PERINATAL SAFETY
MANAGING OB HEMORRHAGE
WHAT WE LEARNED WHILE TEACHING!

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DISCLOSURES

• PVHMC and HASC entered into a partnership to provide 15 days of simulation on Postpartum Hemorrhage, available to all HASC members.
WHAT WE DID

- PRE-BRIEF
- 30 MINUTE EDUCATIONAL COMPONENT INCLUDING QUIZ REVIEW
- ORIENTATION TO SETTING
- SIMULATION SCENARIO 1
- DEBRIEF WITH VIDEO
- SIMULATION SCENARIO 2
- DEBRIEF
- EVALUATIONS
PRE-TEST

1) According to the CMQCC, between 1990 and 2013, the rate of maternal deaths in California has:

a) Decreased by 20%

b) Increased by 136%

c) Increased by 15%

d) Remained about the same
2) Postpartum hemorrhage is:

a) Rare and usually not life-threatening
b) A leading cause of maternal mortality
c) Treatable and preventable
d) Both B and C
3) True or False: A blood pressure of 124/55 confirms that the patient is not hemorrhaging.

T    F
4) True or False: There is no difference in outcomes between early recognition and late recognition of hemorrhaging.  

T   F
5) **True or False**: Quantification of blood loss is important because blood loss of greater than 500ml should be a trigger to the nurse.

T  F
6) **True** or **False**: Consideration should be given to consenting the patient for a total hysterectomy, since this may be necessary to stop the bleeding.

   T   F
7) An OB Hemorrhage kit should contain all of the following except:
   a) Pitocin
   b) Hemabate
   c) Digoxin
   d) Cytotec
   e) Methergine
8) A benefit of performing hemorrhage scenarios in simulation is that it can:
   a) Assess system weaknesses
   b) Test policies and procedures
   c) Assess communication skills of staff members
   d) All of the above
9) **True or False**: Clinicians typically underestimate true blood loss; therefore blood loss should be quantified.

T  F
PRE-TEST

• 10) Clinical triggers should include:
  a) Heart rate
  b) Blood pressure
  c) Oxygen saturation
  d) All of the above
PRE-TEST

• 11) True or False: If you administer Methergine and it does not work, you should try a second dose before moving to another agent.  

    T    F
12) **True or False**: When giving blood, you should wait for CBC results before starting a transfusion.  

\[ \text{\underline{T}} \quad \underline{F} \]
SCENARIO # 1

- The Call for Help!
- Be Specific
SCENARIO # 2

- The Telephone Game
- Have the Primary nurse Make the Call
SCENARIO # 3
SCENARIO # 3

- CO₂ No Sensor
- Touch when sensor connected
- NBP Manual: 228/139
- Sys: 160
- 90 (169)
- Pulse: 157
- 25
- SpO₂: 90
- HR: 157
- 130
- 50
- etCO₂
- ImCO₂
- Lab: Tblood
SCENARIO # 3

• Information Is Essential
• Keep Everyone On The Same Page
• Question things
SCENARIO # 4

• Swiss Cheese Saves The Day!
SCENARIO # 5

- Open-Air Commands
- Diffusion Of Responsibility
SCENARIO # 6

• USE THE CHECKLIST
SCENARIO # 7

• QBL IS ESSENTIAL
LESSONS LEARNED

• LIMIT YOUR LEARNING POINTS
• WE ALL LEARN FROM EACH OTHER
• PRE-BRIEF/EDUCATIONAL COMPONENT IS ESSENTIAL
• SIMULATION IS MORE EFFECTIVE THAN DIDACTIC
In Their Own Words...

• “Fabulous!- I learned the importance of simulation drills and the checklist”

• “Awesome Experience!- I Learned closed-loop communication. This was a great experience”

• “Thank you!- I learned the importance of communication for a successful outcome”
In Their Own Words...

• “Excellent! I learned that the OB PPH checklist is very helpful! It reminds us of the steps to go through”

• “It’s an incredible experience and simulation”

• “Priceless—really!- I feel better prepared. This was a confidence builder for real-life scenarios”
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