

Appendix D – Letters of Support

- American Congress of Obstetricians and Gynecologists District II (New York)
- American Congress of Obstetricians and Gynecologists Illinois Section (District VI)
- American Congress of Obstetricians and Gynecologists District IX (California)
- American Congress of Obstetricians and Gynecologists FACOG (Florida)
- American Congress of Obstetricians and Gynecologists District XI (Texas)
- Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN)
 - National
 - California



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June 23, 2010

On behalf of the American Congress of Obstetricians and Gynecologists, District II, We congratulate the March of Dimes (MOD), the California Maternal Quality Care Collaborative (CMQCC), and the California Maternal, Child and Adolescent Health Division, for the development of the *California Quality Improvement Toolkit*. The goal of the toolkit is to eliminate non-medically indicated deliveries prior to 39 weeks gestation. We support the use of this important resource to improve the health and safety of our patients.

This toolkit is an excellent example of an effective “how-to guide” for physicians and other healthcare providers. However, if a hospital or physician practice already has the means to implement such a program, this toolkit will confirm the approaches already being used. For those needing assistance, this toolkit provides the initiative and insight to develop a quality program.

District II is committed to enhancing patient safety, improving outcomes and reducing liability risk for ob-gyns in New York. The *California Quality Improvement Toolkit* provides a mechanism to achieve this. ACOG District II hopes to partner with the New York State Department of Health to educate healthcare providers and distribute the toolkit statewide.

Sincerely,

Scott D. Hayworth, MD, FACOG
Chair, ACOG District II

Richard L. Berkowitz, MD, FACOG
Co-Chair, ACOG District II Patient Safety Committee

James Woods, MD, FACOG
Co-Chair, ACOG District II Patient Safety Committee

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ACOG
THE AMERICAN CONGRESS
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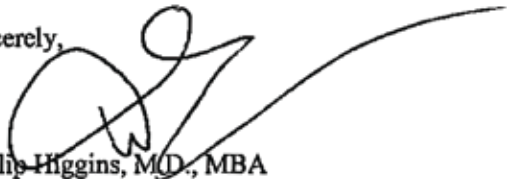
July 14, 2010

On behalf of the Illinois Section (District VI) of the American Congress of Obstetricians and Gynecologists (ACOG), I applaud the March of Dimes (MOD), the California Maternal Quality Care Collaborative (CMQCC), and the California Maternal, Child and Adolescent Health Division, Center for Family Health, California Department of Public Health (CMCAHD-CDPH) for the development of the Toolkit entitled, "Elimination of Non-medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age". We support the use of this Toolkit as a valuable resource to improve the health and safety of mothers and babies.

In our ongoing effort to reduce perinatal morbidity, ACOG has advocated against elective deliveries prior to 39 weeks gestational age for many years. The Toolkit which is based on established ACOG guidelines, includes: (1) a cogent rationale for eliminating purely elective deliveries prior to 39 weeks, including the importance of accurate dating of gestational age, (2) a user-friendly guide that both supports best practices and provides a template for hospitals and providers to assist them in implementing changes in policy and practice, (3) tools for data collection and analysis, and (4) educational materials for implementation, from FAQ sheets to a Power Point presentation for educating staff.

As the premier organization dedicated to the well-being of women, ACOG understands that the Toolkit engenders a process that enhances safety, improves quality of care, and maximizes healthy outcomes for mothers and babies. We are pleased that this valuable resource is going to be implemented in our own state of Illinois, and that together, we can improve perinatal outcomes. Again, we commend the March of Dimes, CMQCC, and the CMCAHD-CHPH for this effort.

Sincerely,



Phillip Higgins, MD., MBA



THE AMERICAN CONGRESS
OF OBSTETRICIANS
AND GYNECOLOGISTS

The American Congress of Obstetricians and Gynecologists

District IX California

April 15, 2010

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On behalf of the American Congress of Obstetricians and Gynecologists, District IX, I want to applaud you on the production of the **CALIFORNIA QUALITY IMPROVEMENT TOOLKIT: Elimination of Non-Medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age**. The District IX Advisory Council strongly supports the use of this important resource and believes that following these recommendations will improve the health and safety of our patients.

Since 1979, ACOG has advised against *elective* deliveries before 39 weeks gestation. As the executive summary so aptly points out, this toolkit does not define the standard of care in California, but rather advises users to adapt these guidelines and this toolkit based on their local facility level of care and patient population. The toolkit is based on ACOG Guidelines, and develops the case for implementation with four separate and important sections. First, it eloquently makes a case for deliveries after 39 weeks to improve the health of our infants and children. There is a need for effective pregnancy dating and appropriate timing of delivery. Second, the toolkit is a how-to implementation guide. If a hospital or a physician practice already has the means to implement such a program this toolkit will confirm the approaches already being used. For those facilities needing assistance, this toolkit provides the initiative and insight into developing a quality program. The third section provides suggestions on data analysis. And finally, the fourth section provides the educational tools for implementation, from FAQ sheets to a Power Point presentation for educating the hospital staff.

It is important to understand that we are recommending a process to enhance safety, to improve quality, and to increase healthy outcomes. This toolkit does NOT confuse the at times necessary role of early delivery for maternal or neonatal indications. It is important for clinicians to document the indication for admission or delivery in all patients. This toolkit will help in all regards. We commend March of Dimes, the California Maternal Quality Care Collaborative and the California Department of Public Health.

Sincerely,

Hal C. Lawrence, III, MD, FACOG
Vice President, ACOG Practice Activities Division

Jeanne A. Conry, MD, PhD
Chair, ACOG District IX

John S. Wachtel, MD
Chair, ACOG District IX Committee on Patient Safety and Quality Improvement

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June 15, 2010

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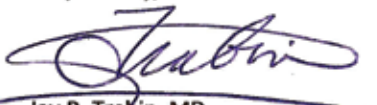
PAST-CHAIR
Ed Carney, MD

On behalf of the Florida Section of the American Congress of Obstetricians and Gynecologists (ACOG), I congratulate the March of Dimes (MOD), the California Maternal Quality Care Collaborative (CMQCC), and the California Maternal, Child and Adolescent Health Division; California Department of Public Health (CMCAHD-CDPH) for the development of the *California Quality Improvement Toolkit* with its goal to eliminate non-medically indicated deliveries prior to completion of 39 weeks gestation. We are delighted that this valuable resource is being considered for implementation in our own State.

As you know, in its ongoing effort to reduce perinatal morbidity, ACOG for many years has advocated against elective deliveries prior to 39 weeks. The *Toolkit* has produced very encouraging results and we believe that we can similarly reduce perinatal adverse outcomes by implementing that program in Florida. It is especially noteworthy that the *Toolkit*, which is based on established ACOG guidelines, neither defines the standards for the State nor does it impose punitive measures. What it does accomplish includes: (1) It explains the cogent rationale for purely elective deliveries only after 39 weeks and encourages the practice of accurate gestational age dating; (2) It serves to support and reinforce correct approaches already undertaken by some physicians and hospitals, and provides a practical template for implementation of those approaches by others; (3) It provides guidelines for data collection and analysis; and (4) It even offers useful FAQ sheets and a Power Point presentation for educating hospital personnel.

As the premier organization dedicated to the well-being of women, ACOG understands that the *Toolkit* engenders a process that enhances safety, improves quality, and maximizes healthy outcomes. This program will be useful in many capacities, from encouraging documentation of gestational age on hospital admission, to the collection and dissemination of outcome data. Again, we applaud the MOD, CMQCC, and CMCAHD-CDPH in their efforts to improve perinatal outcomes and appreciate the opportunity to apply this in Florida.

Respectfully,



Jay R. Trabin, MD



ACOG DISTRICT XI

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April 26, 2010

On behalf of the American Congress of Obstetricians and Gynecologists, District XI, I want to offer our support for the March of Dimes, "CALIFORNIA QUALITY IMPROVEMENT TOOLKIT: Elimination of Non-Medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age."

We commend the March of Dimes, the California Maternal Quality Care Collaborative, and the California Department of Public Health for their leadership in producing this toolkit. ACOG has advised against **elective** deliveries before 39 weeks gestation for many years, and this toolkit is based on ACOG Guidelines.

This toolkit provides with guidelines based on local level of care and patient populations. It emphasized the need for effective pregnancy dating and appropriate timing of delivery. This toolkit is a how-to guide for hospitals or physicians to provide the initiative and insight into developing a quality program at the local level. It also provides suggestions for data analysis and educational materials for hospital staff.

District XI is committed to providing safety, quality and increased healthy outcomes for our patients. This toolkit provides a mechanism to achieve this, without confusing the necessary role of early delivery for maternal or neonatal indications. ACOG District XI is partnering with the Texas Chapter of the March of Dimes to educate healthcare providers and distribute the toolkit.

Sincerely,

A handwritten signature in black ink that reads "John C. Jennings, M.D." in a cursive script.

John C. Jennings, MD
Chair
District XI ACOG



Promoting the health of women and newborns.

May 26, 2010

California Maternal Quality Care Collaborative (CMQCC)
Medical School Office Building
251 Campus Drive, MS 5415
Stanford, CA 94305

To Whom It May Concern:

On behalf of the 23,000 members of the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) and the millions of families they serve, I applaud the production of, "A California Toolkit to Transform Maternity Care: Eliminating Non-medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age" and "Obstetric Hemorrhage Toolkit: Obstetric Hemorrhage Care Guidelines and Compendium of Best Practices." AWHONN and its California Section support the use of these resources to advance the health of women and newborns.

AWHONN supports the American Congress of Obstetricians and Gynecologists (ACOG) recommendations that advise against non-medically indicated deliveries prior to 39 weeks completed gestation. Further, because of AWHONN's extensive research related to late preterm infants, it is clear that these babies are at risk for a host of potentially serious health problems. There is a growing need for effective pregnancy dating and appropriate timing of delivery. Health care providers and their patients must be made aware of the evidence that spontaneous labor is associated with fewer complications than induced labor, and that there are risks to the infant when born just a few weeks early.

AWHONN also supports the mission of CMQCC to eliminate preventable maternal mortality and morbidity and to eliminate racial and ethnic disparities. As such, the "Obstetric Hemorrhage Toolkit," will provide an equally important contribution to improving care in the state of California.

We commend CMQCC, the March of Dimes, the California Department of Health, the California Perinatal Quality Care Collaborative, and Stanford University on these collaborations that are making comprehensive and standardized resources available to obstetric care providers.

Sincerely,

A handwritten signature in cursive script that reads "Karen Peddicord".

Karen Peddicord, RNC, PhD
Chief Executive Officer

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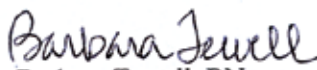
May 11, 2010

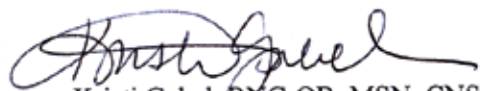
Dear Healthcare Provider,

The Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN) California Section elected officers were asked to review the toolkit titled "A California Toolkit to Transform Maternity Care: Eliminating Non-Medically Indicated (Elective) Deliveries Before 39 Weeks Gestational Age". This toolkit was a collaborative project developed by the California Maternal Quality Care Collaborative, March of Dimes, and the California Department of Public Health: Maternal Child and Adolescent Health Division.

We have reviewed the contents of the toolkit and feel this will serve as an important resource for healthcare providers and for hospitals. It will help to reduce and/or eliminate neonatal morbidities, such as respiratory complications, sepsis, and hypoglycemia.

On behalf of the AWHONN California Section, we are pleased to submit our letter of support for this toolkit.


Barbara Jewell, RN
Section Chair
AWHONN
California Section


Kristi Gabel, RNC-OB, MSN, CNS
Secretary/Treasurer
AWHONN
California Section