Clinical resources for pregnant patients at Kelsey-Seybold include:

• The Kelsey-Seybold electronic medical record (EMR): The EMR allows Kelsey-Seybold physicians to coordinate care with a full picture of a patient’s recent test results, best practice alerts and compliance monitoring.

• 24/7 OB Hotline at 713-442-BABY (2229): This dedicated phone number can be used any time, day or night, to reach a Kelsey-Seybold nurse who has access to the patient’s EMR and can page the physician on call.

• A free, no obligation “Get Acquainted Visit” with any Kelsey-Seybold pediatrician.

• A special website at HoustonBabyDocs.com and New Mom Concierge at 713-442-MOMS (6667). The Concierge can assist mom and dad with selecting a pediatrician or scheduling a “Get Acquainted Visit” before their little one arrives.

• Online resources: With their secure MyKelseyOnline account, patients can email their doctor’s office, check most test results and schedule appointments.

• Screening for postpartum depression: At two weeks after delivery, all Kelsey-Seybold OB patients are screened for postpartum depression.

The OB Care Management team includes:

• The patient’s obstetrician/gynecologist (OB/GYN).

• OB nurse case manager.

• Registered sonographers who perform ultrasound studies of the developing fetus and pelvic organs.

• Board-certified Kelsey-Seybold radiologists who review all obstetric and pelvic sonograms.

• Referrals to KelseyCare affiliate specialists for complex, high-risk pregnancy management.

• Support from Kelsey-Seybold nurses, day and night (not just for high-risk cases).

• Physicians and nurses sharing a common EMR system.

Our Gift to Expecting Moms: A special spiral-bound booklet where moms-to-be can keep track of records, appointments, sonograms and other important information in one convenient place.

By the Numbers: According to the Texas Health Resources and Services Administration, infant care costs are growing by more than 10% per year, with 50% attributed to extremely preterm infants.
We utilize EpicCare to identify patients who are pregnant.

Using our EpicCare electronic medical record (EMR), a report is generated weekly of newly pregnant obstetrics (OB) patients. Our OB Care Management team uses a computerized risk assessment tool and the patient’s own EMR to determine risk status.

**High-Risk Assessment questions include:**
- Does the patient have a history of preterm labor and/or delivery?
- Multiple gestation pregnancy? How many fetuses currently?
- Diagnosis of gestational diabetes?

**At-Risk Assessment questions include:**
- Did the patient have a delivery less than one year ago?
- Has patient had triplets or higher order multifetal pregnancy in the past?
- Is patient <17 or >35 years old?

Our outreach is frequent.

Once high-risk or at-risk OB patients are identified, they receive a letter from our OB case manager. The letter lets them know that because of their past medical and/or obstetric history, their physician has referred them to a special program designed to provide extra support and education. They will continue to see their regular obstetrician/gynecologist for their care during their pregnancy. In addition, the OB nurse case manager will call them periodically to follow up on their progress and provide counseling and education. The letter is sent in the first trimester of pregnancy, along with a case management consent form and Patient Bill of Rights.

We provide ongoing support.

Every three or four weeks, the OB nurse case manager reaches out to patients who have chosen to participate in the program. She asks general health questions like “how is the baby moving or are you experiencing any vaginal pain or bleeding?” She encourages them to eat healthy and drink a lot of water. It’s practical advice that helps to support the OB’s care plan. She looks in mom’s EMR and reminds her when her next doctor’s visit is scheduled. She coaches and educates our moms-to-be.

The OB nurse case manager also reaches out to each patient who has not already contacted her. Multiple attempts are made to contact the patient over two months. After the letter and two calls, the patient is considered a non-participant.

Clinical Outcomes

**KelseyCare outperforms the Texas average for new moms being seen in their 1st trimester of pregnancy.**

<table>
<thead>
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<th>Step</th>
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<th>KelseyCare</th>
<th>Texas</th>
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<td>78.7%*</td>
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**KelseyCare outperforms the Texas average for new moms being seen by their OB/GYN for their recommended postpartum care at 21 to 56 days after delivery.**

<table>
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<td>52%*</td>
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*Guide to Texas HMO Quality: 2013 by the Office of Public Insurance Counsel and Department of State Health Services.

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