Safety Action Series

Obstetric Hemorrhage Drills
Tamika Auguste, MD, FACOG  
Director, OB/GYN Simulation  
MedStar Health  
Associate Professor, Obstetrics & Gynecology  
Georgetown University School of Medicine

Mary Calabrese, MSN, RN  
Director, MedStar Health Clinical Simulation Services  
Simulation Training & Education Lab (SiTEL)
Disclosures

- Tamika Auguste, MD, FACOG has no real or perceived conflicts of interest to disclose.

- Mary Calabrese, MSN, RN has no real or perceived conflicts of interest to disclose.
Objectives

• The participant will identify the importance of conducting interdisciplinary simulation drills in obstetrical hemorrhage

• The participant will understand how to conduct simulation drills in obstetrical hemorrhage

• The participant will be able to provide methods for a successful debriefing

• The participant will identify key takeaways for tailoring drills based on the resources available at their organization
Postpartum Hemorrhage

• 2-5% of all births in U.S. are affected by obstetric hemorrhage
• Top cause of maternal death in U.S. and worldwide
Etiologies

- 80% of cases due to uterine atony
- Retained placenta or placental complications
- Uterine trauma
- Defects in coagulation

<table>
<thead>
<tr>
<th>Etiology</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abnormal uterine contractility</td>
<td>Uterine atony, overdistension and muscle fatigue. Risk factors include prolonged labour, multiple gestation, oxytocin augmentation, polyhydramnios.</td>
</tr>
<tr>
<td>Thrombin</td>
<td>Congenital coagulation disorders. E.g., haemophilia, vWD. Acquired coagulopathy. E.g., DIC, hyperfibrinolysis, pharmacologic anticoagulation. The major coagulopathy independently associated with PPH is low FIBRINOGEN levels.</td>
</tr>
</tbody>
</table>

Managing this Emergency

• **Didactics and Invited Lecture** - Ongoing education

• **Collaboratives & Initiatives** - [CMQCC](#) and [Safe Motherhood Initiative](#)

• **In-Services** - Walk through, asking questions

• **Simulation** - Team based drills
What Does It Take?

- Leadership Support
  - Awareness
  - Organizational Goals
  - Resources
    - Time
    - Money
Simulation Education

- Simulation based interdisciplinary team training drills
  - Communication/Teamwork
  - Understanding the bundle
  - Assessing policy
Simulation Education

• Setting up the drills - 4 Core Focuses
  – Communication/Teamwork
    • Communication Breakdowns - primary cause of > 70% of events analyzed
    • 55% - Organizational culture a barrier to communication and teamwork

  – Situational awareness
    • A shared and accurate understanding of “what’s going on” and “what is likely to happen next”
      Allows us to recognize events around us, act correctly when things proceed as planned, and react appropriately when they don’t
Simulation Education

– **Pre-briefing**
  - Briefing gets us on the same page so we can watch out and help each other
  - Promote teamwork and collaboration

– **Debriefing**
  - What did we do well? What did we learn? What would we do differently next time?
  - Free and open learning discussion
Bringing Simulation to Life

- Identify champions
- Create objectives
- Measure success
- Simulation day
- Debriefing
Identify Champions

• Identify Experts
  – Scenario writing – subject matter experts
  – Assess learners during the evaluation
  – Communicate with leadership and front line
  – Determine logistics
  – Debrief the event
Create Objectives

• Why are we doing this?
  – Run the bundle and look at policy
  – Create policy
  – Teamwork and communication training
Measure Success

• Develop your evaluation
  – Participants critical actions
  – Following the bundle and policy
  – Participant Completion
Simulation Day

• Create a safe learning environment
  – Make it real
  – Encourage them to “pretend”
  – Allow for mistakes to occur
Debriefing Goals

• Bring it back to clinical practice
• Reflective learning
• Create awareness
Debriefing

- Advocacy – inquiring debriefing
  - I noticed you discovered the low blood pressure quickly, then you walked out of the room – tell me what you were thinking when you left the room.
  - Empathy – “see what they see” through their lens
Debriefing

• Reflective learning
  – Offer the team to discuss the why’s
  – Questioning
    • What is another way this could have been handled?
    • How will you manage this in the clinical setting?
    • Compare this to a clinical situation they have had
Next Steps

• Follow up
• Report findings
• Debrief the event
• Make changes

Schedule your next simulation
Key Takeaways for Success

• Obtain leadership buy-in
• Understand your policies and procedures
• Obtain champions who can help make this successful
• Stick to your objectives (keep it simple)
• Create a safe learning environment
• Remember YOU and YOUR learners will both be learning
References

Q&A Session
Press *1 to ask a question

You will enter the question queue
Your line will be unmuted by the operator for your turn

A recording of this presentation will be made available on our website:
www.safehealthcareforeverywoman.org
Next Safety Action Series

Obstetric Hemorrhage: A Year in Review
Wednesday, December 10 | Noon ET

Maternal-Fetal Medicine
Richard Berkowitz, MD, FACOG
Columbia University

Midwifery/Nursing
Lisa Kane Low, PhD, CNM, FACNM
University of Michigan

Anesthesia
Barbara Scavone, MD
The University of Chicago

Click Here to Register
Introducing:

The National Improvement Challenge

- To encourage patient safety and quality improvement projects related to obstetric hemorrhage and severe maternal morbidity.
- To increase widespread implementation of the Obstetric Hemorrhage Patient Safety Bundle or Severe Maternal Morbidity Reporting Forms.
- To foster a culture of collaboration, teamwork, patient safety, and communication between clinicians and patients.

Open to any individual or team in the United States currently in any of the following:

**Educational Programs**
- Clinical Nurse Specialist (CNS)
- Doctor of Nursing Practice (DNP)
- Nurse Anesthetist (CRNA, DNAP)
- Nurse Practitioner (NP),
- Midwifery (CM, CNM)

**Residency Programs**
- Anesthesia
- Family Medicine
- Obstetrics and Gynecology
- Osteopathic Obstetrics and Gynecology

**First Place Award**
- $3,000 cash award (check to be made payable to program)
- 2 paid registrations to ACOG’s annual meeting or other national meeting of a selected clinical professional organization
- Opportunity to present project on a national stakeholder teleconference

Awards are also given for 2nd, 3rd, and 4th place submissions.

**Declaration of intent due January 15, 2015**
**Final submission due June 15, 2015**

Additional information on how to apply will be made available our website:

[www.safehealthcareforeverywoman.org](http://www.safehealthcareforeverywoman.org)