

Rotation expectations

Call group (only cover patients of the following):

Dr. Vishwanath

Dr. Dickinson

Dr. Marquez

Dr. Gade

Dr. Matharu

Any unassigned patients

Door Codes:

Sleep Rm 4th floor 611#

6th floor doctors' lounge 33115

From elevator on 6th floor 425#

From COVID area to 6th floor 425

Expectations:

Round on postpartum patients - 4th floor

Round on Antepartum patients - 6th floor

Cover patients in L&D

See all patients in OB ED - 4th floor

Assist for CSs (Surgery is on 2nd floor close to main elevator)

Read NSTs

Cover GYN consults in ER or floors

Post Op Fever:

Wind - atelectasis

Water - UTI

Wound - infection

Walk - DVT

Wonder drug - heparin

Woman - mastitis, breast engorgement

Womb - endometritis, pelvic vein thrombophlebitis, TOA

Postpartum Hemorrhage:

Can happen postpartum often!

Pre Delivery Hgb → Post Delivery Hgb

Significant drop is > 2

1. Oxytocin 20-80 IU/500ml NS IV infused over 10 mins, then 250ml/hr
2. Methergine 0.2mg IM or PO (contraindication: HTN)
3. Hemabate 0.25mg IM (contraindication: asthma)
4. Misoprostol 200 mcg (up to 3 tabs PR or 1 tab PO)
5. TXA 1gm/100ml NS IV over 10 minutes

Post-Partum Counseling

1. Breastfeeding or Bottle Feeding? - Takes 3-5 days for milk letdown; longer in c/s patients
2. Contraceptive Counseling

A) COC's - wait 3 wks postpartum (early Estrogen increases risk for DVT)

- estrogen may cause decrease milk production if breastfeeding-would not start in house but should not wait for 6 week check to do so

B) Progestins- can give immediately post-partum if desired

1. Depo provera 150 mg IM q3 mo-same as above

2. IUD - at other institutions is placed immediately postpartum, but more likely can be placed ANYTIME after delivery

3. Micronor 0.35 mg pill po qd

Post partum Vaccine

1. Rubella - if nonimmune or equivocal, need vaccine]
2. If Rh negative - check infant

If infant positive → Rhogam

If infant negative → none

Revision #3

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