



Obstetric Anesthesia Subcommittee Minutes

May 14th, 2025

1:00-2:00 pm EST - Zoom

Attendees:

John Kowalczyk, Brigham & Women's	Jeremy Juang, UCSF
Lawrence Tsen, Brigham & Women's	Laura Cohen, UMass Memorial
Sharon Reale, Brigham & Women's	Christine McKenzie, UNC
Arthur Calimaran, Cleveland Clinic	Jackie Goatley, University of Michigan
Pam Tyler, Corewell Health	Tom Klumpner, University of Michigan
Johanna Cobb, Dartmouth	Allison Lee, UPENN
Wandana Joshi, Dartmouth	Henrietta Addo, MPOG
Ashraf Habib, Duke	Kate Buehler, MPOG
Josh Goldblatt, Henry Ford Health	Meilou Calabio, MPOG
Melinda Mitchell, Henry Ford Health	Leanna Delhey, MPOG
Katie O'Connor, Johns Hopkins	Frances Guida-Smiatacz, MPOG
Mellany Stanislaus, Johns Hopkins	Tory Lacca, MPOG
Wendy Owens, MyMichigan	Tiffany Malenfant, MPOG
Joshua Younger, Northwell Health	Kam Mirizzi, MPOG
Brandon Togioka, OHSU	Diana O'Dell, MPOG
Alexander Taylor, Trinity Health	Nirav Shah, MPOG
Heather LaLonde, Trinity Health	Rachel Stumpf, MPOG
Jerri Heiter, Trinity Health	Meridith Wade, MPOG
Rania Elkhateb, UAMS	Andrew Zittleman, MPOG
Jennifer Woodbury, UCSF	

Obstetric-Anesthesia Quality Subcommittee — Meeting Summary

Date/Time: 00:11–01:12 (ET)

Chair: Dr. Brandon Togioka (OHSU) **Vice Chair:** Dr. Wandana Joshi (Dartmouth)

Facilitator: Kate Buehler (MPOG)

1. Announcements

- **Staffing change:** Nicole Barrios stepped down; Kate Buehler now assisting with facilitation for OB Subcommittee meetings.



- **Upcoming meetings:** Sep 10 & Dec 3 (1 p.m. ET). Invitations open to interested colleagues from all sites; only MPOG-contributing sites may vote.
- **New member:** Dr. Emmarie Myers (Cleveland Clinic) welcomed.

2. February Meeting Recap

- Finalized *Days-from-Delivery* phenotype update.
- Clarified **OB Champion** role; outreach planned to sites lacking a champion.
- Launched **ABX-06-OB (azithromycin for C-section)** — now available on dashboards.
- Began reviewing potential measure topics for 2025

3. Literature Spotlight

- **WOMAN-2 trial** (15,000 anemic patients) showed **no benefit** from prophylactic IV tranexamic acid (TXA) after vaginal delivery.
- Editorial review of four quality trials likewise found no prophylactic benefit; aligns with ACOG statement (per chat).

4. PONV-05 Revision — Should midazolam be included as an acceptable antiemetic for prophylaxis?

- ASPIRE Quality Committee (Apr 2025) voted 65 % to add midazolam for the general surgical metric.
- Obstetric data show 75% compliance without midazolam considered as antiemetic.
- **Concerns raised:**
 - Rare OB use; minimal impact on compliance.
 - Memory-loss risk during childbirth or fetal-loss scenarios.
 - Meta-analysis quality and clinical relevance questioned.
- **Vote result:** Subcommittee **rejected adding midazolam** to PONV-05 for OB patients.

5. 2025 Measure-Build Priorities

Proposed metrics (all drawn from SOAP Center of Excellence):

Candidate Measure	Key Discussion Points
Epidural replacement rate	Documentation variability (not all sites have separate CSE/DPE notes); algorithm likely feasible.
Core-temperature monitoring in CD	Cost/access to bladder or zero-flux probes; link to outcomes
Multimodal analgesia	EHR often misses pre-/post-op meds; definition challenges.
Inadequate anesthesia during CD	Not punitive; midazolam should be excluded; exclude planned GA conversions? Consider intraop pain scores?
Unintentional dural puncture (UDP)	Capture via procedure-note checkbox (“wet tap”), blood patch, CSF flow; need standardized documentation.



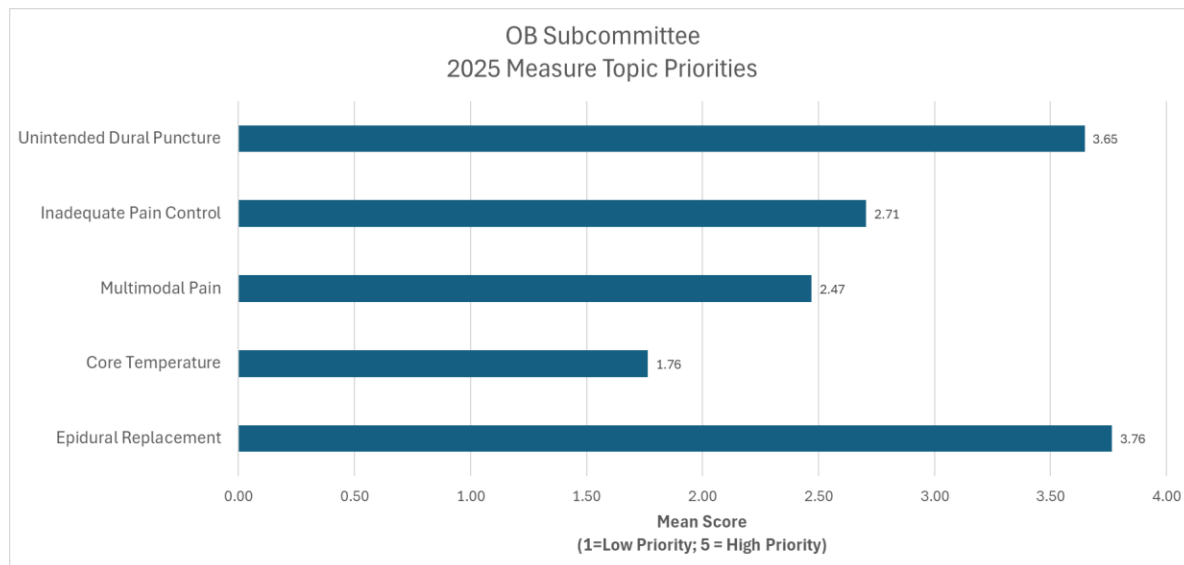
Effort vs. Reliability Mapping (informal):

- *High-reliability, low-effort*: Inadequate anesthesia; core temperature.
- *High-reliability, high-effort*: Epidural replacement.
- *Low-reliability, high-effort (current)*: Unintended Dural Puncture — but could shift left if sites add a click-box.

Discussion Highlights

- Strong sentiment (Habib, Tsen) for prioritizing **Unintended Dural Puncture** despite effort—importance of improving care for patients.
- Agreement that a simple checkbox in the neuraxial procedure note could immediately improve data quality.
- Multimodal and intra-op pain measures need careful drug-list refinement (exclude routine neuraxial opioids; IV-only opioids; precedex dosing nuances).

6. 2025 Measure Build Priority - Vote Results



1. **Epidural replacement** – highest priority.
2. **Unintentional dural puncture** – second priority.
(The pregnancy-phenotype update was deferred to next meeting.)



Action Items

#	Task	Responsible	Timeline
1	Initiate measure development for <i>Epidural Replacement</i> and <i>Unintentional Dural Puncture</i> (define phenotype logic, required data elements).	Kate Buehler & MPOG Analytics Team	Present draft measure specs at Sep 10 meeting
2	Outreach to sites without OB Champions to encourage designation and participation.	Dr. Joshi & Dr. Togioka	Complete outreach before Sep 10 meeting
3	Monitor ABX-06-OB adoption and collect early dashboard feedback.	All site liaisons	Ongoing; initial feedback in Sep
4	Add pregnancy-phenotype update to next agenda.	Brandon Togioka	By Sep 10

Next meeting: **Wednesday, September 10, 2025 — 1 p.m. ET / 10 a.m. PT**