*Close-up of a hand writing on a piece of paper

Description automatically generated*

*[Date]*

Dear Colleague:

The NTSV Case Review Committeehas reviewed a recent NTSV cesarean case you were involved in, and we wanted to share our findings with you, with the goals of lifelong learning and continuous quality improvement in our unit; they are not intended to be punitive.

Delivery Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OBI#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MRN#*:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Indication for Primary Cesarean Delivery** | | |
| **Dystocia** | **Fetal Status** | **Other** |
| * Failed Induction | * Category II tracing | * Maternal Request |
| * Latent Phase Arrest |  | * Other: Unplanned   Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Active Phase Arrest |  | * Planned Cesarean Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Second Stage Arrest |

**Committee Determination: Exemplary**

The Committee would like to acknowledge providers who have dealt with difficult clinical scenarios and did an outstanding job managing those difficult cases. Regarding this case, the Committee felt the care provided by you was **exemplary** in the following manner:

|  |
| --- |
| Did the indication for cesarean meet ACOG/SMFM Guidance for dystocia? □ Yes □ No □ N/A  If no, why: |
| Was there documentation of the use of an algorithm when managing indeterminate FHT’s?  □ Yes □ No □ N/A  Was an algorithm followed when managing indeterminate FHT’s? □ Yes □ No □ N/A |
| What went well: |

This letter and case review are solely utilized to maintain and improve the quality of the care we provide, and as such remain a confidential part of your file and peer protected for medical-legal purposes.

Sincerely,

The NTSV Case ReviewCommittee

*[Date]*

Dear Colleague:

The NTSV Case Review Committeehas reviewed a recent NTSV cesarean case you were involved in, and we wanted to share our findings with you, with the goals of lifelong learning and continuous quality improvement in our unit; they are not intended to be punitive.

Patient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[MRN]* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Indication for Primary Cesarean Delivery** | | |
| **Dystocia** | **Fetal Status** | **Other** |
| * Failed Induction | * Category II tracing | * Maternal Request |
| * Latent Phase Arrest |  | * Other: Unplanned   Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Active Phase Arrest |  | * Planned Cesarean Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Second Stage Arrest |

**Committee Determination: Appropriate**

Appropriate care includes cesareans for dystocia that meet ACOG/SMFM Guidance and cesareans for Category ll fetal heart tracings with the documented use of an algorithm to guide management.

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| --- |
| Did the indication for cesarean meet ACOG/SMFM Guidance for dystocia? □ Yes □ No □ N/A  If no, why: |
| Was there documentation of the use of an algorithm when managing indeterminate FHT’s?  □ Yes □ No □ N/A  Was an algorithm followed when managing indeterminate FHT’s? □ Yes □ No □ N/A |
| Opportunities identified through case review: |
| What went well: |

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Sincerely,

The NTSV Case Review Committee

*[Date]*

Dear Colleague:

The NTSV Case Review Committeehas reviewed a recent NTSV cesarean case you were involved in, and we wanted to share our findings with you, with the goals of lifelong learning and continuous quality improvement in our unit; they are not intended to be punitive.

Patient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[MRN]* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Indication for Primary Cesarean Delivery** | | |
| **Dystocia** | **Fetal Status** | **Other** |
| * Failed Induction | * Category II tracing | * Maternal Request |
| * Latent Phase Arrest |  | * Other: Unplanned   Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Active Phase Arrest |  | * Planned Cesarean Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Second Stage Arrest |

**Committee Determination: Exploratory**

In considering your case, the Committee requests further clarification. Please respond in writing to [Person/Committee] at [email/address] by [date] for the following inquiries:

|  |
| --- |
| Did the indication for cesarean meet ACOG/SMFM Guidance for dystocia? □ Yes □ No □ N/A  If no, why: |
| Was there documentation of the use of an algorithm when managing indeterminate FHT’s?  □ Yes □ No □ N/A  Was an algorithm followed when managing indeterminate FHT’s? □ Yes □ No □ N/A |
| Opportunities identified through case review: |
| What went well: |
| Exploratory Questions - Please respond in writing to the following inquiries: |

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Sincerely,

The NTSV Case Review Committee

*[Date]*

Dear Colleague:

The NTSV Case Review Committeehas reviewed a recent NTSV cesarean case you were involved in, and we wanted to share our findings with you, with the goals of lifelong learning and continuous quality improvement in our unit; they are not intended to be punitive.

Patient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[MRN]* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Indication for Primary Cesarean Delivery** | | |
| **Dystocia** | **Fetal Status** | **Other** |
| * Failed Induction | * Category II tracing | * Maternal Request |
| * Latent Phase Arrest |  | * Other: Unplanned   Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Active Phase Arrest |  | * Planned Cesarean Indication \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| * Second Stage Arrest |

**Committee Determination: Criteria Not Met**

This category designates care that does not meet national and unit-based standards.

|  |
| --- |
| Did the indication for cesarean meet ACOG/SMFM Guidance for dystocia? □ Yes □ No □ N/A  If no, why: |
| Was there documentation of the use of an algorithm when managing indeterminate FHT’s?  □ Yes □ No □ N/A  Was an algorithm followed when managing indeterminate FHT’s? □ Yes □ No □ N/A |
| Opportunities identified through case review: |
| What went well: |

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Sincerely,

NTSV Case Review Committee