

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

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
Q4c: Result <input type="checkbox"/> Interview done <input type="checkbox"/> Health worker refused interview <input type="checkbox"/> Partially completed time restrictions <input type="checkbox"/> Health worker is out <input type="checkbox"/> Unable or unwilling to finish		

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.

Q8a Staff Roster ID number	Q9a Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Q10a: Health Worker Category Code (SEE BELOW, MULTIPLE QUALIFICATIONS CAN BE RECORDED)

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 (please circle appropriate category: if multiple categories apply, circle multiple answers)

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. Registered 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.

OBSERVER 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. C was admitted to the hospital at 10 a.m. on Dec. 5, 2000	1	0	8	
A102: Membranes ruptures at 9 a.m.	1	0	8	
A103: Gravida 4, Para 3+0	1	0	8	
A104: Medical record number: 6639	1	0	8	
A105: The fetal head is 3/5 palpable (De Lee plane -2)	1	0	8	
A106: The cervix is 4 cm dilated	1	0	8	
A107: 3 contractions every 10 minutes, with a duration of 30 seconds each.	1	0	8	
A108: Amniotic fluid is transparent.	1	0	8	
A109: Cranial suture lines are not overlapping.	1	0	8	
A110: The fetal heart rate (FHR) is 140	1	0	8	
A111: Blood pressure: 120/70	1	0	8	
A112: Temperature: 36.8°C	1	0	8	
A113: Pulse: 80/minutes	1	0	8	
A114: Urinary output: 200 ml; negative for protein & acetone	1	0	8	

**STAGE 2**

Information Item (correctly recorded?)	Yes	No	DK	GO TO
A201: 10.30 a.m. FHR 130, Contractions 3/10 with a duration of 35 seconds, Pulse 80.	1	0	8	
A202: 11.00 a.m. FHR 136, Contractions 3/10 with a duration of 40 seconds, Pulse 90.	1	0	8	
A203: 11.30 a.m. FHR 140, Contractions 3/10 with a duration of 40 seconds, Pulse 88.	1	0	8	
A204: 12.00 p.m. FHR 140, Contractions 3/10 with a duration of 40 seconds, Pulse 90, Temperature 37°C, fetal head 3/5 palpable.	1	0	8	
A205: 12.30 p.m. FHR 130, Contractions 3/10 with a duration of 40 seconds, Pulse 90.	1	0	8	
A206: 1:00 p.m. FHR 130, Contractions 3/10 with a duration of 40 seconds, Pulse 88.	1	0	8	
A207: 1:30 p.m. FHR 120, Contractions 3/10 with a duration of 40 seconds, Pulse 88.	1	0	8	
A208: 2:00 p.m. FHR 130, Contractions 4/10 with a duration of 45 seconds, Pulse 90. Temperature 37°C, BP 100/70.	1	0	8	
A209: Fetal head is 3/5 palpable (De Lee Plane -2) above the symphysis pubis.	1	0	8	
A210: Cervix 6 cm dilated, amniotic fluid is transparent.	1	0	8	
A211: Suture lines of fetal skull are overlapping but reducible.	1	0	8	

**STAGE 3**

Information Item (correctly recorded?)	Yes	No	DK	GO TO
A301: 2:30 p.m. FHR 120, Contractions 4/10 with a duration of 40 seconds, Pulse 90, Amniotic fluid is transparent.	1	0	8	
A302: 3:00 p.m. FHR 120, Contractions 4/10 with a duration of 40 seconds, Pulse 88, Amniotic fluid is transparent stained with blood.	1	0	8	
A303: 3:30 p.m. FHR 100, Contractions 4/10 with a duration of 45 seconds, Pulse 100.	1	0	8	
A304: 4:00 p.m. FHR 90, Contractions 4/10 with a duration of 50 seconds, Pulse 100, Temperature 37°C.	1	0	8	
A305: 4:30 p.m. FHR 96, Contractions 4/10 with a duration of 50 seconds, Pulse 100, Head -2, Amniotic fluid with meconium.	1	0	8	
A306: 5:00 p.m. FHR 90, Contractions 4/10 with a duration of 50 seconds, Pulse 110.	1	0	8	
A307: Fetal head is 3/5 palpable (De Lee plane -2).	1	0	8	
A308: Cervix is 6 cm dilated.	1	0	8	
A309: Amniotic fluid is stained with meconium.	1	0	8	
A310: Sutures lines of fetal skull are overlapping and not reducible.	1	0	8	
A311: Urinary output: 100 ml: negative for protein, acetone is 1+.	1	0	8	

**STAGE 4**

Information Item (correctly recorded?)	Yes	No	DK	GO TO
A401: A caesarian section was performed at 5:30 p.m. A 4,850 gram female was born with difficulty breathing.	1	0	8	

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<i>OBSERVER: ASK THE FOLLOWING QUESTIONS, ALLOWING THE HEALTH WORKER TO USE THE PARTOGRAPH AS A GUIDE</i>				
<b>A501: What is your diagnosis or assessment of the woman's condition? (probe for multiple answers)</b>				
	A CPD	1	0	8
	B Poor Descent			
	C Fetal Distress	1	0	8
	D Obstructed Labor	1	0	8
	E Prolonged Labor	1	0	8
	N Health Worker does not know	1	0	8
	O Other Specify (IF THEY SAY C/SECTION, REMIND THEM THAT YOU ARE ASKING ABOUT ASSESSMENT OF CONDITION, NOT RECOMMENDED TREATMENT)	1	0	8
<b>A502: What did you notice between 12:00 and 3:00 p.m.? What steps were indicated? Why?</b>				
	A Delay/Poor Progress	1	0	8
	B Baby not descending	1	0	8
	C Decrease in Fetal HR/ Irregular Fetal HR	1	0	8
	D Dilatation crosses the alert line	1	0	8
	E 2+ molding	1	0	8
	N Health worker does not know	1	0	8
	O Other, Specify	1	0	8
<b>A503: At 5:00 p.m. a caesarian section was ordered and promptly carried out. Was that the right decision?</b>		1	0	8
<b>A504: What complications are to be expected in the newborn?</b>				
	A Asphyxiation/ Difficulty breathing	1	0	8
	B Fetal Distress	1	0	8
	C Sepsis	1	0	8
	D Low/Depressed Apgar Score	1	0	8
	E Cynotic	1	0	8
	F Poor Sucking	1	0	8
	N Health worker does not know	1	0	8
	O Other, Specify	1	0	8
<b>END OF HEALTH WORKER PROCEDURAL SKILLS ASSESSMENT</b>				