**OB Responsibilities for Interns**

DEFINITIONS:

OB attending - any OB/Gyn physician from MidWest Women’s, on-call/in hospital OB hospitalist, family medicine physician who practices OB.

OB hospitalist - 24/7 in-hospital OB/Gyn physician responsible for all unassigned patients, triages, and any procedure/delivery not able to be made by the respective attending.

Unassigned patient- any patient that does not follow with MidWest Women’s or GTFC for prenatal care. These patients are commonly from Swope, Truman Medical Center, Lay midwife patient’s, or no prenatal care.

Triage - any pregnant patient who arrives to the OB ED. These include but are not limited to: rule out rupture of membranes(ROM), active labor check, dehydration, STI’s, back/pelvic pain, vaginal bleeding, trauma in pregnancy, etc. These patients must be seen within 15-20 minutes by the OB hospitalist (or patient’s attending if avail) once arrived in the unit.

•  Show enthusiasm

•  Be professional

•  Arrive for rounds at 6am

•  Learn and practice the IPASS system

•  Make sure you are aware of the active labors, planned discharges, circumcisions

•  On call intern for the day will have help from 3rd year/senior resident during morning. Any questions please address to them or OB hospitalist on call/appropriate Attending.

•  IF YOU ARE ON CALL, TRY TO DELIVER ALL THE BABIES YOU CAN EVEN IF IN THE MORNING. If you need help, the hospitalist and your seniors are all available to assist.

•  When rounding on post-partum patients, these will be a mixture of OB hospitalist patients, MidWest Women’s patients, and our(GTFC patients).

PATIENTS! Assign your note in the following way:

              WEEKDAYS

•  If attending at delivery was an OB Hospitalist  -> assign to OB hospitalist on-call

•  If attending at delivery was MidWestWomen’s  -> assign to same MWW

•  If attending at delivery was GTFC  -> assign to on-call faculty for us that week

             WEEKEND

•  If attending at delivery was an OB Hospitalist  -> assign to OB hospitalist on-call

•  If attending at delivery was MidWestWomen’s  -> assign to *on-call* MWW

•  If attending at delivery was GTFC  -> assign to on-call faculty for us that week

For presentations, please use provided formats in OB rounding room.

•  Be active in presentations; ask questions. If you don’t know something, say so!

•  Read that days reading and be ready for active discussion during rounds.

•  Seek out faculty and seniors to get checklist signoff done in the first week. This includes but is not limited to:

•  Speculum exams

•  Nitrazine/ferning testing

•  Cervical checks

•  OB ultrasounds(never perform without an attending present!)

•  Fetal strip interpretation

•  Keep track of your procedures, deliveries, circumcisions, etc on MedHub. (Get the app, it is so much quicker to do.)

•  Have list printed and ready for check out to your night-time resident by 6:20pm. Be ready to IPASS. They will want to know last cervical checks and times, imminent deliveries, any ill adults or infants, etc.

•  Sit-Down Rounds with RFP Faculty start at 9am

•  About 1 hour to table round (9-10am)

•  About 1 hour for Longitudinal Topics

•  Then you will do circs, round with attending, etc