Obstetrics & Gynecology: Core EPA #3

Managing complex vaginal deliveries

Key Features:
- This EPA focuses on the recognition and management of maternal and fetal conditions that may complicate delivery and necessitate intervention.
- This EPA includes selecting and counselling patients, performing the technical skills of vacuum and forceps deliveries, vaginal delivery of multiple gestation, shoulder dystocia, and repairs of 3rd and 4th degree tears.
- The observation of this EPA is divided into two parts: direct observation of technical skills; a log of procedures to demonstrate the breadth of experience.

Assessment Plan:

Part A: Managing complex vaginal deliveries
Direct observation by OBGYN faculty, Maternal Fetal Medicine (MFM) faculty and subspecialty trainees, TTP trainees, or simulation educators

Use Form 2. Form collects information on
- Complication: shoulder dystocia; vaginal breech, multiple delivery; postpartum hemorrhage (PPH); 3rd or 4th degree tear; other
- If ‘other’ please indicate complication: [free text]
- Setting: clinical; simulation
- Procedure: vacuum; outlet forceps (non-rotation); low forceps (non-rotation); rotational forceps; perineal laceration; shoulder dystocia; internal podalic version; breech extraction

Collect 10 observations of achievement
- At least 1 shoulder dystocia
- At least 1 vaginal breech (may be in simulation)
- At least 1 multiple delivery
- At least 1 postpartum hemorrhage (PPH)
- At least 1 repair of either a 3rd or 4th degree tear
- At least 4 low forceps (non-rotation) or vacuum
- At least 1 of each forceps and vacuum (rotational forceps may be observed in simulation)
- At least 5 observed by faculty
- At least 3 different observers

Part B: Maintaining a logbook
Submit logbook of procedures

Logbook to track: vaginal delivery of multiples/IPV and breech extraction, vaginal breech, shoulder dystocias, PPH, lacerations, manual rotations, external cephalic versions (ECV)
CanMEDS Milestones:

1. **ME 1.7** Adapt care as the complexity, uncertainty, and ambiguity of the patient’s clinical situation evolves

2. **ME 2.3** Share concerns, in a constructive and respectful manner, with patients and their families about goals of care that are not felt to be achievable

3. **ME 3.2** Describe the steps of the procedure, potential risks, and means to avoid/overcome them

4. **ME 3.1** Integrate required information to reach diagnosis and determine correct procedure required

5. **ME 3.2** Use shared decision-making in the consent process, taking risk and uncertainty into consideration

6. **ME 3.4** Prepare and position the patient correctly, gather required instruments, apply knowledge of the approach and anticipate probable complications

7. **ME 3.4** Perform the steps of the procedure efficiently, avoiding pitfalls and respecting soft tissues

8. **ME 3.4** Document the procedure

9. **ME 3.4** Establish and implement a plan for care following delivery

10. **ME 5.2** Apply the principles of situational awareness to clinical practice

11. **COM 1.3** Recognize when the values, biases, or perspectives of patients, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly

12. **COM 3.1** Debrief the delivery with the patient and family in a timely, honest, and transparent manner

13. **COL 1.3** Communicate effectively with physicians and other colleagues in the health care professions

14. **COL 2.1** Delegate tasks and responsibilities in an appropriate and respectful manner

15. **P 4.1** Demonstrate an ability to regulate attention, emotions, thoughts, and behaviours while maintaining capacity to perform professional tasks