

OB/GYN Pre-Rounding

Must Cover:

- Content of SOAP presentation- ask them to list these so you have an idea of where they are
- Where to find necessary information for pre-rounding, following a template
- Have them go through pre-rounding process with the practice patient
- Video Visits: https://www.youtube.com/watch?v=5kbKdwe_6CU&feature=emb_title
 - Depending on how much time you have, you can show this video
 - Please also be sure to put the link in the chat for students to access at a later time

General Session Outline:

5 min- introduce yourself, give them a quick outline of what you'll be doing

10 min- Log into Practice Environment (have them do this with you so that they can follow along in your explanations)-

15 min- demonstrate useful tabs following a pre-rounding template (here) as a guide

30 min- students practice pre-rounding on a specific patient

15 min- Either in groups or as a larger group, practice translating pre-rounding into a presentation

Can use breakout rooms vs. larger group

Login: try to have students use different usernames within the range listed below (it will still work if some students use the same log-in but I don't want it to crash if everyone uses the same username)

- **Track D:** MEDSTU56→ MEDSTU70 (ie- MEDSTU56 or MEDSTU57... or MEDSTU70)
- **Track E1:** MEDSTU71→ MEDSTU80 (ie- MEDSTU71 or MEDSTU72... or MEDSTU80)
- Password is **train** for all login

#1- Review L&D: Note the Greaseboard in the Practice Environment is not great, but they can at least get the feel for it

- If you click: Labor/Ante/PP Readmit, it is a little bit better
 - Yellow= Laboring
 - Blue= Postpartum
 - Red= Antepartum

Epic Home Schedule Patient Lists In Basket Patient Station Chart Remind Me UMHS Links MiChart Request Print Log Out Secure

PRACT3 MED S. EpicCare

L&D Grease Board (OBGYNLOGIN)

Refresh Delivery Grease Board Note Launch EFM AlertWatch: OB Grease Board Default L&D Manager Tx Team Legend

Birth Center (178) Triage **Labor/Ante/PP Readmit** Postpartum OR/PACU My Patients East Central West Newborn Moms with Pended Newborns

Expected Mom Pended Newborns Discharge Patients Anesthesia Anes-Postpartum

Room	Name	Status	Srv	Age	GP	GA	Cx Exam	ROM	Notes	RN	Pager/Phone	1st Contact	Del Sun	Antic Dt	Admit C
8R...	Aggravation, GraceTri...	OB	30 y.o.	G3P1	34w0d										X
8R...	Alchemy, GraceTriage	OB	30 y.o.	G3P1	34w0d										X
8R...	Atari, GraceTriage	OB	30 y.o.	G3P1	34w0d										X
8R...	Azkend, GraceTriage	OB	30 y.o.	G3P1	34w0d										X
8R...	Babel, GraceTriage	OB	30 y.o.	G3P1	34w0d										X
8R...	Battleship, GraceTriage	OB	30 y.o.	G3P1	34w0d										X

Epic Home Schedule Patient Lists In Basket Patient Station Chart Remind Me UMHS Links MiChart Request Print Log Out Secure

Hyperspace - OBGYN LOG-IN - PRACT3 - MED S. Achillas, PostGloria-OBGYN PRACT3 MED S. EpicCare

L&D Grease Board (OBGYNLOGIN)

Refresh Delivery Grease Board Note Launch EFM AlertWatch: OB Grease Board Default L&D Manager Tx Team Legend

Birth Center Triage **Labor/Ante/PP Readmit (DB)** Postpartum OR/PACU My Patients East Central West Newborn Moms with Pended Newborns Expected Mom Pended Newborns Discharge Patients Anesthesia Anes-Postpartum

Room	Name	Status	Srv	Age	GP	GA	Resea	Cx Exam	ROM	Color	GBS	Notes	COVID Status	RN	Pager/Phone	1st Contact	Epidural/PPH	T&S	VTE	PPBC	Admit O	
901P	Bookworm, Maria	UMO	30...	G3P1	33w5d						negative		No result						Expired	0		X
901P	Bopit, Maria	UMO	30...	G3P1	33w5d		2 / 50% / 0	Intact			negative		No result						Expired	0		X
901P	Burgershop, Maria	UMO	30...	G3P1	33w5d		2 / 50% / 0	Intact			negative		No result						Expired	0		X
901P	Cadoo, Maria	UMO	30...	G3P1	33w5d		2 / 50% / 0	Intact			negative		No result						Expired	0		X
903	Zzstorkmaster, Rachel	Labor	OB	25...		-217w2d			SROM				No result						Expired	1		
905	Zzobmaster, Maria	UMO	26...			-169w6d			Intact		negative		No result						Expired	0		X
930P	Aggravation, Rachel	Labor	OB	30...	G3P1	34w0d		6 / 90% / 0	SROM				No result						Expired	1		
930P	Alchemy, Rachel	Labor	OB	30...	G3P1	34w0d		6 / 90% / 0	SROM				No result						Expired	1		
930P	Atari, Rachel	Labor	OB	30...	G3P1	34w0d		6 / 90% / 0	SROM				No result						Expired	1		
930P	Azkend, Rachel	Labor	OB	30...	G3P1	34w0d		6 / 90% / 0	SROM				No result						Expired	1		
930P	Babel, Rachel	Labor	OB	30...	G3P1	34w0d		6 / 90% / 0	SROM				No result						Expired	1		

- Cervical Exam: can help you understand how far into labor patients are
- ROM= amount of time since rupture of membrane
- Sometimes the residents will put relevant info in the Notes section

SIGN OUT:

1. Click “Show Report”
2. Find IP Handoff
3. Rounding Notes/Team To-do
 - a. One liner, relevant pregnancy complications, PMH/PSH, Pregnancy specific notes
4. On Call To-Do list
 - a. Sterile vaginal exam, dilation/%effacement/Station, timeline of events (when pit was given, etc)
5. Residents can show how to update these (mostly updating “On-Call To Do list”)

SURGICAL SERVICES

Patient to use: Achilles, PostGloria

- Be sure to go to “lists” and search all admitted patients (you must be in the current admission to view all the flowsheet data)

Pre-Rounding: Feel free to add to this if you know any tricks that are not included!

1. Go through where to find each piece of information
2. Students will “pre-round”
 - After they have collected information, give them the sign out, physical exam
 - They should attempt an assessment and plan (although this is not the focus)

ONE LINER :

Patient XX is a XX year old woman who is postop day XX following (operation) for (diagnosis) by Dr. XX.

- Look at Operative Note for exact procedure (NOTE: Operative note is written by “Dermatology”)

SUBJECTIVE:

- Overnight events
 - Nursing Notes
 - Sign Out: from residents, some rotations have a sign out page (IP Extended Handoff), some send an email
 - MAR- did they get meds for overnight events?
 - Talk to patient
 - Pain, BM/Passing gas, etc

OBJECTIVE:

- Vitals: Adult IP Flowsheet, IP Vitals, IP Vitals Graph
- I/Os: IP Flowsheet, I/O
 - Mentions that some pts will have drains and/or NG tubes, so talk about how to report that x, back, x, back, x
- PE: obviously they have to see the patient
- Labs: Results review
- Imaging: Results review, Chart Review→ Radiology

ASSESSMENT:

- Remind them that this should be more than repeating the one liner!

PLAN:

- Make sure they know this is by SYSTEM
- Should know what meds the patient is getting (IP MAR)

INFO THEY WILL NOT FIND IN CHART

Sign Out:

- NAEON
- Pain is well controlled
- Passing gas, no BM yet

PE:

- If time, have them tell you which exam findings they would look for on the patient/which are relevant
- Findings (feel free to add or subtract as you see fit):
 - Gen:** Sitting in bed.
 - HEENT:** NCAT. MMM. OP clear.
 - Neck:** Supple. No LAD.
 - Chest:** CTAB
 - Heart:** Normal rate and rhythm, no murmurs.
 - Abd:** Soft. Non-tender, non-distended. No rebound or guarding. BS present. Port sites clean, dry and intact
 - Ext:** No edema. 2+ peripheral pulses.
 - Neuro:** Awake, alert. No focal deficits noted.

Additional things you could cover if time allows:

- How to steal a template from other people
- Notes- how to start/share
- Wrench in specialty specific important tabs in MICHART (not the practice environment)
 - **Purpose:** this will allow students to make changes in their own MiChart (so that they stick) without breaking HIPAA
 - [INSTRUCTIONS](#)
- Answer as many questions as you want to about clerkship year in general, if you don't have time, let them know that they can contact their track advisors.