

Obstetrics – TJUH

Goals:

1. To provide compassionate and effective intrapartum care to all obstetrical patients by learning the management of normal physiologic labor and delivery to complex obstetric care. **(PC, MK)**
2. To learn how to function and communicate effectively on a team with other obstetricians, midwives, nurses, anesthesia, family medicine/emergency medicine, and pediatric personnel. **(SBP)**
3. To become familiar with the resources available for evidence – based practice and bring back information to the team and other learners. **(PBL)**
4. To become competent and efficient in triaging and managing medical complaints of pregnant women in the hospital setting. **(PC)**
5. To provide culturally competent and anti-racist care to patients and communicate with colleagues from a wide socioeconomic background and diverse ethnicity with recognition of implicit bias. **(P, C)**

PGY1

Objectives:

Upon completion of the rotation, the PGY1 resident must be able to:

1. Competently conduct intrapartum fetal assessment with different methods of fetal monitoring including basic ultrasonography and describe the causes and clinical significance of abnormal fetal heart rate patterns such as bradycardia, tachycardia, decreased/absent variability, and decelerations. Should also be able to provide basic intrapartum resuscitation for category II tracings. **(PC, MK)**
2. Perform physical examination to assess status of membranes, presence of vaginal bleeding, fetal position and weight, cervical effacement, dilation and station, uterine contractility. **(MK)**
3. Recognize the abnormalities of labor such as prolonged latent phase, protracted active phase, and arrest of dilation and descent. **(MK)**
4. Identify and treat the most common maternal complications that occur in the puerperium, including uterine hemorrhage, endometritis, urinary tract infection, wound infection, mastitis, embolism, thrombosis and postpartum affective disorders. **(PC)**
5. Work in a structured multidisciplinary team in a respectful way, including performing competent transition of care at team sign out. **(P, C, SBP)**
6. Reach the following EPAs:
 - a. Perform a complete cervical exam (dilation, effacement, etc.)
 - b. Tie one and two handed knots
 - c. Perform US for fetal position, as well as AFI and BPP
 - d. SVD under direct observation
 - e. Repair of laceration with direct supervision
 - f. Perform primary cesarean section with direct supervision
 - g. Admit patients scheduled for induction and c sections
 - h. Intrapartum management/assessment including FSE and IUPC placement as well as amniotomy
 - i. Microscopy skills as relevant for triage

PGY2

Objectives:

Upon completion of the rotation in addition to the PGY1 objectives the PGY2 resident must be able to:

1. Assess and develop a management plan for presentations to obstetrical triage unit such as preterm labor, abruption, pre-eclampsia and management of maternal SUD in pregnancy.
2. Teach and supervise junior residents and medical students.
3. Communicate effectively with MFM team and help to coordinate higher level of care for more obstetrically and medically complex patients
4. Reach the following EPAs:
 - a. SVD with indirect supervision
 - b. Repair of laceration with indirect supervision
 - c. Primary cesarean section with indirect supervision
 - d. Complex cesarean delivery with direct supervision
 - e. Assessment of pre-term labor with indirect supervision
 - f. US for growth, establishing EDD, and cervical length

PGY4

Objectives:

Upon completion of the rotation in addition to the PGY1 & PGY2 objectives the PGY4 resident must be able to:

1. Demonstrate leadership in prioritizing and triaging all care for laboring patients, including an understanding of the role of ancillary personnel and other members of the health care team, available system resources, and concepts of team resource management.
2. Carry out all aspects of intrapartum and postpartum care, including management decisions and performing surgical delivery, as the primary physician, with appropriate supervision by the attending faculty.
3. Lead educational curriculum including standards of care and use of evidence based medicine in the care of obstetrical patients.
4. Perform operative vaginal delivery with appropriate supervision.
5. Respond to obstetrical emergencies as part of the OB CRT (Critical Response Team)
6. Work collaboratively with Midwives and provide consultative care as needed.
7. Demonstrate the ability to supervise, direct and teach the members of the inpatient team and interact effectively with ancillary nursing and operating room staff
8. Analyze and present the patient outcomes from their rotation at a Grand Rounds along with a systems based problem they identified by maintaining a database of outcomes, complications and readmissions from the service.
9. Reach the following EPAs:
 - a. SVD as instructor of junior colleagues
 - b. Repair of simple and complex lacerations independently
 - c. Primary and repeat cesarean as instructor of junior colleagues
 - d. Complex cesarean delivery independently
 - e. Assessment of pre-term labor as instructor of junior colleagues
 - f. Assist junior residents with the workflow and evaluation of patients in triage

Evaluations:

1. Global faculty evaluation, peer evaluations, student evaluations, global nurse evaluations and MyTip Report.
2. Complete oral exam, which includes preparing case list of five cases for examination.

Reading:

Core Text: Gabbe/ Williams Obstetrics

Suggested Readings: Assigned during the rotation