

# The Impact of the Tennessee Initiative for Perinatal Quality Care

## "Cardiac Conditions in Obstetric Care" Project



**TIPQC**  
Tennessee Initiative for  
Perinatal Quality Care

www.tipqc.org

### PROBLEM

In Tennessee, from 2020-2022 cardiovascular conditions were the second leading cause of pregnancy related deaths contributing to 22% of the cases per data available from the Tennessee Department of Health's Maternal Mortality Review report. Cardiac conditions are disorders of the cardiovascular system and have been shown to impact both pregnant and postpartum women. These conditions are the leading cause of pregnancy-related deaths, with 80% of these deaths deemed preventable. Cardiovascular Disease (CVD) has been linked to obstetric complications such as preeclampsia which was related to 29% of deaths. Specialized care and planning are needed during pregnancy and postpartum to prevent morbidity and mortality. According to the MMRC among 2022 pregnancy-related deaths, 76% were deemed preventable.

### ACTION

Hospitals from across Tennessee have come together to achieve a 90% increase in screening and appropriate referrals for all pregnant and postpartum women thereby reducing Nulliparous Term Singleton Vertex (NTSV) cesarean and preterm birth rates in level 3 and 4 hospitals by 10% by September 2026.

The project was launched by three (3) pilot teams in January 2024. Detailed educational instruction occurred at TIPQC's Annual Conference, and the project was made available in October 2024, with twelve (12) additional hospitals joining. One hospital did later drop out from the project. The participating hospitals were provided a toolkit, QI education, data collection tools, content education from nationally recognized experts, and a road map for implementation. Teams will continue participation in monthly huddles, quarterly learning sessions, and annual state-wide meetings, as well as coaching calls from TIPQC.

Hospitals current areas of focus include implementing cardiovascular disease (CVD) assessment into their hospital system for standard practice on admission. TIPQC will continue to offer data collection support to hospital teams for best practices to collect and report outcome measures and the additional process measures for the project.

### EXPLANATION OF IMPACT

As shown in Figure 1, (January 2025-December 2025), hospital teams that are reporting data have reached and maintained the goal of 90% of completed CVD screenings for pregnant and postpartum women. When the implementation of the CVD screening began concern for the increase rate of positives that could be captured therefor increasing the rate of Maternal Fetal Medicine (MFM) Specialist and Cardiology referrals that would be needed to be evaluated was voiced. As shown in Figure 2, (June 2025-December 2025), hospital teams began looking retrospectively to capture the rate of positive screenings. This rate remains low varying between 1-2%. Work continues to build a cardiology network in Tennessee for pregnant and postpartum referrals.

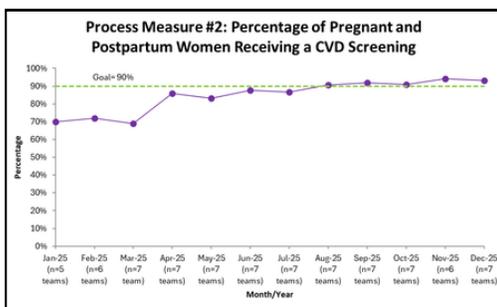


Figure 1: Percentage of CVD Screenings

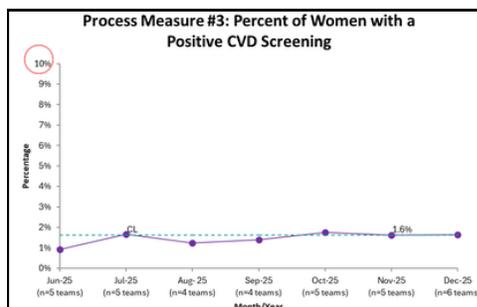


Figure 2: Percentage of Positive CVD Screenings

### WHO WAS RESPONSIBLE

The collaborative and statewide efforts of TIPQC and the participating hospitals have all contributed to this improvement.

### CONTACT

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Website <https://tipqc.org/project-cardiac-conditions-in-obstetric-care/>

## Project Statistics

# 15

Hospital Teams

# 12,571

CVD Screens Completed

# 1,496

Blood pressure cuff kits provided to CCOC Teams during the project

*"I feel this program is important for rural hospitals because our patients can often experience limited healthcare. With the focus on identifying potential cardiac conditions in pregnant women, we have an opportunity to screen women that would otherwise not be seen by a healthcare provider."*

-Participating Hospital

Data captured as of December 31, 2025