



SOAP 2024 FUNDAMENTALS SUBSCRIBER INSTRUCTIONS FOR ZOOM LIVE LECTURES & SELF-PACED ASYNCHRONOUS MODULES

Participants will need a computer with an internet connection sufficient for streaming media. The activity is hosted on ZOOM and the SOAP Learning Center (<https://soap.mclms.net/en/>). Participants will be provided with a link to access the ZOOM and the SOAP Learning Center.

Live Lectures on ZOOM (September 14 & 21, 2024)

Each subscriber will be sent their individual log on credentials for both ZOOM live sessions (September 14 & 21, 2024)

Self-Paced Asynchronous Modules on SOAP Learning Center (September 15-20, 2024)

Each subscriber must log onto the website with their individually assigned log-in credentials. The activity is a self-paced presentation with visuals and audio. The online-module order is as follows

- 1) Learning Activity
- 2) Post-test
- 3) Learner Self Evaluation

All components of the activity are taken online. The assessment and post-test remains locked until the learning module is completed. To receive credit, participants must (1) read the target audience, learning objectives, and disclosure statements, (2) complete the educational activity online, and (3) complete the post-test and activity evaluation.

It is estimated that this activity will take approximately 1 hour and 40 minutes to complete. To receive 2 hours of credit, learner must receive a minimum score of 80% on the post-test. Only 2 attempts are permitted to reach 80% score.

The certificate of completion is available for download once all requirements have been met. The certificate is stored in learner's achievements section of our LMS and can be re-downloaded on demand at any time once they have completed the activity.

Target Audience:

Anesthesiologists & CRNAs

Disclosures:

Individuals involved in the planning, reviewing or execution of this activity have indicated they have no relevant financial relationships to disclose.

Program Description

Research indicates that there are areas in the United States where access to OB Anesthesia care is limited or unavailable. In these areas, the healthcare team may be comprised of obstetricians, family physicians, anesthesiologists, CNRAs, and other medical professionals who are not trained in OB Anesthesia. To fulfill the SOAP mission of advancing and advocating for the health of pregnant women and their babies through research, education, and best practices in obstetric anesthesia care, this program overall goal is to fill the educational needs for these under-resourced areas.

Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Describe the advantages and disadvantages of performing neuraxial and general anesthesia in the setting of an urgent/emergent cesarean delivery.
2. Assess strategies promoting enhanced recovery and opioid-sparing analgesia after cesarean delivery.
3. Analyze the degree of a pregnant patient's cardiac disease and design appropriate delivery care plans: location, timing and mode of delivery, hemodynamic goals, method of anesthesia, monitoring, access and post care.
4. Describe evidence-based clinical practice guidelines on post-dural puncture headache
5. Explain factors that improve success rates for External Cephalic Version (ECV).
6. Explain and provide guidance to the patient on the risks, benefits, and outcomes of non-obstetric surgery during pregnancy, including physiological changes during pregnancy and how these changes may impact perioperative anesthesia care.
7. Describe diagnosis and treatment of neuraxial blockade complications.
8. Implement disclosure into clinical practice when errors are made that reach the patient and define Just Culture and its role in medical errors.
9. Explain physiologic changes in pregnancy that can make airway management more challenging.
10. Describe the detection and management of peripartum peripheral nerve injuries and how our neuraxial anesthetic may play a contributing role.
11. Describe key points of obstetric hemorrhage, the use of tranexamic acid in PPH treatment and prevention, and the role of fibrinogen in the diagnosis and treatment of PPH.
12. Explain the definitions of pregnancy induced hypertension, blood pressure management of acute severe hypertension, and anesthetic implications (i.e induction for general anesthesia, labor pain management)
13. Describe effective techniques to maximize neuraxial analgesia on Labor and Delivery.