Oral Defense Announcement
University of Missouri – St. Louis Graduate School

An oral examination in defense of the dissertation for the degree
Doctor of Nursing Practice with an emphasis in Women’s Health Nurse Practitioner

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B.S. in Nursing, May 2016, Goldfarb School of Nursing
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Implementation of Quantitative Blood Loss Tool to Detect Postpartum Hemorrhage After Vaginal Delivery

Date: July 6, 2022
Time: 3:45 p.m. to 4:20 p.m.
Place: 204 SCCB

Abstract

Problem Maternal deaths and comorbidities related to postpartum hemorrhage (PPH) continue to be high despite being quite preventable. The delay in recognition and treatment of PPH due to the use of imprecise estimated blood loss (EBL) instead of precise measurement using quantitative blood loss (QBL) attributes to this issue.

Methods For this quality improvement (QI) project, a descriptive, observational design was used to gather quantitative data regarding QBL implementation instead of EBL as well as the number of PPH’s identified. A pilot cohort of staff nurses participated by documenting QBL two hours after each delivery. The nurses were given an educational inservice prior to implementation as well as the necessary resources throughout the entire 8 week period. The recourses outlined how to implement QBL and how to document their findings. Patient’s demographic data including race and age were reported. Also, patients’ body mass index (BMI) was collected using AWHONN’s PPH risk assessment tool.

Results A total of 340 singleton vaginal deliveries met criteria over the 8 week period. Out of these deliveries, EBL was implemented 299 times (78.5% of the total deliveries) and QBL was implemented 41 times (10.8% of the total deliveries). The 41 deliveries in which QBL was used, 3 PPH’s were identified. All 3 women were identified as low risk for PPH. This shows while the overall number of QBL deliveries did not meet the increase projected, QBL did accurately identify hemorrhage in patients who were assessed as low risk for PPH prior to delivery.

Implications for Practice Overall, the nurses’ knowledge of the need for QBL implementation in all patients regardless of risk assessment has increased as a result of this QI project. QBL implementation should be adopted in all labor and delivery units in order to guarantee patient quality and safety as well as align with the current evidence-based practice guidelines.

Defense of Dissertation Committee
Chairperson, Cathy Koetting, PhD, DNP, APRN, CPNP-PC, PMHS, FNP-C
Committee Faculty Member, Charity Galgani, DNP, APRN, WHNP-BC
Committee Faculty Member, Sharon Anderson, MSN, RNC-OB