



Pre/Post Training Objective Structured Clinical Evaluation (OSCE)

Participant # _____

Date _____

Station 1: Active Management of Third Stage of Labor

Situation: The second stage of labour is just over. Now deliver the placenta by performing Active Management of Third Stage of Labor (AMTSL).

Observation: Observe if the participant is performing the following steps of AMTSL in the right order, using the right technique:

S.No.	Steps	Score	Remarks
1.	Preliminary step--rules out the presence of another baby by abdominal examination		
2.	Administers uterotonic drug—10 IU oxytocin IM OR Misoprostol 3 tablets (600ug) orally		
3.	Performs Controlled Cord Traction during contractions and delivers the placenta and membranes		
4.	Performs uterine massage		
5.	Examines the lower vagina and perineum		
6.	Examines placenta, membranes and umbilical cord a. Maternal surface of placenta b. Foetal surface c. Membranes d. Umbilical cord		
7.	Places instruments in 0.5% chlorine solution for 10 minutes for decontamination		
8.	Decontaminates or disposes the syringe and needle		
9.	Immerses both gloved hands in 0.5% chlorine solution		
10.	Washes hands thoroughly with soap and water and air dries		

Score of competency = 8/10 (80%)

Participant's score = ____ /10

Result: Competent/Needs improvement (circle the appropriate result)

Station 2: Newborn Resuscitation

Case: You are caring for a mother who is about to deliver a baby of 35 weeks gestation and the liquor is meconium stained. How will you prepare to receive the baby? When the baby is born he is not crying. Demonstrate how you will resuscitate him?

S.No.	Task	Score	Remarks
1.	Gets ready with: <ul style="list-style-type: none">• Bag and mask• Suction equipment• Radiant warmer or other heat source• 2 warm towels• Clock with seconds hand• Oxygen source• Gloves• Shoulder roll• Cord tie/ Cord clamp• Scissors• Stethoscope		
2.	Looks for breathing/cry of baby. If not and liquor meconium stained, then sucks mouth and nose at the mother's abdomen		
3.	Quickly dries the baby, removes wet towel and wraps in another warm dry towel		
4.	Assesses breathing of baby		
5.	If not breathing, clamps and cuts the cord immediately		
6.	Places the baby on a warm, firm flat surface (radiant warmer)		
7.	Positions the baby in slight neck extension using a shoulder roll Performs Suction of mouth and nose Stimulates the baby by gently rubbing the back twice Repositions the baby and reassesses breathing		
8.	If not breathing, provides bag and mask ventilation for 30 seconds, makes sure that the chest rises		
9.	Reassesses the baby after 30 seconds of ventilation		
10.	If still not breathing, continues bag and mask ventilation, starts oxygen and assesses the heart rate		
11.	If the baby is still not breathing, continues bag and mask ventilation and refers to higher center		
12.	At any point, if baby starts breathing, provides observational care		

Score of competency = 9/12 (75%)

Participant's score = ____ /12

Result: Competent/Needs improvement (circle the appropriate result)

Station 3: Management of Antenatal Complications

Instructions for participants: Read the case situation and based on the information given in it, answer the questions.

Case: A 38 weeks pregnant woman has come to the facility with labour pains and complains that she has had a bad headache all day. She also complains that she cannot see properly since few hours. During examination she begins a fit (convulsing).

1. What is your diagnosis?

2. Which medicine will you give her?

3. How will you manage this case using the above mentioned medicine?

Step 1: Describe how will you prepare and administer the loading dose of magnesium sulfate?

Step 2: How long should you give magnesium sulfate in this case if no side effects occur?

Step 3: What is the maintenance dose of magnesium sulfate?

Step 4: What are the signs of magnesium sulfate toxicity for which you will withhold the dose?

Score of competency = 6/8 (75%)

Participant's score = ____ /8

Result: Competent/Needs improvement (circle the appropriate result)

Station 4: Management of Postnatal Complications

Instructions for participants: Read the following case study carefully and answer the questions.

Case: Mrs. Reeta is a 23 year old primigravida who had full term normal vaginal delivery of a live healthy female child weighing 2.5 Kg 2 hours ago. She had 18 hour labour with oxytocin augmentation for a prolonged labor. Her mother complains she has suddenly become drowsy with profuse perspiration and cold on touch.

On examination: BP-100/60 mm Hg, pulse-118/minute, oedema feet-2+, uterine fundus-3 fingers above umbilicus, breasts-soft, no secretions, per vagina-lochia rubra, clots expressed
Investigations: Hb-7.9 gm/dl, urine-protein trace

Questions

- Which of the following postnatal complications is Ms. Reeta at MOST risk? (Select only one)
 - Postpartum hemorrhage ☐
 - Prolapsed uterus ☐
 - Delayed pre-eclampsia ☐
- Related to your diagnosis, which of the below mentioned examination findings are of concern or indicate the need for immediate intervention?

S.No	Observation	Finding	Concern/ Immediate intervention needed (Yes/No)
1.	BP	100/60 mm of Hg	
2.	Urine	Trace Protein	
3.	Edema in lower extremities	+ 2	
4.	Uterine fundus	3 fingers above umbilicus	
5.	Lochia	Rubra, clots expressed	
6.	Hemoglobin	7.9 g/dl	
7.	Baby weight	2.5 Kg	
8.	Gravida	Primigravida	
9.	Duration of labour	18 hours	

- What is the drug of choice for the developed condition?
 - Inj. Magnesium sulphate
 - Inj. Methyl ergometrine (Methergin)
 - Inj. Oxytocin

Score of competency = 9/12 (75%)

Participant's score = ___ /12

Result: Competent/Needs improvement (circle the appropriate result)

OSCE Summary

Station	Activity	Score of competency	Participant's Score	Competent/Needs improvement
1.	AMTSL	8/10		
2.	Newborn resuscitation	9/12		
3.	Management of antenatal complications	6/8		
4.	Management of postnatal complications	9/12		