

# Implementing the AIM Perinatal Mental Health Conditions Bundle in MA

## Psychiatric Emergencies

September 16, 2025



# WELCOME!

- Please type your name and institution into the chat.
  - **Optional share: What are you excited to do now that it is *\*almost\** officially Fall?**
- Please mute yourselves when not speaking.
- Feel free to type your questions into the chat during the webinar.
- We will record this session and upload the recording and webinar slides to our website afterwards!

## Agenda

12:00–12:05 Welcome & Announcements

12:05–12:20 Bipolar Screening

12:20 – 12:45 Psychiatric Emergencies

12:45–1:00 Discussion, Q&A



# AGENDA

**12:00–12:05**

**Welcome & Announcements**

Kali Vitek Espinola

**12:05–12:20**

**Bipolar Screening & Workflow**

Tiffany Moore Simas

**12:20–12:45**

**Fireside Chat: Psychiatric Emergencies**

Uruj Haider  
& Kriti Lodha

**12:45–1:00**

**Discussion, Q&A**

All



# Take Care of Yourself

**CONTENT WARNING:** The following discussion will cover psychiatric emergencies in the perinatal period and will include a discussion with a person with lived experience with postpartum psychosis.

We encourage you to take care of yourself, however you see fit. Should this topic become too much for you, feel free to leave the webinar and return at 12:45pm for the Q&A session, if you are interested.

Some ideas for self-care during and/or after this discussion include:

- Take a few deep breaths
- Take a short walk
- Stretch
- Drink some water
- Doodle
- Turn down/off the volume
- Light a candle
- Talk to someone about how you're feeling



# Reminders & Announcements



**Kali Vitek Espinola, MPH**  
PNQIN Senior Project Manager

## Agenda

12:00–12:05 Welcome & Announcements

12:05–12:20 Bipolar Screening

12:20 – 12:45 Psychiatric Emergencies

12:45–1:00 Discussion, Q&A





# PNQIN PMHC BUNDLE WORKGROUP



Tiffany Moore Simas, MD  
UMass Memorial Health



Kali Vitek, MPH  
PNQIN



Brooke Fortin  
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MGH/PPD Survivor



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Elizabeth Howell, CNM MS  
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HMS/BIDMC



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FamilyWell Health



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Kriti Lodha  
PSI-MA/PPP Survivor



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MCPAP for Moms



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Salma Mohamed  
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Shaniqua Choice  
Infinity Equity Consulting



Stephanie Crawford  
Propa City  
Community Outreach



Swathi Damodaran  
MassHealth



Uruj Haider, MD  
MCPAP for Moms

# PMHC BUNDLE: PARTICIPATING HOSPITALS

1. Anna Jaques Hospital
2. Baystate Franklin Medical Center
3. Berkshire Medical Center
4. Beth Israel Deaconess Medical Center
5. Beverly Hospital
6. Boston Medical Center
7. Cooley Dickinson Hospital
8. Fairview Hospital
9. Holy Family Hospital
10. Lawrence General Hospital
11. Lowell General Hospital
12. Massachusetts General Hospital
13. MetroWest Medical Center
14. Mount Auburn Hospital
15. Newton-Wellesley Hospital
16. Salem Hospital



17. Southcoast Charlton Memorial Hospital
18. Southcoast St. Luke's Hospital
19. St. Elizabeth's Medical Center
20. Tufts Medical Center
21. UMass Memorial Medical Center
22. Winchester Hospital



# Participation Checklist (Updated)

**To be considered fully participating in this bundle between Sept '24 and Feb '26, we ask that you complete:**

1. Onboarding steps
  - a. Team Roster, Pre-Implementation Survey, data sharing agreement
2. Monthly data submission (Goal: 9 months or more)
3. Monthly webinar attendance (Goal: 9 months or more)
- 4. Implementation feedback survey @ 6, 12 and 18 months)**
  - a. Kali following up with 4 remaining hospitals!**
5. Draft or final sustainability plan
6. Sharing opportunities (webinar presentation, summit poster)



# PNQIN Monthly Webinar Series

**3rd Tuesdays from 12-1pm ET:**

1. September 16th, 2025
2. October 21st, 2025
3. November 18th, 2025
4. December 16th, 2025
5. January 20th, 2026
6. February 17th, 2026
7. *No March webinar*
8. *No April webinar*
9. May 19th, 2026\*
10. *No June webinar*
11. *No July webinar*
12. August 18th, 2026

**Topics:**

- ***Psychiatric Emergencies***
- Year 1 in Review, New Hampshire PQC
- Screening in Peds and NICU Settings
- Treatment Modalities
- Treatment and Follow-up, Sustainability
- Year 1.5 in Review, Sustainability Prep
  
- Sustainability Call
  
  
  
  
  
  
  
  
  
  
- Sustainability Call



*\*PNQIN Spring Summit also in May 2026*



# PNQIN Announcements

*Save the Date!*

# PNQIN Spring Summit

**May 13, 2026**  
**Full day (time TBD)**

**Please join us in-person for our annual meeting at the Four Points Sheraton in Norwood, MA!**

We are excited to bring you another full day of quality improvement and perinatal care content! The agenda (breakout rooms, poster presentations) is to be determined, and we will present awards to some distinguished individuals and hospital teams for their work in promoting obstetric and neonatal health in the state of Massachusetts and beyond!

Registration and agenda coming early 2026!




# PMHC Bundle: Toolkit – NOW AVAILABLE!

The Perinatal-Neonatal Quality Improvement Network of Massachusetts

## PNQIN Perinatal Mental Health Conditions (PMHC) Bundle Toolkit



Version 2, February 2025



For the most up to date version and resources please refer to the [Perinatal Mental Health Conditions Bundle Website](#).

The Perinatal-Neonatal Quality Improvement Network of Massachusetts

### American College of Obstetrics and Gynecology (ACOG) Alliance for Innovation in Maternal Health (AIM) Patient Safety Bundle: Perinatal Mental Health Conditions



[What are AIM Patient Safety Bundles?](#)  
A collection of evidence-based best practices developed by experts from many disciplines to address specific conditions in pregnant and postpartum people, especially those which may lead to severe maternal morbidity and mortality. The bundles include action steps and tools, and are built to be adapted to facilities and institutions of all resource levels.

[What is the Perinatal Mental Health Conditions \(PMHC\) Bundle?](#)  
The Perinatal Mental Health Conditions Bundle provides a blueprint to improve the quality of care and outcomes for patients with perinatal mental health conditions. This initiative aims to improve the identification and treatment of all perinatal mental health conditions for all patients throughout the entire perinatal period. For the purposes of this bundle, PMHC includes mood, anxiety, and anxiety-related disorders that occur during pregnancy or within one year of delivery, including conditions that may have started prior to conception.

For a full list of conditions, please review page 8 of the [AIM PMHC ICD-10 codes list](#).

Video: [Introduction to Perinatal Mental Health Conditions](#)

The Perinatal-Neonatal Quality Improvement Network of Massachusetts

### ACOG AIM Patient Safety Bundle: Perinatal Mental Health Conditions - Links to Materials

[Patient Safety Bundle](#)

- Format: PDF
- Content: Describes the primary drivers of changes in quality of care for Perinatal Mental Health Conditions, with review of AIM's "5 Rs" framework:
  - Readiness,
  - Recognition & Prevention,
  - Response,
  - Reporting & Systems Learning, and
  - Respectful, Equitable & Supportive Care.
- This can be used as a high-level summary of the implementation goals for the PMHC Bundle.

[Element Implementation Details and Guide](#)

- Format: PDF
- Content: Further explores AIM's "5 Rs" Framework by sharing core strategies, aims, implementation phases, and steps to integrate obstetric and mental health care for each of the "Rs" in their framework. This document provides additional context for the Patient Safety Bundle (above).

[Implementation Resources](#)

- Format: PDF
- Content: Utilizing the "5 Rs" Framework, this document provides specific resources that correspond to each R and is an adjunct to the bundle and implementation guide noted above. Resources in this document include, but are not limited to, links to toolkits, webpages, publications, and training modules.

[Data Collection Plan](#)

- Format: PDF
- Content: This document outlines the structure, process, and outcome measures that we ask hospital teams to submit each month via REDCap to track participation in and implementation of this bundle.

[Change Package](#)

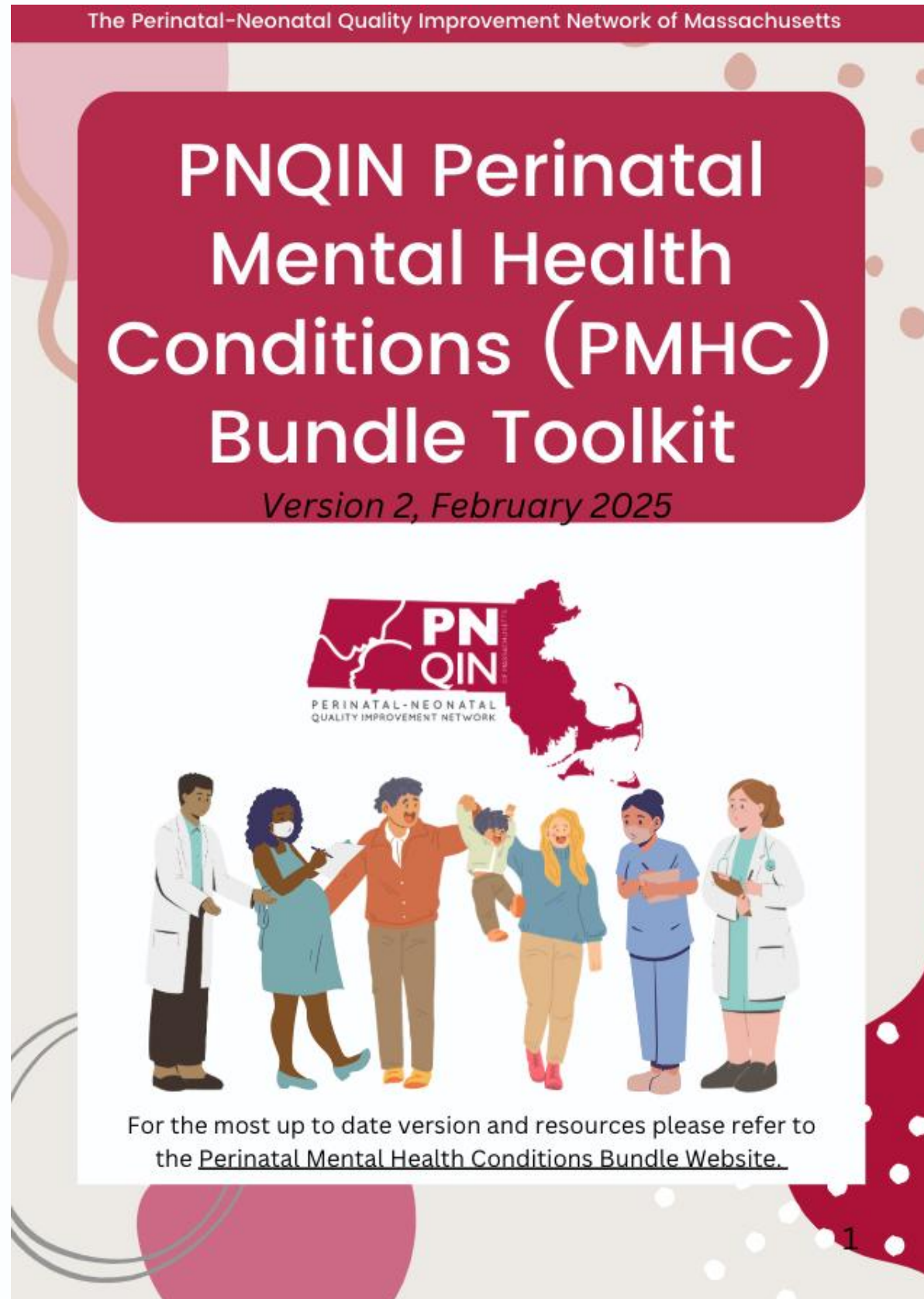
- Format: PDF
- Content: This document, developed and published by the Institute of Healthcare Improvement (IHI) and AIM and co-authored by PNQIN's Bundle Lead, Dr. Tiffany Moore Simas, covers the motivation for designing this bundle. More specifically, the Change Package matches resources to "change ideas," which are interventions that are defined to achieve the goal of integrating obstetric and mental health care and is directly aligned with each bundle element.

[Learning Modules](#)

- Format: Webpage, e-Modules
- Content: This webpage acts as a landing pad for free e-Modules, hosted by ACOG and Nursegrid that can be completed for CME/CE credit. Modules are hosted by ACOG and Nursegrid and are specific to each AIM Patient Safety Bundle.

The toolkit is now available on the PNQIN Website at [this link](#).

# PMHC Bundle: Community Resources



Home → PNQIN Perinatal Mental Health Conditions (PMHC) Toolkit Resources

## PNQIN Perinatal Mental Health Conditions (PMHC) Toolkit Resources

A number of resources included in our toolkit may be updated often, as a result, we have posted them here on our resources page for ease of updating and reference. Please see below! *The links included on this page are intact as of 2/14/2025.*

### Resource Mapping/ID of Community Resources

#### Provider-Specific Resources

- MCPAP for Moms
  - [MCPAP Clinician Resource Page](#)
  - Toolkits
    - [Obstetric Provider Toolkit](#)
    - [Pediatric Provider Toolkit](#)

The resources can be found on the PNQIN Website at [this link](#).

# MA Announcements

# MA AWHONN 2025 CONFERENCE “Transforming Maternal and Newborn Health: Nurses as Advocates and Leaders for Change” (October 16-17th, 2025)

**Where:** Sea Crest Beach Hotel, 350 Quaker Road, Falmouth, MA 02556

Join us too for the pre-conference: “Safe Use of Intermittent Auscultation to Expand Freedom of Movement in Labor” on 10/16 from 1-4pm.

**MEMBERS:** \$225 Regular

**NON-MEMBERS:** \$275 Regular

**PRE-CON:** \$75

**CONFERENCE  
REGISTRATION**



**ROOM BLOCKS  
LINK**



**AWHONN**

MASSACHUSETTS

PROMOTING THE HEALTH OF  
WOMEN AND NEWBORNS



# Breastfeeding in the Bay State 2025 Virtual Conference (September 25 & 26, 2025)

This year's event spans one and a half days of dynamic programming centered on our theme: **Educate, Advocate, Collaborate**. We'll explore current research, clinical best practices, and community-driven approaches that strengthen lactation support across Massachusetts and beyond.

Designed for lactation consultants, lactation specialists and educators, nurses, midwives, doulas, WIC staff, community advocates, public health professionals, and all those supporting human milk feeding.

For updates, visit <https://massbreastfeeding.org> or follow @MassBreastfeedingCoalition.

**General Admission:** \$150pp

**Group Tickets:** \$125pp

See agenda and register [here!](#)



# MassHealth All Provider Bulletin: Perinatal Depression Screening

MassHealth recently published an All Provider Bulletin related to perinatal depression screening.

**All Provider Bulletin 405** was published on **August 19, 2025** related to perinatal depression screening. Perinatal depression is one of the most common complications during pregnancy and the postpartum period, and screening is one important aspect of addressing perinatal mental health needs.

## Highlights of the bulletin include:

- Reimbursement for all depression screens during pregnancy and through 12 months postpartum based on the provider's clinical judgement.
- Requirement that pediatric providers screen for postpartum depression at every preventative well child visit in the first year, including screening paternal, adoptive, and non-birthing parents and caregivers.
- Specific requirements and recommended resources for when a member screens positive for depression.



# Perinatal Loss Trainings for Providers

**Contact:** Stephanie Crawford, Propa City Community Outreach

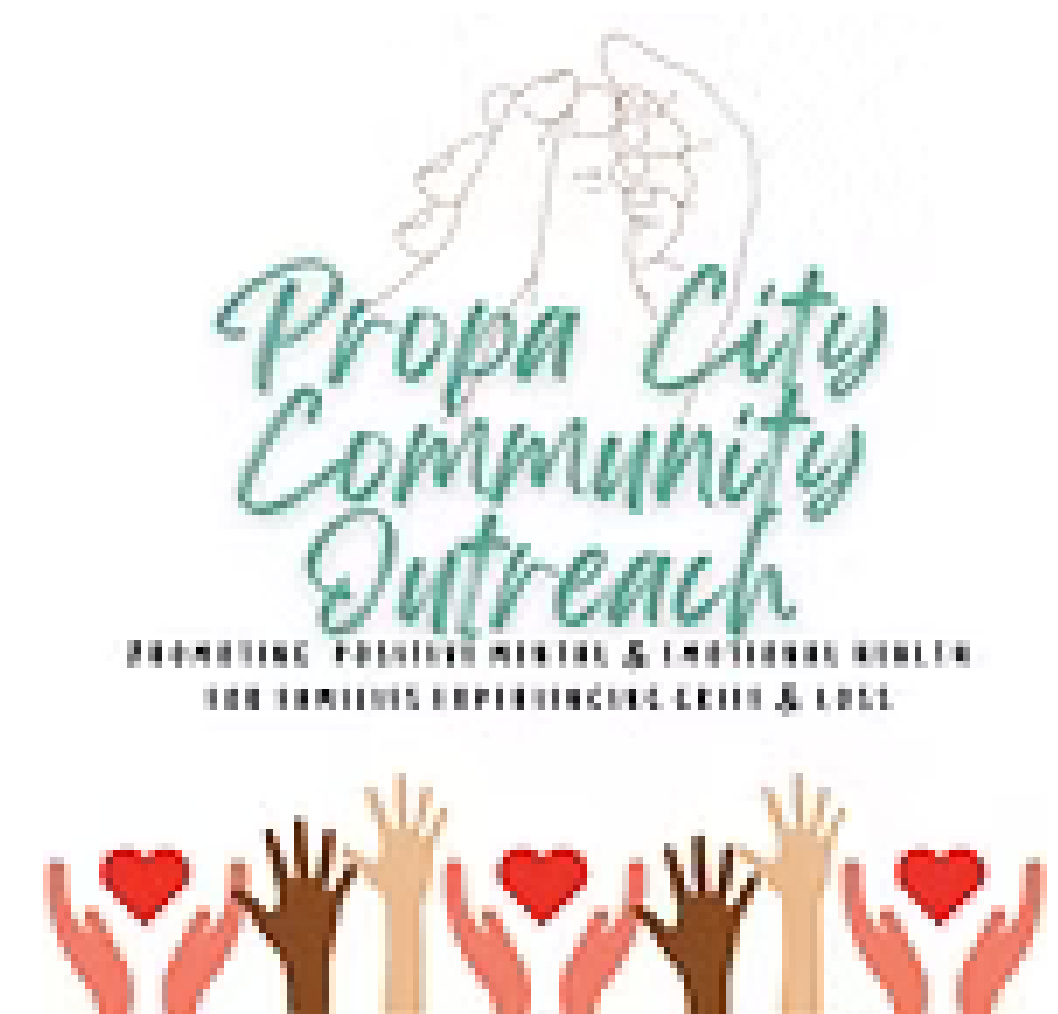
[info@propacityco.org](mailto:info@propacityco.org)

(617) 407-5347

This comprehensive perinatal loss training is designed for maternal health professionals and advocates who seek to enhance their understanding and skills in supporting families during these challenging times. Participants will explore the various types of loss that families experience and unique challenges associated with each, learn effective techniques to help families navigate their grief and foster healing, and more!

**Training Duration:** 5 Sessions: 2.5 hours each session

See flyer in follow-up email for 2024-2025 pilot training pricing!



# MCPAP for Moms: Training Opportunity

MCPAP for Moms, the Massachusetts State Perinatal Psychiatry Access Program, is available as a resource to providers providing **prenatal, perinatal, birthing, and postpartum care** to individuals in Massachusetts.

MCPAP for Moms helps to build health care providers' capacity to address perinatal mental health and substance use disorders through: **trainings and toolkits, telephone-access to perinatal psychiatric consultation, and facilitation of referral to community resources.**

*You can learn more about their services on their [website](#).*

As part of their training offerings, **MCPAP for Moms is available to come to your institution for Grand Rounds and/or trainings with affiliated obstetric practices!**

*If you are interested in learning more or would like to schedule a time for Grand Rounds, please contact Beth McGinn at: [Elizabeth.McGinn@carelon.com](mailto:Elizabeth.McGinn@carelon.com) or email Kali ([PNQINAdmin@pnqinma.org](mailto:PNQINAdmin@pnqinma.org)).*



# Trailer Out Now: 'So Glad You Asked' from MGH

The **MGH Center for Women's Mental Health** started a **podcast** called '**So Glad You Asked**' where co-hosts, Dr. Ruta Nonacs, a leading expert in maternal mental health and Alice Hales, a mom of four, answer questions from parents about mental health in motherhood and consult expert guests.

## Why This Show is Different:

- Every conversation is led by real moms & their questions on air - whether before or during pregnancy, postpartum, or beyond.
- No vague advice - evidenced-based answers & actionable resources.

Listen & subscribe → Listen on [Apple Podcasts](#) or [Spotify](#)



# PCORI Grant Study Recruitment

- A team at UMass Chan Medical School is partnering with Postpartum Support International (PSI) on a project in which they will **implement and compare two approaches for helping OB practices integrate obstetric and mental health care.**
- Funded from the Patient-Centered Outcomes Research Institute (PCORI), they **will implement and test these two approaches with 32 obstetric practices across the US**, including practices in Massachusetts.
- All participating OB practices will receive **\$38,500 in funding across four years** of sustained practice involvement.
- *If you are interested in learning more about the study, please contact Nancy Byatt, DO, MS, MBA, DFAPA, FACLP ([Nancy.Byatt@umassmemorial.org](mailto:Nancy.Byatt@umassmemorial.org))*



# National Announcements

# March of Dimes Trainings (Sep & Nov 2025; Jan 2026)

MOD has several upcoming free LIVE continuing education opportunities, sponsored by LocumTenens.com. **These trainings are “free for the first 100 people to sign up for each session”.**

Please see the emailed flyers for registration links and more details. Each training will be offered live on three separate dates (same presentation, repeated three times).

**September 4, 16, & 25**

*Maternal Mental Health: It's Not Just Postpartum. It's Not Just Depression*

**November 4, 13, & 18**

*Beyond Labels: Reducing Stigma Related to Maternal Mental Health and Substance Use Disorder*

**January 13, 22, & 27**

*Awareness to Action: Dismantling Bias in Maternal and Infant Healthcare®*



# 8th Annual Maternal Mental Health Symposium (Sep 26th, 2025)

*Hosted by El Camino Health through a gift from the Keller Family*



[Click here to see agenda and register!](#)

**Time:** 11:00am to 7:30pm ET

This **free** event is designed to expand access to essential perinatal mental health education. Through education and support, we strive to create healthier, more informed communities for all.

### Agenda Includes:

- Healthy Mothers, Healthy Futures: Addressing ACEs to Improve Maternal Health
- Lived Experience Expertise: Navigating Multigenerational Mental Health Illnesses and Trauma
- Behind the Smiles: Why Postpartum Depression Screening Matters in the Hospital Setting

All presentations will be recorded and provided to those who register. Continuing Education available!



# DECIDE for MOM Provider Training Pilot

New Jersey (Rutgers, NJ DPH, and PSI-NJ) are conducting a research study to assess acceptability, appropriateness and usability of the adapted DECIDE Provider Training designed to improve communication and engagement with perinatal individuals in health, mental health and behavioral health care settings.

This asynchronous, online training is free for all types of providers who screen for mental health and or provide health or mental health care to perinatal individuals within health systems.

**The following incentive is first-come, first-served for up to 35 care providers:**

1. Complete an asynchronous online DECIDE training (approximately 3 hours) and 2 online surveys immediately after the training and one month after the training (\$100 Amazon gift card)
2. Participate in a 1-hour focus group meeting (+ additional \$50 Amazon gift card)

## What is DECIDE for MOM?

- DECIDE, an evidence-based shared decision making practice, stands for: **Decide** the problem, **Explore** the question, **Closed** or open-ended questions, **Identify** the who/why/how of the problem, **Direct** questions to the healthcare professional, and **Enjoy** a shared solution (Alegria et al., 2018)

[Click here to sign up for participation!](#)



# National SPEAK UP Champion™ Implicit and Explicit Racial Bias Education (Jan 9 & 16, 2026)

The SPEAK UP Champion™ Implicit and Explicit Racial Bias Education is a total of eight hours over two days of live virtual interactive learning that outlines quality improvement strategies to support individuals and groups with dismantling racism, providing quality equitable care, and reducing health disparities. **Access the full brochure & agenda [here!](#)**

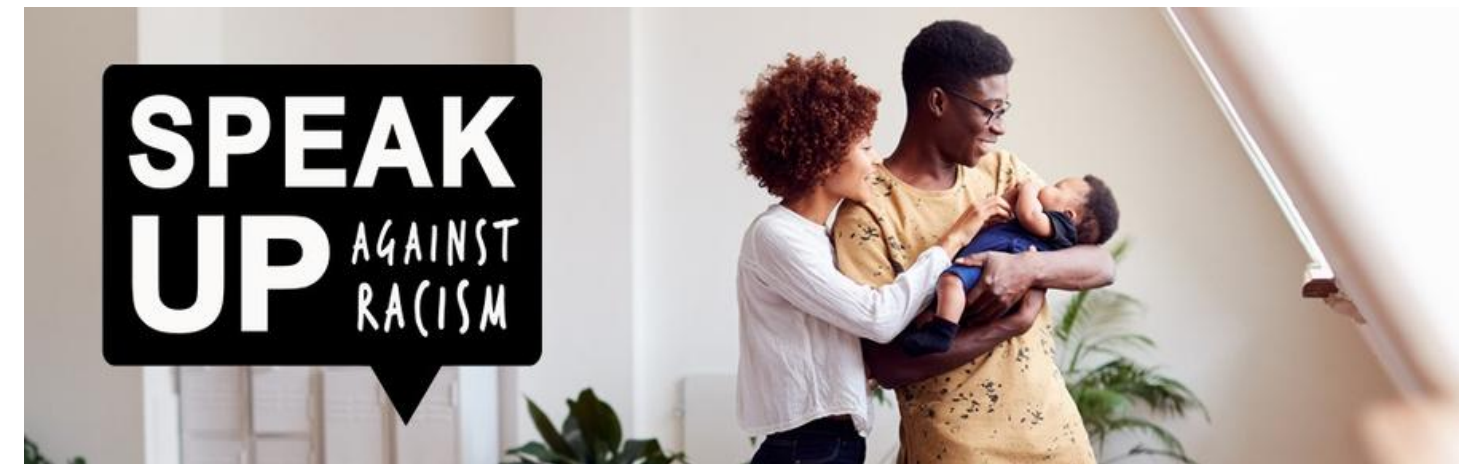
**Time:** 9:30am-1:30pm EST, both days

**Location:** Zoom (link provided after registration)

**Cost:**

- **PQI Members:** \$249 Early Bird (until 11/28), \$269 regular
- **All others:** \$279 Early Bird, \$299 regular

**CNE:** 7.75 hours



# Maternal Health Action and Resource Center: PMADS Resources

## Most recent topics include:

- Two-Generation Postpartum Care
- Educational resources for providers, patients, and families
- Screening and diagnosis of PMHCs during pregnancy and postpartum
- Summary of PMHCs
- Strategies to address societal and structural challenges of PMHCs
- State laws on SUD treatment for incarcerated pregnant and postpartum people
- PMHC training database
- Maternal mortality review committees



# Bipolar Screening & Workflow



**Tiffany Moore Simas, MD, MPH, MEd, FACOG**

MA AIM PMHC Bundle Lead  
UMass Memorial Medical Center

## Agenda

12:00–12:05 Welcome &  
Announcements

12:05–12:20 Bipolar  
Screening

12:20 – 12:45 Psychiatric  
Emergencies

12:45–1:00 Discussion,  
Q&A



# Implementing Bipolar Disorder Screening

**Organization: UMass Memorial Health**

**September 16, 2025**





# AIM PMHC Patient Safety Bundle

## Bipolar Disorder Screening Recommendations



Perinatal Mental Health  
Conditions

### Recognition & Prevention — Every Patient

Screen for perinatal mental health conditions consistently throughout the perinatal period, including but not limited to:

- ▶ Obtain individual and family mental health history at intake, with review and update as needed.\*
- ▶ Screen for depression and anxiety at the initial prenatal visit, later in pregnancy, and at postpartum visits, ideally including pediatric well-child visits.\*
- ▶ Screen for bipolar disorder before initiating pharmacotherapy for anxiety and depression.\*

# ACOG Bipolar Disorder Screening Recommendations



CLINICAL PRACTICE GUIDELINE

NUMBER 4  
JUNE 2023

REPLACES COMMITTEE OPINION 757, NOVEMBER 2018

## Screening and Diagnosis of Mental Health Conditions During Pregnancy and Postpartum



### Evidence-Based Screening and Diagnostic Approaches to Perinatal Bipolar Disorder

ACOG suggests that everyone receiving prenatal and postpartum care be screened for bipolar disorder using a standardized, validated instrument. (CONDITIONAL RECOMMENDATION, MODERATE-QUALITY EVIDENCE)

ACOG recommends screening for bipolar disorder before initiating pharmacotherapy for anxiety or depression, if not previously done. (STRONG RECOMMENDATION, MODERATE-QUALITY EVIDENCE)

Because bipolar disorder is associated with an increased risk of psychosis, suicide, and infanticide or homicide, consider consulting a mental health professional, including those available through Perinatal Psychiatry Access Programs, for assessment, management, and treatment guidance. (GOOD PRACTICE POINT)

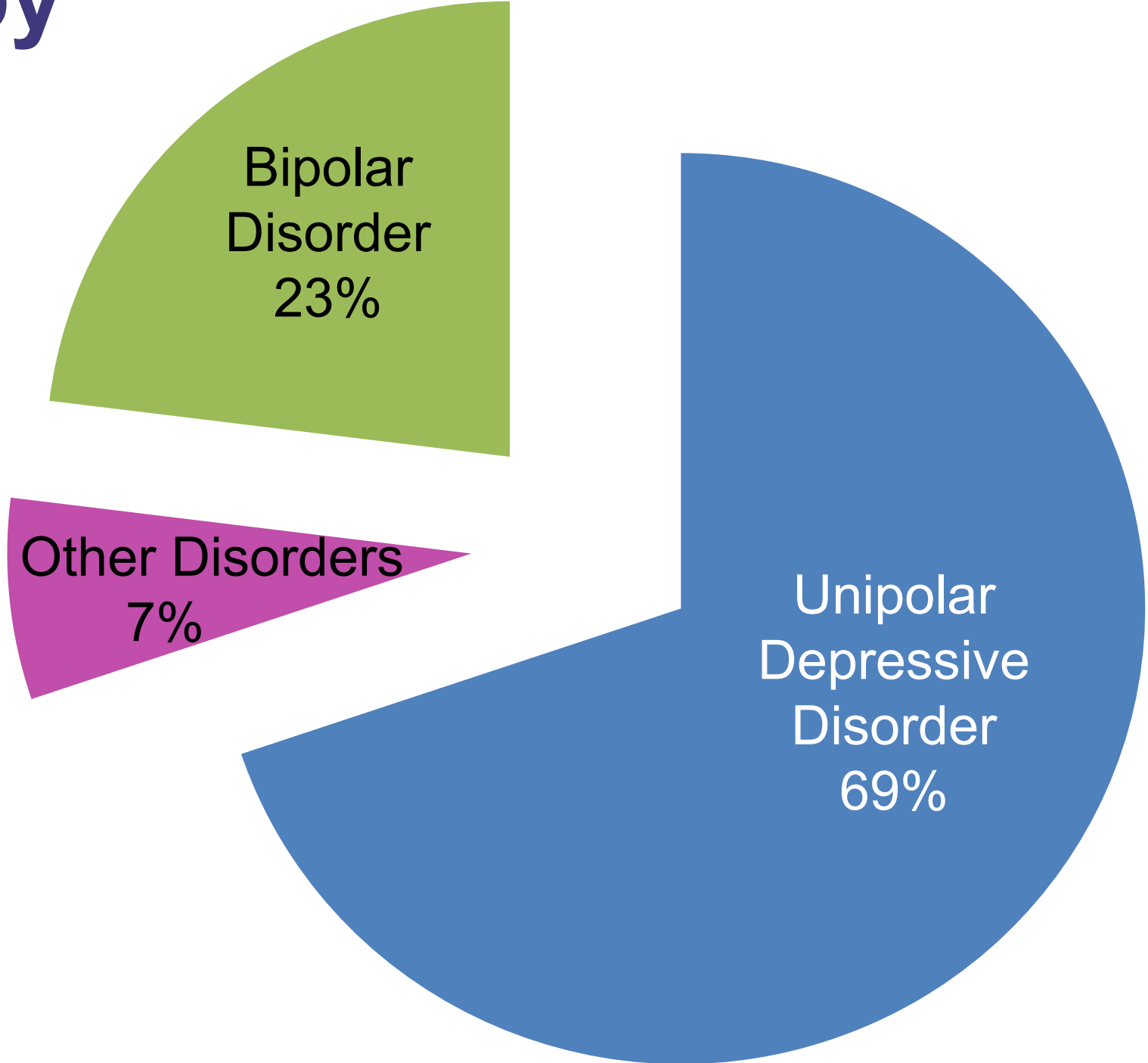


# Bipolar Disorder Epidemiology

- **Affects ~3% general population**
  - 2-8% perinatal populations to high of 18-20% for bipolar spectrum mood episodes (depressed, hypomanic or manic, and mixed mood episodes)
- **Most often diagnosed 18-30 years**
- **For women, perinatal period associated with highest lifetime risk of first onset and increased vulnerability to relapse**
  - Relapse overall risk 37%
    - With pharmacotherapy 23%; WithOUT pharmacotherapy 66%



# Bipolar Disorder Needs to be Considered with a Positive Depression Screen Especially Prior to Initiating Pharmacotherapy



Wisner et al. JAMA Psychiatry 2013

Prescribing unopposed antidepressant can precipitate mania and increase risk of other negative outcomes

# ACOG Bipolar Disorder Screening Recommendations



CLINICAL PRACTICE GUIDELINE

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# UMass Memorial Health Bipolar Disorder Screening



## Screening for mood changes during pregnancy and after giving birth

- Mood changes are very common during pregnancy or after giving birth. They can affect you and your baby's health.
- 1 in 5 women have depression, anxiety, or frightening thoughts during this time.
- If you are having mood changes, getting help is the best thing you can do for you and your baby. You are not alone. We can help.
- Mood changes are common. Because it is important to your health, we are going to be asking about them.
- Please complete the following questionnaires. Your answers will help us figure out how to help you.
- Moods can change at any time during pregnancy and after giving birth. Because of this we will ask you to answer some of these questions again, at future visits.

Turn to next page

For Staff use only: Initial mid postpartum

Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**A** Please circle one of the four answers that comes closest to how you have felt **in the past 7 days**, not just how you feel today.

I have been able to laugh and see the funny side of things*	As much as I always could	Not quite so much now	Definitely not so much now	Not at all
I have looked forward with enjoyment to things*	As much as I ever did	Rather less than I used to	Definitely less than I used to	Hardly at all
I have blamed myself unnecessarily when things when wrong	Yes, most of the time	Yes, some of the time	Not very often	No never
I have been anxious or worried for no good reason*	No, not at all	Hardly ever	Yes, sometimes	Yes, very often
I have felt scared or panicky for no good reason	Yes, quite a lot	Yes, sometimes	No, not much	No, not at all
Things have been getting on top of me	Yes, most of the time I haven't been able to cope at all	Yes, sometimes I haven't been coping as well as usual	No most of the time I have coped quite well	No, I have been coping as well as usual
I have been so unhappy that I have had difficulty sleeping	Yes, most of the time	Yes, sometimes	Not very often	
I have felt sad or miserable	Yes, most of the time	Yes, quite often	Not very often	
I have been so unhappy that I have been crying	Yes, most of the time	Yes, quite often	Only occasionally	
The thought of harming myself has occurred to me	Yes, quite often	Sometimes	Hardly ever	

Keep going.... Circle the letter that indicates:  
Has there ever been a **period of time in your life** when you were **not your usual self** and...

...you felt so good or so hyper that other people thought you were not your normal self, or you were so hyper that you got into trouble?

...you were so irritable that you shouted at people or started fights or arguments?

...you felt much more self-confident than usual?

...you got much less sleep than usual and found you didn't really miss it?

...you were much more talkative or spoke much faster than usual?

...thoughts raced through your head, or you couldn't slow your mind down?

...you were so easily distracted by things around you that you had trouble concentrating or staying on track?

...you had much more energy than usual?

...you were much more active or did many more things than usual?

...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?

...you were much more interested in sex than usual?

...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?

...spending money got you or your family into trouble?

Circle the letter that indicates your answer the following two questions:

If you checked YES to more than one of the above, have several of these ever happened during the same **period of time**?

Have any of your blood relatives (i.e., children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?

Please continue to section **B** (next page)



**B** Circle one of the four answers that indicates:  
Over the **past 2 weeks**, how often have you been bothered by any of the following problems?

Feeling nervous, anxious or on edge	Not at all	Several days	More than half the days	Nearly every day
Not being able to stop or control worrying	Not at all	Several days	More than half the days	Nearly every day
Worrying too much about different things	Not at all	Several days	More than half the days	Nearly every day
Trouble relaxing	Not at all	Several days	More than half the days	Nearly every day
Being so restless that it is hard to sit still	Not at all	Several days	More than half the days	Nearly every day
Becoming easily annoyed or irritable	Not at all	Several days	More than half the days	Nearly every day
Feeling afraid, as if something awful might happen	Not at all	Several days	More than half the days	Nearly every day
If you checked any problems, how difficult have they made it for you to do your work, take care of things at home, or get along with other people	Not difficult at all	Somewhat difficult	Very difficult	Extremely difficult

Please continue to section **C**

**C** Sometimes things happen to people that are unusually or especially frightening, horrible, or traumatic. For example:

- A serious accident or fire
- A physical or sexual assault or abuse
- An earthquake or flood
- A war
- Seeing someone be killed or seriously injured
- Having a loved one die through homicide or suicide

Have you ever experienced this kind of event? Please circle the response that indicates your answer:

	NO	YES
--	----	-----

If NO, you are finished. Thank you for completing this survey! If YES, please continue:

**In the past month, have you...**

have had nightmares about the event(s) or thought about the event(s) when you did not want to?	NO	YES
tried hard not to think about the event(s) or went out of your way to avoid situations that reminded you of the event(s)?	NO	YES
been constantly on guard, watchful, or easily startled?	NO	YES
felt numb or detached from people, activities, or your surroundings?	NO	YES
Felt guilty or unable to stop blaming yourself or others for the event(s) or any problems the event(s) may have caused?	NO	YES

Done! Thank you for completing this questionnaire!

# Mood Disorder Questionnaire (MDQ)

Keep going.... Circle the letter that indicates:

Has there ever been a period of time **in your life** when you were **not your usual self** and...

	NO	YES
...you felt so good or so hyper that other people thought you were not your normal self, or you were so hyper that you got into trouble?	N	Y
...you were so irritable that you shouted at people or started fights or arguments?	N	Y
...you felt much more self-confident than usual?	N	Y
...you got much less sleep than usual and found you didn't really miss it?	N	Y
...you were much more talkative or spoke much faster than usual?	N	Y
...thoughts raced through your head, or you couldn't slow your mind down?	N	Y
...you were so easily distracted by things around you that you had trouble concentrating or staying on track?	N	Y
...you had much more energy than usual?	N	Y
...you were much more active or did many more things than usual?	N	Y
...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?	N	Y
...you were much more interested in sex than usual?	N	Y
...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?	N	Y
...spending money got you or your family into trouble?	N	Y

Circle the letter that indicates your answer the following two questions:

If you checked YES to more than one of the above, have several of these ever happened during the same <u>period of time</u> ?	N	Y
Have any of your blood relatives (i.e., children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?	N	Y

Please continue to section *B* (next page)



# Mood Disorder Questionnaire (MDQ) - Score



## Scoring of Screening Tools for Emotional Changes

<b>A Depression (EPDS)</b>		Please circle one of the four answers that comes closest to how you have felt in the past 7 days, not just how you feel today.			
I have been able to laugh and see the funny side of things*	→	0 As much as I always	1 Not quite so	2 Definitely not so	3 Not at all
I have looked forward with enjoyment to things*		0 As much as I ever	1 Rather less	2 Definitely less	3 Hardly at all
I have blamed myself unnecessarily when things when wrong		3 Yes, most of the ...	2 Yes, some of	1 Not very often	0 No never
I have been anxious or worried for no good reason*		0 No, not at all	1 Hardly ever	2 Yes, sometimes	3 Yes, very ...
I have felt scared or panicky for no good reason		3 Yes, quite a lot	2 Yes, ...	1 No, not much	0 No, not at all
Things have been getting on top of me		3 Yes, most of the time I haven't been	2 Yes, sometimes	1 No most of the time I have coped	0 No, I have been coping as
I have been so unhappy that I have had difficulty sleeping		3 Yes, most of the ...	2 Yes, ...	1 Not very often	0 No, not at all
I have felt sad or miserable		3 Yes, most of the ...	2 Yes, quite ...	1 Not very often	0 No, not at all
I have been so unhappy that I have been crying		3 Yes, most of the ...	2 Yes, quite ...	1 Only occasionally	0 No, never
The thought of harming myself has occurred to me		3 Yes, quite often	2 Sometimes	1 Hardly ever	0 Never
Column totals		_____	_____	_____	_____

Grand total

Scoring: Sum the columns and then sum the column totals. A score  $\geq 10$  and/or a non-zero response on the last question (self-harm question in red) is a positive screen. Use page 21, "Depression" section for treatment options.

<b>Bipolar disorder (MDQ)</b>		Keep going.... Circle the letter that indicates: Has there <u>ever been a period of time in your life</u> when you were not your usual self and...	
		NO	YES
...you felt so good or so hyper that other people thought you were not your normal self, or you were so hyper that you got into trouble?		N	Y
...you were so irritable that you shouted at people or started fights or arguments?		N	Y
...you felt much more self-confident than usual?		N	Y
...you got much less sleep than usual and found you didn't really miss it?		N	Y
...you were much more talkative or spoke much faster than usual?		N	Y
...thoughts raced through your head, or you couldn't slow your mind down?		N	Y
...you were so easily distracted by things around you that you had trouble concentrating or staying on track?		N	Y
...you had much more energy than usual?		N	Y
...you were much more active or did many more things than usual?		N	Y
...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?		N	Y
...you were much more interested in sex than usual?		N	Y
...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?		N	Y
...spending money got you or your family into trouble?		N	Y
Please place a check mark in the NO or YES column to answer the following two questions:			
If you checked YES to more than one of the above, have several of these ever happened during the same period of time?		N	Y
Have any of your blood relatives (i.e., children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?		N	Y

Scoring: Total the number of Y responses above the grey bar containing the text beginning with "Please place a ...". A score  $\geq 7$  is a positive screen. Use page 21, "Bipolar disorder" section and pages 27 and 28, Bipolar Disorder Treatment and Management, for treatment options.

Please continue to section B (next page)

EPOS: Cox JL, et al. Detection of Postnatal Depression: Development of the 10-item Edinburgh Postnatal Depression Scale. Br J Psychiatry. 1987;150: 782-6.  
MDQ: Hirschfeld, R., et al. Development and Validation of a Screening Instrument for Bipolar Spectrum Disorder: The Mood Disorder Questionnaire. Am J Psychiatry 2000; 157: 1873-1875. Adapted



# Mood Disorder Questionnaire (MDQ) - Score



## Scoring of Screening Tools for Emotional Changes

**A Depression (EPDS)** Please circle one of the four answers that comes closest to how you have felt in the past 7 days, not just how you feel today.

I have been able to laugh and see the funny side of things*	0 As much as I always	1 Not quite always
I have looked forward with enjoyment to things*	0 As much as I ever	1 Rather less
I have blamed myself unnecessarily when things when wrong	3 Yes, most of the time	2 Yes, some of the time
I have been anxious or worried for no good reason*	0 No, not at all	1 Hardly ever
I have felt scared or panicky for no good reason	3 Yes, quite a lot	2 Yes, some
Things have been getting on top of me	3 Yes, most of the time I haven't been	2 Yes, sometimes
I have been so unhappy that I have had difficulty sleeping	3 Yes, most of the time	2 Yes, quite often
I have felt sad or miserable	3 Yes, most of the time	2 Yes, quite often
I have been so unhappy that I have been crying	3 Yes, most of the time	2 Yes, quite often
The thought of harming myself has occurred to me	3 Yes, quite often	2 Sometimes
<b>Column totals</b>	<b>_____</b>	<b>_____</b>

Scoring: Sum the columns and then sum the column totals. A score  $\geq 10$  and/or a non-zero in red is a positive screen. Use page 21, "Depression" section for treatment options.

**Bipolar disorder (MDQ)** Keep going.... Circle the letter that indicates: Has there ever been a period of time in your life when you were not your usual self and...

...you felt so good or so hyper that other people thought you were not your normal self, or you were so hyper that you got into trouble?		
...you were so irritable that you shouted at people or started fights or arguments?		
...you felt much more self-confident than usual?		
...you got much less sleep than usual and found you didn't really miss it?		
...you were much more talkative or spoke much faster than usual?		
...thoughts raced through your head, or you couldn't slow your mind down?		
...you were so easily distracted by things around you that you had trouble concentrating or staying on track?		
...you had much more energy than usual?		
...you were much more active or did many more things than usual?		
...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?		
...you were much more interested in sex than usual?		
...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?		
...spending money got you or your family into trouble?		

Please place a check mark in the NO or YES column to answer the following two questions:  
If you checked YES to more than one of the above, have several of these ever happened during the same period of time?

Have any of your blood relatives (i.e., children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?

Scoring: Total the number of Y responses above the grey bar containing the text beginning with "Please place a ...". A score  $\geq 7$  is a positive screen. Use page 21, "Bipolar disorder" section and pages 27 and 28, Bipolar Disorder Treatment and Management, for treatment options.

**Bipolar disorder (MDQ)** Keep going.... Circle the letter that indicates: Has there ever been a period of time in your life when you were not your usual self and...

	NO	YES
...you felt so good or so hyper that other people thought you were not your normal self, or you were so hyper that you got into trouble?	N	Y
...you were so irritable that you shouted at people or started fights or arguments?	N	Y
...you felt much more self-confident than usual?	N	Y
...you got much less sleep than usual and found you didn't really miss it?	N	Y
...you were much more talkative or spoke much faster than usual?	N	Y
...thoughts raced through your head, or you couldn't slow your mind down?	N	Y
...you were so easily distracted by things around you that you had trouble concentrating or staying on track?	N	Y
...you had much more energy than usual?	N	Y
...you were much more active or did many more things than usual?	N	Y
...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?	N	Y
...you were much more interested in sex than usual?	N	Y
...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?	N	Y
...spending money got you or your family into trouble?	N	Y
Please place a check mark in the NO or YES column to answer the following two questions:		
If you checked YES to more than one of the above, have several of these ever happened during the same period of time?	N	Y
Have any of your blood relatives (i.e., children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?	N	Y

Scoring: Total the number of Y responses above the grey bar containing the text beginning with "Please place a ...". A score  $\geq 7$  is a positive screen. Use page 21, "Bipolar disorder" section and pages 27 and 28, Bipolar Disorder Treatment and Management, for treatment options.

Please continue to section B (next page)

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# Rapid Mood Screener (RMS)

## Differentiates BPD I from MDD



Do you have patients who are exhibiting depressive symptoms and a history that may indicate mania?  
This patient questionnaire can help you identify when additional assessment for bipolar I disorder is warranted.

Dear healthcare professional, the information on this website and from the questionnaire are not intended to replace your professional/clinical judgment. The content is designed to provide educational information and not intended to define a standard of care or exclusive course of treatment. In using the information on this website, you are responsible for considering the patient's particular situation in evaluating the appropriateness of the information. The Rapid Mood Screener is not a diagnostic tool.

Please select one response for each question.

1. Have there been at least 6 different periods of time (at least 2 weeks) when you felt deeply depressed?  Yes  No

2. Did you have problems with depression before the age of 18?  Yes  No

3. Have you ever had to stop or change your antidepressant because it made you highly irritable or hyper?  Yes  No

4. Have you ever had a period of at least 1 week during which you were more talkative than normal with thoughts racing in your head?  Yes  No

5. Have you ever had a period of at least 1 week during which you felt any of the following: unusually happy; unusually outgoing; or unusually energetic?  Yes  No

6. Have you ever had a period of at least 1 week during which you needed much less sleep than usual?  Yes  No



# Composite International Diagnostic Interview (CIDI)



CLINICAL PRACTICE GUIDELINE

NUMBER 4

JUNE 2023

REPLACES COMMITTEE OPINION 757, NOVEMBER 2018

## Screening and Diagnosis of Mental Health Conditions During Pregnancy and Postpartum

**Table 3. Composite International Diagnostic Interview (CIDI) Bipolar Screen\***

**Screen for bipolar disorder<sup>†</sup>**

- 1. Some people have periods lasting several days or longer when they feel much more excited and full of energy than usual. Their minds go too fast. They talk a lot. They are very restless or unable to sit still and they sometimes do things that are unusual for them, such as driving too fast or spending too much money. Have you ever had a period like this lasting several days or longer?*
- 2. Have you ever had a period lasting several days or longer when most of the time you were so irritable or grouchy that you started arguments, shouted at people, or hit people?*

If YES to questions 1 and/or 2

**Continue screen for bipolar disorder<sup>†</sup>**

- 3. People who have episodes like this often have changes in their thinking and behavior at the same time, like being more talkative, needing very little sleep, being very restless, going on buying sprees, and behaving in ways they would normally think are inappropriate. Did you ever have any of these changes during your episodes of being (excited and full of energy/very irritable or grouchy)?*

If YES to question 3

**The screen suggests the patient may have bipolar disorder**

If currently symptomatic or anticipating prescribing for other perinatal mood or anxiety disorder, consider consultation with mental health professional, including those available through Perinatal Psychiatry Access Programs across the country.

\*In this algorithm, the provider speaks the *italicized text*.

<sup>†</sup>Taken from the Composite International Diagnostic Interview-Based Bipolar Disorder Screening Scale (Kessler, Akiskal, Angst et al., 2006).

Modified from Massachusetts Child Psychiatry Access Project. MCPAP for Moms toolkit. MCPAP; 2014. Accessed February 7, 2023. <https://www.mcpapformoms.org/Docs/Adult%20Toolkit.pdf>



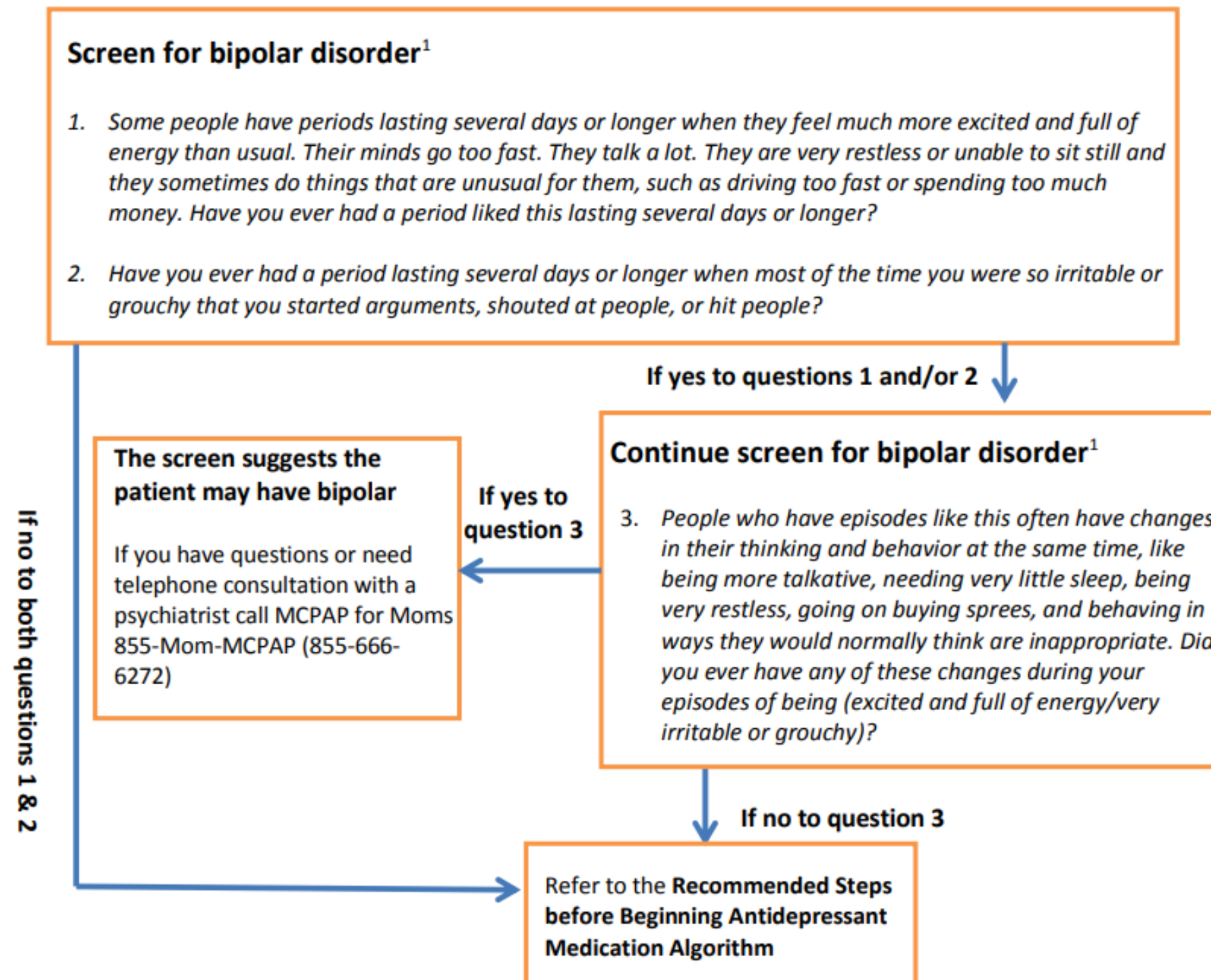
# Composite International Diagnostic Interview (CIDI)



## Bipolar Disorder Screen

This algorithm can be used when treatment with antidepressants is indicated, in conjunction with the **Depression Screening Algorithm for Obstetric Providers**.

In this algorithm, the provider *speaks the italicized text* and summarizes other text.



# Bipolar Disorder Increases the Risk of Postpartum Psychosis

- 1-2/1000 women
- >70% bipolar disorder
- 24 hrs – 3 weeks postpartum
- Mood symptoms, psychotic sxs & disorientation
- R/o medical causes of delirium
- Psychiatric emergency
- Increased risk of suicide & infanticide



# Fireside Chat: Psychiatric Emergencies



**Uruj Haider, MD**  
MCPAP for Moms



**Kriti Lodha**  
PSI-MA/PPP Survivor

## Agenda

12:00–12:05 Welcome &  
Announcements

12:05–12:20 Bipolar  
Screening

**12:20 – 12:45 Psychiatric  
Emergencies**

12:45–1:00 Discussion,  
Q&A



# Take Care of Yourself

**CONTENT WARNING:** The following discussion will cover psychiatric emergencies in the perinatal period and will include a discussion with a person with lived experience with postpartum psychosis.

We encourage you to take care of yourself, however you see fit. Should this topic become too much for you, feel free to leave the webinar and return at 12:45pm for the Q&A session, if you are interested.

Some ideas for self-care during and/or after this discussion include:

- Take a few deep breaths
- Take a short walk
- Stretch
- Drink some water
- Doodle
- Turn down/off the volume
- Light a candle
- Talk to someone about how you're feeling





# Perinatal Mental Health: Psychiatric Emergencies

**Uruj Kamal Haider, MD**

**Medical Director, MCPAP for Moms**

**Assistant Professor of Psychiatry, Obstetrics & Gynecology, U Mass Chan/Memorial  
Medical Director of Women's Mental Health Clinical Services, U Mass Chan/Memorial  
Consulting Psychiatrist, Lifeline for Families**

# Introductions

---

**Kriti Lodha** *(she/her)*

*Maternal Mental Health Advocate | Marketing Executive*

- Global Board of Director @ Postpartum Support International (PSI)
- Executive Advisor @ MGH Center For Women's Mental Health
- PSI Perinatal Psychosis Peer Support Group Leader
- National Perinatal Psychosis Taskforce Member
- PNQIN-MA Advisory Workgroup Member

**My Why:** *I was motivated to turn my pain into purpose after silently battling postpartum psychosis (PPP) in the pandemic. I want to role model the importance of advocacy, representation & service for my daughter Naina.*

**Hear more about my experience with PPP [here](#).**



# How can we detect postpartum psychosis?

- Early recognition + secondary prevention
- Screening: screen as early as possible for current mental health problems, history of psychiatric treatment, a family history of mental illness
  - EPDS, MDQ, PHQ-9, GAD-7
- Enhancing mental health and emotional support
- Psychoeducation, sleep, exercise, diet
- 911, CRISIS, MA Behavioral Health Helpline (BHHL), don't leave mom alone with baby, MCPAP for Moms, get immediate help

*Timely treatment can prevent trauma or tragedy: Please review [PSI's perinatal psychosis "Get Help" page](#) as an invaluable resource - whether you are a provider, help seeker, or family member*

# PSI's PPP Get Help Page



1.800.944.4773 MEMBER PORTAL CONTACT SUBSCRIBE JOURNALISTS



Get Help Professionals Training Get Involved About Store En Español [Donate](#)

## Perinatal Psychosis (Pregnancy, Post-Loss, and Postpartum)

Postpartum Psychosis (PPP), also known as Perinatal Psychosis, is a serious PMH disorder that usually has an onset in the first 2-weeks (but up to a year). Postpartum Psychosis occurs in approximately 1 to 2 out of every 1,000 deliveries. Review the information below to learn more about PPP.

An active case of Postpartum Psychosis is considered an emergency, and you should reach out to one of the numbers listed below. It is important to stay with the perinatal individual and the child to ensure everyone's safety.

Postpartum Psychosis is treatable, and help is available. You do not need a diagnosis to reach out for help.

## In an Emergency/If you suspect Postpartum Psychosis

- **National Maternal Mental Health Hotline** 1-833-852-6262 (1-833-TLC-Mama)
- **Crisis Text Line** Text HOME to 741741 from anywhere in the USA
- **National Suicide Prevention Lifeline** Call 988

Symptoms



Risk Factors



Treatment Options



## Get Help

Get Help

In An Emergency

Perinatal Mental Health

- Signs, Symptoms and Treatment
- Learn More

Find Support

- PSI HelpLine
- Provider Directory
- Find Local Support
- Online Support Groups
- Chat with an Expert
- Peer Mentor Program
- Specialized Support
- Postpartum Planning Class
- En Español

Resources

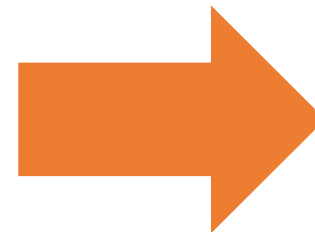
- FAQs
- Birth and Postpartum Doulas
- Intensive Treatment in the US
- Medication Resources

EN ^

# What do I do if there is a psychiatric emergency?

- **Suicide or PPP: take the baby away from the mom and call 911, BHHL, CRISIS**
- **BHHL: Call, text or chat 833-773-2445, 24/7, 365 days, free**
  - Anyone can call, even family members
  - Staffed by trained clinicians who will stay online with you until you get the support you need
  - Connects to crisis support or Community Behavioral Health Centers (CBHC)
- **Imminent risk vs non-imminent**
- ***Call MCPAP for Moms at any point – we can guide you***

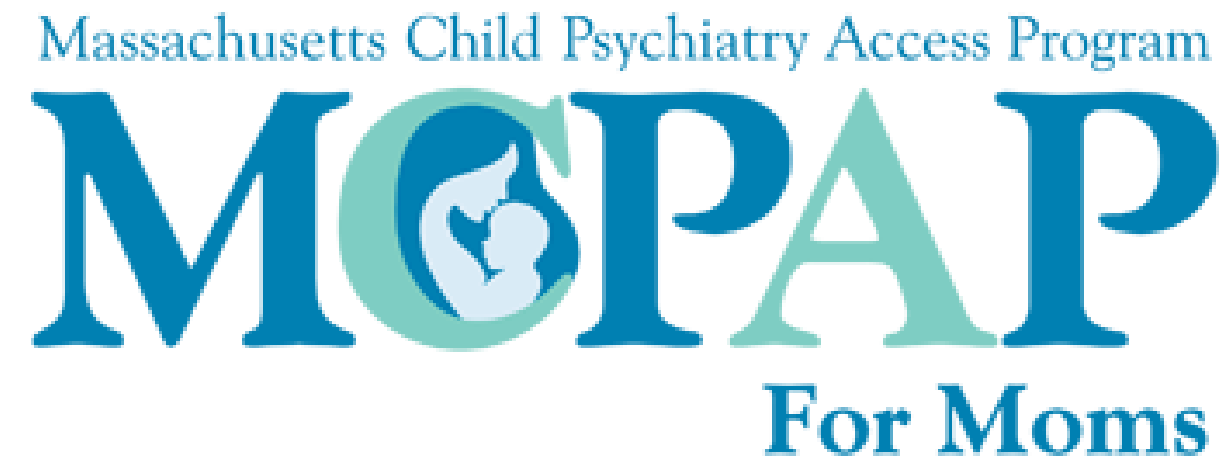
In summary, our aim is to promote maternal and child health by building the capacity of front line providers to address perinatal mental health and substance use disorders.



Please call us with any questions. We are to here to help

**1-855-Mom-MCPAP**

**[www.mcpapformoms.org](http://www.mcpapformoms.org)**



# Provider Resources

- [ACOG](#): *Perinatal Mental Health Page*
- [MCPAP for Moms](#): *Mass. Child Psychiatry Access Program for Moms*
- [MGH Postpartum Psychosis Project](#): *PPP Research & Resources*
- [PSI PPP Get Help Page](#): *PPP Information Resources, including:*
  - [FREE, virtual support groups](#) for 1) PPP survivors and 2) PPP families
  - [Postpartum Psychosis Discussion Tool](#) in English and Spanish  
(Downloadable PDF)
- [Postpartum Psychosis Task Force](#): *National PPP taskforce*
- [MGH Center for Women's Mental Health](#)
- [Lactmed](#)
- [Lifeline for Moms](#)

MASSACHUSETTS  
**BEHAVIORAL  
HEALTH  
HELP LINE**

Get help now.

**833-773-2445**



# Any Questions?



**Tiffany Moore Simas, MD**  
MA AIM PMHC Bundle Lead



**Uruj Haider, MD**  
MCPAP for Moms



**Kriti Lodha**  
PSI/PPP Survivor

## Agenda

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12:20 – 12:45 Psychiatric  
Emergencies

12:45–1:00 Discussion,  
Q&A



***Thanks for joining, see you on  
10/21!***

***Have questions?  
Email [PNQINAdmin@pnqinma.org](mailto:PNQINAdmin@pnqinma.org)!***

