Reviewer's report

Title: The development of quality indicators for the prevention and management of postpartum haemorrhage in primary midwifery care in the Netherlands

Version: 1 Date: 21 August 2013

Reviewer: James Walker

Major Compulsory Revisions
None

- Minor Essential Revisions

Introduction para 5, first line.
PPH over 1000ml is 5.9%, this cannot be as it is very high! Is it meant to be 5.9/1000?

Discussion para 2, 5-6th line down, sentence does not make sense.
In midwifery, though the use of uterotonics has increased over the last decade, it is not standard procedure in quality indicators if bleeding does not cease – is there a time limit to this eg after 30 mins refer to secondary care – does this mean transfer?

For blood loss >1000ml there does not appear to be a need to transfer to higher level care – is there an assumption they will be there by then, if so why is it mentioned when over 2000ml

In the way they are described, there is not clarity on what they would actually do and when someone is transferred out of home to hospital or consultant care.

- Discretionary Revisions

I think the most significant finding was the discrepancy between the midwives and the others. The routine use of uterotonics scores highly in value but had a low "consensus score". Discuss this as a concern for implementation and agreement of any future document of quality indicators. I realize that the next piece of work may help to answer this question by getting evidence to support/refute it but is is a point of contention.

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

'I declare that I have no competing interests'