Providing preconception and antenatal care to women with high risk pregnancies

Key Features:
- This EPA includes pre-pregnancy optimization of high-risk obstetric patients and recognition, management, counselling, and appropriate referral of complicated pregnancies in the antenatal period (including fetal, maternal and placental issues).
- This EPA includes the direct observation of patient counselling with validation of the history/physical by the supervisor followed by discussion of the management plan.

Assessment Plan:

Direct observation or case discussion with review of consult letter and chart review by OBGYN faculty, Maternal Fetal Medicine (MFM) faculty, obstetric medicine faculty or subspecialty trainee, Internal Medicine faculty or subspecialty trainee, or genetics faculty, counsellor or subspecialty trainee

Use Form 1. Form collects information on
- Setting: clinic; inpatient unit; labour and delivery; intensive care unit
- Counselling: preconception; antenatal
- Presentation: genetic disorder; maternal medical disorder; history of previous pregnancy complication; fetal complication; pregnancy complication
- Provide presentation detail (i.e., diabetes, intrauterine growth disorder/discrepancy, multiple gestation, etc.): [free text]
- External cephalic version attempt: yes; no
- Observation: direct; indirect

Collect 10 observations of achievement
- At least 5 observations of preconception counselling including:
  o At least 1 genetic disorder
  o At least 1 maternal medical disorder
  o At least 1 history of previous pregnancy complication
  o At least 3 direct observations
  o At least 2 by MFM faculty
- At least 5 observations of antenatal counselling including:
  o At least 1 maternal medical disorders
  o At least 1 fetal complications
  o At least 1 pregnancy complication
  o At least 3 direct observations
  o At least 2 MFM faculty
CanMEDS Milestones:

1. **ME 1.4** Apply a broad base and depth of knowledge in clinical and biomedical sciences to manage the breadth of patient presentations in obstetrics and gynecology
2. **ME 1.7** Adapt care as the complexity, uncertainty, and ambiguity of the patient’s clinical situation evolves
3. **ME 2.1** Prioritize issues to be addressed in the patient encounter
4. **ME 1.5** Perform clinical assessments that address all relevant issues
5. **ME 2.4** Develop and implement patient-centred management plans that consider all of the patient’s health problems and context
6. **COM 1.5** Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately
7. **COM 3.1** Convey information about diagnosis and prognosis clearly and compassionately
8. **COL 1.2** Consult as needed with other health care professionals, including other physicians
9. **COL 1.3** Communicate effectively with physicians and other colleagues in the health care professions
10. **COL 3.2** Organize the handover of care to the most appropriate physician or health care professional
11. **HA 1.1** Facilitate timely patient access to services and resources
12. **P 1.3** Manage ethical issues encountered in the clinical and academic setting