

LABOR AND DELIVERY ROTATION OBJECTIVES

MATERNAL-FETAL MEDICINE FELLOWSHIP

University of New Mexico

1. General Description and Goals

A one month Labor and Delivery Rotation will be undertaken by the fellows in both the second and third years of fellowship. Fellows will be supervised by the general obstetrics and gynecology faculty for routine obstetrical care and procedures, by the maternal-fetal medicine faculty for procedures and conditions requiring MFM care, and by the gynecologic oncology faculty as well as the MFM faculty for complex surgical care including cesarean hysterectomies. During the Labor and Delivery rotation the supervisory MFM faculty will be available in-house at all times.

The goal of this rotation is to enhance the experience and education of the fellow on the medical knowledge and clinical skills that will enable the fellow to provide intrapartum care in normal and complicated pregnancies. The fellow will also gain knowledge and clinical competency in complicated operative vaginal deliveries, non-vertex second twin, management of obstetrical emergencies, and management of complicated surgical cases.

Goals:

To understand describe; and perform the following procedures performed in Labor and Delivery

1. Fetal assessment
 1. Nonstress test
 2. Contraction stress test
 3. Biophysical profile
 4. Doppler velocimetry
2. Complicated cesarean delivery
3. Cesarean hysterectomy
4. Control of hemorrhage
 1. Medical and Surgical
5. Episiotomy and vaginal laceration repair
6. Intrapartum fetal assessment
 1. Fetal heart rate monitoring
 2. Fetal scalp stimulation
7. Induction of labor
8. Manual removal of the placenta
9. Operative vaginal deliveries
10. Sterilization procedures
11. Breech deliveries, spontaneous, assisted and application of Piper forceps
12. Delivery of multiple gestations
 1. Management of the non-vertex 2nd twin
 2. Version of second twin

13. Wound Care/ Complications
14. External cephalic version of breech-presenting singleton

2. Learning Objectives

Upon completion of the rotation, the Fellow will accomplish the following objectives as listed in the respective ACGME competences category according to the year of training:

PGY6

1. Medical Knowledge

1. Understand and describe methods of fetal assessment listed under (Goals, above)
2. Understand and describe methods of labor induction
3. Understand and describe management of obstetric hemorrhage
4. Understand and describe complicated cesarean sections, operative vaginal deliveries, management of vaginal breech delivery and twin delivery including non-vertex second twin
5. Serve as a sub-attending on the UNMH obstetrical Triage unit
6. Understand and describe intrapartum fetal assessment.

2. Patient Care and Procedure Skills:

1. Perform and/or interpret fetal assessment tests.
2. Counsel patients on management and medical interventions for complicated intrapartum obstetrics including FHR categories II and III, disorders of labor progression, obstetrics hemorrhage and malpresentations:
3. Cite published effectiveness rates for any interventions
4. Explain frequency and types of side effects of all interventions
5. Evaluate the level of evidence for success and complication rates
6. Discuss cost-effectiveness of any interventions
7. Interpret FHR tracings and demonstrate knowledge of: sensitivity, specificity, positive and normal, equivocal and abnormal tracings, and test reliability
8. Describe Standard FHR terminology (i.e., categories), normal, equivocal and abnormal tracings, and test reliability. Describe clinical management algorithms for intrapartum FHR tracings.

C. Practice-based Learning and Improvement:

1. Demonstrate an ability to perform self-assessment and incorporate feedback into improving clinical practice
2. Critically analyze and understand the appropriate use of the measures of intrapartum fetal assessment and clinical management plans formulated and identify areas for improvement

3. Use information technology to locate scientific studies from literature on fetal assessment and management strategies for malpresentations and obstetric emergencies.
4. Apply these technologies to improve practice and patient care

D. Interpersonal and Communication Skills:

1. Demonstrate an ability to communicate test results to patients and families
2. Use effective listening skills to elicit and then provide information to patients and families
3. Work effectively, interact, and communicate appropriately with referring providers.

E. Professionalism: Fellows are expected to:

1. Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
2. Demonstrate respect, compassion, and integrity in interactions with patients, families and other health care professionals
3. Demonstrate sensitivity and responsiveness to patient's culture, age, gender, and disabilities

F. Systems-Based Practice: Fellows are expected to:

1. Practice cost-effective healthcare and demonstrate knowledge of resource allocation that does not compromise quality of care, especially in the use of diagnostic tests
2. Coordinate patient care among different health care providers, including medical students, residents, nurse practitioners, certified midwives and referring family medicine and general obstetrics and gynecology physicians.

4. PGY7 objectives

A. Medical Knowledge

1. To understand and describe methods of fetal assessment listed under (Goals, above)
2. Understand and describe methods of labor induction
3. Understand and describe management of obstetric hemorrhage
4. Understand and describe complicated cesarean section, operative vaginal delivery, management of vaginal breech delivery and twin delivery including non-vertex second twin
5. To serve as a sub-attending on the UNMH obstetrical Triage unit
6. Understand and describe intrapartum fetal assessment.

B. Patient Care: Upon completion of this rotation, fellows will

1. Independently perform and/or interpret fetal assessment tests.
2. Be competent to independently perform complicated cesarean section, operative vaginal delivery, management of vaginal breech delivery and twin delivery including non-vertex second twin
3. Counsel patients on management and medical interventions for complicated intrapartum obstetrics including FHR categories II and III, disorders of labor progression, obstetric hemorrhage and malpresentations:

4. Cite published effectiveness rates for any interventions
5. Explain frequency and types of side effects of all interventions
6. Evaluate the level of evidence for success and complication rates
7. Discuss cost-effectiveness of any interventions
8. Interpret FHR tracings and demonstrate knowledge of: sensitivity, specificity, positive and negative predictive values
9. Standard terminology, normal, equivocal and abnormal tracings, and test reliability

C. Practice-based Learning: Fellows are expected to:

1. Demonstrate ability to perform self-assessment and incorporate feedback into improving clinical practice
2. Critically analyze and understand the appropriate use of the measures of intrapartum fetal assessment and clinical management plans formulated and identify areas for improvement
3. Use information technology to locate scientific studies from literature on fetal assessment and management strategies for malpresentations and obstetric emergencies. Apply these to improve practice and patient care

D. Interpersonal and Communication Skills: Fellows are expected to:

1. Demonstrate ability to communicate test results to patients and families
2. Use effective listening skills to elicit and then provide information to patients and families
3. Work effectively, interact, and communicate appropriately with referring providers.

E. Professionalism: Fellows are expected to:

1. Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
2. Demonstrate respect, compassion, and integrity in interactions with patients, families, and other health care professionals
3. Demonstrate sensitivity and responsiveness to patient's culture, age, gender, and disabilities

F. Systems-Based Practice: Fellows are expected to:

1. Practice cost-effective healthcare and demonstrate knowledge of resource allocation that does not compromise quality of care, especially in the use of diagnostic tests
2. Coordinate patient care among different health care providers, including medical students, residents, nurse practitioners, certified midwives and referring family medicine and general obstetrics and gynecology physicians.