

# DOCUMENT GUIDE

## DOCUMENT NAME: HORIZONTAL MATERNAL CARE END OF SHIFT REPORT

### DESCRIPTION:

To be completed by the clinical supervisor at the end of a clinical supervision period to contribute to MRAs and ITARs, and to specifically identify the number and nature of procedures completed on a clinical supervision period. This report is specific to horizontal Maternal Care experiences during Family Medicine Block Time.

**NOTE: An MRA should be created upon completion of 50% of the horizontal experience, and at 6 monthly intervals for experiences greater than 12 months duration.**

### ACCESS TO DOCUMENT:

- Go to Family Medicine website - [http://umanitoba.ca/faculties/health\\_sciences/medicine/units/family\\_medicine/index.html](http://umanitoba.ca/faculties/health_sciences/medicine/units/family_medicine/index.html)
- Click on “Documents and Forms”
- Form is available under “Assessments”

### AUTHORITY/RESPONSIBILITY:

- Program Assistant
- Site Medical Lead
- Site Education Director
- Primary Preceptor
- Alternate/Secondary Preceptor
- Faculty Lead
- Resident
- Postgraduate Director
- Associate Director, Enhanced Skills Program
- Assistant Director, Enhanced Skills
- Postgraduate Program Office

### SCHEDULE:

UPDATE/COMPLETE	SUBMIT/PRESENT	ENTER IN VENTIS (yes/no)	COMMENTS
Preceptors provide feedback following direct observation	Upon completion of 50% of horizontal experience, and at 6 monthly intervals for experiences greater than 12 months duration. Program Assistant collects Maternal End of Shift Reports and files in Resident Portfolio Binder	No	

# HORIZONTAL MATERNAL CARE END OF SHIFT REPORT



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Date:  
Resident:  
Supervisor:

Setting:  Outpatient  
 Triage  
 Ward  
 Birthing unit

## Maternal Care Competencies

<i>Doing well implies doing it correctly at the level of a graduating PGY2</i>		Unable to do this	Does not do this well	Is starting to do this well	Does this well	Can supervise	N/A
Prenatal	Confirm and date pregnancies						
	Perform early pregnancy counselling						
	Provide comprehensive prenatal care						
	Detect and manage early pregnancy problems						
	Detect and manage late pregnancy problems						
Intrapartum	Diagnose spontaneous rupture of membranes						
	Perform accurate cervical assessment						
	Manage labour, fetal surveillance						
	Scalp electrode placement						
	Manage amniotomy and augmentation of labour						
	Manage spontaneous vaginal delivery						
	Manage obstetrical emergency						
	Participate in operative delivery						
Perform perineal repair							
Post	Provide breastfeeding support						
	Detect and manage key post-partum issues						

Number of deliveries attended: \_\_\_\_\_

## Comments

What has been done well:

- CanMEDS-FM 2017**
- FM Expert
    - Patient-centered
    - Selectivity
    - Clinical reasoning
    - Procedural skill
  - Communicator
  - Collaborator
  - Leader
  - Health Advocate
  - Scholar
  - Professional

What could be done differently:

- CanMEDS-FM 2017**
- FM Expert
    - Patient-centered
    - Selectivity
    - Clinical reasoning
    - Procedural skill
  - Communicator
  - Collaborator
  - Leader
  - Health Advocate
  - Scholar
  - Professional

## Overall Performance

- Unable to do this** (cannot practice this)
- Does not do this well** (practice with full supervision)
- Is starting to do this well** (practice with supervision on demand)
- Does this well** (ready for "unsupervised" practice)
- Can supervise others to do this** (ready to supervise junior learners)

## Action Plan

Flag for review

Supervisor  
Signature

Resident  
Signature



**Please return the signed form to your program assistant**