American University of Beirut Medical Center

Department of Anesthesiology

Obstetric Anesthesia Rotation Goals and Objectives

Location: AUBMC

Rotation Coordinator: Dr. Sahar Sayyid-Siddik

Rotation Duration: All residents should spend at least 2 blocks in the Obstetric Anesthesia rotation during their residency.

Rotation Goals and Objectives

I. Patient Care:

Goals: Residents must be able to provide patient care that is compassionate, appropriate, and effective for patients presenting for labor and delivery. The resident will demonstrate increased confidence and ability to provide prenatal consultation for complex obstetrical cases and to provide a detailed plan for the management of this group of patients. Management of postpartum complications and involvement in the resuscitation of the compromise newborn are also goals of the rotation.

Learning Objectives:
A CA2/CA3 resident at the end of the rotation should be able to:

- Demonstrate the ability and understanding to manage of high risk obstetric cases including pre-eclampsia, multiple pregnancy, cardiac disease in pregnancy, sickle cell pregnant patients, neurological disease in pregnancy and chemical dependency
- Recognize sign and symptoms and establish emergent management of OB complications such as postpartum bleeding and amniotic fluid emboli
- Anticipate need for newborn resuscitation, assess the newborn and establish steps toward resuscitation in conjunction with the neonatal team
- Under supervision, demonstrate independence and teaching abilities in the performance of neuraxial techniques.

II. Medical Knowledge

Goals: Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patients presenting for labor and delivery that require anesthesia interventions.

Learning Objectives:
A CA2/CA3 resident at the end of the rotation should be able to:

(a) Discuss anesthesia management of the complicated / high risk pregnancy.
(b) Discuss pathophysiology and anesthetic management of medical problems in pregnant patients:
   - Cardiac disease
   - PIH and HELLP syndrome – Anti toxemic drugs and side effects
   - Asthma, difficult airway
   - Neurological diseases – seizures, myasthenia, multiple sclerosis, paraplegia
   - Endocrine – diabetes, thyroid
   - Hematological - coagulopathy, sickle cell disease
   - Morbid obesity
   - HIV, AIDS and the drug addicted mother
   - Abnormal fetal presentations
   - Placenta Previa
   - Preterm labor and delivery
   - Multiple gestation Discuss Maternal – fetal physiology

(c) Summarize management of peripartum complications:
   - PACU admission criteria
   - PACU discharge Criteria
   - Interpretation of diagnostic tests; EKG, CXR, labs including ABG
   - Current ACLS protocols
   - Intubation and extubation criteria
   - Assessment of adequate neuromuscular reversal

(d) Describe Anesthesia for Surgery during Pregnancy
(e) Describe Anesthesia for Postpartum Sterilization Surgery
(f) Describe fetus and newborn assessment:
   - Evaluation of the Fetus
   - Diagnosis and management of fetal asphyxia
   - Assessment of the Newborn Apgar and other scores
   - Steps in Resuscitation of the Newborn

Recommended Texts, Reading Material and Electronic Resources:

- Electronic Access via Saab Medical Library to multiple reference and research resources (OVID, Medline, MD Consult, etc.)
- Obstetric Anesthesia Sections from Major Anesthesia Textbooks (Miller, Barash, Morgan & Mikhail.

III. Interpersonal and Communication Skills:

Goals: Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Although this is a common goal in all rotations, the OB rotation offers a unique
environment for the resident to develop this competency as the resident will have a close interaction with obstetrician, obstetric nurses and the patients.

**Learning Objectives:**

**IV. Professionalism:**

**Goals:** Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. This principles include but are not limited to compassion, integrity, and respect for others, respect for autonomy, sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

**Learning Objectives:**

**V. Practice Based Learning and Improvement:**

**Goals:** Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. This rotation will allow the resident to evaluate and treat patients in the OB clinic and follow up their labor and early post labor course.

**Learning Objectives:**

- Assess obstetric patients and predict whereas an uncomplicated course can be predicted or patient is a high risk patient.
- Assess complex obstetric patients and anticipate complications and steps needed to prevent and or treat those complications.
- Assess impact of intervention and recognize potential complications by providing post-anesthesia visits to all patients.
- Explore various ways to find information using information technology (e.g. PubMed, Ovid, MD Consult etc.).
- Learn to use the institutions Patient Information System to effectively gather information.
- Take active part in departmental and institutional Quality Improvement and Risk Reduction projects. (M&M, RSQC committee teams).

VI. System-Based Practice:

Goals: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. This rotation exposes the resident to the chronic pain syndrome and the implications of pain in society.

Learning Objectives:
   A CA1/CA2/CA resident at the end of the rotation should be able to:
   - Understand the concepts of prioritization and triage in a busy obstetric department.
   - Develop a decision making leadership role in the obstetric suite with the attending physician functioning as a backup advisor.
   - Coordinate care of complex obstetric patient and request consultations (such as intensive care) if required early on to prevent delays on proper overall care.