



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

Modules to Complete Online Before Attending Course	
34 min	Transport of the Critically Ill Pregnant Patient
25 min	Cardiac Conditions in Pregnancy (optional)
37 min	Neurocritical Care in Pregnancy (optional)
28 min	Trauma in Pregnancy (optional)

DAY 1	
7:00 a.m. – 7:15 a.m.	Welcome and Course Announcements FCCS: Obstetrics Overview
7:15 a.m. – 7:45 a.m.	Physiologic Changes During Pregnancy <ul style="list-style-type: none"> Examine how altered physiology can affect the diagnosis and management of critically ill patients Anticipate and predict the effects of pregnancy on underlying medical conditions
7:45 a.m. – 8:30 a.m.	Airway Management in the Pregnant Patient <ul style="list-style-type: none"> Describe anatomic and physiologic airway changes in the pregnant patient Describe factors that cause airway challenges in the pregnant patient Describe methods for airway evaluation Outline a systematic approach to management of a difficult airway in a pregnant patient
8:30 a.m. – 9:15 a.m.	Preeclampsia/Eclampsia <ul style="list-style-type: none"> Identify the most significant complications of preeclampsia Describe how to manage preeclampsia and its main complications
9:15 a.m. – 10:00a.m.	Maternal Cardiac Arrest <ul style="list-style-type: none"> Examine the physiologic changes of pregnancy that affect resuscitation in pregnancy Review basic life support and advanced cardiovascular life support recommendations for cardiopulmonary resuscitation in pregnant patients
10:00 a.m. – 10:15 a.m.	BREAK
10:15 a.m. – 11:00 a.m.	SKILL STATION: Management of Preeclampsia <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
11:00 a.m. – 11:45 a.m.	SKILL STATION: Cardiopulmonary Arrest in Pregnancy

	<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
11:45 a.m. – 12:45 p.m.	LUNCH
12:45 p.m. – 1:30 p.m.	Hemodynamic Monitoring <ul style="list-style-type: none"> • Discuss the uses of noninvasive and invasive hemodynamic monitoring, as well as sources of error • Explain point-of-care ultrasound measurements used for the assessment of hemodynamically unstable patients • Review laboratory tests that can be used to determine the adequacy of peripheral perfusion
1:30 p.m.– 2:15 p.m.	Obstetric Hemorrhage <ul style="list-style-type: none"> • Outline diagnostic criteria, evaluation, and differential diagnosis for obstetric hemorrhage • Discuss the management of obstetric hemorrhage • Review medications and devices used to stop bleeding in the postpartum period • Identify complications of hemorrhage and transfusion therapy • Discuss surgical principles to stop obstetric bleeding
2:15 p.m. – 2:30 p.m.	BREAK
2:30 p.m. – 3:15 p.m.	<p style="text-align: center;">SKILL STATION: 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
3:15 p.m. – 4:00 p.m.	Sepsis in Pregnancy <ul style="list-style-type: none"> • Recognize early manifestations of sepsis in pregnancy. • Outline initial strategies for managing maternal sepsis, including resuscitation and source control
4:00 p.m. – 4:15 p.m.	WRAP-UP DAY 1

DAY 2

7:30 a.m. – 7:45 a.m.	Welcome and Announcements
7:45 a.m. – 8:30 a.m.	Management of Delivery and the Newborn <ul style="list-style-type: none"> • Prepare to manage labor and delivery in critically ill pregnant patients • Outline the principles of evaluation and resuscitation of neonates
8:30 a.m. – 9:15 a.m.	Fetal Evaluation and Fetal Concerns in the Seriously Ill Pregnant Patient <ul style="list-style-type: none"> • Examine how the fetus can impact patient care • Describe the principles of fetal drug and radiation exposures • Discuss specific fetal interventions
9:15 a.m. – 10:00 a.m.	SKILL STATION: Delivery and Neonatal Resuscitation

	<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
10:00 a.m. – 10:15 a.m.	BREAK
10:15 p.m. – 11:00 a.m.	Thromboembolic Disease and Pregnancy <ul style="list-style-type: none"> • Recognize the physiologic changes during pregnancy that can make the diagnosis of thromboembolic disease more challenging • Select appropriate tests for confirming or ruling out the diagnosis of thromboembolism in high-risk patients • Determine the thromboprophylaxis options available during pregnancy
11:00 a.m. – 11:45 a.m.	Mechanical Ventilation in Pregnancy <ul style="list-style-type: none"> • Review respiratory, anatomic, and physiologic adaptations in pregnancy • Describe etiologies for respiratory failure and acute respiratory distress syndrome (ARDS) in pregnancy • Review invasive and noninvasive mechanical ventilation in pregnancy • Describe therapeutic options for severe ARDS in pregnancy
11:45 a.m. – 12:45 p.m.	LUNCH
12:45 p.m.– 1:30 p.m.	<p style="text-align: center;">SKILL STATION: 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
1:30 p.m.– 2:15 p.m.	Pregnancy-Related Acute Kidney Injury (AKI) <ul style="list-style-type: none"> • List the differential diagnosis of etiologies for AKI in pregnancy • Review the diagnostic evaluation of AKI in pregnancy
2:15 p.m. – 2:30 p.m.	BREAK
2:30 p.m.– 3:00 p.m.	Trauma in Pregnancy (optional) <ul style="list-style-type: none"> • Review the main causes of trauma in pregnancy • Identify common injuries in pregnant patients • Recognize the priorities in managing pregnant trauma patients • Select appropriate diagnostic tests for pregnant trauma patients
3:00 p.m.– 3:45 p.m.	<p style="text-align: center;">SKILL STATION: 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
3:45 p.m.– 4:15 p.m.	Nonobstetric Surgical Diseases in the Pregnant Patient <ul style="list-style-type: none"> • Establish the most useful diagnostic methods that pose the least risk to the fetus • Review management of nonobstetric surgical disease • Recognize the role of multiprofessional management in surgical emergencies
4:15 p.m. – 4:30 p.m.	WRAP-UP DAY 2