Obstetric Emergency Team Response

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BACKGROUND
A coordinated team response is critical to optimizing patient outcomes, especially in an emergency. Obstetric Emergency Teams (OBET) have been implemented in perinatal units with the goal of enhancing patient safety, reducing medical errors, preventing death and adverse outcomes, among other outcomes. However, there is limited research investigating the implementation of OBET with respect to organization, role delineation, responsiveness, communication, trust, and respect. Specifically, at the Hospital of the University of Pennsylvania, several years ago, a prior quality improvement project helped to define a common language to communicate the urgency of a cesarean delivery. Specifically, the nomenclature of urgency was defined using Level 1, 2, and 3. However, as the use of the language has evolved and has become standard, the organization of this response for level 1 cesarean deliveries at the Hospital of the University of Pennsylvania. The average time from arrival of a patient in the operating room to the time of incision was 15 minutes. Improving this time can potentially lead to improved maternal and fetal outcomes.

TARGET CONDITION

<table>
<thead>
<tr>
<th>Metric</th>
<th>Baseline</th>
<th>Goal</th>
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<tbody>
<tr>
<td>Outcome</td>
<td>Fetal pH</td>
<td>34-50 with pH &lt; 5.2</td>
</tr>
<tr>
<td>Process</td>
<td>Time from OR Arrival to Incision</td>
<td>7 minutes</td>
</tr>
<tr>
<td>Balancing</td>
<td>Number of People Responding during Resuscitation</td>
<td>17 individuals</td>
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</tbody>
</table>

To improve staff perception, limiting of response, and neonatal outcomes in a level 1 cesarean delivery.

PROBLEM STATEMENT

Obstetrical emergencies are stressful, time-sensitive events requiring the mobilization of a multidisciplinary obstetric emergency team. From January 1, 2016 to June 30, 2016, there were 50 level I cesarean deliveries at the Hospital of the University of Pennsylvania. The average time from arrival of a patient in the operating room to the time of incision was 15 minutes. Improving this time can potentially lead to improved maternal and fetal outcomes.

AIM

AIM

CURRENT CONDITION

Process Mapping

Fishbone Analysis

In-Situ Simulation

Actions Taken

To clarify interdisciplinary roles and responsibilities in a Level 1 cesarean delivery response, a map outlining OR zones and individualized stickers listing role specific tasks were created and utilized in Level 1 in-situ simulations.