Severe Maternal Morbidity Among Delivery and Postpartum Hospitalizations in the United States

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1. Review the objectives in the abstract. If you were to design a study to propose a new standard for monitoring severe maternal morbidity, what new standards would you be interested in proposing? How would you design the study?

2. The authors used the Nationwide Inpatient Sample (NIS) dataset. Review http://www.hcup-us.ahrq.gov/nisoverview.jsp. How accurate is the NIS dataset? How are the data collected and verified?

3. The authors note several limitations to the NIS dataset in the discussion. How might this affect the results? Would it make them more or less likely?

4. How did the authors define severe maternal morbidity?

5. The authors report that severe maternal morbidity affects 52,000 women. Given their definition, what is the rate at your hospital or in your practice?

6. The authors state that this analysis was exempt from review by their institutional review board (IRB). What types of studies are exempt from IRB review? Would this study be exempted by your institution’s IRB?

7. The authors report that blood transfusion was the most common indicator of severe maternal morbidity. Is this consistent with your practice or hospital data? How frequent is transfusion? Do you have a standard transfusion policy? Why or why not?

8. Did the authors correct for multiple comparisons in their analysis? Why or why not? What is the reason to correct for multiple comparisons? What is the counterargument for not correcting for them?

9. The authors and editors have classified this study as Level III—an uncontrolled descriptive study including case series. Do you agree with this classification? Why or why not? What are the different classifications? How does classifying studies help readers?