

**OBSTETRICS PROCEDURAL SKILLS ASSESSMENT  
Partograph Skills Test A**

Cover Page

Q1: Facility ID	Q2: Facility Name	Q4b: Time simulation started (HH:MM)
Q3: Observer number	Q4a: Today's date (DD/MM/YYYY) ____ / ____ / ____	____ : ____ AM/PM
<b>Q4c: Result</b> <input type="checkbox"/> Interview done <input type="checkbox"/> Person in charge refused interview		
<input type="checkbox"/> Partially completed time restrictions <input type="checkbox"/> Unable or unwilling to finish <input type="checkbox"/> Person in charge is out		

THIS TEST IS TO BE ADMINISTERED TO A HEALTH WORKER FROM OB/GYN SERVICES. EACH FOLIO (SET OF PAPERS) CORRESPONDS TO ONE HEALTH WORKER ONLY. IF YOU ADMINISTER THIS TEST TO SEVERAL HEALTH WORKERS, YOU NEED A NEW FOLIO FOR EACH HEALTH WORKER. ALSO BE SURE TO RECORD THE STAFF ID NUMBER OF THE HEALTH WORKER ANSWERING THIS TEST, BY REFERRING TO THE STAFF ROSTER TO OBTAIN THE STAFF ID NUMBER. CHECK THE STAFF ROSTER AND SEE IF THE HEALTH WORKER IS RECORDED AS HAVING GIVEN CONSENT FOR THE RESEARCH. IF NOT YOU MUST READ THE FULL CONSENT FORM AND OBTAIN HIS/HER SIGNATURE. IF YES, REMIND HIM/HER USING THE TEXT BELOW.

Q5a: Has the health worker previously signed a consent form?     Yes → go to Q6a     No → go to Q7a

Q6a: ASK HEALTH WORKER: I would like to ask you to simulate the provision of care in a specific medical case. Your answers will remain confidential, we will not share the result of this simulation test and it will not have any impact on your work or the assessment of your performance. Do I have your permission to administer this simulation test?

Yes → go to Q8a     No, consent is not given → observation of this health worker must END; if available, approach another health worker for participation.

Q7a: READ FULL CONSENT SCRIPT TO HEALTH WORKER AND OBTAIN SIGNATURE. Did the health worker sign the form?

Yes → go to Q8a     No, consent is not given → observation of this health worker must END; if available, approach another health worker for participation.

<b>Q8a Staff Roster ID number</b>	<b>Q9a Gender</b>	<b>Q10a: Health Worker Category Code (see below for codes)</b>
	<input type="checkbox"/> Male <input type="checkbox"/> Female	

READ THE FOLLOWING TO THE HEALTH WORKER:

I will start by briefly explaining to you how the simulation works. I will then start observing you in the simulation of the provision of care to an asphyxiated newborn (simulated with the doll that I have here). Please simulate the actions you would take to the best of your knowledge. I will give you information sometimes to let you know what happens in this simulation, but I will not give you advice on what to do or how to do it. If you need me to repeat that information, just let me know.

Health Worker Category Codes				
1. MD-Obstetrician/Gynecologist	2. MD-Neonatologist	3. MD-Surgeon	4. MD- Family Physician	5. MD - Pediatrician
6. Physician's Assistant	7. Nurse midwife	8. Bachelor and Science of Nursing Nurse	9. Diploma Nurse	10. Nurse with Associate Degree
11. Licensed Practical Nurse	12. Certified midwife	13. Midwife	14. Nurse aide	96. Other, please specify:

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PROVIDE THE HEALTH WORKER WITH THE CASE STUDY INFORMATION SHEET RELATED TO THIS CASE, ONE PAGE AT A TIME. EACH HEALTH WORKER SHOULD BE WORKING WITH A PARTOGRAPH FROM FACILITIES SUPPLIES. THEY WILL FILL ALL OF THE RELEVANT INFORMATION ON THE PARTOGRAPH. AT THE END OF EACH STAGE, THERE ARE A FEW QUESTIONS THEY MUST ANSWER ABOUT THE CASE: RECORD THEIR ANSWERS BELOW. IF THEY ARE UNABLE TO COMPLETE ALL OF THE STAGES OF THIS CASE, PLEASE MAKE SURE TO RECORD THE REASON WHY THE CASE IS NOT COMPLETE ON THE FIRST PAGE: DID THEY NOT HAVE TIME, OR WERE THEY UNABLE TO COMPLETE THE CASE STUDY. IF IT IS CLEAR THE HEALTH WORKER IS NOT QUALIFIED TO USE THE PARTOGRAPH, END THE VIGNETTE AND INDICATE THIS ON THE FIRST SHEET.

READ ALOUD:

Plot the information given on the case descriptions graphically using a blank partograph form and answer the questions related to the case. There are multiple stages for each case and when you have finished with one stage you can continue on to the next.

RECORD WHETHER THE PROVIDER CORRECTLY INDICATED THE FOLLOWING INFORMATION ON THE PARTOGRAPH:

**STAGE 1**

Information Item (correctly recorded?)	Yes	No	DK	Go to
A101: Mrs. B was admitted to the hospital at 10:00 a.m. on Feb. 5, 2000	1	0	8	
A102: Membranes intact	1	0	8	
A103: Primigravida, primipara	1	0	8	
A104: Medical record number: 1443	1	0	8	
A105: The fetal head is 5/5 palpable above the symphysis pubis	1	0	8	
A106: The cervix is 4 cm dilated	1	0	8	
A107: 2 contractions every 10 minutes, with a duration of less than 20 seconds each	1	0	8	
A108: The fetal heart rate (FHR) is 140	1	0	8	
A109: Blood pressure: 100/70	1	0	8	
A110: Temperature: 36.2°C	1	0	8	
A111: Pulse: 80/minutes	1	0	8	
A112: Urinary output: 400 ml; negative for protein & acetone	1	0	8	

ASK THE FOLLOWING QUESTIONS, ALLOWING THE HEALTH WORKER TO USE THE PARTOGRAPH AS A GUIDE

<b>A120: What stage of labor is the patient?</b>				
	A 1 <sup>st</sup> Stage, Active Stage	1	0	8
	B Other Specify	1	0	8

<b>A121: What actions would you take?</b>				
	A continue to monitor	1	0	8
	B Other Specify	1	0	8

**STAGE 2**

Information Item (correctly recorded?)	Yes	No	DK	Go to
A201: 10.30 a.m. FHR 140, Contractions 2/10 with a duration of 15 seconds, Pulse 90.	1	0	8	
A202: 11.00 a.m. FHR 136, Contractions 2/10 with a duration of 15 seconds, Pulse 88, membranes intact.	1	0	8	
A203: 11.30 a.m. FHR 140, Contractions 2/10 with a duration of 20 seconds, Pulse 84.	1	0	8	
A204: 12.00 p.m. FHR 136, Contractions 2/10 with a duration of 15 seconds, Pulse 88, Temperature 36,2°C.	1	0	8	
A205: The fetal head is 5/5 palpable above the symphysis pubis.	1	0	8	

ASK THE FOLLOWING QUESTIONS, ALLOWING THE HEALTH WORKER TO USE THE PARTOGRAPH AS A GUIDE

<b>A220: What is your diagnosis or assessment of the woman's condition? (probe for multiple answers)</b>				
	A 1 <sup>st</sup> Stage, Active Stage	1	0	8
	B Delayed descent of the head	1	0	8
	C Mild contractions	1	0	8
	D Delayed progress	1	0	8
	E Other Specify	1	0	8

<b>A221: What actions would you take?</b>				
	A continue to monitor	1	0	8
	B Reassess frequently	1	0	8
	C Encourage to drink liquids	1	0	8
	D Encourage to ambulate	1	0	8
	E Other, Specify	1	0	8

**Stage 3**

Information Item (correctly recorded?)	Yes	No	DK
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A301: 12:30 p.m. FHR 136, Contractions 1/10 duration of 15 seconds, Pulse 90.	1	0	8
A302: 1:00 p.m. FHR 140, Contractions 1/10 duration of 15 seconds, Pulse 88.	1	0	8
A303: 1:30 p.m. FHR 130, Contractions 1/10 duration of 20 seconds, Pulse 88.	1	0	8
A304: 2:00 p.m. FHR 140, Contractions 2/10 duration of 20 seconds, Pulse 90, Temperature 36,8°C, BP 100/70.	1	0	8
A305: The fetal head is palpable above the symphysis pubis.	1	0	8
A306: Urinary output: 300 ml.: negative for protein & acetone.	1	0	8
A307: Membranes intact.	1	0	8
A308: Cervix 4 cm. dilated, fetal skull bones are separated and the sutures are easily palpable.	1	0	8
A309: The fetal head is 3/5 palpable above the symphysis pubis.	1	0	8

*ASK THE FOLLOWING QUESTIONS, ALLOWING THE HEALTH WORKER TO USE THE PARTOGRAPH AS A GUIDE*

**A320: What is your diagnosis or assessment of the woman's condition? (probe for multiple answers)**

<b>A</b> 1 <sup>st</sup> Stage, Active Stage	1	0	8
<b>B</b> Mild contractions	1	0	8
<b>C</b> Little progress	1	0	8
<b>D</b> Other Specify	1	0	8

**A321: What actions would you take?**

<b>A</b> Reassess	1	0	8
<b>B</b> Augment labour. Oxytocin 5 IU in 1000ml RL. Start at 10 drops per minute and increase every 30 minutes until you get the desired contractions.	1	0	8
<b>C</b> Other Specify	1	0	8

**Stage 4**

**Information Item (correctly recorded?)** **Yes** **No** **DK**

A401: 2:00 p.m.			
a. Artificial rupture of membranes, amniotic fluid transparent.	1	0	8
b. Labor induced with oxytocin (2.5 units in 500 ml. IV fluid, 10 drops per minute).	1	0	8
A402: 2:30 p.m.			
a. 2 contractions in 10 minutes, each with a duration of 30 seconds.	1	0	8
b. Drip is increased to 20 drops per minute.	1	0	8
c. FHR 140, Pulse 88, BP 120/80.	1	0	8
A403: 3:00 p.m.			
a. 3 contractions in 10 minutes, each with a duration of 30 seconds.	1	0	8
b. IV infusion increased to 30 drops/min.	1	0	8
c. FHR 140, Pulse 90.	1	0	8
A404: 3:30 p.m.			
a. 3 contractions in 10 minutes, each with a duration of 30 seconds.	1	0	8
b. IV infusion increased to 40 drops/min.	1	0	8
c. FHR 140, Pulse 88.	1	0	8
A405: 4:00 p.m.			
a. Fetal head 2/5 palpable (De Lee plane 0).	1	0	8
b. Cervix 6 cm dilated.	1	0	8
c. 3 contractions in 10 minutes, each of 30 seconds duration.	1	0	8
d. IV infusion increased to 50 drops/min.	1	0	8
A406: 4:30 p.m. FHR 140, Pulse 90, 3 contractions in 10 minutes, each of 45 seconds duration.	1	0	8

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**A420: What actions would you take?**

<b>A</b> Continue to monitor	1	0	8
<b>B</b> Maintain IV at 50 drops per minute	1	0	8
<b>C</b> Other Specify	1	0	8

**Stage 5**

**Information Item (correctly recorded?)** **Yes** **No** **DK**

A501: 5:00 p.m. FHR 138, Pulse 88, 3/10 duration of 40 seconds, maintain IV infusion at 50 drops/min.	1	0	8
A502: 5:30 p.m. FHR 140, Pulse 90, 3/10 duration of 45 seconds, maintain IV infusion at 50 drops/min.	1	0	8
A503: 6:00 p.m. FHR 140, Pulse 90, 4/10 duration of 50 seconds, maintain IV infusion at 50 drops/min.	1	0	8
A504: 6:30 p.m. FHR 144, Pulse 90, 4/10 duration of 50 seconds, maintain IV infusion at 50 drops/min.	1	0	8

**Stage 6**

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Information Item (correctly recorded?)	Yes	No	DK
A601: 7:00 p.m.			
a. Fetal head 0/5 palpable (De Lee plane +4).	1	0	8
b. FHR 144, Pulse 90, Contractions 4 in 10 minutes, duration 50 seconds each.	1	0	8
c. Cervix completely dilated.	1	0	8
<b>Stage 7</b>			
Information Item (correctly recorded?)	Yes	No	DK
A701: 8:00 p.m. Spontaneous birth of a live male weighing 2,654 g.	1	0	8
<i>ASK THE FOLLOWING QUESTIONS, ALLOWING THE HEALTH WORKER TO USE THE PARTOGRAPH AS A GUIDE</i>			
<b>A720: How long was the active phase of first stage labor?</b> A Specify			
<b>A721: How long was the second stage of labor?</b> A Specify			
<b>A722: Why was labor induced?</b> A Specify			
<b>END OF HEALTH WORKER PROCEDURAL SKILLS ASSESSMENT</b>			