**Helping Mothers Survive**

**Prolonged and Obstructed Labor**

**OSCE 2: VAB procedure**

**Read the following guidelines to learners:**

* The purpose of this activity is to assess your ability to make clinical decisions while providing care to a client in a simulated environment.
* For this station assume you are alone in a facility with operative capacity. You have all equipment and supplies necessary for a normal vaginal birth and for comprehensive emergency management.
* I will provide all the essential information at the start of each OSCE station.
* Ask me to clarify any questions prior to beginning. Once the OSCE has started, I will only provide information about the results of any assessment you do.
* From the start of the OSCE, you will have 7 minutes to complete each station.
* **Talk to and care for the woman in front of you exactly as you would in real life. Even though I am both the examiner and acting as the woman in labor, please speak to me as if I am the woman.**
* Tell me exactly what you are doing as you complete each step.
* Be explicit in verbalizing your clinical findings and subsequent decisions.
* If you give a medication, you must state what you are giving, the dose, the route, and why you are giving it.

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| **Instructions for the Examiner*** **Review the instructions for the learner.**
* **Wear the birthing simulator with the baby’s head in LOA position.**
* **Observe only; do not intervene during the learner’s demonstration.**
* **In the items below you will see *instructions to you in italics*. Follow these instructions.**
* **Learners must complete each action within each step in order to receive credit for accurately completing that step.**
* **Do NOT give information for assessments they do not make.**
* **Hold feedback until the end of the assessment for all learners.**

***Read the following to the learner*:** “I have given my consent for a VAB because of fetal distress. One assistant will be monitoring and supporting me while you conduct the VAB. My mother is supporting me. Another assistant is here to help care for the baby after the birth. Membranes have been ruptured for 3 hours and liquor is meconium stained. I have just emptied my bladder. All connections to the vacuum extractor have been checked. Please conduct the vacuum-assisted birth.” |

**Pass score is 11/14**

Participant name or ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OSCE 2: VAB procedure**

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|  | **OSCE ITEMS****\*\*\*Note that checklist is for assessment only, not for instruction\*\*\*** | **Performed to standard** |
| Yes | No |
| Throughout the OSCE, evaluate respectful care. Observe the learner’s communication with the woman. Learners should be respectful, supportive, tell you what they are doing and why. You will score respectful care at the end. | *Check appropriate box for each item* |
| 1.1 | Washes hands with soap and water or alcohol-based hand rub. Puts on appropriate PPE, including sterile gloves. |  |  |
| 1.2 | Cleans the vulva with antiseptic solution. |  |  |
| 1.3 | Locates the flexion point. *If the learner tells you s/he is locating the flexion point, ask: “Where is the flexion point?” [Response: The flexion point is 3 cm anterior to the posterior fontanelle.]* |  |  |
| 1.4 | Calculates the cup insertion distance.  |  |  |
| 1.5 | Attaches the distal end of the cup tubing to the vacuum pump. |  |  |
| 1.6 | Moistens the cup with clean water or lubricant jelly and inserts the cup. |  |  |
| 1.7 | Checks the application.*If the learner tells you s/he is checking the application, ask: “What are you checking for?” [Response: Make sure no vaginal tissue is trapped between the cup and the scalp.]* |  |  |
| 1.8 | Creates / Has the assistant create a vacuum of 0.2 kg/cm2 negative pressure with the pump and re-checks the application. (*Ask to see the gauge)* |  |  |
| 1.9 | Reminds the woman that you will ask her to push with each contraction to help with your pulling efforts. |  |  |
| 1.10 | Increases vacuum to 0.8 kg/cm2 negative pressure, checks that the cup is well-applied. (*Ask to see the gauge)* |  |  |
| 1.11 | With contractions, provides traction along the axis of the pelvic curve, using the two-finger grip to monitor cup lift and fetal head descent. |  |  |
| 1.12 |  In between contractions, **does not apply traction**, fully maintains suction pressure of 500 to 600 mmHg (0.8 kg/cm2), asks the assistant to check fetal heart rate, checks application of the cup, checks if there is any scalp trauma. |  |  |
| 1.13 | Once the baby’s head is born, asks the woman not to push. Releases the vacuum, removes the cup, and prepares to complete the birth of the baby. |  |  |
| 1.14 | Ensured privacy and confidentiality. Provided respectful care and good communication. Told you what was to happen and why, and informed you of the findings. |  |  |

**Score \_\_\_\_\_\_\_\_\_\_/14 Pass score is 11/14** **Pass / Fail** (circle one)