

# Collaborating Against Catecholamines: Using Interprofessional Simulation to Prepare for a Potential Cardiac Emergency in Pregnancy.

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## Published In/Presented At

Gogle, J. Kemp, T. (2018, June 23-27). *Collaborating Against Catecholamines: Using Interprofessional Simulation to Prepare for a Potential Cardiac Emergency in Pregnancy*. Poster Presented at: AWHONN, Tampa, FL.

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# Collaborating Against Catecholamines: Using Interprofessional Simulation to Prepare for a Potential Cardiac Emergency in Pregnancy

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## OBJECTIVES

- Detail the evidence-based, interprofessional management of an antepartum woman with a high-risk cardiac condition – Catecholaminergic Polymorphic Ventricular Tachycardia (CPVT).
- Identify pragmatic strategies to prepare for a potential cardiac emergency in pregnancy.

## BACKGROUND

- Interprofessional simulation is routinely scheduled on the L&D unit to prepare staff for obstetric emergencies.
- OB division holds monthly multidisciplinary team meetings to develop care plans for complicated obstetric cases.
- Team identified a 28 year-old primigravid woman at 16 weeks gestation with a rare, genetic cardiac disorder – CPVT.
- In CPVT:
  - ▶ Increased catecholamines (such as with labor) may precipitate
    - syncope
    - cardiac arrest
    - ventricular tachycardia
    - death
- Call to action – team assembled to outline care strategies for the antepartum, intrapartum and postpartum periods.

## IMPLEMENTATION



## CONCLUSION/LESSONS LEARNED

- 1) Ask for assistance.
- 2) Define the available resources and establish the process to access, activate and mobilize that support in a timely manner.
- 3) Involve bedside clinicians in the plan of care.

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