2014-2015 Inova Fairfax Hospital OBGYN Resident Simulation Curriculum

1. Operative Vaginal Delivery

- Describes indications and contraindications for operative vaginal delivery
- Compares and contrasts the risks and benefits of vacuum delivery versus forceps delivery
- Correctly demonstrates the use of vacuum extractor (Kiwi) on mannequin
- Identifies the parts of forceps and describes the use of different forceps
- Counsels patient regarding the risks and benefits of vacuum/forceps
- Correctly applies Simpson forceps to Occiput Anterior presenting fetus
- Correctly applies Kielland forceps to Occiput Posterior presenting fetus

2. Episiotomy and Fourth Degree Repair

- Correctly identifies the anatomic structures of the perineum (vaginal mucosa, bulbocavernosus muscle, transverse perineal muscle, external anal sphincter, internal anal sphincter)
- Correctly identifies a second degree, third and fourth degree perineal laceration
- Using simulated foam boards, correctly demonstrates reapproximation of the vaginal mucosa, vaginal musculature, repair of external and internal anal sphincters

3. Shoulder Dystocia

- Correctly lists the risk factors for shoulder dystocia
- Correctly lists the causes of fetal injury during shoulder dystocia
- Demonstrates teamwork approach to management of shoulder dystocia
- Correctly demonstrates McRoberts and suprapubic maneuvers
- Correctly demonstrates Rubins, Woods corkscrew maneuvers and delivery of posterior arm
- Describes Zavanelli maneuver, indications and outcomes
- Correctly lists elements of documentation of shoulder dystocia delivery

4. Breech/Piper Forceps

- Correctly lists risk factors for breech presentation
- Correctly lists complications of vaginal breech delivery
- Discusses indications and contraindications of vaginal breech delivery
- Correctly demonstrates technique of spontaneous vaginal breech delivery
- Correctly demonstrates techniques of vaginal breech extraction, nuchal arm and Mauriceau-Smellie-Veit maneuver
- Correctly demonstrates application of Piper forceps
- Lists options for management of entrapment of fetal head during breech delivery

5. Eclampsia

- Correctly lists signs and symptoms of pre-eclampsia and severe criteria
- Correctly lists causes of obstetrical seizures
- Demonstrates immediate management of eclamptic seizure using teamwork
- Correctly lists anti-seizure medication, dose, route, interval
- Correctly lists anti-hypertensive medication, dose, route, interval
- Correctly lists complications of severe pre-eclampsia

6. **Obstetrical Emergencies:** cord prolapse, inverted uterus

- Discusses risk factors for cord prolapse
- Correctly identifies cord prolapse
- Demonstrates management of cord prolapse using teamwork
- Discusses indications for vaginal versus cesarean delivery during cord prolapse
- Discusses risk factors for inverted uterus
- Correctly demonstrates management of inverted uterus using teamwork

7. Postpartum Hemorrhage

- Discusses risk factors for postpartum hemorrhage
- Correctly demonstrates a systematic approach to the assessment of a bleeding postpartum patient
- Correctly demonstrates management of atonic uterus
- Correctly lists uterotonic medications including dose, route, interval and contraindications
- Correctly lists code hemorrhage blood products, indications and complications

8. C-Section/C-Hyst

- Discusses indications for primary cesarean section
- Identifies surgical instruments utilized for routine cesarean section
- Identify key anatomic structures involved in the entry and closure of the lower abdomen
- Identify key steps of primary cesarean section

9. Fundamentals of Laparoscopy/Intro to Da Vinci

The objective of this exercise is to develop basic laparoscopic skills for the individual; The five tasks are:

Task #1: Peg transfer

Two Maryland dissectors, one peg board, 6 rubber ring objects
Time limit to complete is 300 seconds, starts when peg is touched, ends when last object dropped in place
Description: Transfer a total of 6 pegs from one side to another and back. Picking them up with one hand, transferring them in midair and placing them back.

Task #2: Precision cutting

One Maryland dissector, one pair of endoscopic scissors, one jumbo clip and one 4x4 piece of gauze with a pre marked circle, 2 alligator clips
Time limit 300 seconds starts when gauze is touched, ends when circle is separated
Description: Cut using endoscopic scissors a premarked circle within 5mm of the mark

Task #3: Ligating Loop

One grasper, one pair of endoscopic scissors, one jumbo clip one prettied ligating loop or endoloop, one red foam organ with appendages.
Time limit 180 seconds starts when loop or instrument is visible and ends with the strings cut
Description: Place an endoloop around an foam organ with appendages

Task #4: Suture with extracorporeal knot

Two needle drivers, one knot pusher, one 2-0 silk suture of 90 cm in length or 120 cm in length, one pair of endoscopic scissors, one penrose drain, with marked targets, one suture block
Time limit 420 seconds starts when instruments are visible and ends with cutting the strings.
Description: Load the needle out of the FLS box, place inside the box, laparoscopically load the needle and place a simple suture in marked penrose drain. Place 3 throws and push each one down with the knot pusher and then cut the string. Do not avulse the penrose drain from its place.

Task #5: Suture with Intracorporeal Knot

Two needle drivers, one 2-0 silk suture of 15 cm in length, one pair of endoscopic scissors, one suture block, one penrose drain with marked targets
Time limit 600 seconds starts when instruments are visible and ends with cutting the strings
Description: Load the needle onto the needle driver laparoscopically. Then place a single suture in the marked penrose drain. Do 3 throws and make sure there are no air knots. Cut the string. Do not avulse the penrose drain from its position

10. Hysteroscopy/Cystoscopy