

Group Activity Responses



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH

Who do you want on the team? Who is available?

ER provider, RN, Individual who is NRP trained, Anesthesia

Personnel we would like on our rapid team --> ER MD, 2 ER RNs, 1 RT --> Contact person via on call if not in person: Lab/bloodbank specialist, OB service provider, Anesthesia provider

I would suggest our team would include the ED physician (or if a physician with OB experience is available), at least 2 RNs (one for mom and one for baby -hopefully with NRP), Scribe. Runner. Other thoughts? Am on the right track for what they are looking for?

We wanted anesthesia/respiratory there, someone with scalpel privileges, lab & pharmacy and then the front line staff

RT, EDRN, EDprovider,surgical skill,US bedside, anesthesia, scribe, OB if available, lab, medic (EMS)

we said that if we had a dream team we would have: blood bank/labs, ER Provider, nurse, respiratory/anesthesia, transport/runner, transportation on hand to move patient when stable ASAP, IV team, scribe, pharmacy. If we only had 3 people we would have - ED provider, nurse, and respiratory

Who do you want on the team? Who is available?

1 nurse for NB, 1 nurse for mother. All caregivers trained in NRP & STABLE, radiant warmer, nb emergency kit, pph kit, protocols and policies for pph, peripartum htn, newborn emergencies, anesthesia, respiratory, routine simulation and drills, delivery kit

[who] MD 2RNs (nrp if possible) rt supervisor anesthesia security

in general order of importances and availability - Physician and at least one nurse along with a runner (someone who knows where things are and to call) second nurse for infant., Second level would include respiratory technician, Ob (in person or video conferencing) anesthesia, Ob or surgeon and pediatrics. Lab tech for blood bank

Anesthesia, Pediatrician, OB, Surgeon, OB, if available. 2 nurses- one for mom, one for baby. Respiratory therapist, Pharmacy, Radiology, person outside of the clinical care aspect to coordinate transport, etc. Someone who can read fetal monitor.

What skills does the team need to have?

NRP/PALS; vaginal and breach delivery/managing 2nd stage, placenta delivery, stabilization, treating eclampsia, IV access, blood administration, Mg, Initiation of varying therapies,...

MD. RN telehealth option with closest OB/NICU

Room 25: an OB Emergency cart, a newborn crash cart and a room set up for delivery especially with a newborn warmer available

Intubation with advanced airway management for both mom and baby. Strong IO and IV skills for mom and neonate. ACLS and NRP certification. Training on OB complications PIH/PPH. Good team with a strong team leader.

What skills should the response team have. 1. NRP skills, intubation skills for neonates, assessment skills, ability to accurately measure the pregnant patient for date, have resuscitation dates in the department, additional education related to pregnancy and/or delivery, asking questions such as are you or were you recently pregnant, have you been or were you diagnosed with preeclampsia.

All caregivers trained in NRP & STABLE

What other resources exist (or should exist) to help?

Emergency deliver kits, PPH carts, infant procedural carts, emergency c/s carts, Checklists, knowing what steps to take for common emergencies, Access to meds

transfer agreement with facility with OB services, also with NICU services; emerg ACOG physician, Isollette; Delivery Kit; NRP kit; 2 staff NRP trained; neonatology robot (optional)

radiant warmer, nb emergency kit, pph kit, protocols and policies for pph, peripartum htn, newborn emergencies, anesthesia, respiratory, routine simulation and drills, delivery kit