

Q13: Record time the observation

started



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waternal and Ne	iternal and Newborn Quality of Care Survey				necklist
				Q12	
		Cover P	Page		
Facility name			Facility number		
,			·		
Observer number			Today's date (day/month/year)		
IS NOT A NEW RESPONDENT, PRO	CEED TO $Q5.\ B$ EFORE OBSERVING O MAKE SURE THAT THE PROVIDER	THE CONSU	ULTATION, MAKE SURE T	AIN INFORMED CONSENT BELOW. IF TO O OBTAIN PERMISSION FROM BOTH TH TO EVALUATE HIM OR HER, AND THAT	HE SERVICE
READ ORAL CONSENT SCRIPT TO	HEALTH WORKER.				
Q5: Ask health worker Do I have	e your permission to be present a	at this cons	ultation?		
\square Yes, consent is given \rightarrow go t	o Q6				
\square No, consent is not given \rightarrow \bigcirc	observation of this health worker	r must <u>ENI</u>	<u>D;</u> if available, approacl	n another health worker for participa	ation.
Q6: Health worker line number (from staff listing)		(Q7: Sex of health works	er	
(Male	1
				Female	2
Q8: Health worker category	Category 1	1			
		$\begin{bmatrix} 2 \\ 3 \end{bmatrix}$			
		4			
		5			
		6			
		7			
		8			
		9			
CONSENT FOR CLIENT CANNOT BE START OF OBSERVATION.	E GIVEN BY HEALTH WORKER OR F.	TED, NEXT (FACILITY IN-	CHARGE. CLIENT OR PRO	D ACCOMPANYING CLIENT MAY GIVE C OXY CONSENT MUST BE OBTAINED PRI	
Q9: Ask client Do I have your pe	rmission to be present while you	u are receiv	ring services today?		
\square Yes, consent is given \rightarrow go t	o Q10				
\square No, consent is not given \rightarrow o	observation of this client must $\underline{\mathbf{E}}$	<u>ND</u> ; if avai	lable, approach another	r client for participation.	
Q10: Who gave consent	Client	1			
011. (1:	Next of kin/family friend	2	Ctt -1:t 1		·:1:4
Q11: Client code		i	Start client code at 1 for	r the first client observed at a given f	acılıty.
Q12: Client initials or other identifier				dentifier in box at top right of cover f lentify this client's case when observi	

MOST CLIENTS WILL BE IN LABOR WHEN ADMITTED AND OBSERVATION STARTS, HOWEVER SOME CLIENTS MAY HAVE ALREADY DELIVERED AND COME TO THE FACILITY WHEN THEY ARE EXPERIENCED A COMPLICATION (PPH OR PE/E). ALSO, SOME CLIENTS MAY EXPERIENCE A COMPLICATION (PE/E) BEFORE GOING INTO LABOR AND BE TREATED IN LABOR WARD.

cases





Q14: Client is admitted for:	Labor and delivery	1	ightarrow Go to Section 1 to begin the observation
	Complication	2	
Q15: Where is client coming from:			
	Other health facility	1	
	ANC ward at this facility	2	
	Home/someplace else	3	
Q16: Type of complication			
	Postpartum hemorrhage	1	ightarrow Go to PPH Checklist to begin the observation
	Pre-eclampsia/eclampsia	2	ightarrow Go to PE/E Checklist to begin the observation





Section 1: Initial Client Assessme Question	Yes	No	DK	Go to
Q100: Was this section observed?	1	0		$No \rightarrow Q200$
PLEASE ANSWER Q100 BEFORE PROCEEDING: WAS THIS SECTION OBSERVED? IF SECTION NOT RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATIC SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER) INTRODUCTION AND HISTORY TAKING				
Q101: Respectfully greets the pregnant woman	1	0	8	
Q102: Encourages the women to have a support person present during labor and birth	1	0	8	
Q103: Asks woman (and support person) if she has any questions	1	0	8	
Q104: Checks client card OR asks client her age, length of pregnancy, and parity	1	0	8	
Q105: Asks whether she has experienced any of the following for current pregnancy:				
01) Vaginal bleeding	1	0	8	
02) Fever	1	0	8	
03) Severe headaches and/or blurred vision	1	0	8	
04) Swollen face or hands	1	0	8	
05) Convulsions or loss of consciousness	1	0	8	
06) Severe difficulty breathing	1	0	8	
07) Persistent cough for 2 weeks or longer	1	0	8	
08) Severe abdominal pain	1	0	8	
09) Whether the client has felt a decrease or stop in fetal movement	1	0	8	
10) If there are any other problems the client is concerned about	1	0	8	
Q106: Checks woman's HIV status (checks card or asks woman)	1	0	8	
Q107: Offers woman HIV test if status unknown	1	0	8	
Q108: Is woman HIV positive? (observer: listen and record answer; circle Don't Know if status is unknown or is not discussed.	1	0	8	$No/DK \rightarrow Q110$
Q109: Asks about or counsels on the following topics for HIV positive mothers:				
01) Asks if client is currently taking ARVS	1	0	8	$No/DK \rightarrow Q109_0$
02) Explains why the mother should take ARVs	1	0	8	
03) Explains when and how the mother should take ARVs	1	0	8	
04) Administers ARVs to mother	1	0	8	
05) Explains why the newborn should take ARVs	1	0	8	
06) Explains when and how newborn should take ARVs	1	0	8	N /DIZ 0110
Q110: Client has any previous pregnancies? (observer: listen and record answer)	1	0	8	$No/DK \rightarrow Q112$
Q111: Asks about complications during previous pregnancies:	1	0	0	
01) Heavy bleeding during or after delivery	1	0	8	
02) Anemia 03) High blood pressure	1	0	8	
04) Convulsions	1 1	0	8	
<i>'</i>		0	8	
05) Multiple pregnancies (twins or above) 06) Prolonged labour	1 1	0	8	
07) C-section	1	0	8	
08) Assisted delivery (forceps, vacuum extraction)	1	0	8	
09) Prior neonatal death (death of baby less than 1 month old)	1	0	8	
10) Prior stillbirth (baby born dead that does not breathe or cry)	1	0	8	
11) Prior abortion/miscarriage (loss of pregnancy)	1	0	8	
EXAMINATION	1	U	O	
Q112: Washes his/her hands with soap and water or uses alcohol hand rub before any nitial examination	1	0	8	
2113: Explains procedures to woman (support person if present or if situation allows) before proceeding	1	0	8	
Q114: Takes temperature	1	0	8	
Q115: Takes pulse	1	0	8	
Q116: Takes blood pressure	1	0	8	$\mathrm{No/DK} \rightarrow \mathrm{Q117}$
01) Take client's blood pressure in sitting or lateral position	1	0	8	
02) Take blood pressure with arm at heart level	1	0	8	
Q117: Asks/notes amount and colour of urine output	1	0	8	





Q118: Tests urine for presence of protein	1	0	8	
Q119: Performs general examination (e.g. for anemia, edema)	1	0	8	
Q120: Performs the following steps for abdominal examination:				
01) Checks fundal height with measuring tape	1	0	8	
02) Checks fetal presentation by palpation of abdomen	1	0	8	
03) Checks fetal heart rate with fetoscope/doppler/ultrasound	1	0	8	
Q121: Wash her/his hands with soap and water or uses alcohol hand rub before vaginal	1	0	8	
examination				
Q122: Wears sterile gloves for vaginal examination				
Q123: Informs the woman what will happen before conducting vaginal examination				
Q124: Performs vaginal examination	1	0	8	
Q125: Informs pregnant woman of findings	1	0	8	
Q126: Was this woman referred for a c-section	1	0		$No \rightarrow Q200$
Q127: Cause of referral	Code			
Obstructed Labor	A			
Pre-eclampsia/eclampsia	В			
Placenta previa	С			
Previous c-section scar	D			
Fetal distress	E			
Cord prolapse	F			
Other	X			
End of Section 1				





Section 2: Intermittent Observation of First Stage of Labor				
Question	Yes	No	DK	Go to
Q200: Was this section observed?	1	0	•	$No \rightarrow Q300$
Please answer Q200 before proceeding: was this section observed? If section not	OBSERVED,	SKIP TO NE	XT SECTION	V.
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATIO	NS: (SOME O	F THE FOLL	OWING STE	PS MAY BE PERFORMED
SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER) PROGRESS OF LABOR				
Q201: At least once, explains what will happen in labor to woman (support person if	1	0	8	
present)	1	U	0	
Q202: At least once, encourages woman to consume fluids/food during labor	1	0	8	
Q203: At least once, encourages/assists woman to ambulate and assume different	1	0	8	
positions during labor			_	
Q204: Observer: Is a support person present at some point during labor?	1	0	8	
Q205: Partograph used to monitor labor	1	0	0	$N_0 \rightarrow Q211$
Q206: Action line on partograph reached	1	0	8	$No/DK \rightarrow Q211$
Q207: Record time action line was reached				
Q208: If action line reached on partograph, was any <u>definitive</u> action taken?	1	0	8	$No/DK \rightarrow Q211$
Q209: Record time action was taken	_	_	_	
•				
Q210: What definitive action was taken:	Code			
Consult with specialist	1			
Refer to other facility for specialist	2			
Prepare for assisted delivery	3			
Prepare for c-section	4			
Other (specify)	6			
EXAMINATION & PROCEDURES				
Question	Yes	No	DK	Go to
Q211: Puts on clean protective clothing in preparation for birth (goggles, gown or apron)	1	0	8	
Q212: Washes his/her hands with soap and water or uses alcohol hand rub prior to any	1	0	8	
examination of woman Q213: Wears sterile surgical gloves	1	0	8	
Q214: Drapes woman (one drape under buttocks, one over abdomen)	1	0	8	
Q215: Explains procedures to woman (support person) before proceeding	1	0	8	
Q216: Number of vaginal examinations (observer: to the best of your ability, update the	1	U	O	
answer to this question during intermittent observation of first stage of labor)				
Q217: Augments labor with oxytocin	1	0	8	No/DK \rightarrow Q218
Q218: Oxytocin administered intravenously (IV)	1	0	8	
Q219: Performs artificial rupture of membrane	1	0	8	
Q220: Administers antibiotics	1	0	8	$\text{No/DK} \rightarrow \text{Q223}$
Q221: Why were antibiotics administered?	Code			
Treatment for chorioamnionitis	1			
Management of pre-labor rupture of membranes	2			
Preparation for C-section	3			
Routine/prophylactic	4			
Don't know	8			
Q222: Which antibiotic was administered? (CIRCLE ALL THAT APPLY)				
Penicillin	A			
Ampicillin	В			
Gentamicin	С			
Metronidazole	D			
Cephalosporin	Е			
Other	X			
Don't know	Z			
PREPARATION FOR DELIVERY				
CHECK TO SEE IF THE FOLLOWING EQUIPMENT AND SUPPLIES ARE LAID OUT IN PREPARATION I	FOR DELIVE	RY. IF SOME	SUPPLIES 2	ARE IN A BIRTH KIT,
LOOK/ASK TO DETERMINE WHICH ITEMS ARE INCLUDED. Question	Yes	No	DK	Go to
Q223: Prepares uterotonic drug to use for AMTSL	1	0	8 8	No/DK \rightarrow Q225
Q225. I repares attendionic drug to use for AMTSD		0	J	110/1211 / 9/220





		Code			
	Oxytocin	1	0	8	
	Ergometrine	1	0	8	
	Syntometrine	1	0	8	
	Misoprostol	1	0	8	
Question		Yes	No	DK	Go to
Q225: Timer (clock or watch with seconds hand)		1	0	8	
Q226: Self-inflating ventilation bag (250 or 500 mL)		1	0	8	
Q227: Newborn face mask size 0		1	0	8	
Q228: Newborn face mask size 1		1	0	8	
Q229: Suction bulb		1	0	8	
Q230: Catheter		1	0	8	
Q231: Suction machine		1	0	8	
Q232: At least two cloths/blankets (one to dry; one to cover)		1	0	8	
Q233: Cap/hat for the newborn		1	0	8	
Q234: Disposable cord ties or clamps		1	0	8	
Q235: Sterile scissors or blade		1	0	8	
Q236: Was this woman referred for a c-section		1	0		$No \rightarrow Q238$
Q237: Cause of referral		Code			
	Obstructed Labor	A			
J	Pre-eclampsia/eclampsia	В			
	Placenta previa	С			
	Previous c-section scar	D			
	Fetal distress	E			
	Cord prolapse	F			
Q238: Has the woman completed the first stage of labor?		1	0		$Yes \rightarrow Q300$
If first stage of labor is not complete, check answers in the	HIS SECTION AGAIN 15-30 N	MINUTES LAT	ER		
	END OF SECTION 2				





Section 3: Continuous Observation of Second & Third Stage of Labor				
Question	Yes	No	DK	Go to
Q300: Was this section observed?	1	0		$No \rightarrow Q400$
PLEASE ANSWER Q300 BEFORE PROCEEDING: WAS THIS SECTION OBSERVED? IF SECTION NOT				
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATION OF THE PROVIDER OF THE PROVIDE OF THE PROVIDER	ONS: (SOME O	F THE FOLL	LOWING STE	PS MAY BE PERFORMED
SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER). PREPARATION FOR DELIVERY				
Q301: Puts on clean protective clothing in preparation for birth (goggles, gown or apron)	1	0	8	
(yes if no contamination)				
Q302: Washes his/her hands with soap and water or uses alcohol hand rub before any	1	0	8	
examination of woman (observer: circle yes if no contamination) Q303: Wears sterile surgical gloves (yes if no contamination)	1	0	8	
Q304a: Performs episiotomy if indicated	1	0	8	
Q304b: States correct indication for episiotomy	1	0	8	
Q305: Presentation of baby is cephalic (head first)	1	0	8	
DELIVERY & UTEROTONIC				
Q306: As baby's head is delivered, supports perineum	1	0	8	
Q307: Record time of the delivery of the baby				
Q308: Checks for another baby prior to giving the uterotonic	1	0	8	
Q309: Second baby present? (observer: circle 1 if multiple babies)	1	0	0	
Q310: Administers uterotonic?	1	0		$No \rightarrow Q317$
Q311: Record time uterotonic given	_	•		4,0-1
Q312:Timing of administration of uterotonic	Code			
At delivery of anterior shoulder	1			
Within 1 min of delivery of baby	2			
Within 3 min of delivery of baby	3			
More than 3 min after delivery of baby Q313: Which uterotonic given	4			
Oxytocin	1			
Ergometrine	2			
Syntometrine	3			
Misoprostol	4			
Q314: Record dose of uterotonic given (observer: if necessary, ask afterwards)				
Q315: Units of medication (observer: if necessary, ask afterwards)	1			
IU	1 2			
$_{ m mg}$	3			
mcg	4			
Q316: Route uterotonic given:	1			
IM	1			
IV	2			
Oral	3			
Other	4			
Q317: Record time the cord was clamped				
Question	Yes	No	DK	
Q318: Applies traction to the cord while applying suprapubic counter traction	1 1 1	0	8 8	
Q319: Performs uterine massage immediately following the delivery of the placenta		0	8	
Q320: Was placenta delivered before administration of uterotonic? (observer: circle Don't		0	8	
Know if no uterotonic was given)	1			
Q321: Assesses completeness of the placenta and membranes	1	0	8	
Q322: Assesses for perineal and vaginal lacerations	1	0	8	
Q323: Observer: Did more than one health worker assist with the birth?	1	0		
Q324: Observer: Did mother gave birth in lithotomy position (on back)	1	0		
Q325: Observer: Is a support person (companion) for mother present at birth?	1	0		•
End of Section 3				





Section 4: Immediate Newborn and Postpartum Care					
Question	Yes	No		Go to	
Q400: Was this section observed?	1	0		No → Q601	
PLEASE ANSWER Q400 BEFORE PROCEEDING: WAS THIS SECTION OBSERVED? IF SECTION NO					
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINAT SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER) IMMEDIATE CARE	IONS: (SOME O	F THE FOLLO	OWING STE	EPS MAY BE PERFORMED	
Q401: Immediately dries baby with towel	1	0	8		
Q402: Discards the wet towel	1	0	8		
Q403: Is the baby breathing or crying?	1	0		$No \rightarrow Q500$	
IF BABY IS NOT BREATHING OR CRYING, GO TO RESUSCITATION CHECKLIST (SECTION 5)			_	•	
Q404: Places baby on mother's abdomen "skin to skin"	1	0	8	-	
Q405: Covers baby with dry towel	1	0	8		
Q406: If not placed skin to skin, wraps baby in dry towel	1	0	8		
Q407: Ties or clamps cord when pulsations stop, or by 2-3 minutes after birth (not immediately after birth)	1	0	8		
Q408: Cuts cord with sterile blade or sterile scissors	1	0	8		
Q409: Observer: Is a support person (companion) for mother present?	1	0			
HEALTH CHECK					
Q410: Checks baby's temperature 15 minutes after birth	1	0	8		
Q411: Checks baby's skin color 15 minutes after birth	1	0	8		
Q412: Takes mother's vital signs 15 minutes after birth	1	0	8		
Q413: Palpates uterus 15 minutes after delivery of placenta FIRST HOUR AFTER BIRTH	1	0	8		
Q414: Mother and newborn kept in same room after delivery (rooming-in)	1	0	8		
Q415: Baby bathed within the first hour after birth	1	0	8		
Q416: Baby kept skin to skin with mother for the first hour after birth	1	0	8		
Q417: observe breastfeeding initiated within the first hour after birth	1	0	8		
Q418: Provides tetracycline eye ointment 1% prophylaxis	1	0	8		
Q419: Administers Vitamin K to newborn	1	0	8		
Q420: Is the mother HIV positive? (observer: listen and record answer; circle Don't Know if status is unknown or is not discussed)	1	0	8	$No/DK \rightarrow Q422$	
Q421: Administers ARVs to newborn	1	0	8		
Q422: Administers antibiotics to mother postpartum if indicated	1	0	8	$No/DK \rightarrow Q425$	
Q423: Why were antibiotics administered?	Code				
Treatment for chorioamnionitis					
Routine/prophylaction					
Third stage/postpartum procedure					
Don't know	8				
Q424: Which antibiotic was administered? (CIRCLE ALL THAT APPLY) Penicillir	Α.				
Ampicillir Gentamicir					
Metronidazole					
Cephalosporir					
Other					
Don't know					
CLEAN-UP AFTER BIRTH					
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINAT SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER)	`		OWING STE		
Question	Yes	No		Go to	
Q425: Disposes of all sharps in a puncture-proof container immediately after use	1	0	8		
Q426: Decontaminates all reusable instruments in 0.5% chlorine solution	1	0	8		
Q427: Sterilizes or uses high-level disinfection for all reusable instruments	1	0	8		
Q428: Disposes of all contaminated waste in leak-proof containers	1	0	8		
Q429: Removes apron and wipe with chlorine solution	1	0	8		
Q430: Washes his/her hands with soap and water or uses alcohol hand rub	1	0	8		





CLEAN-UP AFTER NEWBORN RESUSCITATION				
Q431: Was there a newborn resuscitation? (observer: check answer to Q500)	1	0		$No \rightarrow Q439$
Q432: Disposes of disposable suction catheters and mucus extractors in a leak-proof container or plastic bag	1	0	8	
Q433: Takes the bag and mask apart and inspects for cracks and tears	1	0	8	
Q434: Decontaminates the bag and mask in 0.5% chlorine solution	1	0	8	
Q435: Sterilizes or uses high-level disinfection for bag, valve and mask	1	0	8	
Q436: Decontaminates reusable suction devices in 0.5% chlorine solution	1	0	8	
Q437: Sterilizes or uses high-level disinfection for reusable suction devices	1	0	8	
Q438: Washes his/her hands with soap and water or uses alcohol hand rub	1	0	8	
Q439: Record time L&D observation ended				
REMEMBER TO THANK CLIENT AND PROVIDER FOR THEIR PARTICIPATION IN THE STUDY				
End of Section 4 - Go to Section 60	00			





Section 5: Checklist for Newborn Resus	citation			
Question	Yes	No	DK	Go to
Q500: Was this section observed?	1	0		$No \rightarrow Q600$
PLEASE ANSWER Q500 BEFORE PROCEEDING: WAS THIS SECTION OBSERVED? IF SECTION NOT RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATION SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER)				
Q501: Record time resuscitation started				
Q502: Clears the airway by suctioning the mouth first and then the nose	1	0	8	
Q503: Stimulates baby with back rubbing	1	0	8	
Q504: OBSERVER: does newborn starts to breathe or cry spontaneously?	1	0		$Yes \rightarrow Q531$
Q505: Calls for help	1	0	8	
Q506: Ties or clamps cord immediately	1	0	8	
Q507: Cuts cord with sterile blade or sterile scissors	1	0	8	
Q508: Places the newborn on his/her back on a clean, warm surface or towel	1	0	8	
Q509: Places the head in a slightly extended position to open the airway	1	0	8	
Q510: Tells the woman (and her support person) what is going to be done	1	0	8	
Q511: Listens to the woman and provides support and reassurance Q512: Checks mouth, back of throat and nose for secretions, and clears if necessary	1	0	8	
Q512: Checks mouth, back of throat and nose for secretions, and clears if necessary Q513: Places the correct-sized mask on the newborn's face so that it covers the chin, mouth and nose (but not eyes)	1	0	8	
Q514: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	
Q515: OBSERVER: is newborn's chest rising in response to ventilation?	1	0		$Yes \rightarrow Q524$
Q516: Checks the position of the newborn's head to make sure that the neck is in a slightly extended position (not blocking the airway)	1	0	8	
Q517: Checks mouth, back of throat and nose for secretions, and clears if necessary	1	0	8	
Q518: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	V 0504
Q519: <i>OBSERVER</i> : is newborn's chest rising in response to ventilation? Q520: Checks the position of the newborn's head again to make sure that the neck is in slightly extended position	1	0	8	$Yes \rightarrow Q524$
Q521: Repeats suction of mouth and nose to clear secretions, if necessary	1	0	8	
Q522: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	
Q523: OBSERVER : is newborn's chest rising in response to ventilation? IF NEWBORN'S CHEST IS NOT RISING AFTER TWO ATTEMPTS TO READJUST, OBSERVER SHOW HEALTH WORKER COMPETENT IN RESUSCITATION IS NOT AVAILABLE, OBSERVER MAY CHOOSED.			TSOR TO IN	TERVENE. IF A
Q524: Ventilates at a rate of 30 to 50 breaths/minute	1	0	8	
Q525: Conducts assessment of newborn breathing after 1 minute of ventilation	1	0		No→Q527
Q526: Condition of newborn at assessment	Code			0.501
Respiration rate 30-50 breaths/minute and no chest indrawing	1			→Q531
Respiration rate <30 breaths/minute with severe indrawing	3			
No spontaneous breathing	Yes	No	DK	Go to
Q527: Continues Ventilation	1	0	211	No→Q531
Q528: Conducts assessment of newborn breathing after prolonged ventilation (10 minutes)	1	0		No→Q530
Q529: Condition of newborn at assessment	Code			
Respiration rate 30-50 breaths/minute and no chest indrawing	1			→Q531
Respiration rate <30 breaths/minute with severe indrawing	2			
No spontaneous breathing	3	N	DIZ	C .
	Yes	No	DK	Go to
Q530: Continues Ventilation Q531: Record time that resuscitation actions ended (or time of death if baby died)	1	0		
Q532: Was the resuscitation successful? (observer: circle No if newborn died)	1	0		
Q533: Arranges transfer to special care either in facility or to outside facility	1	0	8	
Q534: Explains to the mother (and her support person if available) what happened	1	0	8	
Q535: Listens to mother and responds attentively to her questions and concerns	1	0	8	
Page 10 of 20				





Q536: Observer: Did you call for help or intervene during the resuscitation to save the	1 0				
life of newborn?					
Q537: Please comment on the quality of care provided:					
Was mother treated respectfully? Informed of procedures to her baby? Was the situation cha	notic or calm? Were there any major delays in needed				
treatment? If so, for what drugs/procedures and why? Were multiple health workers involv	ed? Who? If newborn did not survive, describe the				
circumstances. Was the mother counseled about the death of newborn?					
End of Section 5 – Return to Section 4, Q409					





Section 6: Outcome & Review of Documentation				
Question	Code			
COMPLETE THIS SECTION FOR ALL CLIENTS				
CONDITION OF MOTHER & NEWBORN AT END OF OBSERVATION				
$RECORD\ THE\ STATUS\ OF\ MOTHER\ AND\ NEWBORN\ AT\ THE\ END\ OF\ FIRST\ HOUR\ AFTER\ BIRTH.$				
Q601: Record outcome for the mother				
Goes to recuperation ward	1			
Referred to specialist, same facility	2			
Goes to surgery, same facility	3			
Referred, other facility	4			
Death of mother	5			
Don't know	8			
Q602: Record outcome for the newborn or fetus				
Goes to normal nursery	1			
Referred to specialist, same facility	2			
Referred, other facility	3			
Goes to ward with mother	4			
Newborn death	5			
Fresh stillbirth	6			
Macerated stillbirth	7			
Don't know	8			
POTENTIALLY HARMFUL PRACTICES				
Q603: Did you see any of the following harmful or inappropriate practices by health workers that are never indicated (CIRCLE ALL THAT APPLY)				
Use of enema	A			
Public shaving	В			
Apply fundal pressure to hasten delivery of baby or placenta	С			
Lavage of uterus after delivery	D			
Slap newborn	E			
Hold newborn upside down	F			
Milking the newborn's chest	G			
Stretching of the perineum	H			
Shout, insult or threaten the woman during labor or after	I			
Slap, hit or pinch the woman during labor or after	J			
None of the above	Y			
Q604: Did you see any of the following practices done without an appropriate indication (CIRCLE ALL THAT APPLY)				
Manual exploration of the uterus after delivery	A			
Use of episiotomy	В			
Aspiration of newborn mouth and nose as soon as head is born	C			
Restrict food and fluids in labor	D			
None of the above	Y			
REVIEW PARTOGRAPH AND/OR CHART FOR COMPLETENESS	***	3.7	DII	Q
Question	Yes	No	DK	Go to
Q605: Was there a newborn resuscitation? (observer: check answer to Q500)	1	0		$No \rightarrow Q611$
EXAMINE CHART TO DETERMINE WHETHER THE HEALTH WORKER RECORDED THE FOLLOWING	i		0	
Q606: Condition of the newborn at birth	1	0	8	
Q607: Procedures necessary to initiate breathing Q608: Time from birth to initiation of spontaneous breathing or time of death if	1 1	0	8	
unsuccessful				
Q609: Any clinical observations during resuscitation, including baby vital signs	1	0	8	
Q610: Final outcome of resuscitation measures	1	0	8	
EXAMINE PARTOGRAPH IF AVAILABLE	1 -			N 0000
Q611: was the partograph used to monitor labor?	1	0		$No \rightarrow Q630$
Q612: Which partograph used	Code			
Old WHO partograph (latent phase)	1			
New WHO partograph (at 4cm dilatation)	2			





Other partograph	3			
Question	Yes	No	DK	Go to
Q613: Initiated use of partograph at the appropriate time according to partograph used (New WHO partograph starts at $4~\rm cm$; old version starts at $3~\rm cm$)	1	0	8	
Examine partograph to determine whether the health worker recorded the foll	OWING INFO	RMATION W	HILE THE W	VOMAN WAS IN ACTIVE
<u>LABOR</u> :	•			
Q614: Fetal heart rate plotted at least every half hour	1	0	8	
Q615: Cervical dilatation plotted at least every four hours	1	0	8	
Q616: Descent of head plotted at least every four hours	1	0	8	
Q617: Frequency and duration of contractions plotted at least every half hour	1	0	8	
Q618: Maternal pulse plotted at least every half hour	1	0	8	
Q619: BP recorded at least every four hours	1	0	8	
Q620: Temperature recorded at least every two hours	1	0	8	
Q621: OBSERVER: Did you see provider fill out partograph after delivery (with information that should be entered during labor)? (circle Don't Know if partograph use was not observed)	1	0	8	
EXAMINE PARTOGRAPH TO DETERMINE WHETHER THE HEALTH WORKER RECORDED THE FOLL	OWING INFO	RMATION AI	BOUT THE L	DELIVERY
Q622: Birth time	1	0	8	
Q623: Delivery method	1	0	8	
Q624: Birthweight	1	0	8	
DATA EXTRACTION FROM PARTOGRAPH AND/OR CHART				
Q625: Was action line on partograph reached? Q626: Record time action line was reached	1	0	8	$No/DK \rightarrow Q630$
Q627: If action line reached on partograph, was any <u>definitive</u> action taken?	1	0	0	No/DK → Q630
Q628: Record time action was taken (observer: enter 99:99 if unknown)	1	U	8	100/DK → 6090
Q629: What definitive action was taken:	Code			
Consult with specialist	1			
Refer to other facility for specialist	2			
Prepare for assisted delivery	3			
Prepare for c-section	4			
Other (specify)	6			
FOR THE FOLLOWING QUESTIONS: EXAMINE PARTOGRAPH AND/OR CHART TO DETERMINE THE IN THE CHART OR PARTOGRAPH, BUT THE OBSERVER KNOWS THE INFORMATION OR PREVIOUSI HE OR SHE SHOULD FILL IN THEIR OWN ANSWER. IF THE INFORMATION IN THE CHART OR PARTOBSERVER'S INFORMATION. Q630: Record age of woman	LY RECORDEI	THE INFOR	RMATION IN	ANOTHER SECTION,
Q631: Record the gravidity of the woman				
Q632: Record the parity of the woman <u>prior to this delivery</u>				
Q633: Time of admission to labor ward (observer: enter 99:99 if unknown)				
Q634: Centimeters dilated upon admission to labor ward (observer: enter 99 if unknown)				
Q635: Time membranes ruptured (observer: enter 99:99 if unknown)				
Q636: How did the membranes rupture?	Code			
Spontaneous	1			
Artificial	2			
Don't know	8			
Q637: Type of delivery				
Spontaneous vaginal	1			
Assisted (instrumented)	2			
Caesarean	3			
Don't know	8			
Q638: Time of birth (observer: enter 99:99 if unknown)				





L&D Observation Checklist

Q639: Birthweight in grams (observer: enter 9999 if unknown)				
Q640: Record gestational age at birth in weeks (observer: enter 99 if unknown)				
Question	Yes	No	DK	Go to
Q641: Was she diagnosed with severe PE/E?	1	0	8	$No \rightarrow Q643$
Q642: Was baby delivered within 24 hours of PE diagnosis or within 12 hrs of eclampsia diagnosis?	1	0	8	
Q643: Did the mother have blood loss more than 500mL?	1	0	8	$No \rightarrow Q645$
Q644: Was she diagnosed with postpartum hemorrhage?	1	0	8	
Q645: Did the mother develop a fever of 38° C or higher during labor?	1	0	8	$No \rightarrow Q647$
Q646: Was she diagnosed with chorioamnionitis during labor?	1	0	8	
Q647: Were antibiotics administered to mother at any time?	1	0	8	$\mathrm{No/DK} \rightarrow \mathrm{Q651}$
Q648: When were antibiotics administered? (CIRCLE ALL THAT APPLY)	Code			
1st stage	A			
2nd stage	В			
3rd stage	C			
Postpartum	D			
Q649: Why were antibiotics administered? (CIRCLE ALL THAT APPLY)				
Treatment for chorioamnionitis	A			
After prelabor rupture of membranes	В			
Preparation for C-section	С			
Routine/prophylactic	D			
Third stage/postpartum procedure	E			
Don't know	Z			
Q650: Which antibiotic was administered? (CIRCLE ALL THAT APPLY)				
Penicillin	A			
Ampicillin	В			
Gentamicin	С			
Metronidazole	D			
Cephalosporin	E			
Other	X			
Don't know	Z			
Question	Yes	No	DK	Go to
Q651: Is mother HIV positive? (observer: circle Don't Know if status is unknown or was not discussed)	1	0	8	$\text{No/DK} \rightarrow \text{Q654}$
Q652: Was newborn given ARV(s)?	1	0	8	$\mathrm{No/DK} \rightarrow \mathrm{Q654}$
Q653: Record type of ARV(s) given to newborn	Code			
NVP	1			
AZT	2			
3TC	3			
Don't know	8			

Q654: Please comment on the quality of care provided:

Was mother treated respectfully? Informed of procedures to herself and her baby? Was the situation chaotic or calm? Were there any major delays in needed treatment? If so, for what drugs/procedures and why? Were multiple health workers involved? Who? If maternal or newborn/fetal death occurred, describe the circumstances. Was the mother counseled about the death of newborn/fetus?

End of Section 6





Section 7: Observation of Postpartum Hemorrhage					
Question		Yes	No	Go to	
Q700: Was this section observed?		1	0	$No \rightarrow Q800$	
Check that $Q9$ client consent has been filled in. If $Q9$ is blank, complete q	COVER PA	GE INCLUDII	IG Q 9 BEFORI	E STARTING PPH OBSERVATION	
Q701: Confirm that consent was received from client (or her proxy is she is incapacitated)		1	0		
Q702: Record time complication started					
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXA SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER). IF TIME OF EVENT IS UNKNOW. IMMEDIATE CARE		*			
Q703: Monitors bleeding		1	0	No→Q705	
Q704: How much bleeding was there (in mL)					
Q705: Performs uterine massage		1	0	No→Q707	
Q706: Time massage performed					
Q707: Gives oxytocin		1	0	No→Q711	
Q708: Record dose (in IU)					
Q709: Is route of administration intravenous (IV) through ringer's lactate or norm saline?	nal	1	0		
Q710: Time oxytocin given					
Q711: Other uterotonic given		1	0	No→Q714	
Q712: Which other uterotonic was given:		Code			
Ergor	netrine	1			
	netrine	2			
	prostol	3			
Q713: Time other uterotonic given					
Question		Yes	No	Go to	
Q714: Performs abdominal exam for uterine contraction		1	0	No→Q716	
Q715: Time exam performed					
Q716: Examines the vagina and perineum for lacerations and or cervical tear		1	0	No→Q718	
Q717: Time exam performed					
Q718: Examines the placenta for completeness		1	0	No→Q720	
Q719: Time exam performed					
Q720: Starts IV fluids		1	0	$No \rightarrow Q722$	
Q721: Time IV fluids started					
FOLLOW UP CARE					
Q722: Performs uterine exploration		1	0	$No \rightarrow Q724$	
Q723: Time procedure performed					
Q724: Performs uterine mechanical evacuation		1	0	No→Q726	
Q725: Time procedure performed					
Q726: Performs manual removal of the placenta		1	0	No→Q728	
Q727: Time procedure performed					
Q728: Performs bimanual compression of the uterus		1	0	No→Q730	
Q729: Time procedure performed					
Q730: Performs aortic compression		1	0	No→Q732	
Q731: Time procedure performed				4,10-	
Q732: Uses balloon or condom tampanade		1	0	No→Q734	
4.02. Obeo bandon of condom tampanade		1	U	110→Q194	





Q733: Time procedure performed				
Q734: Uses uterine sutures/cutgut		1	0	No→Q736
Q735: Time procedure performed				•
Q736: Performs cardiac resuscitation		1	0	No→Q738
Q737: Time procedure performed		1	U	110→&130
Q738: Sends to surgery for hysterectomy		1	0	No→Q740
Q739: Time sent to surgery performed				
Q740: Performs blood clotting time		1	0	No→Q742
Q741: Time procedure performed				
Q742: Checks haemoglobin/haematocrit		1	0	No→Q744
Q743: Time procedure performed				
Q744: Requests blood grouping and crossmatching		1	0	No→Q746
Q745: Time procedure performed		1	U	110-40140
			_	
Q746: Gives blood products Q747: Record number of units		1	0	No→Q749
7141. Necora number of units				
Q748: Time blood given				
Q749: Gives antibiotics		1	0	No→Q752
Q750: Which antibiotic was administered? (CIRCLE ALL THAT APPLY)		Code		·
	Penicillin	A		
	Ampicillin	В		
	Gentamicin Metronidazole	C D		
	Cephalosporin	E		
	Other	X		
	Don't Know	Z		
Q751: Time antibiotics given				
Question		Yes	No	Go to
Q752: Gives additional dose of oxytocin		1	0	No→Q756
Q753: Record dose (in IU)				
Q754: Is route of administration intravenous (IV)?		1	0	
Q755: Time oxytocin given				
Q756: Gives additional dose of other uterotonic		1	0	No→Q759
Q757: Which other uterotonic was given:		Code	v	110 7 4 100
	Ergometrine	1		
	Syntometrine	2		
Q758: Time other uterotonic given	Misoprostol	3		
(100: 11me otner uterotonic given				
Question		Yes	No	Go to
Q759: Is the woman's condition stable?	In in amina a	1	0	Yes→Q760
IF THE WOMAN'S CONDITION IS NOT STABLE, CONTINUE OBSERVING UNTIL SI POSSIBLE). CHECK ANSWERS TO Q722-Q759 AS OBSERVATION CONTINUES.	1E IS STABLE OR 1	FOR AT LEAST	T HOUR AFTE	K THE INITIAL EVENT (IF
Q760: End time of observation				
(continued next page)				
The state of the s				





L&D Observation Checklist

material and Newborn Quanty of Gare Survey	LOCA ODSCIVATION CHECKIST
CASE DETAILS	
Q761: What is the woman's diagnosis (CIRCLE ALL THAT APPLY)	Code
Atonic uterus	A
Laceration	В
Incomplete expulsion of placenta	C
Placenta attached	D
Coagulopathy	E
Q762: At what stage of labor and delivery did the complication occur:	
At delivery	1
Postpartum (before discharge)	2
After discharge	3
Q763: Please write a brief summary of the case and then describe the condition of	OF THE WOMAN AT THE END OF OBSERVATION:

Q764: Please comment on the quality of care provided:

Was the woman left alone at any point even if there was a danger of shock? Was she treated respectfully? Informed of procedures? Was the situation chaotic or calm? Were there any major delays in needed treatment? If so, for what drugs/procedures and why? Were multiple health workers involved? Who?

END OF SECTION 7 - RETURN TO APPROPRIATE SECTION TO CONTINUE OBSERVATION





Section 8: Observation of Severe Pre-eclampsia and Eclampsia						
Question	Yes	No	Go to			
Q800: Was this section observed?	1	0	$No \rightarrow End section$			
CHECK THAT Q9 CLIENT CONSENT HAS BEEN FILLED IN. IF Q9 IS BLANK, COMPLETE COVER PAGE INCLUDING Q9 BEFORE STARTING PPH OBSERVATION Q801: Confirm that consent was received from client (or her proxy is she is incapacitated) Q802: Record the time complication started	1	0				
4002. Record the time complication started						
RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATION SIMULTANEOUSLY OR BY MORE THAN ONE PROVIDER). IF TIME OF EVENT IS UNKNOWN, ENTER IMMEDIATE CARE						
Q803: Blood pressure taken	1	0	$No \rightarrow Q807$			
Q804: Record blood pressure: systolic						
Q805: Record blood pressure: diastolic						
Q806: Time blood pressure taken						
Q807: Urine checked for protein	1	0	No→Q810			
Q808: Record result						
Q809: Time urine checked						
Q810: Were IV fluids started?	1	0	No→Q812			
Q811: Time IV fluids given						
Q812: Magnesium sulfate given intramuscular (IM)?	1	0	No→Q815			
Q813: Record dose in grams			•			
Q814: Time magnesium sulfate given IM						
Q815: Magnesium sulfate given <u>intravenously (IV)</u> ?	1	0	No→Q818			
Q816: Record dose in mL						
Q817: Time magnesium sulfate given IV						
Q818: Diazepam given	1	0	$No \rightarrow Q822$			
Q819: Record dose in mg						
Q820: Diazepam given intravenously (IV)?	1	0				
Q821: Time diazepam given						
Q822: Antihypertensive given	1	0	$No \rightarrow Q827$			
Q823: Which antihypertensive was given:	Code					
Hydralazine/ Apresoline	1					
Nifedipine	2					
Labetalol Methyldopa/ Aldomet	3					
Other (specify)	6					
Q824: Record dose in mg						
Q825: Route of administration						
Intramuscular (IM)	1					
Intravenous (IV)	2					
Oral/sublingual Q826: Time antihypertensive given	3					
FOLLOW UP CARE	37	NT.	C			
Question Q827: Urinary catheter placed	Yes 1	No 0	Go to No→Q829			
Qo21. Officially casheser placed	1	U .	110-7Q023			





Q828: Time catheter placed			
Q829: Labor induced or augmented (including artificial rupture of membranes)	1	0	No→Q831
Q830: Time labor induced or augmented			·
Q831: Sent to surgery for c-section	1	0	No→Q833
Q832: Time sent for surgery			
Q833: Gives additional dose of magnesium sulfate	1	0	$No \rightarrow Q837$
Q834: Record dose in grams			
Q835: Magnesium sulfate given intramuscular (IM)?	1	0	
Q836: Time magnesium sulfate given			
Q837: Gives additional dose of other medication	1	0	No→Q842
Q838: Which medication(s) was the client given (CIRCLE ALL THAT APPLY) Diazepam	Code A		
Hydralazine/ Apresoline	В		→Q842
Nifedipine	C		→Q842
Labetalol	D		→Q842
Methyldopa/ Aldomet	E		→Q842
Other (specify)	X		→Q842
Q839: Record dose in mg for diazepam			
Question	Yes	No	Go to
Q840: Diazepam given intravenously (IV)?	1	0	
Q841: Time diazepam given			
Q842: Calcium gluconate given	1	0	No→Q844
Q843: Time calcium gluconate given			
MONITORING			
Q844: How many times in the first hour of observation was blood pressure taken	Code		
Blood pressure not taken during first hour	0		
Once	1		
Twice	2		
Three times	3		
Four times	4		
Five or more Q845: How many times in the first hour of observation were reflexes checked	5		
Reflexes not checked during first hour	0		
Once	1		
Twice	2		
Three times	3		
Four times	4		
Five or more	5		
Q846: How many times in the first hour of observation were respirations checked			
Respirations not checked during first hour	0		
Once	1		
Twice	2		
Three times	3		
Four times Five or more	5		
Question rive or more	Yes	No	Go to
Q847: Is the woman's condition stable?	1	0	GO 10
IF THE WOMAN'S CONDITION IS NOT STABLE, CONTINUE OBSERVING UNTIL SHE IS STABLE OR POSSIBLE). CHECK ANSWERS TO Q826-Q846 AS OBSERVATION CONTINUES.			ER THE INITIAL EVENT (IF
Q848: End time of observation			
	1		





L&D Observation Checklist

CASE DETAILS			
Q849: What is the woman's diagnosis	Code		
Eclampsia	1		
Severe pre-eclampsia	2		
Other (specify)	3		
Question	Yes	No	Go to
Q850: Was the woman ever unconscious	1	0	
Q851: Did the woman experience convulsions	1	0	
Q852: At what stage of labor and delivery did the complication occur:	Code		
Before labor (including admissions from ANC)	1		
During labor	2		
At delivery	3		
Postpartum (before discharge)	4		
After discharge	5		

Q853: Please write a brief summary of the case and then describe the condition of the woman at the end of observation

Q854: Please comment on the quality of care provided:

Was the woman left alone at any point even if there was a danger of convulsions? Was she treated respectfully? Informed of procedures? Was the situation chaotic or calm? Were there any major delays in needed treatment? If so, for what drugs/procedures and why? Were multiple health workers involved? Who?

END OF SECTION 8

IF CLIENT IS IN LABOR OR HAS ALREADY DELIVERED, PLEASE RETURN TO APPROPRIATE SECTION TO CONTINUE OBSERVATION; IF CLIENT HAS NOT DELIVERED AND IS NOT IN LABOR PLEASE MAKE SURE THAT YOU HAVE ANSWERED Q100, Q200, Q300, Q400, Q500, Q601-Q604, AND Q700 BEFORE MOVING ON TO NEXT CLIENT.