Heavy menstrual bleeding clinical care standard indicators: 9-Local arrangements to measure and act upon patient-reported outcomes related to heavy menstrual bleeding

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# Heavy menstrual bleeding clinical care standard indicators: 9-Local arrangements to measure and act upon patient-reported outcomes related to heavy menstrual bleeding

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| Identifying and definitional attributes |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | Indicator 9-Local arrangements to measure and act upon patient-reported outcomes related to heavy menstrual bleeding |
| METEOR identifier: | 667349 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 17/10/2018 |
| Description: | Evidence of local arrangements to measure and act upon patient-reported outcomes related to [**heavy menstrual bleeding.**](https://meteor.aihw.gov.au/content/667292) |
| Indicator set: | [Clinical care standard indicators: heavy menstrual bleeding](https://meteor.aihw.gov.au/content/666572)[Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 17/10/2018 |

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| Collection and usage attributes |
| Computation description: | Local arrangements should specify:* a requirement to regularly measure patient-reported symptom severity and quality of life related to the patient's heavy menstrual bleeding;
* a protocol outlining how a patient’s results will be used to inform their treatment and care.

Clinically-validated tools should be used for measurement (see Comments), administered at minimum at baseline (in primary care, this may be defined as first or second visit with a new presentation of heavy menstrual bleeding), and at clinically appropriate time intervals thereafter. |
| Computation: | A healthcare setting where care is provided to patients with heavy menstrual bleeding which has documented evidence of local arrangements should record ‘Yes’. Otherwise, the healthcare setting should record ‘No'. |
| Comments: | Examples of tools assessing both symptoms of heavy menstrual bleeding and condition-specific quality of life are:* Aberdeen Menorrhagia Severity Scale (AMSS)
* Menorrhagia Multiattribute Scale (MMAS)
* Menstrual Impact Questionnaire (MIQ)
* Menstrual Bleeding Questionnaire (MBQ)
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| Representational attributes |
| Representation class: | Count |
| Data type: | Real |
| Unit of measure: | Service event |
| Format: | Yes/No |
| Accountability attributes |
| Other issues caveats: | Applicable settings: primary care settings (including general practice, family planning and sexual health services), public and private specialist gynaecology clinics and practices, and public and private hospitals. |
| Source and reference attributes |
| Submitting organisation: | Australian Commission on Safety and Quality in Health Care |
| Reference documents: | Bushnell, DM, Martin, ML, Moore, KA, Richter, HE, Rubin, A, & Patrick, DL 2010. Menorrhagia Impact Questionnaire: assessing the influence of heavy menstrual bleeding on quality of life. Current Medical Research and Opinion, 26(12), 2745-2755.Gupta, J, Kai, J, Middleton, L, Pattison, H, Gray, R, Daniels, J, et al. 2013. Levonorgestrel intrauterine system versus medical therapy for menorrhagia. New England Journal of Medicine, 368(2), 128-137.Lukes, AS, Muse, K, Richter, HE, Moore, KA, & Patrick, DL 2010. Estimating a meaningful reduction in menstrual blood loss for women with heavy menstrual bleeding. Current Medical Research and Opinion, 26(11), 2673-2678.Matteson, KA, Scott, DM, Raker, CA, & Clark, MA 2015. The menstrual bleeding questionnaire: development and validation of a comprehensive patient-reported outcome instrument for heavy menstrual bleeding. British Journal of Obstetrics and Gynaecology, 122(5), 681-689.Pattison, H, Daniels, JP, Kai, J, & Gupta, JK 2011. The measurement properties of the menorrhagia multi-attribute quality-of-life scale: a psychometric analysis. British Journal of Obstetrics and Gynaecology, 118(12), 1528-1531.Ruta, DA, Garratt, AM, Chadha, YC, Flett, GM, Hall, MH, & Russell, IT 1995. Assessment of patients with menorrhagia: how valid is a structured clinical history as a measure of health status? Quality of Life Research, 4(1), 33-40.Shaw, RW, Brickley, MR, Evans, L, & Edwards, MJ 1998. Perceptions of women on the impact of menorrhagia on their health using multi-attribute utility assessment. British Journal of Obstetrics and Gynaecology, 105(11), 1155-1159.  |