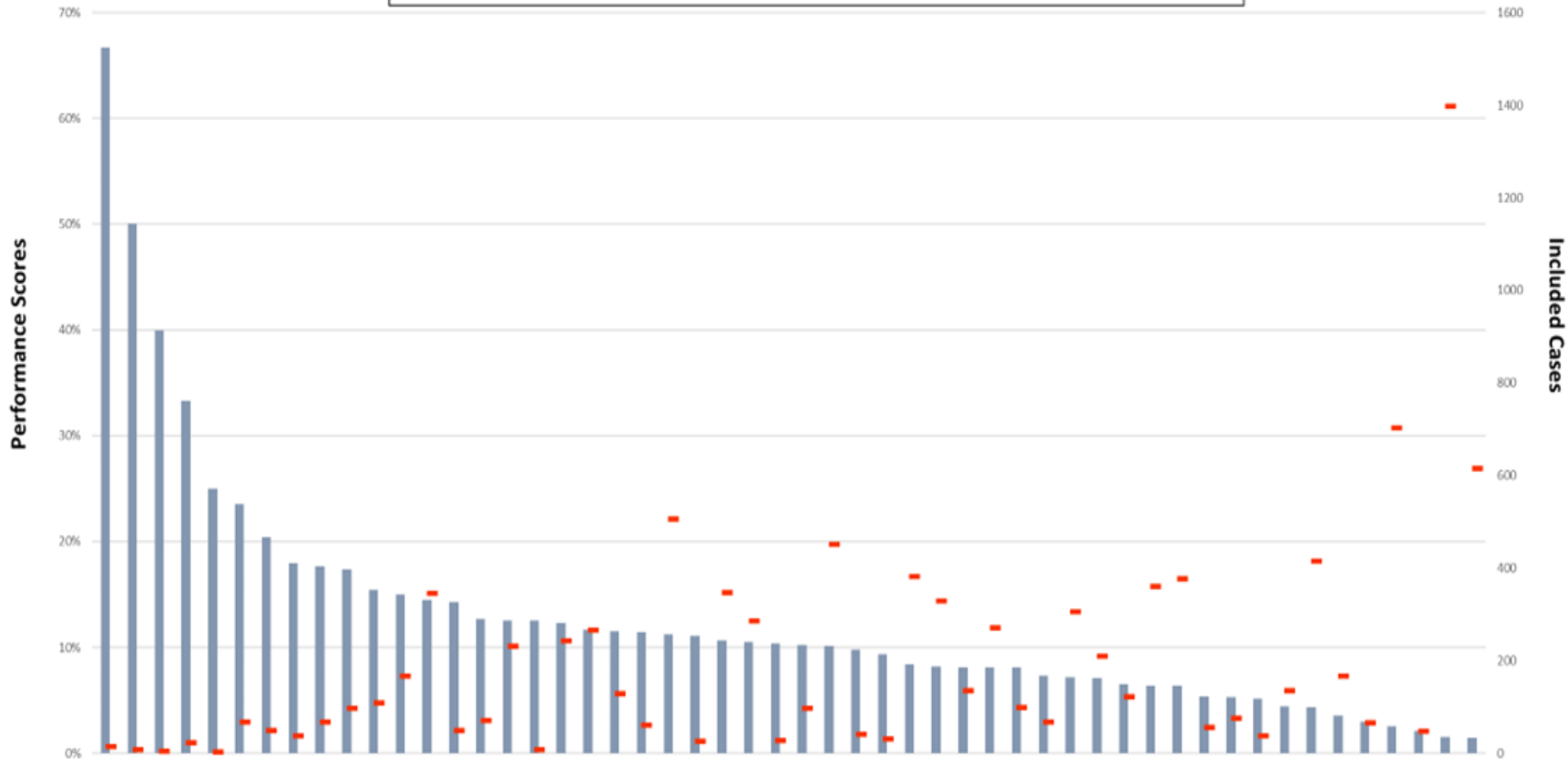
Cesarean Delivery cases where *only* epidural anesthesia was used

- Cesarean Delivery cases as determined by the [Obstetric Anesthesia Type](#) Phenotype. Phenotype results included:
 - Cesarean Delivery
 - Conversion (Cesarean Delivery Portion)
 - Conversion (Labor epidural and cesarean delivery combined)
- Neuraxial anesthesia use is determined by the [Anesthesia Technique Neuraxial](#) phenotype. Results included:
 - Epidural (GA-03)
 - Combined Spinal Epidural (CSE) (GA-03b)





GA-03 OB Performance Overview
February 2022- March 2023
Percentage of Patients who undergo GA after Epidural



In the News: Oxytocin labeling practice

- Recent article about Oxytocin labels with follow-up Twitter conversation
- What do your labels look like?

MPOG Social Media
Twitter @mpogaspire

LinkedIn – Multicenter Perioperative Outcomes Group



EE WiFiCall 18:38 11%

Association of Anaesthetists

Dear Editor

Oxytocin: a potentially dangerous drug with an innocuous label

We recently had a serious incident during a Category 3 caesarean section when oxytocin was injected intravenously instead of a saline flush, causing uterine hypertonus and necessitating an immediate switch to a Category 1 operation. We have both had similar near misses and know of many more. Identical or similar incidents have been described before [1, 2], and there must be considerable under-reporting.

Various approaches have been provided to reduce the risk of accidental administration of oxytocin [3], but Muddanna et al. suggested the use of specific colour coding for uterotonic syringe labels [1]. In the ISO system

anaesthetists.org

EE WiFiCall 18:38 11%

Association of Anaesthetists

We urgently request that the Association of Anaesthetists considers submitting this suggestion to the relevant ISO committee TC121.

Figure 1.

Matthew Bigwood
ST7 Anaesthetic Trainee

Andrew Ling
Consultant Anaesthetist

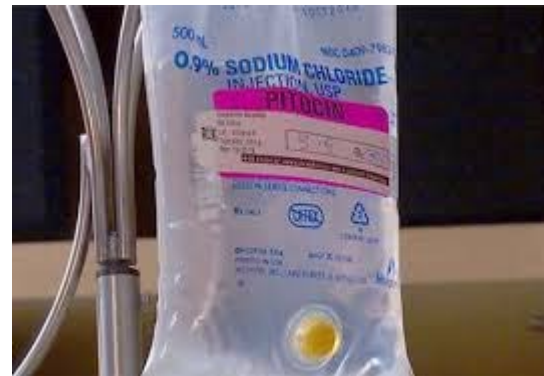
University Hospitals of Leicester, Leicester

Twitter: @MJTB1987

References

anaesthetists.org

Oxytocin Labeling Practice



Frontside view of IV bag and label



Backside view of IV bag and label





GA 01 & GA-02- Discussion for New Exclusion

GA-01-OB- Cesarean Delivery cases where General Anesthesia was used.

GA-02-OB- Percentage of Cesarean Delivery cases where General Anesthesia was Administered after Neuraxial Anesthesia.

Current Exclusions:

- GA-01 - Cesarean Hysterectomies & Non-cesarean delivery cases
- GA-02 – Cesarean Hysterectomies, Non-cesarean delivery cases, Cesarean delivery cases that only use general anesthesia without neuraxial anesthesia

Moving forward, should we exclude Placenta Accreta cases from these measures?



ABX-01 Measure Review

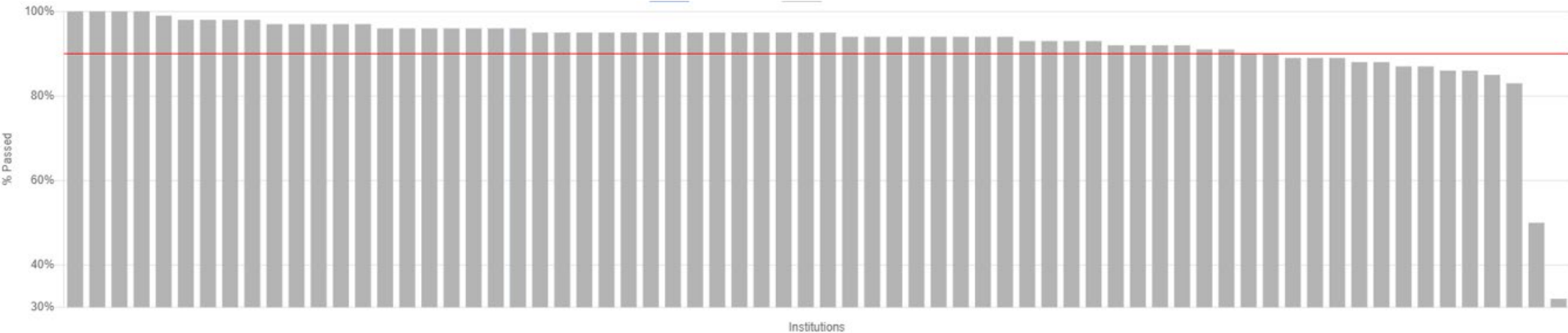
Brandon Togioka, MD - OHSU

Monica Servin, MD – University of Michigan



ABX-01-OB Current Performance

Cesarean delivery cases with antibiotic administration within one hour before surgical incision





Measure review

- BP-04 will be reviewed at the November meeting.
- The measure review schedule is posted on Basecamp. Please also check your emails for the measure review schedule.

- [Template form](#)

Measure	Published date	Present at OB subcommittee	Assigned to
ABX-01	July 2020	May 2023	Monica Servin and Brandon Togioka
BP-04	Feb 2021	Nov 2023	Preet Singh and Dan Biggs
GA-01	Feb 2021	Feb 2024	Melinda Mitchell and Sharon Abramovitz
GA-02	Aug 2021	Feb 2024	Melinda and Sharon
TEMP-05	Aug 2021	Feb or May 2024	Wandana Joshi and Christine Warrick



THANK YOU!

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