## **Quality of Care and Patient Safety**

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This issue of Proceedings in Obstetrics and Gynecology (POG) is devoted to exploring issues related to the quality of care provided to patients and to patient safety. In 1999 the Institute of Medicine (IOM) published "To Err is Human: Building a Safer Health System". This identified the number of deaths that occur in hospitals related to medical errors and served as a "call to action" to improve safety for patients. The IOM published a follow-up report in 2001 entitled "Crossing the Quality Chasm" A New Health System for the 21st Century"; this report emphasized the provision of "timely, effective, efficient, equitable, and patient-centered care".2 According to DE Detmer, the premises of safe care include (a) healthcare should be viewed from a systems perspective with the patient at the center, (b) analysis of care should be continuous, with the aim being to improve outcomes, and (c) decisions should be based on evidence.3,4 In its most recent Committee Opinion that specifically addresses "Patient Safety in Obstetrics and Gynecology", American College of Obstetricians and Gynecologists (ACOG) focuses attention on fostering a culture that prioritizes patient safety, promoting safe surgical medication and practices, effective promoting communication

between members of the healthcare team, addressing systems issues, and working with patients to improve safety.<sup>5</sup>

In the 20 years since the IOM drew our attention to the issues of quality of care and patient safety, a considerable amount of research has been done related to improving outcomes for patients. This issue of POG includes some of that research; there are articles that address patient safety related to providing education to patients with diabetes mellitus, evaluating tools for follow up after intrauterine device (IUD) insertion, screening for breast cancer, and a process for accurately measuring blood loss at the time of delivery. In addition, there are articles that evaluate whether there are improved outcomes for infants with the use of misoprostol before cesarean deliveries and that raise awareness about an emerging bacteremia syndrome. Lastly, there are articles that pertain to medical education, as aspects of training and the evaluation of learners ultimately affect the quality of care provided by those learners. We are clearly working towards the goals outlined by the IOM.

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