OBSTETRICS AND GYNAECOLOGY ROTATION PLAN (2020-21)

NAME OF ROTATION: Neonatal Intensive Care Unit (NICU)

FOCUS OF THIS ROTATION

• To provide opportunities for learning in the Neonatal Intensive Care Unit (NICU). To develop an understanding of the neonatal implications of obstetric outcomes including prematurity.

CBD stage(s) for this rotation:

• Foundations of Discipline (FOD)

Length of this rotation:

2-week rotation

PGY Level(s) for this rotation:

• PGY2

Locations for rotation:

- Mount Sinai Hospital (MSH)
- Sunnybrook Health Sciences Centre (SHSC)

Required training experiences included in this rotation

- FOD 2.8 Completion of Neonatal Resuscitation Program (NRP), or equivalent (if not already completed)
- FOD 3.1 Recommended clinical training experiences Neonatal Intensive Care Unit

Other training experiences that may be included in this rotation

- SF education program (Tuesday mornings)
- AHD/OBGYN education program (some Tuesday afternoons)
- On-call in NICU per schedule
- · Presentation at rounds or other educational event

| | EPAs Mapped to this rotation: | Total # of Entrustments | Assessment Tool # & Name: |
|----|-------------------------------|----------------------------|---------------------------|
| 1. | N/A | | |

| | Other assessments during this rotation: | Tool Location / Platform (e.g. POWER, Elentra): |
|----|---|---|
| 1. | ITAR (In-Training Assessment Report) | POWER |

May 20, 2020

| | Way 20, 2 | |
|-----|--|----------------------------|
| | Key Objectives for this Rotation: | CanMEDS Role(s): |
| | | |
| 1. | Demonstrates competence in basic initial neonatal resuscitation techniques. | Medical Expert |
| 2. | Demonstrate knowledge of: | Medical Expert |
| | 1) Mechanisms of disease and the clinical presentation of the common | • |
| | clinical disorders of the term and preterm neonate; | |
| | 2) Factors in pregnancy that may affect the health and development of the | |
| | fetus and neonate; and | |
| | 3) Basic survival and morbidity statistics of preterm infants. | |
| 3. | Obtain an appropriate antenatal, perinatal, and neonatal history that is | Medical Expert |
| | accurate and complete, utilizing a variety of sources | |
| 4. | 1) Demonstrate a basic understanding of the course and challenges in caring | Medical Expert |
| | for preterm and other complicated neonates. | |
| | 2) Recognize maternal and obstetric risk factors for common newborn issues, | |
| | including hypoglycemia, hyperbilirubinemia, and sepsis. | |
| 5. | Document clinical encounters in an effective clear, concise, timely and | Communicator, Professional |
| | accurate manner, in compliance with local regulations, including | |
| | documentation of patient consent where appropriate. | |
| | Elicit and then use patient and family preferences, values and circumstances | Communicator |
| | to contribute to the development of a patient and family-centred management | |
| | plan. | |
| 6. | Demonstrate an understanding of the role of various inter-professional team | Collaborator |
| | members and consultants in the management of the critically ill neonate and | |
| | family. Participate actively as a team member. | |
| 7. | Demonstrate an understanding of allocation of resources in neonatal care. | Leader |
| 8. | Identify opportunities for patient counselling and education. Recognize and | Health Advocate |
| ο. | respond to those issues where advocacy is appropriate. | Fleatin Auvocate |
| 10. | | Professional |
| 10. | Demonstrate an awareness of the medico-legal issues and ethical issues with respect to patient confidentiality. Demonstrate familiarity with some of the | FIUIESSIUIIAI |
| | common ethical issues that arise in the provision of patient care in the NICU. | |
| | Continion ethical issues that arise in the provision of patient care in the NiCo. | |

Other: