



**Fundamental Critical Care Support: Obstetrics
Sample Agenda Option A**

Modules to Complete Online Before Attending Course	
35 min	Physiologic Changes During Pregnancy
23 min	Airway Management in the Pregnant Patient
27 min	Hemodynamic Monitoring
32 min	Preeclampsia/Eclampsia
40 min	Sepsis in Pregnancy
30 min	Thromboembolic Disease and Pregnancy
41 min	Obstetric Hemorrhage
34 min	Maternal Cardiac Arrest
39 min	Fetal Evaluation and Fetal Concerns in the Seriously Ill Pregnant Patient
37 min	Nonobstetric Surgical Diseases in the Pregnant Patient
21 min	Pregnancy-Related Acute Kidney Injury
29 min	Management of Delivery and the Newborn
34 min	Transport of the Critically Ill Pregnant Patient
42 min	Mechanical Ventilation in Pregnancy
28 min	Trauma in Pregnancy (optional)
25 min	Cardiac Conditions in Pregnancy (optional)
37 min	Neurocritical Care in Pregnancy (optional)

SKILLS DAY	
7:30 a.m. – 7:45 a.m.	Welcome and Course Announcements FCCS: Obstetrics Overview
7:45 a.m. – 8:45 a.m.	<p style="text-align: center;">SKILL STATIONS: A and B</p> <p>A. Management of Preeclampsia</p> <ul style="list-style-type: none"> • Recognize a preeclamptic patient with hypertension, and acute respiratory insufficiency • Discuss management and treatment of hypertension • Recognize and treat eclamptic seizures • Describe hemolysis, elevated liver enzymes, and low platelet count (HELLP) syndrome • Recognize when a preeclamptic patient requires immediate delivery of the fetus <p>B. Cardiopulmonary Arrest in Pregnancy</p> <ul style="list-style-type: none"> • Discuss the causes of maternal cardiac arrest

	<ul style="list-style-type: none"> • Describe maternal resuscitation, including intubation, CPR, and appropriate medications • Recognize the need for early and expeditious delivery of the fetus (perimortem cesarean delivery) • Describe risk factors, diagnosis, complications, and treatment options for amniotic fluid embolism syndrome
8:45 a.m. – 9:45 a.m.	<p style="text-align: center;">SKILL STATIONS: A and B</p> <p>A. Management of Preeclampsia</p> <ul style="list-style-type: none"> • Recognize a preeclamptic patient with hypertension and acute respiratory insufficiency • Discuss management and treatment of hypertension • Recognize and treat eclamptic seizures • Describe hemolysis, elevated liver enzymes, and low platelet count (HELLP) syndrome • Recognize when a preeclamptic patient requires immediate delivery of the fetus <p>B. Cardiopulmonary Arrest in Pregnancy</p> <ul style="list-style-type: none"> • Discuss the causes of maternal cardiac arrest • Describe maternal resuscitation, including intubation, CPR, and appropriate medications • Recognize the need for early and expeditious delivery of the fetus (perimortem cesarean delivery) • Describe risk factors, diagnosis, complications, and treatment options for amniotic fluid embolism syndrome
9:45 a.m. – 10:00 a.m.	BREAK
10:00 a.m. – 11:00 a.m.	<p style="text-align: center;">SKILL STATIONS: C and D</p> <p>C. Postpartum Hemorrhage</p> <ul style="list-style-type: none"> • List the steps for evaluation of a patient with postpartum hemorrhage • Select appropriate laboratory tests to evaluate a patient with postpartum hemorrhage • Modify the treatment regimen for worsening signs of hypovolemic shock • Discuss medication options for treatment of continued uterine bleeding • Describe possible interventions for control of continued bleeding despite medical therapy <p>D. Delivery and Neonatal Resuscitation</p> <ul style="list-style-type: none"> • Discuss procedures for vaginal delivery, clamping and ligation of the umbilical cord, and delivery of the placenta • Discuss basic neonatal resuscitation • Discuss advanced skills for neonatal resuscitation
11:00 a.m. – 12:00 p.m.	<p style="text-align: center;">SKILL STATIONS: C and D</p> <p>C. Postpartum Hemorrhage</p> <ul style="list-style-type: none"> • List the steps for evaluation of a patient with postpartum hemorrhage • Select appropriate laboratory tests to evaluate a patient with postpartum hemorrhage • Modify the treatment regimen for worsening signs of hypovolemic shock • Discuss medication options for treatment of continued uterine bleeding • Describe possible interventions for control of continued bleeding despite medical therapy <p>D. Delivery and Neonatal Resuscitation</p>

	<ul style="list-style-type: none"> • Discuss procedures for vaginal delivery, clamping and ligation of the umbilical cord, and delivery of the placenta • Discuss basic neonatal resuscitation • Discuss advanced skills for neonatal resuscitation
12:00 p.m. – 1:00 p.m.	LUNCH
1:00 p.m. – 2:00 p.m.	<p style="text-align: center;">SKILL STATIONS: E and F</p> <p>E. Mechanical Ventilation</p> <ul style="list-style-type: none"> • Interpret arterial blood gases and analyze their differences in pregnancy • Discuss endotracheal intubation • Discuss changes to basic ventilator parameters that are specific to pregnant patients • Discuss how the fetus may interact as an end-organ perfusion measure <p>F. Trauma In Pregnancy (optional)</p> <ul style="list-style-type: none"> • List the steps of the primary survey for a pregnant trauma patient • Identify the altered adjunctive treatments in the primary survey to improve the care of pregnant patients • List the steps of a brief obstetric evaluation in the secondary survey • Describe indications for fetal monitoring and disposition within the hospital • Discuss the roles of the multiprofessional team for trauma in pregnancy
2:00 p.m. – 3:00 p.m.	<p style="text-align: center;">SKILL STATIONS: E and F</p> <p>E. Mechanical Ventilation</p> <ul style="list-style-type: none"> • Interpret arterial blood gases and analyze their differences in pregnancy • Discuss endotracheal intubation • Discuss changes to basic ventilator parameters that are specific to pregnant patients • Discuss how the fetus may interact as an end-organ perfusion measure <p>F. Trauma In Pregnancy (optional)</p> <ul style="list-style-type: none"> • List the steps of the primary survey for a pregnant trauma patient • Identify the altered adjunctive treatments in the primary survey to improve the care of pregnant patients • List the steps of a brief obstetric evaluation in the secondary survey • Describe indications for fetal monitoring and disposition within the hospital • Discuss the roles of the multiprofessional team for trauma in pregnancy
3:00 p.m. – 3:15 p.m.	WRAP-UP