

## 9024 ROTATION MISCELLANEOUS INFORMATION AND RESOURCES

### SCRUB ACCESS

Burgundy scrubs are required in the OR. Any resident needing scrub access needs to:

1. Swipe their badge at a scrub ex machine and write down the numbers that pop up
2. Pick a scrub size from the list on the machine
3. Send email of steps 1-2 and their name to [heidi-bernard@uiowa.edu](mailto:heidi-bernard@uiowa.edu)

### KEY RESPONSIBILITIES

- Meet with current 9024 resident **BEFORE** your rotation begins to review specific details of daily routines (EPIC order entry, note templates, etc).
- Review the 9024 EPIC patient list the day before rotation begins and each Sunday to become familiar with patients on service
- Resident carries the 9024 pager and logs into Voalte on their own phone (OBFP with password 11111)
- Resident is responsible for every OB patient on L&D and postpartum care
- Resident is responsible for every newborn infant (up to 3 months old) admitted to the service.
- You will present at OB stats review. This is the last Friday of the block. For more information, please see Powerpoint attachment.
- **OBGYN lectures** are on **Tuesday morning at 7:30 AM** in Melrose Conference Room 1 &2 and the expectations are for you to attend those unless busy with patient care. (Zoom link and Attendance Code available from Dr. Jorgensen or your FMOB day call staff)

### ADMISSION POLICIES

- Please review Admission Protocols on FPINFO under “Dept Fam Med” prior to beginning the rotation
  - DFM Admissions Algorithms/DFM OB Policies
  - DFM Faculty Notification of OB Patient

### FMOB Day Call Faculty Supervision & Evaluations

- The **OB day Call Faculty** will usually be your faculty for one week at a time. There are some weeks that the OB day faculty will be shared among different faculty. We would like for you to share any ideas you have about how to make this rotation better for you (education, experience, hands-on). At the same time, you will get feedback from faculty via Medhub and in person.

### 9024 Rotation Skills card:

To be filled out by the FMOB Faculty at the time of skill performed and topic discussed. Topic to discuss can be found on the other side of the card and needs to be checked off by faculty.

*Please submit card to Dr. Jorgensen at the end of rotation*

## OB Chart Review

To be done with the faculty

1. Dr. Walter will provide you a list of patients to review during your 9024 rotation.
  2. Document when a chart has been reviewed in the comments section of the outpatient Epic OB list.
  3. During chart review the elements of the OB problem list will be independently verified and updated.
  4. The Overview Tab in the Pregnancy /prenatal visit tab will be updated.
  5. If an OB problem list has not been started, then one will be created during chart review. The PCP is still primarily responsible for creating the OB problem list for their patient after the OB work-up visit.
  6. When a deficiency is noted during chart review, the following process will be used to inform the PCP and track response.
    - a. The 9024 resident will create a staff message in Epic with listed deficiencies that will be sent to the resident and/or faculty who is following the patient
    - b. The 9024 resident will CC the staff message to them self
  7. At the end of the month the 9024 resident will create a combined list of deficiencies from the CC'd messages to be given to the next month's resident who will confirm that the deficiencies have been addressed by the PCP
- **ACOG article review:** at the beginning of rotation, Dr Shen will send 1-3 most recent ACOG articles. You will pick one of them and present at the FMOB faculty meeting, as scheduled, as well as at the OB stats noon conference. The presentation is informal, 5-min, including brief summary of the article and related evidence and review of existing related institutional and/or departmental policy or guideline if there is any.
  - **OB/Newborn census:** Keep the inpatient list (deliveries, newborn admissions, OB admissions, OB triage, etc) up to date for OB Presentation. You can make your own list in Epic. Make sure to add the patients that are on the service even during the days you are not on. A spreadsheet will be posted in the OB workroom on 6 to help facilitate coverage of care provided overnight and on weekends.
  - **OB-newborn follow up:** Sometimes during the rotation, you may get paged from the clinic to ask you if you could see an OB/newborn patient. IF you are not busy with inpatient care or didactic learning, you are encouraged to go see those patients.
  - **Residents COC list:** The 9024 resident is in charge of keeping this list up to date. You will receive an e-mail from Cinda with the current OB COC patient list. Please, follow the steps to make this list accurate and report back to Cinda.
  - **Circumcisions:** When scheduling a newborn circumcision, please determine day and time with the faculty, communicate with the nurse taking care of the baby so they can give Tylenol to the baby at the appropriate time and put the name, day and time in the white board located in the Peds workroom next to the nurse station on MBU 6<sup>th</sup> floor. If the circumcision is going to be done on the 3<sup>rd</sup> floor, there is no white board there so good communication with nurses is KEY!!!. If the baby will return for the circumcision as

an outpatient procedure, an encounter needs to be created by the MBU clerk, the MBU charge nurse informed and time/date/name to be written on the white board.

**Labor and Delivery:** You will be involved with the care of all the Family Medicine OB patients. You will be the resident to assess all the OB patients that come to L&D. If one of the residents' COC patients is in the hospital for induction or labor, **you will manage the patient with the resident.**

**Important order sets:**

OBG: LABOR ADMISSION

OBG: OB TRIAGE

OBG: Postpartum Vaginal Delivery

OBG: Postpartum Discharge orders

OBG: LDR SCHEDULED VISITS (for ordering US/AFI on labor and delivery as well as return nurse visits for BP checks etc)

PED: Newborn Nursery Admission

PED: NNSY: NEWBORN CIRCUMCISION

PED: GLUCOSE PROTOCOL

PED: NNSY: SEPSIS

**Common Newborn nursery diagnoses:**

Search with using following terms:

“liveborn infant” .... vaginal or cesarean

“newborn infant” ....

“neonatal” sepsis/hypoglycemia

**Hospital documentation**

If the “Labor Check” portion gets deleted from your H&P or progress note, use the following dot phrases to assist:

OBLDRCHECK

OBLDRSTRIP

**Sign-out documentation:**

.fammothersignout

.fambabysignout

Before printing out the handoff, please ensure you are in the following context: ‘Family Medicine Obstetrics’

Suggested References & Readings

- **To carry in your lab coat:** ALSO cards, EFM interpretation card (yellow card), NRP card, Category II Management card, Pink card

- Please review the Newborn/Maternal Care Objectives and Readings. You may find these in Medhub under Resources/Documents and then Curriculum Objectives and then Newborn/Maternal Care-9024.
- There is an **ABFM SAM Module on Maternity Care** that you may consider completing as well. Please contact Cinda Blake if you need help recalling your log in information.
- The AAFP has a great resource –AFP Topics: Family Planning & Contraception, Labor Delivery & Postpartum Issues, Neonatology/Newborn Issues and Prenatal. <http://www.aafp.org/afp/topicModules/viewAll.htm>
- **Ratcliffe et al. (2008). *Family Medicine Obstetrics* 3<sup>rd</sup> edition. Philadelphia: Mosby Elsevier.** You may access this through Hardin Library—Clinical Key and search under books.
- Cunningham, F.G. [and others]. *Williams obstetrics*. 25th ed. Stamford, CT: Appleton & Lange, 2018. This can be accessed via Hardin Library.
- Gabbe, S. G., Niebyl, J. R., Simpson, J. L., & Anderson, G. D. (2020). *Obstetrics: Normal and problem pregnancies 8<sup>th</sup> edition*. New York: Churchill Livingstone. This can be accessed via Hardin Library.
- **[Obstetric care consensus no. 1: safe prevention of the primary cesarean delivery.](#)** American College of Obstetricians and Gynecologists; Society for Maternal-Fetal Medicine. *Obstet Gynecol.* 2014 Mar;123(3):693-711. doi: 10.1097/01.AOG.0000444441.04111.1d. PMID: 24553167
- FPINFO Obstetrics
- FPINFO Neonatology
- Iowa Nursery Handbook (Found in FPInfo>Neonatology>Neonatology Tools>Iowa Nursery Handbook)
- Iowa Neonatology Handbook (Found in FPInfo>Neonatology>Neonatology Tools> Iowa Neonatology Handbook)

### **PRACTICE KITS AVAILABLE (In Dr. Walters' office)**

1. IUPC/FSE/Cook catheter
2. Perineal Laceration model
3. Infant CPR
4. Suture kit
5. Yarn for hand tie practice
6. Nexplanon practice kit

### **BREAST FEEDING/LACTATION RESOURCES/FORMULA FORTIFICATION**

We are developing a lactation curriculum with the Breastfeeding Group at UIHC- in progress. Feel free to reach out to lactation consultants on the floor and look through Mary Johnson's smart phrases on how to advise patients.

1. Kellymom: <https://kellymom.com/>
2. Stanford Getting started with Breastfeeding videos: <http://med.stanford.edu/newborns/professional-education/breastfeeding.html>
3. Lactmed

4. Infant risk (Texas tech University): <https://www.infantrisk.com/categories/breastfeeding>
5. Practical formula fortification: [https://www.childrensmn.org/references/pfs/nutr/formula-adjustment-\(standard-20-cal-oz\).pdf](https://www.childrensmn.org/references/pfs/nutr/formula-adjustment-(standard-20-cal-oz).pdf)
6. Outpatient Lactation resource: Consult IRL- Pediatric Lactation Services; Dr. Kaefring in Muscatine
7. Lactivate! A User's Guide to Breastfeeding by Jill Krause and Chrisie Rosenthal

### **NEONATAL RESUSCITATION**

You will be able to practice this either in the Peds Simulation Room on 6<sup>th</sup> floor of the Children's Hospital or will participate in a simulation that will be organized in Labor and Delivery.

### **INSTRUMENT TIE AND SURGICAL KNOTS (VIDEO LINKS)**

1. Instrument Tie: <https://www.youtube.com/watch?v=jCx192DPdz0>
2. Two handed surgical Knot: <https://www.bing.com/videos/search?q=two+handed+tie+video+ethicaon&docid=607999899543605084&mid=D2AF7B1C957773BB121ED2AF7B1C957773BB121E&view=detail&FORM=VIRE>
3. One-Handed surgical knot: <https://www.bing.com/videos/search?q=edje09+one+handed+knot+video&docid=608016903268337614&mid=24CF5540CDC3DA5AF49224CF5540CDC3DA5AF492&view=detail&FORM=VIRE>
4. Second degree perineal laceration repair: <https://www.youtube.com/watch?v=R4o4KSY4MMY>  
<https://www.youtube.com/watch?v=m5Vm8ZT24HM&t=128s>

## June 2015 Census

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- Admissions: 17
  - NSVD: 13
  - C-sec: 2 (prev shoulder dystocia, prev C-sec)
  - Tx OB: 1 (24 w6/7 days; abruption)
  - In labor: 1
- Triage: 10
- Inductions: 2
- OB/CNM babies: 5
- Tx NICU: 1 ( resp distress)
- Circumcisions: 5