

Obstetric Team Debriefing Form

Remember: Debriefing is meant to be a learning experience and a way to address both human factors and systems issues to improve the response for next time. There is to be no blaming/finger-pointing.

Type of event: _____ Date of event: _____

Location of event: _____

Members of team present: (check all that apply)

- | | | | |
|---|--|-------------------------------------|---|
| <input type="checkbox"/> Primary RN | <input type="checkbox"/> Primary MD | <input type="checkbox"/> Charge RN | <input type="checkbox"/> Resident(s) |
| <input type="checkbox"/> Anesthesia personnel | <input type="checkbox"/> Neonatology personnel | <input type="checkbox"/> MFM leader | <input type="checkbox"/> Patient Safety Officer |
| <input type="checkbox"/> Nurse Manager | <input type="checkbox"/> OB/Surgical tech | <input type="checkbox"/> Unit Clerk | <input type="checkbox"/> Other RNs |

Thinking about how the obstetric emergency was managed,

Identify what went well:
(Check if yes)

- Communication
- Role clarity (leader/supporting roles identified and assigned)
- Teamwork
- Situational awareness
- Decision-making
- Other: _____

Identify opportunities for improvement:
"human factors" (Check if yes)

- Communication
- Role clarity (leader/supporting roles identified and assigned)
- Teamwork
- Situational awareness
- Decision-making
- Other: _____

Identify opportunities for improvement:
"systems issue" (Check if yes)

- Equipment
- Medication
- Blood product availability
- Inadequate support (in unit or other areas of the hospital)
- Delays in transporting the patient (within hospital or to another facility)
- Other: _____

Obstetric Team Debriefing Form

FOR IDENTIFIED ISSUES, FILL IN TABLE BELOW

ISSUE	ACTIONS TO BE TAKEN	PERSON RESPONSIBLE
	①	
	②	
	③	
	④	