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# Prevention and Management of Postpartum Hemorrhage and Pre-Eclampsia/Eclampsia: National Programs in Selected USAID Program-Supported Countries



## Appendix A: Complete Questionnaire Content March 2011

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## Appendix A: Complete Questionnaire Content

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### Section I: Postpartum Hemorrhage (PPH)

1. Is AMTSL at every birth approved as national policy? *(YES/NO)*
2. Are the steps for correctly performing AMTSL incorporated with service delivery guidelines? *(YES/NO)*
3. Is misoprostol approved for prevention and/or treatment of PPH? *(YES/NO)*
4. Are midwives authorized to perform manual removal of placenta at all levels of the health system? *(YES/NO)*
5. Are midwives authorized to perform AMTSL with oxytocin at all levels of the health system? *(YES/NO)*
6. Is pre-service education curricula updated to include AMTSL for all SBA cadres? *(YES/NO)*
7. If so, which cadres?
8. Are students assessed for competency in performance of AMTSL as a clinical skill prior to graduation? *(YES/NO)*
9. Is AMTSL included in in-service training curricula for all SBA cadres? *(YES/NO)*
10. Is distribution of misoprostol for PPH prevention during home births being piloted? *(YES/NO)*
11. Is distribution of misoprostol for PPH prevention during home births being scaled up? *(YES/NO)*
12. Is oxytocin on the Essential Drug List? *(YES/NO)*
13. Is misoprostol on the Essential Drug List? *(YES/NO)*
14. Is oxytocin regularly available at facilities that offer maternity services? *(YES/NO)*
15. Do stock-outs of oxytocin occur? *(YES/NO)*
16. If so, how frequently do stock-outs of oxytocin occur?
17. Is AMTSL included in the national HMIS? *(YES/NO)*
18. Where is AMTSL recorded? e.g., delivery logs, maternity chart, other registers.
19. What activities in PPH prevention and management are being undertaken by MOH? Briefly specify what is being done.
20. What activities in PPH prevention and management are being undertaken by United States government-sponsored programs? Briefly specify what is being done.
21. What activities in PPH prevention and management are being undertaken by other partners funded by other donors? Briefly specify what is being done.
22. What percentage of districts is covered by current national PPH programs?
23. What percentage of current SBAs are being reached by programmatic efforts of the current national PPH programs?
24. Please describe any potential opportunities that you see for program expansion or scale-up. e.g., champion exists who needs support to disseminate messages; national conference scheduled for next year and curriculum revision planned; MOH has policy in place and needs support for program roll-out.
25. What are the three most significant bottlenecks to scaling up PPH-reduction programs in your country? Briefly describe what is being done.

26. Contact person who will be responsible for updates to this matrix. Include name, telephone number and e-mail address.

**Section II: Pre-eclampsia/Eclampsia (PE/E)**

1. What drugs are approved through national policy/service delivery guidelines as first-line anticonvulsants for severe PE/E?
2. Is MgSO<sub>4</sub> on the Essential Drug List for severe PE/E? *(YES/NO)*
3. What drugs are approved through national policy/service delivery guidelines for administration as first-line anti-hypertensives in severe PE/E?
4. What drugs are listed on the Essential Drug List, as anti-hypertensives in management of severe PE/E?
5. Are midwives authorized to diagnose severe PE/E and administer initial dose of MgSO<sub>4</sub> at lowest level facility that they work at within the health system?
6. Have pre-service education curricula and teaching materials been updated to include current global management principles for PE/E for all SBA cadres? *(YES/NO)*
7. If so, which cadres?
8. Are current global management principles for PE/E included in in-service training courses for SBAs? *(YES/NO)*
9. Is MgSO<sub>4</sub> regularly available at facilities that offer maternity services? *(YES/NO)*
10. Do stock-outs of MgSO<sub>4</sub> occur? *(YES/NO)*
11. If so, how frequently do stock-outs of MgSO<sub>4</sub> occur?
12. Is an indicator to monitor the quality of severe PE/E management included in the national HMIS? *(YES/NO)*
13. If so, what is this indicator and where is it recorded? e.g., delivery logs, maternity chart, other registers
14. What activities in PE/E prevention and management programming are being undertaken by the MOH? Please briefly specify what is being done.
15. What activities in PE/E prevention and management programming are being undertaken by United States government-supported implementing partners? Please briefly specify what is being done.
16. What activities in PE/E prevention and management programming are being undertaken by other partners funded by other donors? Please briefly specify what is being done.
17. What percentage of districts is covered by current PE/E programs?
18. What percentage of current SBAs are being reached by programmatic efforts of the current national PE/E programs?
19. Please describe any potential opportunities that you see for program introduction, expansion or scale-up, e.g., champion exists who needs support to disseminate messages; national conference scheduled for next year and curriculum revision planned; MOH has policy in place and needs support for program roll-out.
20. What are the three most significant bottlenecks to scaling up PE/E management programs in your country? Please briefly describe what is being done.
21. Contact person who will be responsible for updates to this matrix. Include name, telephone number and e-mail address.



