



Labor and Delivery Clinical Goals and Objectives

In addition to the Global Clinical Objectives, certain clinical experiences are best suited to the attainment of specific knowledge and skills. In this context, *Goals* are defined as competencies that the faculty feel would benefit the student if presented with the opportunity to experience them. *Objectives* are competencies that the student will be expected to obtain.

Purpose: The purpose of this rotation is to give students an opportunity to observe and assist with normal and abnormal deliveries as well as practice assessing the pregnant patient and newborn infant.

Goals: It is the goal of the intensive care unit rotations to expose students to as many patient assessment/management experiences as possible. These experiences may include, but are not limited to:

1. Observe and assist abnormal deliveries including breech delivery, prolapsed cord, shoulder dystocia, and limb presentation.
2. Observe, assist in, and review management of patients with pregnancy induced hypertension, placenta previa, placental abruption, fetal distress, ruptured/leaking amniotic membranes, premature labor, and precipitous delivery.
3. Observe delivery via cesarean section.
4. Observe and assist with evaluation of dilation and effacement.
5. Observe administration of epidural or subdural anesthesia.
6. Performance of fundal massage after delivery.
7. Observe and assist with medication administration including magnesium sulfate and pitocin.
8. Observe assessment and management of postpartum complications including perineal injury, retained placenta, and prolapsed cord.
9. Observe and assist with neonatal resuscitation.
10. Observe and assist with management of meconium aspiration.

Objectives: At a minimum, students will be expected to accomplish the following objectives during each Labor and Delivery rotation:

1. Assess pregnant patients to include determining gravidity and parity, estimating length of gestation by measuring fundal height, determining EDC, identifying stage of labor, measuring contraction frequency and length, and recognizing imminent delivery.
2. Document at least 3 patient assessments to include the pathophysiology of the diagnosis, mechanism of action of drugs given, and a SOAP style report.
3. Identification of the 3 stages of labor.
4. Observe and assist with normal vaginal deliveries.
5. Evaluation of neonate by determination of APGAR score.
6. Observe and assist with routine care of newborn including evaluation of airway and ventilation, suctioning, oxygen administration, clamping/cutting umbilical cord, and temperature control.
7. Inspect placenta.
8. Inspect umbilical cord and attempt to identify artery and veins.