

HANDS-ON DRILL · ONE SCENARIO, RUN ON YOUR OWN PROTOCOL

Postpartum hemorrhage drill: scenario sheet and competency record

This is the format of a drill day. A facilitator brings the manikin, your team runs the scenario the way *your* protocol says to, and the facilitator watches, coaches and records. The clinical steps below are prompts only: each one points to your own protocol, and your protocol governs.

1 · The scenario

SETTING	Labor room or operating room, with the equipment your staff would really use
SCENARIO	A patient in the first hour after birth has heavier-than-expected bleeding and a falling blood pressure. The facilitator adjusts the manikin and the vital signs as the team acts.
LENGTH	About 15 minutes of action, then a 15-minute debrief
YOUR PROTOCOL	Hospital hemorrhage protocol, version and date: _____

2 · Roles for this run

ROLE	NAME
Team leader	_____
Recorder (times and actions)	_____
Medication nurse	_____
Airway/vitals or second nurse	_____
Runner / supplies	_____
Observer (facilitator's eye)	_____

3 · Observer's checklist

STEP	STATUS	TIME / NOTES
Recognize and call for help Problem named aloud; help called per your escalation policy	☐ Done ☐ Late ☐ Missed	
Assign roles Leader named; roles stated out loud	☐ Done ☐ Late ☐ Missed	
Measure blood loss Method per your protocol (for example, quantitative)	☐ Done ☐ Late ☐ Missed	

First-line measures Per your hemorrhage protocol	☐ Done ☐ Late ☐ Missed
Illustrative sample. Your hospital's protocols govern. Not clinical guidance. catchmentmaternity.com	
Medications and order sets Per your protocol and formulary; read back and confirm	☐ Done ☐ Late ☐ Missed
Escalate Next-level measures and who is called, per your protocol	☐ Done ☐ Late ☐ Missed
Transfer decision Criteria and the call to the receiving facility, per your transfer protocol	☐ Done ☐ Late ☐ Missed
Communicate Closed-loop communication; patient and family updated	☐ Done ☐ Late ☐ Missed
Document Times, quantities, actions, as your policy requires	☐ Done ☐ Late ☐ Missed

4 • Debrief

- What went the way the protocol says? Where did the team have to improvise?
- Where was the protocol hard to follow: unclear, too long, missing something, or not matching the room?
- What equipment or supply was missing, hard to find or not where staff expected?
- What one change goes back into the protocol or the unit before the next drill?

FINDINGS TO FEED BACK INTO THE PROTOCOL

5 • Completion record

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One record per participant, kept in the personnel file. Completion records support your hospital's own training policy and documentation.

NAME	ROLE	SCENARIO	DATE	RESULT
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat
_____		Postpartum hemorrhage		☐ Competent ☐ Repeat

Facilitator name and signature _____

Date _____

Unit manager or educator signature _____

Next drill due _____