Overall Competencies for the Pediatric Residency Training Program

NORMAL NEWBORN

Goals and Competencies

PC: Patient Care; MK: Medical Knowledge; PBLI: Practice-Based Learning & Improvement; IC: Interpersonal & Communication Skills; P: Professionalism; SBP: Systems-Based Practice

GOAL 1: Prenatal Visit:

COMPETENCIES: (PC, MK, IC, P, SBP)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Understand the importance of an approach to the prenatal office visit, including timing of the visit, goals for the parents and the practice and topics to be covered.		1	2	3

GOAL 2: Role of the Pediatrician in the Normal Newborn Nursery:

COMPETENCIES: (PC, MK, PBLI, IC, P, SBP)	<25%	25-50%	50-75%	75-100%
Understand the role of the primary care pediatrician in the normal newborn nursery and how it relates to the continuum of office health supervision care, including appropriate communication and transfer of records if the ongoing care giver will be someone else, or a different physician in the same practice.			1	2,3

GOAL 3: Hospital Routines:

COMPETENCIES: (PC, MK, SBP)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Understand the rationale behind various nursery and delivery routines and how these affect the health and well being of families and newborns (e.g., rooming in, on-demand feeding, 24 hour discharge of the newborn).				1,2,3

GOAL 4: Prenatal and Perinatal Risk Assessment:

COMPETENCIES: (PC, MK, IC)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Demonstrate competency in obtaining and interpreting historical risk factors including:				
1. Maternal medical and obstetric history.			1	2,3
2. Family history.			1	2,3
3. Maternal test results of blood type, Rh, rubella, hepatitis, serology, HIV, tuberculosis, drugs of abuse.				1,2,3

GOAL 5: Postnatal Risk Assessment:

Competencies: (PC, MK, IC)	<25%	25-50%	50-75%	75-100%
Demonstrate competency in obtaining and interpreting a social history as it pertains to family strengths and family and environmental risks.				1,2,3

GOAL 6: Physical Exam and Gestational Age Assessment:

COMPETENCIES: (PC, MK)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Demonstrate competence in the performance of the newborn physical exam and gestational age assessment (Ballard).				1,2,3

GOAL 7: The Sick Newborn:

COMPETENCIES: (PC, MK)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Demonstrate the ability to recognize and initiate appropriate management of the sick newborn in the normal newborn nursery.		1	2	3

GOAL 8: The Transition:

COMPETENCIES: (PC, MK)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Describe the physiology of neonatal transition after delivery and relate it to overall management of the newborn in the nursery. Describe how to recognize signs and symptoms of inadequate adaptation to the transition period.		1	2	3

GOAL 9: Common Problems:

COMPETENCIES: (PC, MK)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Demonstrate understanding of the diagnosis and management of common exam findings and clinical situations encountered in the normal newborn nursery, including:				
Exam Findings:				
1. Common birthmarks.			1	2,3
2. Common rashes			1	2,3
3. Heart murmurs.		1	2	3
4. Cyanosis.		1	2	3
5. Tachypnea/respiratory distress.		1	2	3
6. Hypothermia or hyperthermia.		1	2	3
7. Congenital hip dislocation.			1,2	3
8. Fractured clavicle.			1,2	3
9. Facial palsy, Erb's palsy.			1,2	3
10. Cephalhematoma, caput succedaneum.				1,2,3
11. Congenital anomalies.			1	2,3
Clinical Situations:				
1. Hypoglycemia.			1,2	3
2. Infant of diabetic mother.			1,2	3
3. Sepsis evaluation.			1	2,3
4. Jaundice.			1	2,3
5. SGA/LGA/Preterm.		1	2	3
6. Post maturity.			1,2	3
7. Maternal substance abuse.		1	2	3
8. Delayed passage of urine, meconium.		1	2	3
9. Vomiting.		1	2	3
10. Poor suck.		1	2	3
11. Polycythemia.		1	2	3
12. Jittery infant.		1	2	3
13. Hypotonic infant.		1	2	3

GOAL 10: Circumcision:

COMPETENCIES: (PC, MK, PBLI, IC, P)	**<25%**	**25-50%**	**50-75%**	**75-100%**
1. Demonstrate understanding of the indications, risks and procedure used for circumcision of newborns. Understand the AAP recommendations.			1	2,3
2. Demonstrate the ability to explain to parents the procedure of circumcision, its indications, contraindications, risks and benefits.			1	2,3
3. Counsel parents on circumcision site care.				1,2,3
4. Discuss current approaches to pain for neonatal circumcision and counsel parents about the advantages, disadvantages, risks, and contraindications.		1	2	3

GOAL 11: Newborn Screening:

COMPETENCIES: (PC, MK, IC, SBP)	**<25%**	**25-50%**	**50-75%**	**75-100%**
1. Describe the state neonatal blood screening program, including diseases screened for, timing, testing procedures and initial management of abnormal results.		1	2	3
2. Describe the pediatricians responsibility for follow up of neonatal screening results.			1	2,3

GOAL 12: Routine Nursery Interventions:

COMPETENCIES: (PC, MK)	**<25%**	**25-50%**	**50-75%**	**75-100%**
1. Eye prophylaxis				1,2,3
2. Vitamin K injection				1,2,3
3. Hepatitis B vaccine				1,2,3

GOAL 13: Breast Feeding:

COMPETENCIES: (PC, MK, PBLI, IC, P)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Understand and demonstrate the ability to counsel parents (when appropriate) about:				
1. The benefits of breast feeding.			1	2,3
2. Physiology of lactation.			1	2,3
3. Maternal medication use and breast feeding.			1	2,3
4. Proper feeding technique including frequency, positions, effects of supplementation, etc.			1	2,3
5. Normal and abnormal patterns of weight loss.			1	2,3
6. Common problems.			1	2,3
7. Role of lactation consultants.				1,2,3

GOAL 14: Bottle Feeding:

COMPETENCIES: (PC, MK, PBLI, IC, P, SBP)	**<25%**	**25-50%**	**50-75%**	**75-100%**
Understand and demonstrate the ability to counsel parents (when appropriate) about:				
1. Proper feeding technique.			1	2,3
2. Different types of proprietary formulas and how to choose.			1	2,3
3. Importance of iron fortification (AAPCON recommendation of no appropriate role for low iron formulas).				1,2,3
4. Safety issues (e.g., bottle propping, micro-waving).			1	2,3
5. Common problems.			1	2,3
6. WIC program.				1,2,3

GOAL 15: Anticipatory Guidance at Nursery Discharge:

COMPETENCIES: (PC, MK, PBLI, IC, P, SBP)	**<25%**	**25-50%**	**50-75%**	**75-100%**
1. Understand how to provide anticipatory counseling at nursery discharge which relates to newborn behavior, family adjustment, injury prevention, and access to medical services.			1	2,3
2. Demonstrate the ability to counsel parents in this regard.			1	2,3
3. Discuss criteria for discharge readiness of the newborn and caretakers, indicating particular awareness of the criteria to be satisfied for early (less than 48 hours) discharge.			1	2,3
4. Routine follow-up.			1	2,3
5. Warning signs of jaundice, infection, dehydration, and feeding problems.			1	2,3
6. Normal infant behaviors related to crying, sleep, and wakefulness and how to deal with common problems.			1	2,3
7. Postpartum adjustment including the need for rest and support, and the potential for postpartum “blues” (e.g., depression, anxiety, feelings of inadequacy, fear and resentment).			1	2,3
8. Uniqueness of each infant’s temperament and how to identify and respond to this.			1	2,3
9. Potential for sibling rivalry and ways to handle this.			1	2,3
10. Injury prevention (e.g., car seat for discharge, smoke alarms, crib safety, water temperature, (120°F), constant supervision of newborn with siblings or pets).				1,2,3
11. Sleep position.				1,2,3