

Well Baby/Newborn Nursery

GOALS AND OBJECTIVES – FIRST WEEK OF LIFE:

Patient Care: Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

Objectives:

1. Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families
2. Gather essential and accurate information about their patients, i.e. mother and infant pairs
3. Make informed decisions about diagnostic and therapeutic interventions based on patient history and examination, current standard of practice and clinical judgement
4. Develop and carry out patient management plans, including appropriate outpatient nursery follow-up
5. Counsel and educate parents and families
6. Use information technology to support patient care decisions and parent education
7. Perform competently all medical and invasive procedures appropriate for newborn nursery practice
8. Promote nursery follow-up services to anticipate and prevent health problems and provide adequate parental support
9. Work with health care professionals, including specialists, to provide patient-focused care
10. Understand how to maintain accurate, timely and legally appropriate medical records in the inpatient nursery setting

Medical Knowledge: Residents must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care.

Goal 1. Understand how to assess and manage common signs and symptoms associated with each neonatal condition, both normal and pathological.

1. For each of the signs and symptoms listed below:
 - Perform a directed history and physical examination
 - Formulate a differential diagnosis with consideration for normal variants
 - Develop a plan for further work-up and treatment if indicated
- A. General: Fever, irritability, small for gestational age, large for gestational age
- B. Respiratory: Tachypnea, oxygen need, apnea, rales, increased work of breathing
- C. Cardiovascular: Tachycardia, arrhythmia, heart murmur, hypotension, pallor, cyanosis
- D. Dermatologic: Rashes, nevi, hemangiomas
- E. GI/Nutrition: Excessive weight loss, jaundice, vomiting, delayed passage of meconium, poor feeding at breast, hepatosplenomegaly, abdominal distension
- F. Infectious Disease: Fever, hypothermia
- G. GU/Renal: Low urine output, ambiguous genitalia, hypospadias
- H. Neurologic: Jitteriness, seizure, hypertonia, hypotonia, microcephaly, sacral dimple
- I. Metabolic: Hypoglycemia
- J. Genetics: Abnormal physical features, cleft lip/palate
- K. Orthopedic: Hip click, clavicle or extremity trauma, clubfoot

Goal 2. Understand how to assess and manage common neonatal conditions cared for in the well-baby nursery setting.

1. For each of the conditions listed below:

Describe indications for evaluation and treatment

Describe criteria for consultation with a specialist and admission to the NICU

- A. General: Intrauterine growth retardation, prematurity, postmaturity
- B. Respiratory: Pneumonia, transient tachypnea of the newborn, meconium aspiration
- C. Cardiovascular: Polycythemia, Congenital heart disease, anemia
- D. Dermatologic: Erythema toxicum, port wine stain
- E. GI/Nutrition: ABO blood type incompatibility, hyperbilirubinemia
- F. Infectious Disease: History of risk factors for neonatal sepsis (maternal fever, prolonged rupture of the membranes, maternal pretreatment with antibiotics, h/o +GBS culture), maternal Hepatitis B carrier, maternal + PPD, maternal syphilis infection (+RPR), sepsis
- G. GU/Renal: Desire for circumcision, hypospadias, ambiguous genitalia
- H. Neurologic: Infant of substance-abusing mother, seizures
- I. Metabolic: Infant of diabetic mother, inborn errors of metabolism
- J. Genetics: Chromosomal abnormality, non-chromosomal abnormality
- K. Orthopedics: Developmental dysplasia of the hip, clavicle or extremity fracture, talipes equinovarus
- L. Psychsocial: Teenage mother, late or no prenatal care, multiple births

Goal 3. Understand the indication, limitations, and interpretation of common laboratory tests and imaging studies utilized in newborn nursery care.

1. For each of the tests in the list below:

Explain the indications and limitations of each test and be aware of age-appropriate normals

Interpret abnormalities in the context of each specific physiologic derangements

Discuss therapeutic options for correction of abnormalities when present

- A. CBC with differential, platelet count, CRP
- B. Blood chemistries: glucose, magnesium
- C. Bilirubin, direct and indirect; Retic count, blood type and coombs
- D. TORCHES titers
- E. RPR, VDRL
- F. Toxicology screens
- G. CSF cell count and analysis
- H. Arterial and venous blood gases
- I. Radiologic studies

Goal 4. Understand the indications for the following procedures and when appropriate demonstrate competency in their performance. Be comfortable and competent obtaining informed parental consent as required.

- A. Circumcision
- B. Cardiorespiratory and oxygen saturation monitoring
- C. Phototherapy

Practice-Based Learning: Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

Objectives:

- A. Analyze practice experience and perform practice-based improvement activities using a systematic methodology
- B. Perform literature searches related to their patients' health problems

- C. Apply knowledge of study designs and statistical methods to the critical review of clinical studies and other information on diagnostic and therapeutic effectiveness
- D. Obtain and use information about their own population of patients and the larger population from which their patients are drawn
- E. Use information technology to manage information, access on-line medical information, and support their own education
- F. Give talks to colleagues regarding patient issues that have been researched

Interpersonal and Communication Skills: Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates.

Objectives:

- A. Create and sustain a therapeutic and ethically sound relationship with patients
- B. Communicate well and work effectively with attendings, fellow residents, medical students, consultants, nurses and ancillary staff
- C. Communicate effectively with the Kaiser case coordinators, lactation nurses, and home health nurses to provide adequate and appropriate maternal-infant follow-up after discharge
- D. Maintain accurate and appropriate medical records.

Professionalism: Residents must be able to demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principals, and sensitivity to a diverse patient population.

Objectives:

- A. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supercedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and ongoing professional development
- B. Demonstrate a commitment to ethical principal pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- C. Demonstrate sensitivity and responsiveness to patients' culture, age gender, and disabilities

Systems-based Practice: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

Objectives:

- A. Understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice
- B. Know how types of medical practice and delivery systems from one another, including methods of controlling health care costs and allocating resources
- C. Practice cost-effective health care and resource allocation that does not compromise quality of care
- D. Advocate for quality patient care and assist patients in dealing with system complexities
- E. Know how to partner with health care mangers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance