

Facility Name: _____

UFI: |__|__|__|__|

MODULE 6: PARTOGRAPH REVIEW

Interviewer Name _____ **Date (d/m/y):** ___/___/___

Instructions: Ask to see the partographs in use at the facility, and then ask the person in charge of the maternity the following questions. Make sure you are given copies of completed partographs to verify that the partograph is used in the facility.

No.	Item	Responses		Skip to
1	Do you use a partograph in this facility?	Yes 1 No 0		If "Yes", skip to 3
2	Why do you not use the partograph in this facility? a. Staff are not trained b. No supplies (no blank partographs) c. Staff do not have time d. Use of the partograph is not mandatory/not policy e. Other (<i>specify</i>) _____	Mentioned spontaneously	Not mentioned	ALL end Module 6
		1	0	
		1	0	
		1	0	
		1	0	
3	Which type of partograph is used in this facility? a. Modified WHO partograph b. Simplified WHO partograph c. Composite WHO partograph d. Other (<i>specify</i>) _____	Yes	No	If the answer to 3a, 3b, or 3c is "Yes", continue on to 4 Otherwise, end Module 6
		1	0	
		1	0	
		1	0	
		1	0	
4	Is there a labor management protocol for a woman using a partograph? <i>(Ask and then confirm with observation of poster or chart on the wall. If could not observe, circle 0 for "no")</i>	Yes 1 No 0		

- Look through records and select three recent partographs. Choose only partographs that have been filled out within the last 12 months.
- If possible, choose partographs completed by different providers.
- Ask for the case notes and/or patient records for these partographs.
- The partographs should belong to women: 1) at term, 2) <8 cm dilatation at first exam, 3) with vertex presentation, 4) fetal heart present at first exam, and 5) without obstetric complications at first exam (multiple gestations should be considered as a complication).
- If the facility uses the composite WHO partograph, select only partographs that start with the active phase of labor.

There is one column for each partograph. Write the correct codes/answers in the appropriate cell. Answer all the questions for one partograph, then go to the second partograph and then the third partograph.

No.	Question	Case 1	Case 2	Case 3
5	What was the woman's dilatation when the partograph was started? <i>(write number of cms)</i>			
6	Was the first dilatation charted on the alert line? 1. Yes 0. No <i>If "No", end the review for this case and move to next case.</i>			
7	How many hours and minutes elapsed between first exam and delivery? <i>(Refer to the case notes/patient record if necessary.)</i> <i>(write number of hours and minutes; 99:99 = No information)</i>	___ : ___ hrs min	___ : ___ hrs min	___ : ___ hrs min
8	How many times was the woman's temperature checked and recorded between admission and delivery (including admission and delivery)?			
9	How many times was blood pressure checked and recorded between admission and delivery (including admission and delivery)?			
10	How many times was the mother's pulse checked and recorded between admission and delivery (including admission and delivery)?			
11	Was the fetal heart rate observed at least at hourly intervals? 1. Yes 0. No			
12	Were contractions assessed at least hourly? 1. Yes 0. No			
13	How many times was a vaginal examination carried out and recorded between admission and delivery (including admission and delivery)?			
14	Was the descent checked and recorded between admission and delivery? 1. Yes 0. No			
15	Was the state of the membranes or color of the liquor recorded? 1. Yes 0. No			

No.	Question	Case 1	Case 2	Case 3
16	According to the partograph, when did the woman deliver? 1. On or left of the alert line → skip to 18 2. Between the alert and action lines → skip to 18 3. On or to the right of the action line			
17	If she delivered on or to the right of the action line, how many hours and minutes beyond the action line? <i>(write number of hours and minutes; 99: 99 = No information)</i>	____ : ____ hrs min	____ : ____ hrs min	____ : ____ hrs min
18	Was augmentation used? 1. Yes 0. No → skip to 20			
19	If augmentation was used, when? 1. On the alert line 2. Between the alert and action lines 3. On or to the right of the action line			
20	Was time at delivery filled in? <i>(Refer to the case notes/patient record if necessary.)</i> 1. Yes 0. No			
21	What type of delivery did she have? <i>(Refer to the case notes/patient record if necessary.)</i> 1. Spontaneous vertex delivery → skip to 23 2. Vacuum extraction or forceps delivery 3. Cesarean delivery 4. Other (specify by writing in cell) → skip to 23 9. No information → skip to 23			
22	If operative vaginal delivery or cesarean delivery, state reason. <i>(Refer to the case notes/patient record if necessary)</i> 1. CPD 2. Fetal distress 3. Other (specify by writing in cell)			
23	Outcome for the baby <i>(Refer to the case notes/patient record if necessary)</i> 1. Normal live birth 2. Live birth with distress (APGAR <7) 3. Stillbirth 9. No information			

Comments