Iowa Statewide Perinatal Care Program Facts

Perinatal Care Team Members:

**Michael Acarregui**, MD – Neonatologist and Director

**Stephen Hunter**, MD, PhD- Maternal-Fetal Medicine Specialist, Associate Director

**Penny Smith**, RNC – Neonatal Nurse Consultant

**Amy Sanborn**, RNC- Obstetrical Nurse Consultant

**Susan Carlson**, RD – Neonatal Dietician

**Katherine Brogden** – Secretary and Program Coordinator

All Team members are employed at UIHC and each has 10 – 20 + years of experience in their specialty. The clinical activity of the physicians and nurses in the care of complicated obstetrical and neonatal patients keeps their expertise current and relevant.

The Program:

1. Is in its 36th year of operation.

2. Is responsible for maintaining Iowa’s Regionalized System of Perinatal Care

   This is Iowa’s System of referral for progressively complex patients to higher levels of care. This system results in excellent obstetrical and neonatal outcomes with an infant mortality rate among the lowest in the United States (< 5.0 / 1000 live births) and a remarkably low neonatal death rate in Iowa’s rural hospitals (1.48 / 1000 live births). With these outcomes, there is interest in other states in modeling the program to improve their perinatal outcomes. In May of 2008, The Commonwealth Fund ranked Iowa as the state with “the best overall health care system for children”. One of the several programs cited as instrumental to this achievement was the Iowa Statewide Perinatal Care Program.

3. Promotes Quality and Safety in patient care through:

   a. Direct critical peer review of medical records with visits to all Iowa hospitals providing obstetrical care. Level I hospitals with obstetrical services are visited on a biennial basis and Level II and III centers are visited annually. Review of adverse events including all maternal, neonatal and fetal deaths (stillbirths) is performed with a focus on issues of possible preventability.

   b. Dissemination of current, evidence-based guidelines to hospitals, administrators, nurses and physicians via:

      i. On site delivery – face-to-face education and discussion.

      ii. Quarterly publication of “The Iowa Perinatal Letter” and “Progeny” (1925 recipients).


   These activities and publications promote current standards for safety and quality in patient care that serve to standardize perinatal care across Iowa.
4. Provides IDPH access to maternity hospitals and staff as the Program maintains a regularly updated database of hospitals, administrators, nurses and physicians who are active at Iowa’s maternity hospitals. This communication network is a valuable tool for the rapid dissemination of new information to the many professionals served by the Program.

5. Is consulted daily by physicians and nurses at community hospitals regarding an array of issues in the care of mothers and babies. The Team is also frequently asked by hospital administrators to share their expertise by providing peer review of difficult cases at hospitals across Iowa.

6. Presents the Annual Iowa Conference on Perinatal Medicine: Over 220 physicians, nurses, public health officials and hospital administrators attend annually. Nationally known experts in perinatal care speak at this two-day conference in Des Moines. This is an unusual educational opportunity since it is designed to meet the needs of all perinatal healthcare providers. This year’s topics include “Management of the Obese Parturient” and “Medical-Legal Issues in Obstetrics and in Newborn Resuscitation”. These are relevant topics since obesity is recognized as a major contributor to maternal death and complications for both mothers and babies. Since perinatal injury to babies can have lifelong consequences, discussions of medical-legal concerns are of great interest to those providing perinatal care services. The 2009 Conference was the 35th Annual! This professional conference is self-sustaining and funded primarily through the registration fees of the attendees.

7. The Iowa Statewide Perinatal Care Team is instrumental in generating and updating the Iowa Perinatal Guidelines for Services every few years. The guidelines are then reviewed and approved by a multidisciplinary committee. The most recent guideline was published and distributed in 2008. Recent changes in the guidelines included recommendations for screening of mothers and babies for exposure to toxic substances during pregnancy, safe guidelines for labor induction and the use of Pitocin, and a new regionalized designation for hospitals with increased neonatology services.

You can access the Iowa Perinatal Letter online at http://www.idph.state.ia.us/hpcdp/perinatal_newsletters.asp

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