General Description: All third year (PGY7) Maternal Fetal Medicine Fellows rotate for one month in the Medical ICU. During this time, the fellows are protected from all other clinical duties. The following are goals and objectives for the UNM one month MICU rotation.

1. Goals:

   1. Diagnose and provide critical care management for
      a. Acute blood loss and hemorrhagic shock
      b. Adult respiratory distress syndrome
      c. Cardiac arrest
      d. Congestive heart failure and pulmonary edema
      e. Hypertensive crisis
      f. Hypovolemic shock
      g. Multisystem trauma
      h. Myocardial infarction
      i. Cardiomyopathy
      j. Pulmonary embolism
      k. Respiratory failure – and indications for intubation
      l. Septic shock
      m. Diabetic ketoacidosis and hyperglycemic hyperosmolar coma
      n. Acute thyrotoxicosis
      o. Necrotizing infections

   2. Diagnose and provide critical care management for the following pregnancy-specific conditions:
      a. Eclampsia
      b. Peripartum cardiomyopathy
      c. Acute fatty liver of pregnancy
      d. Hypovolemic shock
      e. Amniotic fluid embolism
      f. Septic shock

   3. Describe the indications for and complications of invasive hemodynamic monitoring

   4. Describe indications for placement of:
      a. Arterial line
      b. Central venous pressure catheter monitoring
      c. Pulmonary artery catheter monitoring
      d. Mechanical ventilation

   5. Outline a plan of management for critically ill patients with:
      a. Arterial line
      b. Central venous pressure catheter monitoring
      c. Pulmonary artery catheter monitoring
      d. Mechanical ventilation
6. Counsel women who have survived life threatening illnesses requiring critical care on risks of recurrences in future pregnancies

2. Learning Objectives:

The objectives for this rotation based on the ACGME core competencies are as follows:

A. Medical Knowledge: Upon completion of this rotation, fellows will:
   a. Discuss and describe life threatening medical complications of pregnancy and life-threatening pregnancy-specific conditions outlined above.

B. Patient Care: Upon completion of this rotation, fellows will
   a. Demonstrate clinical competency in the intensive care management of life threatening conditions, as outlined above.
   b. Formulate appropriate management plans for any life-threatening complications of pregnancy and or life-threatening medical co-morbidities.
      i. Cite published effectiveness rates for any antimicrobial therapy
      ii. Explain frequency and types of side effects and complications for all interventions
iv. Evaluate the level of evidence for treatment success and complication rates
v. List costs of treatment regimens
vi. Understand and interpret invasive monitoring parameters and results
vii. Understand standard terminology, normal values, and test reliability

C. **Practice-based Learning**: Fellows are expected to:
   a. Demonstrate ability to perform self-assessment and incorporate feedback into improving clinical practice
   b. Critically analyze and understand appropriate clinical management plans and identify areas for improvement
   c. Use information technology to locate scientific studies from literature on medical and surgical management options and apply these to improve practice and patient care

D. **Interpersonal and Communication Skills**: Fellows are expected to:
   a. Demonstrate ability to communicate test results to patients and families
   b. Use effective listening skills to elicit and then provide information to patients and families
   c. Work effectively, interact, and communicate appropriately with all members of the care team, including residents, fellows, intensive care specialists, medical and surgical subspecialists.

E. **Professionalism**: Fellows are expected to:
   a. Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population
   b. Demonstrate respect, compassion, and integrity in interactions with patients, families, and other healthcare professionals
   c. Demonstrate sensitivity and responsiveness to patient’s culture, age, gender, and disabilities
   d. Demonstrate respect, compassion, and integrity in interactions with patients and their families surrounding end of life decision making.

F. **Systems-Based Practice**: Fellows are expected to:
   a. Practice cost-effective healthcare and demonstrate knowledge of resource allocation that does not compromise quality of care, especially in the use of diagnostic tests
   b. Coordinate patient care among different healthcare providers, including residents, intensive care specialists, medical and surgical subspecialists.