

5th Annual Clinical Meeting Continues Tradition of Quality Content and Networking

Once again, the Society of Ob/Gyn Hospitalists pulled off an Annual Clinical Meeting that raised the bar on all previous efforts. This time, in addition to amazing simulation and didactic opportunities, we focused on Ob/Gyn Hospitalists as leaders. Ob/Gyn Hospitalists frequently fill new unanticipated leadership positions that perhaps they did not sign up for and for which additional preparation is welcome. We had courses on leading simulation (Train the Trainer), Ob/Gyn Emergency Response, Operative Vaginal Delivery and OB ACLS: The First 5 minutes. Didactic sessions supplied cutting edge, evidence based management strategies, practice advice and research opportunities. And the keynote presentation on leadership by Steven Beeson, which resulted in a well-deserved standing ovation, is still resonating with me.

Some of us were drawn to this work for its leadership opportunities, but I suspect most of us were thinking instead of the rewards of providing obstetric care or of a “simplified” and focused professional life. But no matter what our original motivation, Ob/Gyn Hospitalists are leaders. We find ourselves in a clear position of leadership on our units, in our departments and in our hospitals. Labor and Delivery nurses are relieved of the stress of obstetrical triage. Midwives are free to provide supportive, low intervention care knowing they can call upon skilled Ob/Gyn Hospitalist collaborators. Administrators are thrilled that we take responsibility for creating order sets and protocols and strive to maintain safety and quality for our departments. Patients are reassured that they have skilled back up. But our colleagues often have to be convinced. Dr. Beeson’s approach, where as leaders we demonstrate hope, belief, lead by example, and tap into our colleagues sense of purpose, is a role I can embrace.

How has our annual meeting already paid dividends for me in the weeks since I returned? I presented a case at Department Peer Review and in addition to discussing the etiology, pharmacology and treatment of a clear drug error, heeding Dr. Beeson’s words, I appealed to my colleague’s sense of purpose and asked him to apologize to the patient who had suffered due to his error. I submitted a proposal for a simulation day that will include some of what I learned at the OB ACLS course regarding “resuscitative hysterotomy.” I quoted Dr. Beeson in my Department Meeting Agenda with the subtitle “Believe, Hope and Lead by Example” and the end note “Holding a grudge is like drinking poison and waiting for the other person to die.” I booked a DJ for our holiday party because there is nothing more fun than dancing in a circle screaming lyrics from the 1990s with the people who are there for you every day.

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