CPQCC Maternal Exposures Data Collection

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MatEx Data Collection Pilot

Data collection pilot to improve understanding of this critical public health issue

Data

Collecting data on all maternal substance exposures (including but not limited to opioids). QI

Range of reports designed to help hospitals identify areas of high and low performance, monitor the effects of improvement interventions, and conduct research that advances the quality of care.

MatEx Workgroup

Comprised of member hospitals who are passionate about this topic.

The workgroup is led by Co-Chairs Robert Castro, Lisa Chyi, and Angela Huang.



Eligibility Criteria

Any infant who is greater than or equal to 34 weeks gestation with **in-utero** history of exposure to opioids/narcotics (prescribed or illicit) with Neonatal Abstinence Syndrome (NAS) withdrawal symptoms by Day of Life 7. See list of drugs for complete eligibility:

- 1. Buprenorphine (Subutex, Suboxone)
- 2. Codeine
- 3. Fentanyl
- 4. Heroin
- 5. Hydrocodone
- 6. Hydromorphone
- 7. Methadone
- 8. Oxycodone
- 9. Other

Reference:

Hudak ML, Tan RC; Committee on Drugs; Committee on Fetus and Newborn. American Academy of Pediatrics Clinical Report. Neonatal drug withdrawal. Pediatrics. 2012;129(2). Available at: www.pediatrics.org/cgi/content/full/129/2/e540



About the Data Collection



Optional

Is optional and open to both CPQCC member and non-member hospitals.



www.CPQCCData.org

Will be housed on the NICU Data site.



NICU and more

Will be NICU focused but will not be limited to the NICU.



MBSEI

This is a separate initiative which CPQCC is implementing in partnership with CMQCC and Health Management Associates.



MatEx Database Participants

- Dominican Hospital
- John Muir Medical Center
- LPCH
- Mercy Medical Center Redding
- Rady Children's NICU at Rancho Springs Medical Center
- Redlands Community Hospital
- Riverside University Health System Medical Center
- Salinas Valley Memorial Hospital
- Santa Clara Valley Medical Center
- Santa Rosa Memorial Hospital
- Tri-City Medical Center
- UC Davis
- UC Irvine

Demographics

| Create New MA | TEX Record | * Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI). | * Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI). | | | | |
|----------------------|---|---|---|--|--|--|--|
| Demographics | Maternal History Maternal Screen Infant Screen | Infant Non-RX Treatment Infant RX Treatment Disposition | | | | | |
| MATEX ID | | NICU Data Record ID | | | | | |
| | MATEX ID - assigned by intake system | Only applicable for NICU Data eligible infants (NICU participants only). Otherwise, leave empty. | | | | | |
| Optional NAD Stay II | D | Optional Hospital Infant ID | | | | | |
| | [Optional] NAD stay reference number (NICU participants of | ly). [Optional] Infant ID for hospital record (not MRN). | | | | | |
| Date of Birth 🜟 | Unknown | Time of Birth | | | | | |
| Admission Type 🔺 | Inborn | Transfer for NAS Management 🗌 NICU | | | | | |
| | Outborn | Well-Baby | | | | | |
| Location of Birth 🔺 | | Pediatrics | | | | | |
| | For outborn infants, specify the hospital name in any forma | PICU | | | | | |
| Sex \star 🖨 | Female | Transported to another hospital Other | | | | | |
| | Male | | | | | | |
| | Ambiguous | Indicate all locations where the infant was transferred for treatment relat | ted to | | | | |
| | Unknown | exposure or potential exposure. | | | | | |
| Admission Date \star | | Mother's Date of Birth * | | | | | |
| | Indicate when the infant was admitted for treatment. The year of admission must be 2019. | | | | | | |
| Birth Weight * | Unknown | Gestational Age (ww/d) * | | | | | |
| | Specify the birth weight in grams. Any non-number entries are ignored. | Specify completed weeks and days as WW/D or WW.D or WWD or WWD (assumes 0 for days). | or WW | | | | |

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Maternal History

| Create New MA | | | * | st Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI) | | | | |
|---------------------------|-------------------------------|-------------------------|--|---|---|----------------------------------|---|--|
| Demographics | Maternal History | Maternal Screen | Infant Screen | Infant Non-RX Tre | atment Infant | RX Treatmen | t Disposition | |
| | eive Medication Assiste | ed Treatment during the | e 🔿 No | | Indicate the Medi | | Buprenorphine (Suboxone, Subutex) | |
| Pregnancy? 🙁 😑 | | | Yes | | Assisted Treatme | nt * | Methadone | |
| | | | Unkno | wn | | | Other (DESCRIBE) | |
| | | | | | | | Unknown | |
| | | | | | Description of Ot | her | | |
| Did the Mother Rec * 🗢 | eive Addiction Services | 0 0 7 | No Yes (ddiction Services inc uring the pregnancy | | t, psychiatry, psycholo ig the pregnancy and | ogy, social wor before admiss | k, facilitated group therapy, or facilitated family therapy. sion to labor and delivery. | |
| Maternal Drug Expo | osure during Pregnancy | | | ositive OUnknowr | | , illicit drugs, or | r antidepressants/antipsychotics. | |
| If Positive, Which Dr | 0 | bl | | | If Opiates during | Pregnancy, | Buprenorphine (Suboxone, Subutex) | |
| Exposures during P | regancy? \star 📄 Amphe | etamines | | | Which One(s)? ≭ | | Codeine | |
| | Antide | pressants/Psychotropic | s (non SSRI) | | | | ☐ Fentanyl | |
| | Benzoo | diazepines/Barbiturates | 5 | | | | Heroin | |
| | Cocain | le | | | | | Hydrocodone | |
| | Mariju | ana (THC) | | | | | Hydromorphone | |
| | Opiate | is . | | | | | Meperidine | |
| | Phency | yclidine (PCP) | | | | | Methadone | |
| | Selection | ve Serotonin Reuptake | Inhibitors (SSRI) | | | | Morphine | |
| | Tobacc | CO | | | | | Oxycodone (Percocet, Percodan, OxyContin) | |
| | | (DESCRIBE) | | | | | OxyContin | |
| | Unkno | wn | | | | | Other (DESCRIBE) | |
| | | | | | | | Unknown | |
| Description of Othe | r | | | | Description of Ot | her | | |

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Maternal Screen

| Create New MATEX Record | | | | * Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI). | | | | |
|---|---|---|-----------------|---|--------------------|--|--|--|
| Demographics | Maternal History | Maternal Screen | Infant Screen | Infant Non-RX Treatment | Infant RX Treatmer | nt Disposition | | |
| Maternal Toxicology S | creen 🗢 | C |) Negative 🔵 Po | ositive 🔿 Not Done 🔿 Unk | known | | | |
| If Positive, Which Drug Tested Positive? | Ampheta Antidepa Benzodia Cocaine Marijuar Opiates Phencyco | ressants/Psychotropic azepines/Barbiturates na (THC) ilidine (PCP) e Serotonin Reuptake l) DESCRIBE) | | If Opiate: | s, Which One(s)? | Buprenorphine (Suboxone, Subutex) Codeine Fentanyl Heroin Hydrocodone Hydromorphone Meperidine Methadone Morphine Oxycodone (Percocet, Percodan, OxyContin) OxyContin Other (DESCRIBE) Unknown | | |
| Description of Other | | | | Descripti | ion of Other | | | |



Infant Screen

| Create New MAT | EX Record | | | * Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI). | | | |
|---|---|--|----------------|---|---------------------|--|--|
| Demographics | Maternal History | Maternal Screen | Infant Screen | Infant Non-RX Treatment | Infant RX Treatment | Disposition | |
| Infant Toxicology Scre | en 🗢 | C |) Negative 🔵 P | ositive 🔿 Not Done 🔿 Un | known | | |
| If Positive, Which Drug Tested Positive? | Amphet Antidep Benzodi Cocaine Marijuat Opiates Phencyc | ressants/Psychotropic iazepines/Barbiturates na (THC) clidine (PCP) e Serotonin Reuptake o DESCRIBE) | ; | If Opiate | | Buprenorphine (Suboxone, Subutex) Codeine Fentanyl Heroin Hydrocodone Hydromorphone Meperidine Methadone Morphine Oxycodone (Percocet, Percodan, OxyContin) OxyContin Other (DESCRIBE) Unknown | |
| Description of Other | | | | Descript | ion of Other | | |



Infant Non-Pharmacological Treatment

| Create New MATE | EX Record | | | | * Item req | uired for the Collabor | rative for the Mom & Baby Substand | e Exposure Initiative (MBSEI). |
|--|------------------|---|---|-----------------------------|------------|--------------------------------------|--|--------------------------------|
| Demographics | Maternal History | Maternal Screen | Infant Screen | Infant Non-RX T | reatment | Infant RX Treatmen | nt Disposition | |
| Which Type(s) of Non-F Receive at Your Hospit | | | None Cuddlers Higher Calorie Fe Kangaroo Care o Low Lactose For Low Stimulation Pacifiers Rooming In Swaddling Other (DESCRIBE Not Applicable (r Unknown | er Clothed Cuddling mula | | | | |
| Description of Other | | | | | | | | |
| How was the Infant Fee Your hospital at any Tir | me? | s Breast Milk Breast Milk DESCRIBE) | | | | s) why Infant was Not d by Mother | Mother not available Mother medically unstable Mother HIV positive Mother positive for illicit drugs Other (DESCRIBE) Unknown | |
| Description of Other | | | | | Descript | tion of Other | |] |



Infant Pharmacological Treatment

| Create New MATE | EX Record | | Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBS) | | | | | |
|--|---------------|---|---|-----------------------------|---------------------|-------------|---------|--|
| Demographics | Maternal Hist | tory Maternal Screen | Infant Screen | Infant Non-RX Treatment | Infant RX Treatment | Disposition | | |
| Was Infant Treated wit Hospital? 🗢 | h Pharmacolo | ogic Drugs in Your | ○ No ○ Yes ○ Unknown The infant should have received at least one dose of the primary or secondary treatment drug. | | | | | |
| Was the Pharmacologi NAS Protocol at Your H | | Done in Accordance to the | ○ No ○ Yes ○ | No NAS Protocol for Treatme | nt 🔾 Unknown | | | |
| Primary Pharmacologic | c 🔿 I | Buprenorphine (Suboxone, | Subutex) | Treatme | ent Start Date | | Unknown | |
| Treatment Drug 😑 | \bigcirc | Clonidine | | | | | | |
| | \bigcirc I | Diluted Tincture of Opium | | Treatme | ent End Date | | Unknown | |
| | | Methadone | | | | | | |
| | | Morphine | | | | | | |
| | | Phenobarbital | | | | | | |
| | | Other (DESCRIBE) Primary Treatment Drug No | at Llood | | | | | |
| | | Unknown | 7.0320 | | | | | |
| | | | | | | | | |
| Description of Other | | | | | | | | |
| Secondary Pharmacolo | ogic 🔿 I | Buprenorphine (Suboxone, | Subutex) | Treatme | ent Start Date | | Unknown | |
| Treatment Drug 😑 | \bigcirc | Clonidine | | | | | | |
| | 0 | Diluted Tincture of Opium | | Treatme | ent End Date | | Unknown | |
| | $^{\circ}$ | Methadone | | | | | | |
| | | Morphine | | | | | | |
| | | Phenobarbital | | | | | | |
| | | Other (DESCRIBE) | | | | | | |
| | | Secondary Treatment Drug | Not Used | | | | | |
| | 0 | Unknown | | | | | | |
| Description of Other | | | | | | | | |



Disposition

| Create New MATEX Record | | | | * Item required for the Collaborative for the Mom & Baby Substance Exposure Initiative (MBSEI). | | | | | |
|-------------------------|------------------------|--|--------------------|---|--------------------------|---|--|--|--|
| Demographics | Maternal History | Maternal Screen | Infant Screen | Infant Non-RX Treatment | Infant RX Treatment | Disposition | | | |
| Infant Disposition | | | | | | | | | |
| Was the Infant Dischar | ged on NAS Treatme | ent Drugs 😑 | | 🔿 No 🔿 Yes 🔿 Unknor | wn | | | | |
| NAS Treatment Drug Ir | fant was Discharged | d on 🗢 | | Clonidine | | | | | |
| | | | | Methadone | | | | | |
| | | | | Morphine | | | | | |
| | | | | Phenobarbital | | | | | |
| | | | | Other (DESCRIBE) | | | | | |
| | | | | Unknown | | | | | |
| | | | | | | | | | |
| Description of Other | | | | | | | | | |
| Did Infant Receive any | Mother's Milk withir | n the last 24 Hours of In | fant Hospital Disc | :harge? * 🔿 No 🔿 Yes | 🔵 Unknown | | | | |
| Infant Health Insurance | | | | Infant (|)ischarge Date 🔺 | | | | |
| interredict instrance | | ercial HMO | | | isendige bate ip | | | | |
| | 0 | ercial PPO | | Infant H | lospital Disposition ∗ 😑 | Home to biological mother | | | |
| | Medi-Ca | al | | | | O Home to other family member | | | |
| | Point of | f Service EPO | | | | Discharged to Social Services/Foster Care | | | |
| | Other | | | | | Transported to another hospital | | | |
| | Unknow | vn | | | | O Died | | | |
| | Note: Health | urance options that apply ny Families Program trans i-Cal Managed Care plans | itioned to Medi-Ca | spital stay. in 2013. Select 'Medi- | | O Unknown | | | |
| Description of Other | | | | | | | | | |
| Maternal Disposition | 1 | | | | | | | | |
| Have All Safe Discharge | e Checklist Criteria B | een Met? 🛪 😑 | | 🔿 No 🔿 Yes 🔿 No Che | ecklist 🔿 Unknown | | | | |
| | | | | A template Maternal Safe Discharge Checklist is available here. You can customize the template to create a maternal Safe Discharge Checklist for your facility. Once you have developed those facility-specific criteria, indicate here whether the checklist has been followed for | | | | | |
| | | | | each specific patient. • Check "Yes" if the specific patient has met ALL safe discharge criteria on your hospital's defined Safe Discharge Checklist • Check "No" if the specific patient has not met ALL safe discharge criteria on your hospital's defined Safe Discharge Checklist | | | | | |

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For More Information...

MatEx Website

https://www.cpqcc.org/nicu/n icu-data/maternal-substanceexposure-data-collection-pilot

 Contains information about the MatEx Database and the Mother & Baby Substance Exposure Initiative

MatEx Webinar

https://www.cpqcc.org/engag e/event/maternal-substanceexposure-data-collection-pilot

• Webinar recording of how to use the MatEx Database and helpful tips on collecting data.

Join!

To join the Maternal Exposures Workgroup or to start collecting data on maternal exposures at your hospital, please submit a Help Ticket at <u>www.cpqcchelp.org</u>



