

OB Anesthesia Levels of Care

Direct*: Indirect after fellow has demonstrated proficiency				
PROCEDURE/SKILL	LEVEL OF CARE	SUPERVISION	MILESTONE	COMPETENCY
With conditional independence, manages problems or complications associated with neuraxial anesthesia	PGY 5	Indirect	PC	Patient Care
Supervises and provides consultation to other members of the anesthesia care team when providing general anesthesia to the obstetric patient	PGY 5	Direct	PC	Patient Care
Serves as a consultant for initiation and management of technically challenging neuraxial anesthesia	PGY 5	Indirect	PC	Patient Care
Formulates and tailors anesthetic plans that include consideration of medical, obstetric, and anesthetic risk factors, as well as patient preference and available resources, for patients requiring complex care	PGY 5	Indirect	PC	Patient Care
With conditional independence, serves as a consultant to the multidisciplinary care team regarding evaluation, management, and disposition of the critically-ill obstetric patient	PGY 5	direct	PC	Patient Care
Directs resources to optimize care for multiple patients simultaneously	PGY 5	Indirect	PC	Patient Care
Designs and implements multidisciplinary institutional protocols for efficient diagnosis and coordination of care for pregnant patients with a specific high-risk condition (e.g., hemorrhage, emergent cesarean delivery)	PGY 5	Direct	PC	Patient Care
With conditional independence, assumes leadership of crisis response team for the obstetric patient	PGY 5	Direct	PC	Patient Care
With conditional independence, organizes resources for interdisciplinary and interprofessional management of patient complications	PGY 5	Indirect	PC	Patient Care
Serves as a consultant in critical situations, and is a resource to others in the care team	PGY 5	Indirect	PC	Patient Care

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Designs and implements institutional policies and protocols for the management of obstetric crises and the management of complications	PGY 5	Indirect	PC	Patient Care
Advises the multidisciplinary team involved in the care of the medically-complex obstetric patients on anesthetic issues	PGY 5	Direct	PC	Patient Care
Appropriately addresses conflicting goals of management in medically complex obstetric patients	PGY 5	Direct	PC	Patient Care
Coordinates the multidisciplinary team involved in the care of the medically-complex obstetric patients	PGY 5	Indirect	PC	Patient Care
Uses pre-operative processes to optimize subject accrual into clinical investigations	PGY 5	Indirect	PC	Patient Care
Synthesizes detailed and up-to-date knowledge of current research and controversies in obstetric anesthesiology	PGY 5	Indirect	MK	Medical Knowledge
Demonstrates a working knowledge of the institutional review board and statistical analysis as applies to research in obstetric anesthesia	PGY 5	Indirect	MK	Medical Knowledge
Demonstrates the knowledge necessary to educate residents, obstetricians, and generalist anesthesiologists on high risk obstetric anesthesiology	PGY 5	Indirect	MK	Medical Knowledge
Functions as a consultant in obstetric anesthesiology	PGY 5	Indirect	MK	Medical Knowledge
Demonstrates knowledge for obtaining grant support and conducting quality research	PGY 5	Indirect	MK	Medical Knowledge
Demonstrates knowledge of current controversies in obstetric management (e.g., magnesium therapy for cerebral palsy prophylaxis, comparison of induction of labor and expectant management at term, use of fetal pulse oximetry)	PGY 5	Indirect	MK	Medical Knowledge
Demonstrates knowledge of current controversies in neonatal resuscitation (e.g., FIO2 used for resuscitation)	PGY 5	Indirect	MK	Medical Knowledge
Exhibits detailed and up to-date knowledge of current research in obstetrics and neonatology	PGY 5	Indirect	MK	Medical Knowledge

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With conditional independence, leads the interprofessional care team for all clinical situations	PGY 5	Direct	SBP	Patient Care
With conditional independence, coordinates transitions of care for all clinical situations	PGY 5	Direct	SBP	Patient Care
Exhibits knowledge of the advantages and disadvantages of different types of transitions of care (e.g., face-to-face, verbal, written, electronic-supported)	PGY 5	Indirect	SBP	Patient Care
Develops methods to optimize and coordinate care throughout the continuum	PGY 5	Indirect	SBP	Patient Care
Serves as a role model and teacher in demonstrating effective methods for coordination of care during transitions across health care systems	PGY 5	Indirect	SBP	Patient Care
Substantially participates in a patient safety or quality improvement project	PGY 5	Indirect	SBP	Patient Care
Identifies opportunities to improve practice to optimize patient care	PGY 5	Indirect	SBP	Patient Care
Utilizes data about clinical practice to define opportunities to improve patient care	PGY 5	Indirect	SBP	Patient Care
Leads a patient safety or quality improvement initiative	PGY 5	Indirect	SBP	Patient Care
Ensures appropriate follow-up or implementation of safety and quality initiatives	PGY 5	Indirect	SBP	Patient Care
Substantially contributes to programs to reduce costs and improve efficiency of clinical care	PGY 5	Indirect	SBP	Patient Care
Identifies opportunities to reduce total costs of care without compromising patient outcomes	PGY 5	Indirect	SBP	Patient Care
Leads a team or teams to determine the most cost-effective strategies for all aspects of a procedure	PGY 5	Indirect	SBP	Patient Care

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Substantially contributes to structured improvement processes (e.g., LEAN, Define, Measure, Analyze, Improve and Control [DMAIC], Six Sigma) to improve clinical care and reduce costs	PGY 5	Indirect	SBP	System Based Practice
Participates in development of evidence based clinical protocols and guidelines	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Identifies opportunities to improve personal clinical practices and learning from multiple sources	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Designs and implements a clinical research study based on appropriate research design with the intent to present and publish	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Participates in editorial reviews and other scholarly activity for peer reviewed medical journals	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Participates in professional society and other activities to advance scholarship	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Presents an abstract at a peer-reviewed forum	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Submits a manuscript to a peer-reviewed journal	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Actively promotes education of all team members and other providers regarding clinical practice and optimizing patient care	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Disseminates educational research through presentations and/or publications	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Develops patient-oriented educational materials to optimize communication with patients and families	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Develops an educational curriculum for members of the health care team to optimize understanding of clinical issues and quality of care	PGY 5	Indirect	PBL	Practice Based Learning & Improvement
Serves as a role model for teaching and mentoring	PGY 5	Indirect	PBL	Practice Based Learning & Improvement

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Participates in divisional, departmental, and institutional committees	PGY 5	Indirect	Prof	Professionalism
Serves as a resource to medical students and residents in addressing professional practice and its impact on well-being	PGY 5	Indirect	Prof	Professionalism
Supports colleagues after adverse clinical outcomes	PGY 5	Indirect	Prof	Professionalism
Participates in regional or national committees; chairs institutional, regional, or national committees	PGY 5	Indirect	Prof	Professionalism
Provides constructive feedback in a tactful and supportive way to physician and nonphysician members of the care team to enhance patient care	PGY 5	Indirect	Prof	Professionalism
Effectively seeks and provides constructive feedback in challenging situations (e.g., when there is resistance, there are adverse outcomes, or an experienced practitioner is involved)	PGY 5	Indirect	Prof	Professionalism
Teaches residents and medical students the need to balance patient, personal, institutional, and societal needs when providing health care	PGY 5	Indirect	Prof	Professionalism
Serves as a resource to medical students and residents in addressing professional practice and its impact on well-being	PGY 5	Indirect	Prof	Professionalism
Serves as a resource for the development of organizational policies and procedures regarding professional responsibilities	PGY 5	Indirect	Prof	Professionalism
Assists with or leads intervention for suspected impaired colleagues	PGY 5	Indirect	Prof	Professionalism
Serves as resource for colleagues returning from treatment for impairment	PGY 5	Indirect	Prof	Professionalism
Serves on institutional physician wellness committee	PGY 5	Indirect	Prof	Professionalism
With conditional independence, manages patient and family conflicts in complex situations	PGY 5	Indirect	ICS	Interpersonal & Communication Skills
With indirect supervision, discloses medical errors or complications to patients and/or families	PGY 5	Indirect	ICS	Interpersonal & Communication Skills

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Consistently ensures that effective communication and resolution of concerns occurs with patients and/or families	PGY 5	Indirect	ICS	Interpersonal & Communication Skills
Independently manages patient and family conflicts in all situations	PGY 5	Indirect	ICS	Interpersonal & Communication Skills
Independently, or with other members of the health care team, discloses medical errors or medical complications to patients and/or families	PGY 5	Indirect	ICS	Interpersonal & Communication Skills
Models cross-cultural communication and establishes therapeutic relationships with persons of diverse socioeconomic and cultural backgrounds	PGY 5	Indirect	ICS	Interpersonal & Communication Skills

KEY
Supervision:
Direct -the supervising physician is physically present with the resident and patient.
A faculty physician, other than another resident, is physically present during the key portions of the procedure or is immediately available.
Indirect -the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.
Oversight - the supervising physician is available to provide review of procedures/encounters with feedback after care is provided.
Core Competencies:
1. Patient Care (PC)
2. Medical Knowledge (MK)
3. Practice-Based Learning & Improvement (PBL)
4. Systems-Based Practice (SBP)
5. Interpersonal & Communication Skills (IC)
6. Professionalism (P)