



OB Curriculum PGY: 1

NGMC- Family Medicine Residency Program Gainesville. Ga

# **Description of Rotation:**

This is a four-week block obstetrics experience with direct supervision by obstetricians. Supplemental longitudinal learning in the FMP supervised by Family Physician Faculty is also expected. Residents will see prenatal, laboring, and postpartum patients in the inpatient, and outpatient triage settings.

### **Overall Goal of Obstetrics PGY1 Rotation:**

Residents will learn to provide evidence-based, compassionate, comprehensive maternity care for women with low-risk pregnancies. They will be skilled in identifying pregnancy conditions which require assistance from specialists for management. They will develop technical skills necessary to assist women with vaginal deliveries and manage urgencies/emergencies which may arise ante/intra/post-partum.

## **Patient Care Objectives and Competencies**

Residents must demonstrate ability to:

- Perform comprehensive physical examinations of female anatomy;
- Perform appropriate pre-conception counseling/treatment, including (PC-3):
  - Nutrition and exercise
  - Genetic screening and prevention of birth defects
  - Optimization of health prior to conception
  - Assessment of immunization status and appropriate vaccinations, as needed

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- Occupational hazards assessment
- Order appropriate prenatal screening tests;
- Provide, in collaboration with OB or FM faculty, comprehensive, compassionate, continuous care for obstetric patients with a broad range of pregnancy-related complications, including (PC-1):
  - Spotting/bleeding
  - o Pelvic pain
  - Hyperemesis gravidarum
  - Musculoskeletal changes and discomforts
  - Failed pregnancies (threatened/incomplete/complete abortions, embryonic demise) including medical management of uncomplicated SABs, surgical referrals and grief counseling
  - Ectopic Pregnancy
  - Recurrent early pregnancy loss
  - Gestational diabetes
  - Sexually transmitted infections
  - Bacterial or yeast vaginitis





- Asymptomatic bacteriuria, urinary tract infections, and complications
- Iron deficiency anemia
- Group B Strep colonization
- Preterm labor
- Placental abruption
- Blood factor isoimmunization
- Pregnancy-induced hypertension, preeclampsia, eclampsia, HELLP syndrome and acute fatty liver of pregnancy
- o Postpartum hemorrhage
- o Postpartum fever and endometritis
- o Thromboembolic disease
- Postpartum depression
- Utilize the Electronic Health Record to extract information relevant to patients' obstetrics history;
- Perform required procedures with supervision; appropriately referring cases to obstetrical back up. (PC-5)

## **Medical Knowledge Objectives and Competencies**

#### Residents must demonstrate:

- Appropriate counseling for women regarding screening during pregnancy, including: (MK-1)
  - Options for early screening for chromosomal abnormalities through noninvasive prenatal testing, including ultrasound examination for nuchal translucency, alpha-fetoprotein
  - (AFP)/quadruple marker testing, combined or sequential screening protocols, and cell-free DNA testing;
  - Cystic fibrosis and Tay-Sachs disease screening;
  - Referral for genetic counseling regarding other genetic diseases, with attention to maternal age and other risk factors;
  - Referral for chorionic villus sampling and amniocentesis;
- Appropriate counseling for prevention or treatment of substance abuse and sexually transmitted infections (STIs), to specifically include:
  - Tobacco cessation counseling in pregnancy.
  - Alcohol abuse risks and fetal alcohol syndrome.
  - o Opiate abuse and referral for treatment with methadone or buprenorphine, and
  - o counseling regarding neonatal abstinence syndrome.
  - Other substances of abuse and pregnancy risks.
  - Risk factors for STIs (including viral hepatitis and HIV) and their impact on pregnancy

Updated: January 24, 2019

- and fetal outcome.
- Assessment of estimated fetal weight by Leopold maneuvers;
- Understanding of the physiology of the three stages of labor;





- Management of normal labor and delivery;
- Appropriate utilization and interpretation of external electronic fetal monitoring;
- Appropriate use of obstetric analgesia and anesthesia;
- Understanding of methods for protecting the perineum during the second stage of labor
- Understanding of indications for episiotomy;
- Understanding of the normal course of the third stage of labor and the steps involved to prevent excessive bleeding and reduce risk of postpartum hemorrhage using the active management techniques, as described in Advanced Life Support in Obstetrics (ALSO); (MK-1)
- Compassionate and accurate counsel of patients regarding breastfeeding in the immediate postpartum period;
- Understanding of pregnancy complications, including:
  - Fetal malposition and malpresentation: understand fetal-pelvic relationships and the importance of early detection of malposition; distinguish types of malposition and understand their compatibility with vaginal delivery.
  - Labor dystocia: understand risk factors, prevention, recognition, and management, including augmentation of labor and utilization of appropriate obstetric consultation when indicated.
  - Post-term pregnancy: understand indications and risk assessments for induction of post-term pregnancy, including post-dates monitoring, and selection of management options, including cervical ripening agents, Pitocin induction, and artificial rupture of membranes; understand appropriate assessment and use of Bishop scoring for induction management.
  - Premature and prolonged rupture of membranes: Knowledge of appropriate interventions, including induction or augmentation of labor and use of prophylactic antibiotics when indicated.
  - Meconium, and awareness of the need for appropriate personnel to be present at the time of delivery and for appropriate intrapartum management of the neonate born with meconium-stained fluid, including counseling mothers and families about expectations for delivery;
  - Life-threatening emergencies during the peripartum period and need to utilize appropriate resuscitative techniques for mothers and babies; with obstetric consultation, co-manage placental abruption/hemorrhage, preeclampsia, eclampsia, amniotic fluid embolism, and disseminated intravascular coagulation (DIC);
  - Early signs of fetal compromise and demonstration of appropriate interventions, including position change, tocolytics, maternal fluid and oxygen resuscitation, and amnio-infusion, as well as timely consultation, when necessary;
  - Shoulder dystocia: understand risk factors, prevention, recognition, and management using ALSO protocols.
  - Assisted deliveries: understand indications for and appropriate use and application of a vacuum extractor; understand indications for forceps.
  - o Cesarean section: understand indications, risks/benefits, and need for timely consultation.
  - Stillbirth: care for the psychological needs of patients and families experiencing.

**Systems Based Practice Objectives and Competencies** 





### Residents must demonstrate:

- Understanding of the roles of the obstetrician and obstetrician subspecialists as they relate to Family Physician care of obstetric patients (SBP-4);
- Appropriate usage of resources in women's health care delivery systems (e.g., Special Supplemental Nutrition Program for Women, Infants, and Children [WIC], Planned Parenthood) (SBP-1);
- Appropriate collaboration with other health care professionals regarding advocacy and coordination of care for female patients across the continuum of outpatient, inpatient, and institutional care (e.g., childbirth educator, lactation consultant, certified nurse midwife, nutritionist, dietician, parenting educator, social services) (SBP-3).

# **Practice Based Learning and Improvement Objectives and Competencies**

### Residents must demonstrate:

- Willingness and ability to incorporate faculty feedback into clinical/academic performance and participate in system change (PBLI-3);
- Appropriate use of search tools online and the Medical Center Library to find references which augment learning from cases encountered during supervised care; (PBLI-1)
- Use of the EPIC Electronic Health Record to facilitate patient care, including:
  - Appropriate usage of "Care Everywhere" to locate non-Harrison medical information available from external sources;
  - Appropriate usage of EPIC data synthesis function/charting resources to summarize trends in patient lab data.

## **Professionalism Objectives and Competencies**

## Residents must demonstrate:

- Ethical behavior and the humanistic qualities of respect, compassion, integrity, and honesty in all patient/staff interactions (PROF-1);
- Willingness to acknowledge errors when committed and perform self-analysis to avoid future similar mistakes (PROF-2);
- Punctuality and reliability always, whether in clinic, didactic sessions, or performing inpatient care;

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A professional appearance always

### **Interpersonal Communication Objectives and Competencies**

 Consult and communicate appropriately with Obstetrician-Gynecologists (OB-GYNs), Maternal-Fetal Medicine specialists, and allied health care professionals to provide optimum health services for women. (C-2)

## This includes:

- initial admission H&P's
- interval condition updates





- o requests for consultation by external specialists
- Develop rapport with the patients and/or family members to promote patients' welfare, employing active listening techniques to clarify information; (C-1)
- Communicate effectively with non-physician health-care team members;
- Counsel patients and/or family members in a compassionate and accurate manner regarding expectations of care and risks of care;
- Construct appropriately-organized, complete, and timely Electronic Health Record documentation. (C-4)

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