

SITM: Care for Prematurity (CP)

SECTION 1: CAPABILITIES IN PRACTICE

CP CiP 1: The doctor demonstrates the skills and attributes to counsel parents who have experienced preterm birth.

| Key Skills | Descriptors |
|--|---|
| Delivers appropriate and timely postnatal and preconceptual advice to reduce midtrimester loss/preterm birth | <ul style="list-style-type: none"> Delivers appropriate and timely postnatal and preconceptual advice to reduce midtrimester loss/preterm birth. Counsel women regarding management options and undertaking debriefing appointments following adverse outcomes. |
| Evidence to inform decision | |
| <ul style="list-style-type: none"> NOTSS TO2 CBD Mini-Cex | <ul style="list-style-type: none"> Reflective Practice Attendance at preterm birth clinic Examples of anonymised pregnancy plans |
| Knowledge criteria | |
| <ul style="list-style-type: none"> Epidemiology of pre term labour Current theories on the aetiology of spontaneous pre term labour Risk factors associated with preterm labour The causes, associations, recurrence risks and preventive strategies for mid-trimester fetal loss, and preterm labour Current thinking around surgical and pharmacological strategies for reducing the risk of mid-trimester loss Current thinking around surgical and pharmacological strategies for reducing the risk of prematurity | |

CP CiP 2: The doctor demonstrates the skills and attributes to optimally manage the pregnancy of a woman who is at risk of preterm birth.

| Key Skills | Descriptors |
|--|---|
| Is able to predict the woman at risk of mid-trimester loss/preterm birth and make an appropriate management plan | <ul style="list-style-type: none"> Takes a targeted history to assess for risk factors Manages and modifies specific risk factors including smoking, domestic violence, previous cervical surgery, uterine abnormalities and previous full dilatation-C-sections. |

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| | <ul style="list-style-type: none"> • Demonstrates familiarity with screening strategies that may assist in the subsequent assessment of risk and can advise about care pathways. • Competently performs transvaginal cervical length scans and their interpretation. • Delivers appropriate advice and counselling based on these results. • Is aware of specific interventions and can advise accordingly. |
| <p>Is able to advise and carry out interventions to prevent mid-trimester loss/preterm birth</p> | <ul style="list-style-type: none"> • Demonstrates the ability to discuss the procedure, timing, risks and benefits of cervical cerclage. • Demonstrates the ability to assess when a history indicated cerclage, an emergent cerclage and an emergency cerclage is required. • Demonstrates the skills to insert an effective cervical cerclage. • Is familiar with post-operative care following cerclage. • Demonstrates the ability to advise, and where necessary, carry out alternative interventions such as insertion of an Arabin pessary and/or progesterone supplementation. • Understands the indications and when to refer for transabdominal cerclage. • Understands the timing and targeting of drug therapies aimed at reducing morbidity (such as steroids and magnesium sulphate). |
| <p>Evidence to inform decision</p> | |
| <ul style="list-style-type: none"> • Reflective Practice • NOTSS • TO2 • CBD • Mini-Cex • OSATs (see below) | <ul style="list-style-type: none"> • Attendance at preterm birth clinic • Examples of anonymised pregnancy plans • Log of cases and outcomes • Evidence of cervical suture simulation training |
| <p>Knowledge criteria</p> | |
| <ul style="list-style-type: none"> • Recognise when cervical length measurement should be offered and know the criteria for doing so accurately • The role of bedside testing in assessing the risk of mid-trimester loss and prematurity • The indications, complications and types of cervical cerclage • The role of pharmacological agents in reducing the risk of mid-trimester loss and prematurity eg progestogens • The role of bacterial vaginosis and the merit of screening in women at risk mid-trimester loss and prematurity • The impact of degrees of prematurity on the neonate and on neurodevelopment | |

SECTION 2: PROCEDURES

Procedures marked with * require three summative competent OSATS

| Procedures | Level by end of training | CIP 1 | CIP 2 |
|--------------------------------|---------------------------------|--------------|--------------|
| Ultrasound – cervical length * | 5 | | X |
| Insertion of cervical suture * | 5 | | X |

SECTION 3: GMC GENERIC PROFESSIONAL CAPABILITIES

| Mapping to GPCs |
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| Domain 1: Professional values and behaviours Domain 2: Professional skills <ul style="list-style-type: none"> • Practical skills • Communication and interpersonal skills • Dealing with complexity and uncertainty • Clinical skills (<i>history taking, diagnosis and management, consent; humane interventions; prescribing medicines safely; using medical devices safely; infection control and communicable diseases</i>) Domain 3: Professional knowledge <ul style="list-style-type: none"> • Professional requirements • National legislative requirements • The health service and healthcare systems in the four countries Domain 4: Capabilities in health promotion and illness prevention Domain 5: Capabilities in leadership and teamworking Domain 6: Capabilities in patient safety and quality improvement <ul style="list-style-type: none"> • Patient safety • Quality improvement Domain 7: Capabilities in safeguarding vulnerable groups |

SECTION 4: MAPPING OF ASSESSMENTS TO CP CiPs

| CP CIP | OSATS | Mini-CEX | CbD | NOTSS | TO1/TO2 | Reflective practice |
|--|--------------|-----------------|------------|--------------|----------------|----------------------------|
| 1: The doctor demonstrates the skills and attributes | | X | X | X | X | X |



| CP CIP | OSATS | Mini-CEX | CbD | NOTSS | TO1/ TO2 | Reflective practice |
|---|-------|----------|-----|-------|-------------|------------------------|
| to counsel parents who have experienced preterm birth | | | | | | |
| 2: The doctor demonstrates the skills and attributes to optimally manage the pregnancy of a woman who is at risk of preterm birth | X | X | X | X | X | X |