Anesthesiology: Foundation EPA #20

Managing common complications of labour analgesia

Key Features:
- This EPA may include any of the following complications: inadequate control of pain, hypotension, bradycardia, fetal bradycardia and decelerations, respiratory depression, unilateral block, high block and/or inadvertent subarachnoid block.

Assessment plan:

Part A: Patient management
Supervisor does assessment based on indirect observation (chart review and/or case discussion)

Use Form 1. Form collects information on:
- Patient’s weight
- Patient BMI
- Type of complication: inadequate control of pain; hypotension; bradycardia; fetal bradycardia and decelerations; respiratory depression; unilateral block; high block; inadvertent subarachnoid block; inadvertent dural puncture

Collect 6 observations
- at least 4 different complications

Part B: Multisource feedback
Multiple observers provide feedback individually, which is then collated to one report

Use Form 3. Form collects information on:
- observer role: labour and delivery nurse; obstetrical nurse

Collect feedback on one occasion from at least 6 observers

Relevant milestones

Part A
1. **F ME 1.3** Apply clinical and biomedical sciences to manage core patient presentations in anesthesiology
2. **F ME 1.4** Perform focused clinical assessments with recommendations that are well-documented
3. **F ME 1.4** Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance immediately
4. **F ME 1.6** Develop a plan that considers the current complexity, uncertainty, and ambiguity in a clinical situation
5  **F ME 2.1** Iteratively establish priorities, considering the perspective of the patient and family (including values and preferences) as the patient’s situation evolves

6  **F ME 2.4** Develop and implement management plans for common problems in labour analgesia

7  **F ME 3.3** Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy

8  **F ME 3.4** Seek assistance as needed when unanticipated findings or changing clinical circumstances are encountered

9  **F ME 5.1** Prioritize the initial medical response to adverse events to mitigate further injury

10 **F COM 5.1** Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions

11 **F COL 1.1** Receive and appropriately respond to input from other health care professionals

12 **F COL 1.3** Integrate the patient’s perspective and context into the collaborative care plan

13 **F COL 2.1** Actively listen to and engage in interactions with collaborators

14 **F COL 2.2** Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts

15 **F S 2.3** Identify unsafe clinical situations involving learners and manage them appropriately

Part B

1  **F ME 1.4** Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance immediately

2  **F COM 4.1** Communicate with cultural awareness and sensitivity

3  **F COL 1.1** Receive and appropriately respond to input from other health care professionals

4  **F COL 2.1** Actively listen to and engage in interactions with collaborators

5  **F COL 2.1** Delegate tasks and responsibilities in an appropriate and respectful manner

6  **F COL 2.2** Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts

© 2017 The Royal College of Physicians and Surgeons of Canada. All rights reserved.
7  **F COL 3.2** Summarize the patient’s issues in the transfer summary, including plans to deal with the ongoing issues

8  **F P 1.1** Exhibit appropriate professional behaviours and relationships in all aspects of practice, reflecting honesty, integrity, humility, dedication, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality

9  **F P 1.5** Exhibit professional behaviours in the use of technology-enabled communication