

DEPARTMENT OF EMERGENCY MEDICINE

Basic Life support and Advance cardiac life support–2023

DATE: March 10, 11 and 12, 2023

VENUE: Sri Manakula Vinayagar Medical College and Hospital,
Kalitheerthalkuppam, Puducherry

NAME OF THE ORGANIZING DEPARTMENT: Department of Emergency
Medicine

NAME OF THE SPONSORING AGENCY: Sri Manakula
Vinayagar Medical College and Hospital/ Indian institute of Emergency
Medical service

NATURE OF DELEGATES (PG/FACULTY): Postgraduates of various
departments, MBBS

Under graduate students, Consultants, Paramedics

NUMBER OF DELEGATES: BLS – 19 ACLS - 17

DETAILS OF RESOURCE PERSON:

Dr.R. Nithyaraj

Assistant Professor,
Department of Emergency Medicine,
SMVMCH, Puducherry.

Dr. E. Kirubasankaran

Senior Resident,
Department of Emergency Medicine
SMVMCH, Puducherry.

Dr. Naveen puthum,

Assistant Professor,
Department of Emergency Medicine,
Arupadaiveedu Medical College and Hospital,
Puducherry.

DESCRIPTION OF THE EVENT:

On March 10, 11 and 12, 2023, Department of Emergency Medicine of Sri Manakula Vinayagar Medical College and Hospital conducted “BLS, ACLS”. It was a 3 days event held from 9.30am to 4.30 pm at the Simulation lab.

The event started off with a prayer song. Dr.R. Nithyaraj, Assistant Professor and Incharge of Department of Emergency Medicine at SMVMCH gave Welcome address and introduced the guest speaker. He also unfolded them

Above mentioned faculties delivered speech about various topics and hands on training about BLS and ACLS and they spoke about the various skills on airway and technics in treating various cardiac rhythms on periarrest and cardiac arrest, how to effectively help to revert the respiratory and cardiac arrest in adults. It was an informative, educational speech and training.

The event ended with a vote of thanks by Dr.E. Kirubasankaran, Senior Resident, Department of Emergency Medicine, SMVMCH, followed by National Anthem



DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
OPERATIVE LAPASOCOPY WORKSHOP- 2023

Photos Image

In this modern era in medical sciences, the practice of minimally invasive surgery is increasing. Worldwide and making it as an essential skill for the doctors

In this regard our Department of Obstetrics and Gynecology organized a live operative Laparoscopy workshop on April 1st 2023 from 8.30 A.M to 5.30 P.M at our operation theatre And it was live telecasted at MIT Auditorium, Sri ManakulaVinayagar Medical college & Hospital, Pondicherry under the guidance of organizing chairperson Dr.Jayasree .M,Professor & HOD, Dr. Bubathy .A, Professor organizing Vice-Chairperson, Dr. Nivedita .K, Professor and Dr. Poomalar G.K. Professor.

The introductory session was conducted by Dr.Jayasree .M followed by live workshop from 2 OT theatres conducted by Dr. Mala raj, consultant Gyn & Minimal access surgery, Firm Hospital Chennai and Dr. Gnana Sankar Natesan, Consultant Gyn Oncology & Minimal Access Surgery, S.K.S Hospitals & PCI Institute, Salem.

The chairperson were

Dr. Dilip Kumar Maurya , Professor,
Department of OBG, JIPMER

Dr. Sasirekha, Additional Professor
Department of OBG, JIPMER

Dr. Satheesh Ghosh Dean, Professor,
Department of OBG, MGMCRI

Dr. Sathyanarayanan, Professor & Unit Chief,
Rajiv Gandhi Hospital, Pondicherry

There were 6 cases included in this live workshop they were.

1. Total Laparoscopic Hysterectomy by Dr. Malaraj&Assisted by Dr. Priyadharshini
2. Laparoscopic cerclage by Dr. Gnana Sankar & Assisted by Dr. Ilamathi.
3. Total Laparoscopic Hysterectomy in previous 2 LSCS by Dr. Malaraj& Team.
4. Total Laparoscopic Hysterectomy in previous LSCS by Dr.GanaSankar& Team.
5. Laparoscopic Myomectomy by Dr. Malaraj &Team.
6. Total Laparoscopic Hysterectomy with explanation of pelvic anatomy by Dr. GanaSankar& Team.

Around 50 participants from various Medical Colleges from Pondicherry and Tamil Nadu actively participated in this workshop and benefited with the skill and knowledge regarding Laparoscopic Surgeries. They were encouraged and awaiting such events in near future.

Professor & Head
Dept. of Obstetrics & Gynecology

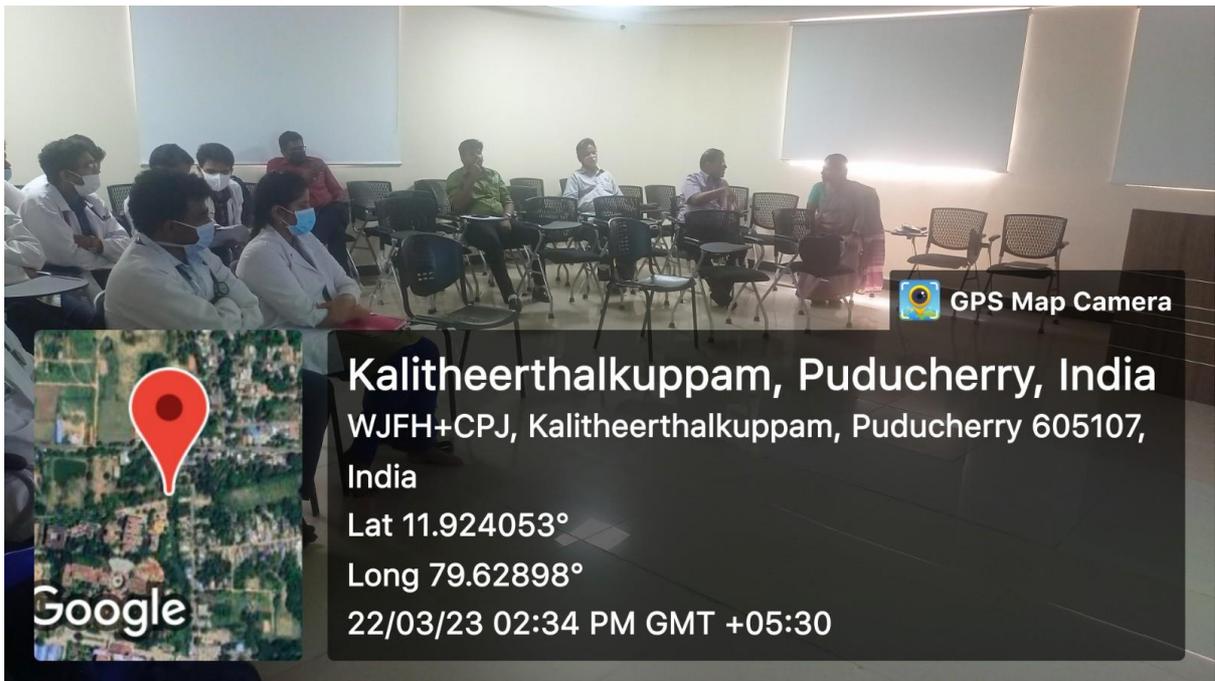
WORKSHOP ON “PLANNING AND EXECUTION OF OSPE AND OSCE”

The MEU in collaboration with the Simulation Centre of SMVMCH organized a half-day workshop on “Planning and Execution of OSPE and OSCE” for around 25 participants, comprising of Postgraduates and faculty of Medicine department of SMVMCH on 22.03.2023 at the Simulation Centre of SMVMCH. Dr.Soundariya inaugurated the session and highlighted the essentials of OSPE and OSCE in the CBME curriculum. Dr.M.Jayasree, Coordinator, Simulation Centre SMVMCH facilitated the sessions. The resource faculty enlightened the participants on selecting the skills to be assessed by OSCE, Key components in running an OSCE and reporting the results of OSCE. The participants were shown a live demonstration of 5 OSCE stations on various skills and it was well appreciated by participants. There was a debriefing session and the resource faculty addressed all the queries of the participants. The sessions were highly interactive and positive feedback was obtained from the participants.



Feedback Analysis

- The practical constraints in conducting the OSCE was well discussed
- Dr.Girija.S, Professor and HOD, Department of General Medicine requested overview of the conduction of OSCE during ward leaving exams, by the MEU and the coordinator of Simulation Centre for betterment of the same
- It was insisted on organizing similar workshops for other clinical departments in turns to facilitate sensitisation for STEP-2 of NEXT.



Action Taken

- The suggestions were discussed with dean and it was decided to first obtain the station scenarios from the clinical departments followed by fixing of slots for the conduct of the workshop

INTERN ORIENTATION PROGRAM 2023
Introduction to interprofessional collaborative practice and
teamwork
Report

IMG's attribute as a communicator necessitates that they communicate with sensitivity, respect, and effectively with patients, families, colleagues, and the community. As a leader and member of the healthcare team with capabilities to collect, analyze, synthesize, and communicate health data appropriately, lead the healthcare system effectively and responsibly, respect the roles and responsibilities of other team members, be able to educate and motivate other team members, understand national health policies and priorities.





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The AETCOM module has been introduced only in the new CBME curriculum from the 2019 batch onwards which was lacking in the previous curriculum. Our workshop was planned to address these two attributes (communicator and leader and member of the healthcare team).



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The lesson plan and scenarios are attached

Sixty-five percent of participants were females. The average score in the pretest was 11/25. Knowledge regarding strategies for leadership, communication, and competencies for interprofessional collaboration was lacking among many of the participants. The average score in the posttest was 18/25. Definition of leadership, mutual support, and IPCP were the questions wrongly answered by many participants.

13TH SOUTH INDIAN MEDICAL STUDENTS CONFERENCE 2023

Simulation competition Report

Photos image



SIMSCON 2023 theme was art of diagnosis. We have conducted pre-conference workshops on surgical skills, obstetric skills, pediatric skills, medical skills, BLS, and acute trauma care. Other workshops organized were radiology interpretation, ECG, and dermatology. Pretest was given and students scored 50% and above were selected. Participants were formed into 19 teams. Each team comprises 5 members and has participated in different workshops. Ten stations were kept. One member from each team has to perform a skill at each station which will be evaluated based on a checklist.

The scenarios and checklists kept for the competition is attached.

PARTICIPANTS

Fifty six percent of the participants belonged to Phase II, 25% from phase 3 part I and II and 18% from phase I.

Based on the marks from all stations, top three teams were given prizes in SIMSCON

FEEDBACK

Feedback was completed by only 55 participants. Out of which 47.5% rated it 5 and 34.5% rated it 4. **Almost all of them were satisfied** after the competition except one person who felt overwhelmed because peers were observing while performing the skill.

Some of them opined that if the teams had equal distribution from all phases the competition would have been fair. Most of them opined that they have some confidence in performing basic life support, acute trauma care skills, obstetric skills, teamwork and communication skills, and patient safety. Almost 60% of them gave feedback that they have no confidence in performing surgical skills, medical procedural skills, neonatal resuscitation skills and interpretation skills in radiology.



Sri MANAKULA VINAYAGAR

Medical college and Hospital

DEPARTMENT OF EMERGENCY MEDICINE

Basic Life support and Advance cardiac life support – 2023

DATE: October 5, 6 and 7, 2023

VENUE: Sri Manakula Vinayagar Medical College and Hospital, Kalitheerthalkuppam,
Puducherry

NAME OF THE ORGANIZING DEPARTMENT: Department of Emergency Medicine

NAME OF THE SPONSORING AGENCY: Sri Manakula Vinayagar Medical College and
Hospital/ Indian institute of Emergency Medical service

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Senior Resident,
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SMVMCH, Puducherry.

Dr. Amaravathi .U,

Assistant Professor,
Department of Emergency Medicine,
SMVMCH, Puducherry.

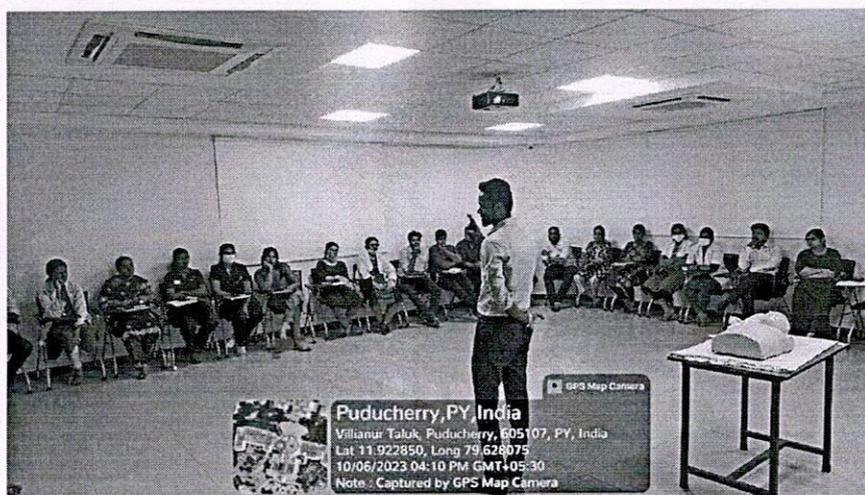
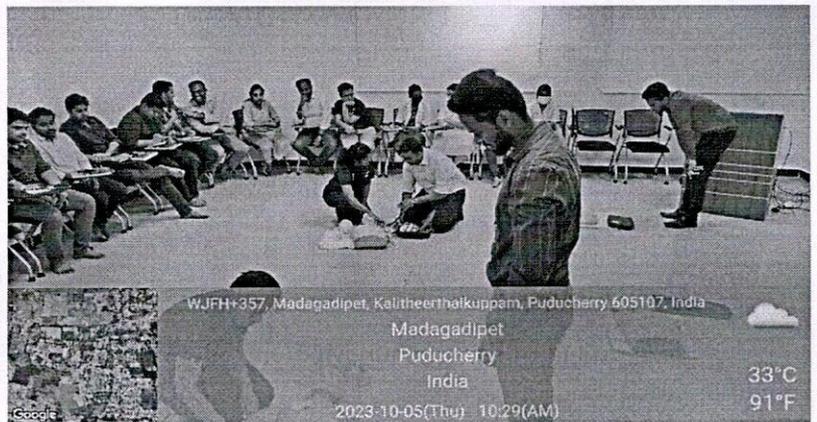
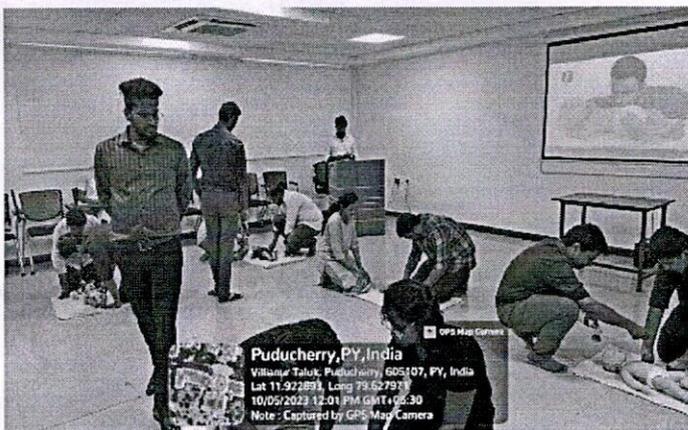
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Puducherry

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Dr. R. N. NARAYANAN

TNMC No. 87858

Incharge, Asst. Professor

Dept. of Emergency Medicine

Sri Manakula Vinayagar Medical College & Hospital

Google

PG ORIENTATION 2023

Teamwork and communication skills workshop

Patient safety is the foundation mission of our hospital. Effective communication is the cornerstone to create and sustain a culture of safety. Cooperation is the key to providing patients with high-quality treatment and improving communication, teamwork, and team leadership requires team training. The U.S. Department of Defense Patient Safety Program in collaboration with the Agency for Healthcare Research and Quality (AHRQ) developed the TeamSTEPPS program — Team Strategies and Tools to Enhance Performance and Patient Safety that has proved effective. It is based on a framework of four teamwork competencies.

COMMUNICATION: Effectively exchange information among team members, regardless of how it is communicated

LEADING TEAMS: Direct and coordinate, assign tasks, motivate team members and facilitate optimal performance

SITUATION MONITORING: Develop common understandings of the team environment; apply strategies to monitor team members' performance; maintain a shared mental model

MUTUAL SUPPORT: Anticipate other team members' needs through accurate knowledge; shift workload to achieve balance during periods of high workload or stress



Teamwork tools to enhance patient safety:

COMMUNICATION: SBAR, Call-out, Check-back, Handoff

Brief, Huddle, Debrief

SITUATION MONITORING: STEP, Cross monitoring, I'm SAFE
CHECKLIST

MUTUAL SUPPORT: Two challenge rule, CUS, DESC script



A good consultation model is needed to achieve good doctor-patient communication and to deliver comprehensive care by addressing patient issues in a holistic way. We have used the Calgary Cambridge consultation model to train our residents on doctor-patient communication.



Delivering bad news is a daunting task and residents need training to avoid negative consequences for patients, families, and physicians and SPIKES model is used to train in delivering bad news.

The lesson plan, case scenarios, and checklist used are attached.

For **first-year residents**, the workshop was conducted for 7 hours. A hundred students were divided into a batch of three and the session was facilitated by Dr. Jayasree, Dr. Preethi, and Dr. Priyadharshini. **Second-year residents** underwent 3 hours of training during the basic presentation and teaching skills.



Most of the residents were less than 30 years of age. Thirty-nine percent of them have no previous work experience, 36% of them have worked for less than 1 year, 23% have worked for 2- 5 years, and only 2% have >6 years of experience.

All participants had a pre and post-test to assess their knowledge of teamwork and communication. The average pretest score was 7/22 and the posttest score has improved to 12/22.

TeamSTEPPS Teamwork perception questionnaire was given to **second-year** residents since they have been working in the department for the past 1 year. Seventy percent of students have agreed that their team has good team structure, leadership, mutual support, and communication while **30% have remained neutral**



Feedback

By participating in the workshop, >94% agreed that the workshop was useful for preparing their consultation skill, teamwork, consent taking, and delivering bad news while 2% remained neutral and 2% strongly disagreed.

A majority (75%) of the participants have agreed to use tools SBAR, check-back, brief, Huddle, and SPIKES. Fifty-nine percent of them agreed to use the Calgary Cambridge consultation model while the remaining participants wanted to use the GATHER technique of doctor-patient interview.

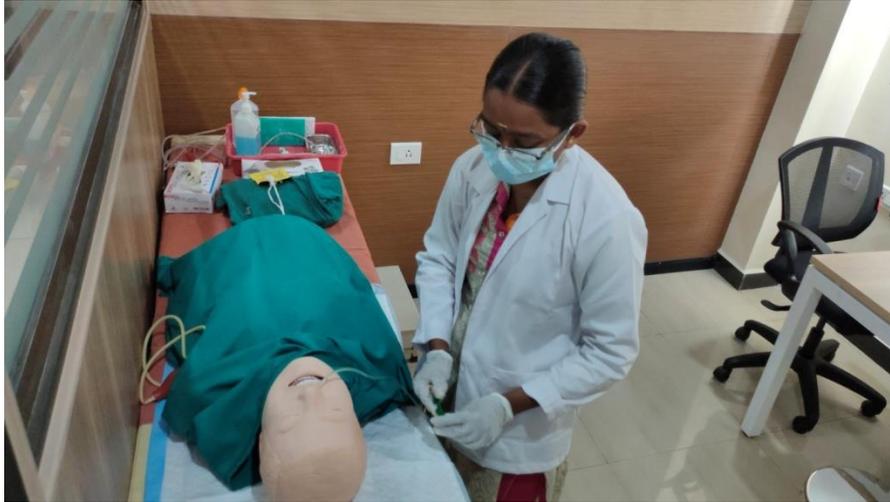
Instead of one day the workshop can be held for two days and jumbling of groups and more role play and activities were suggested for improvement of the workshop.

Participants have given positive feedback for incorporating simulation and role-play made the workshop interesting and informative.

OSCE

All the first-year residents were assessed on basic procedural skills like peripheral iv cannulation, NG tube insertion, male and female catheterization, doctor-patient interview, consent taking, handing over, patient safety, suturing, and hand hygiene. The majorities of the students have done well in peripheral IV cannulation,

catheterization, patient safety, and hand hygiene skills. An equal number of students have done well and not done well in suturing station. Among communication skills, < 50% of students have done well in doctor-patient interview technique and handing over while 66% of students have scored >50% in consent taking.



After the assessment, the students were debriefed about all the stations. They were also sensitized about OSCE station preparation and assessment.

PRACTICAL OBSTETRIC SKILLS TRAINING

Report

Nurses posted in sub-centres in India are expected to conduct delivery for low-risk pregnant women. So the conduct of normal labour, episiotomy, vaginal examination, clinical pelvimetry, IUCD insertion, and removal are skills that nursing students have to become competent. Assisted breech delivery and instrumental delivery are low-frequency but high-intensity skills that are mandatory. An increasing number of trainees and a declining number of basic skills per student have reduced learning opportunities in the present scenario. So these skills have been considered for simulation.



Methodology:

All the participants had given a pre-test and accessed the lecture and videos through the Whatsapp group. Students attended the simulation training on mannequins and OSCE was conducted to assess their skills. Post-test and feedback were obtained through Google forms.

Baseline requirement:

Attended theory classes and written examinationson

- Indication, contraindication, types of episiotomy, and classification of perineal tear
- Indications, contraindications, prerequisites, complications, and steps of forceps delivery
- Indications, contraindications, prerequisites, complications, and steps of vacuum delivery
- Indications, contraindications, prerequisites, complications, and steps of assisted breech delivery
- Bishops score, clinical pelvimetry, and indications and contraindications of induction of labor
- Indications, contraindications, prerequisites, complications, and steps of IUCD insertion and removal
- Should complete the pretest posted in the Whatsapp group
- Should listen to voiceover PPT and watch videos relevant to the topic posted in the Whatsapp group



Objectives:

At the end of the session, participants will be able to

- Demonstrate IUCD insertion and removal in a mannequin
- Demonstrate episiotomy placement and suturing in a simulated environment
- Demonstrate pelvic examination and clinical pelvimetry in a simulated environment
- Demonstrate assisted breech delivery in a mannequin
- Describe and demonstrate preparation and assistance for assisted vaginal delivery

Time	Topic	TL method	Faculty
9:00- 9:30 am	Introduction	PPT	Dr. Muthamizh selvi Dr. Jayasree
9:31- 10:10 am	IUCD insertion and removal	Demo and hands-on mannequin	Dr. Priyadharshini Dr. Manimegalai
10:11-10:50 am	Pelvic examination & clinical pelvimetry	Demo and hands-on mannequin	
10:51-11:10 am	Tea break		
11:11 -11:50 am	Episiotomy placement and suturing	Demo and hands-on mannequin	Dr. Niveditha Dr. Agalya Mrs. Sudha Ms.Sathyavathy
11:51-12:30 am	Assisted breech delivery	Demo and hands-on mannequin	Dr.Jayasree Dr.Hemavathy Dr.Aishwarya
12:31- 1:10 pm	Instrumental delivery(outlet forceps & vacuum delivery)	Demo and hands-on mannequin	Dr. Bupathy Dr. Arularasan Dr.Fathima
1:11- 2:00 pm	Lunch		
2:01- 4:30 pm	OSCE		All faculty
4:31- 4:45 pm	Feedback		

Results:

The average score in the pretest was 7/20 and the score improved to 12/20. The questions that many of them missed were on the mechanism of action, pull-out technique, absolute contraindication for IUCD, and episiotomy as a routine process rather than an elective procedure.

In the OSCE except 5 candidates all participants scored more than 70%.

A remedial simulation session was organized on IUCD insertion for all students.

Feedback

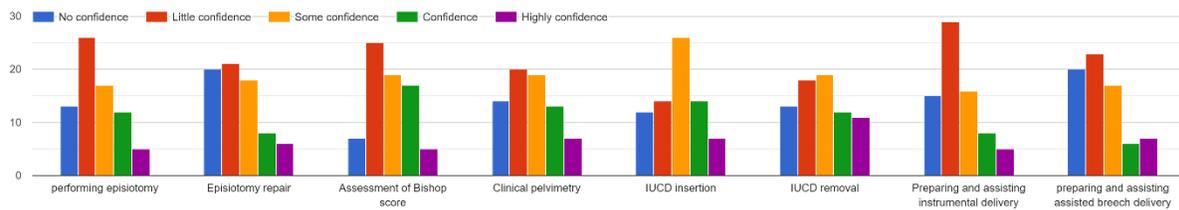
Eighty-four percent of participants agreed that the course content was clear and easy to understand while 8% disagreed, a majority(86%) of them also agreed that voiceover PPT and videos helped them in learning the skill.

Self-perception of confidence in these skills before attending the simulation was between no confidence to some confidence among 81% of participants.

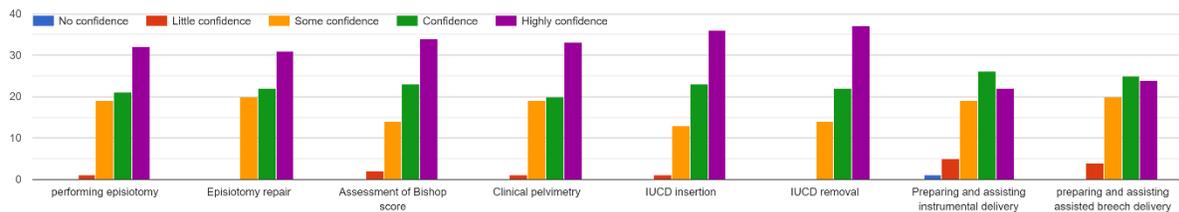
After attending the simulation, 50% of the participants felt they were highly confident, 35% of them were confident and the remaining had some confidence in performing these skills.

Participants wanted the simulation training to be held over a period of time rather than a one-day workshop and wanted repeated sessions to improve their skills.

Your perception of confidence level before attending the simulation training and assessment



Your perception of confidence level after attending the simulation training and assessment





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