

# **ALERTWATCH OB**

A Failure to Recognize Maternal Risk is Putting U.S. Mothers in Danger

While U.S. medical innovation is advancing, so is its rate of pregnancy-related maternal deaths. Most of these deaths are preventable, as are the majority of injuries mothers experience before, during and after delivery.

### PREVENTABLE MATERNAL DEATHS & INJURIES ARE RISING

A leading cause of these deaths? Failure to recognize and respond to early signs of deterioration.<sup>3</sup>

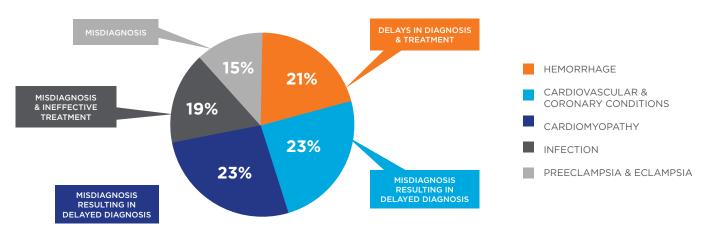
#### 'FAILURE TO RECOGNIZE' IS A LEADING CAUSE OF POOR OUTCOMES





To reduce these alarming statistics, it's essential that Labor & Delivery (L&D) units adopt early warning scoring and automated risk assessment applications proven to enhance situational awareness and improve outcomes.

#### **LEADING CAUSES OF PREGNANCY-RELATED DEATH**



- <sup>1</sup> GBD 2015 Maternal Mortality Collaborators. Global, regional, and national levels of maternal mortality, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015. Lancet. 2016;388(10053):1775-1812.
- <sup>2</sup> CDC, CDC Foundation. Report from Maternal Mortality Review Committees: A View into Their Critical Role. MMRIA. January 2017.
- <sup>3</sup> Main EK, McCain CL, Morton CH, Holtby S, Lawton ES. Pregnancy-related mortality in California: causes, characteristics, and improvement opportunities. Obstet Gynecol. 2015 Apr; 125(4):938-47
- <sup>4</sup> Main EK, McCain CL, Morton CH, Holtby S, Lawton ES. Pregnancy-related mortality in California: causes, characteristics, and improvement opportunities. Obstet Gynecol. 2015 Apr;125(4):938-47.
- <sup>5</sup> Trends in maternal mortality: 1990 to 2013. Estimates by WHO, UNICEF, UNFPA, The World Bank and the United Nations Population Division. Geneva: World Health Organization; 2014.
- <sup>6</sup> CDC, CDC Foundation. Report from Maternal Mortality Review Committees: A View into Their Critical Role. MMRIA. January 2017

## A VITAL SAFETY NET TO HELP PROTECT MOTHERS AT RISK

The world's first maternal monitoring and early warning solution, AlertWatch:OB integrates and analyzes over 200 maternal data elements to provide actionable insight at-a-glance for the entire L&D unit. This vital technology provides comprehensive, always-on surveillance to help you recognize and respond to emerging maternal issues.



### **HELPS CREATE A SAFER STANDARD OF L&D CARE**

- Identifies early signs of patient decline
- Displays all necessary information in a single dashboard, including vitals, trends, and labs
- Offers context at-a-glance with a color-coded organ view of each mother
- · Helps teams make fast, informed decisions



## **REDUCES ALARM FATIGUE AND IMPROVES SITUATIONAL AWARENESS**

- Prioritizes alerts through exception-based alarms to quickly identify patients with worsening conditions
- Guides actions with role-specific escalation pathways
- Delivers continuous data analysis and near real-time patient status



### **IMPROVES HANDOFF AND CASE MANAGEMENT WORKFLOWS**

- Displays all rooms on one screen, to reduce communication gaps during handoffs
- Provides a handoff specific view for all L&D patients
- · Access anytime, anywhere, on any internet-connected device

## **MULTI-PATIENT DASHBOARD**

Census view shows patients color-coded by stage, with icons indicating alerts and comorbidities.

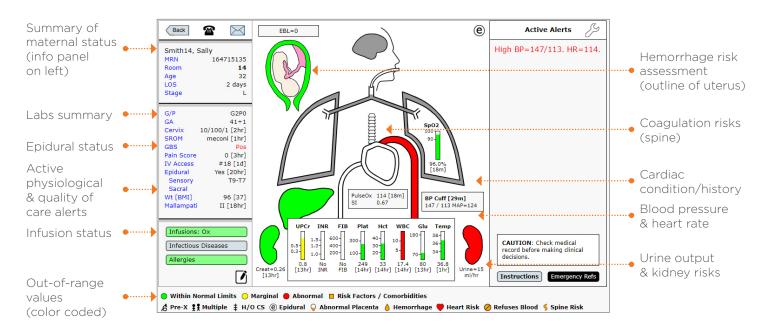


Powering Intelligent Care Everywhere



### SINGLE-PATIENT DASHBOARD

Patient view offers a detailed overview of the mother's information, organs and vitals, and active alerts.



### **HANDOFF VIEW**

Summary of all active L&D patients to support clinical handoffs between shifts.

	Smith1, Sally	131716036	TR	Age 35	Wt [BMI] 74 [28]	G6P5				
	Mallampati	GA 38+6	IK	Age 35	Cx 3/75/-2 [1hr]	0000				
	<u> </u>	GA 30+0			Cx 3//3/-2 [1111]	(f				
	RISKS Parity > 4  ALLERGIES no known allergies									
	ALLENGIES IIO KIIOWII allei	gies								
2	Smith2, Sally	568755679	TR	Age 33	Wt [BMI] 87 [30]	G3P0				
	Mallampati	GA 36+0	Plt 226	Hct 35.3	Cx	C 5				
	RISKS Other Coagulation D	Defects, Prior C/S or Uterine	Surgery							
		ALLERGIES aloe vera (Rash-Mild)(iodinated contrast media (Cough) [Itching, and feeling like she was going to sneeze.] pineapple ("Throat irritation")								
3	Smith3, Sally	781582366	TR	Age 22	Wt [BMI] 79 [0]	G3P1				
	Mallampati	GA 36+5	Plt 119	Hct 33.8	Cx	C # Ø				
	Maliampau	0,,00,0		1100 0010		u + •				
	·	r C/S or Uterine Surgery, His				<i>u</i> + <b>∨</b>				
	·	C/S or Uterine Surgery, His				u + •				
	RISKS Refuses Blood, Prior	C/S or Uterine Surgery, His				U + U				
1	RISKS Refuses Blood, Prior	C/S or Uterine Surgery, His			Wt [BMI] 74 [30]	G1P0				
<b>,</b>	RISKS Refuses Blood, Prior ALLERGIES no known aller	r C/S or Uterine Surgery, Histogies	tory of Cesarean Se	ection						
1	RISKS Refuses Blood, Prior ALLERGIES no known aller Smith4, Sally	r C/S or Uterine Surgery, Hist gies 355845742	tory of Cesarean Se	Age 28	Wt [BMI] 74 [30]	G1P0				
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	RISKS Refuses Blood, Prior ALLERGIES no known aller Smith4, Sally Mallampati II RISKS	r C/S or Uterine Surgery, Hist gies 355845742 GA 33+5	AP Plt 235	Age 28 Hct 33.9	Wt [BMI] 74 [30] Cx 0/0/ [1d]	it gives her diarrhea ]				
	RISKS Refuses Blood, Prior ALLERGIES no known aller  Smith4, Sally Mallampati II RISKS ALLERGIES orange (Diarrh	GA 33+5  ea)  actose (GI Distress)  ton	AP Plt 235 mato (solanum lyco)	Age 28 Hct 33.9 Dersicum) (Diarrhe	Wt [BMI] 74 [30] Cx 0/0/ [1d] ea) [Anything with Tomatoes in	G1P0 [20] it gives her diarrhea ]				
4	RISKS Refuses Blood, Prior ALLERGIES no known aller  Smith4, Sally Mallampati II RISKS ALLERGIES orange (Diarrh  Smith5, Sally Mallampati II	GA 33+5  ea) lactose (GI Distress) ton	AP Plt 235  AP Plt 235  AP Plt 269	Age 28 Hct 33.9 Dersicum) (Diarrhe	Wt [BMI] 74 [30] Cx 0/0/ [1d] ea) [Anything with Tomatoes in Wt [BMI] 52 [22] Cx	it gives her diarrhea ]				
	RISKS Refuses Blood, Prior ALLERGIES no known aller  Smith4, Sally  Mallampati II  RISKS  ALLERGIES orange (Diarrh  Smith5, Sally  Mallampati II  RISKS Snoring, Diabetes G	GA 33+5  (GA 3345)  (GA 3345)  (GA 3345)  (GA 3345)  (GA 3345)	AP Plt 235 mato (solanum lyco) AP Plt 269 Outlet Right Ventric	Age 28 Hct 33.9 Dersicum) (Diarrhe	Wt [BMI] 74 [30] Cx 0/0/ [1d] ea) [Anything with Tomatoes in Wt [BMI] 52 [22] Cx	it gives her diarrhea ]				
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#### SYSTEM REQUIREMENTS

To run the AlertWatch system, there are a number of technical requirements. These can vary based on the integration plan, size of the site and number of AlertWatch systems that will be run at the site. The requirements listed below are the standard, and some requirements may be more flexible than others. Please review with a Capsule representative before making final decisions.

#### **HARDWARE**

#### **WEB SERVER**

To host the AlertWatch web system a Windows Web Server is required. This server should have Internet Information Services (IIS) and enough disk space to store the applications, space for system performance logs and a bit of room to grow. This can be, and typically is, a virtual server hosted on an internal server farm. This server will also be the primary remote access point for the Capsule installation and maintenance team to access the system.

COMPONENT	REQUIREMENT	DETAILS
Operating System	Windows Server 2016	
RAM	8 GB	
CPU	4 cores 2.40 GHz	
Disk Space	50 GB free space (-75 GB total)	-25 GB for OS and standard software
IIS Version	IIS 8 and up	
Installed Software	SQL Server Management Studio* Site Standard Web Browser	Pending SQL access via another route AlertWatch supports: Internet Explorer 9+, Chrome. Firefox

<sup>\*</sup> See Access Section

#### **SQL SERVER + DATABASE(S)**

#### REQUIREMENTS FOR THE CONFIGURATION DATABASE

The AlertWatch system requires a SQL database to store:

- Configuration tables (site configurable alert thresholds, levels for setting colors on display, etc.)
- A log table of system events (user access, alerts triggered, user comments, etc.)
- Dynamic tables to manage the current list of patients and analyzed data
- Stored procedures and functions for accessing the data and saving log entries

Over time, the log table will utilize the most space in the configuration database. The rate of log table growth depends on the size of the site and the daily usage at the site. The truncation scheme of the log table can vary depending on the site's preferences.

COMPONENT	REQUIREMENT	
SQL Server Version	SQL Server 2012+	
Database Space	20 GB	
Growth	Varies based on client's retention policy	

#### **EXTRACT DATABASE REQUIREMENTS**

For systems leveraging web services, an additional database is required to manage web service calls and temporarily store the results of the web services. This database will be referred to as the AlertWatch Extract database. The size of this database will vary depending on the size of the site, the number of web services being accessed and how long data should be stored after patients have left the system. It represents a current set of patients, so the size of this database should be relatively stable over time.

COMPONENT	REQUIREMENT
SQL Server Version	SQL Server 2012
Database Space	40 GB
Growth	Varies based on client's retention policy

#### **ACCESS**

There are several points of access and credentialing required:

- Capsule installation and maintenance team will need access to the AlertWatch Web Server
- 2. Capsule installation and maintenance team will need to connect to the SQL databases
- 3. A service or system account (resource account) should be provisioned so that the AlertWatch web system can access the SQL data in IIS
- 4. Web service credentials should be granted for accessing the requested web services

It is important to decouple the access in #2 and #3 so that access issues for the Capsule installation and maintenance team do not compromise the availability of the AlertWatch system.

## FOR MORE INFORMATION, CONTACT US

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