

Appendix A

Caesarean Section Training

CS= Caesarean section

This questionnaire is strictly confidential. Anonymity is maintained and no identifying features are linked to your responses. By continuing with this questionnaire you are indicating your willingness to participate and providing your consent for participation. Thank you for your participation.

1. What is your age?

2. What is your gender?

Mark only one oval.

Male

Female

3. At which University did you complete your undergraduate training?

Mark only one oval.

- University of Cape Town
- University of the Free State
- University of Kwa-Zulu Natal
- University of Pretoria
- Stellenbosch University
- University of Witwatersrand
- Sefako Makgatho Health Sciences
University (Medunsa) Walter
Sisulu University
- Other: _____

4. At which hospital/hospital complex did you complete your internship and in which province?

5. What date did you start your Community Service year?

Example: January 7, 2019

Surgical Questions

These next questions relate to the surgical aspects of CS training received during Internship.

6. How many CS did you perform as the primary surgeon during your internship?

7. Do you think that the HPCSA's stipulated minimum number of 10 CS is appropriate for internship?

Mark only one oval.

- Yes
 No, it should be increased
 No, it should be decreased

8. Did you ever perform a CS as the primary surgeon under direct supervision (in theatre) of an Obstetric Specialist?

Mark only one oval.

- Yes
 No

9. Did you ever perform a CS as the primary surgeon under direct supervision (in theatre) of a Family Medicine Specialist?

Mark only one oval.

- Yes
 No

10. If you answered "no" to either of the previous 2 questions, who then was the most senior person who ever directly supervised you in theatre performing a CS?

Mark only one oval.

- Obstetric Registrar
 Obstetric Medical Officer
 Community Service Medical Officer
 Fellow Intern
 Not applicable

11. While in theatre performing a CS, who were you mainly supervised by during your internship training?

Mark only one oval.

- Specialist
 Registrar
 Medical Officer
 Community Service Medical Officer
 Fellow Intern

12. Did you ever perform a CS as an intern without a more senior doctor (not a fellow intern) supervising you in theatre?

Mark only one oval.

- Yes
 No

13. Did you ever perform an emergency CS?

Mark only one oval.

Yes

No

14. Did you ever perform an elective CS?

Mark only one oval.

Yes

No

15. Did you ever perform a complicated CS as the primary surgeon? (select all options that apply)

Check all that apply.

Previous CS

Breech presentation

Transverse lie

Twin Pregnancy

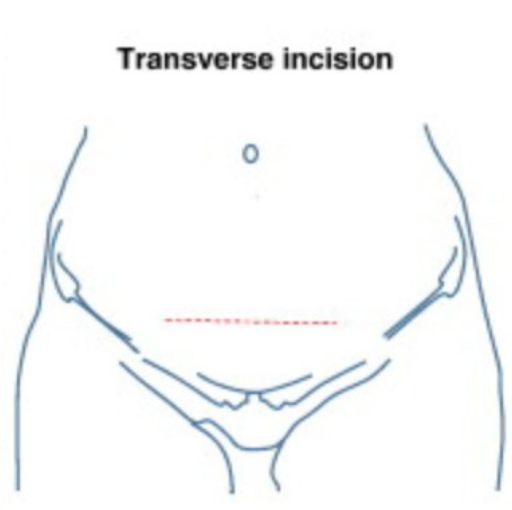
Abruptio Placentae

Placenta Previa

No

Other: _____

16. Did you ever perform a CS as the primary surgeon through a transverse skin incision (eg. Pfannenstiel)?

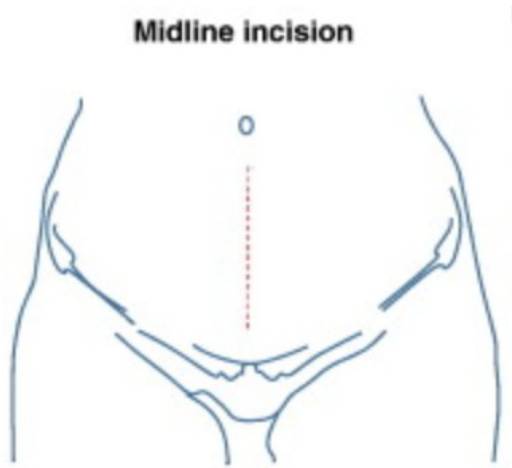


Mark only one oval.

Yes

No

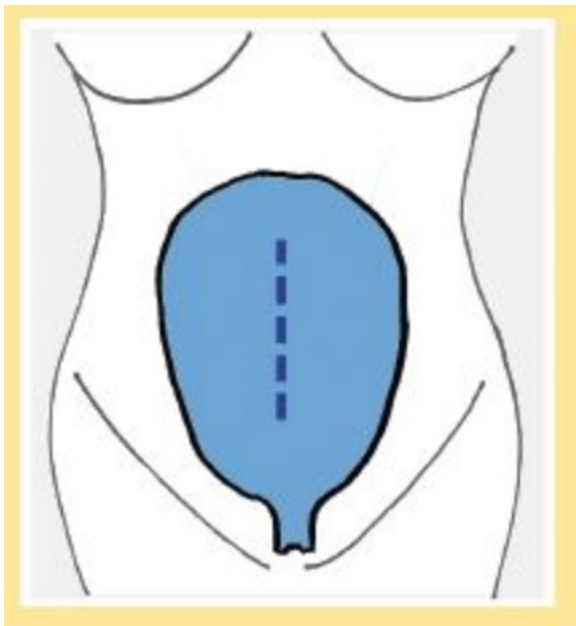
17. Did you ever perform a CS as the primary surgeon through a midline skin incision?



Mark only one oval.

- Yes
- No

18. Did you ever perform or assist at a classical CS (vertical upper segment uterine incision)?



Check all that apply.

- Primary surgeon
- Assistant surgeon
- No

19. When complications occurred intra-operatively were you allowed to manage them or did the senior take over?

Mark only one oval.

1 2 3 4 5

I was never allowed to try and manage surgical complications I was always allowed to manage surgical complication

20. During intra-operative obstetric haemorrhage which occurred while you were the primary surgeon, were you taught how to control bleeding with any of the following techniques?

Check all that apply.

- Suturing of uterine tears which extended laterally/inferiorly from the incision?
- B-lynch compression suture?
- Uterine artery ligation?
- Uterine tourniquet with Foley's catheter?
- Hysterectomy?
- No, I was not taught any of these methods
- Not applicable - I never had a patient with obstetric haemorrhage in theatre

Other: _____

21. Do you feel confident in managing obstetric haemorrhage intra-operatively during CS as the primary surgeon?

Mark only one oval.

	1	2	3	4	5	
Not at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

22. Was there an ESMOE training course presented during your internship?

Mark only one oval.

- Yes
- No

23. If yes, did you participate in any of the following modules?

Check all that apply.

- Obstetric haemorrhage module
- Surgical skills module
- Anaesthesia module
- Not applicable

24. Did you find this course beneficial?

Mark only one oval.

- Not at all
- Disappointing
- Average
- Beneficial
- Very beneficial
- Not applicable

25. Do you feel confident in making the decision to perform a CS on a labouring patient?

Mark only one oval.

	1	2	3	4	5	
No not at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes very confident

26. In the hospital where you did internship, were there post-call handover meetings where the CS that were performed on call were presented and discussed?

Mark only one oval.

- Yes
 No

27. During internship did you ever manage post-partum haemorrhage following CS?

Mark only one oval.

- Yes
 No

28. Do you feel confident in your approach to managing post-partum haemorrhage following CS?

Mark only one oval.

	1	2	3	4	5	
No, I don't have an approach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Yes, I am very confident in my approach

29. During internship, were your CS surgical skills ever formally assessed in theatre by a senior doctor?

Mark only one oval.

- Yes
 No

30. If so, were you formally accredited as being safe to perform basic CS independently at the end of your Obstetric/Gynaecology block?

Mark only one oval.

- Yes
 No
 Not applicable

31. At the start of your COSMO year, did you feel competent to perform CS surgery independently on uncomplicated CS cases?

Mark only one oval.

	1	2	3	4	5	
Not at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident in my skill

Anaesthesia Section

The following questions relate to your 2 months of training in Anaesthesia during internship.

32. Did you ever do the anaesthetic for a CS with absolutely no senior supervision available?

Mark only one oval.

- Yes
 No

33. Who were the majority of your anaesthetic CS cases supervised by?

Mark only one oval.

- Pre-DA Medical Officer
 Post-DA Medical Officer
 Registrar
 Specialist
 Other: _____

34. Did you receive tutorials during your rotation, and what style of tutorials were received?

Check all that apply.

- No tutorials received
 Informal ad-hoc in-theatre teaching
 Formal in-theatre teaching (following a syllabus)
 Formal lectures
 Simulation centre
Other: _____

35. Did you complete the required number of anaesthetic cases as stipulated by the HPCSA (80 cases performed under supervision consisting of at least 40 general intubated cases, 10 general non-intubated cases and 10 spinal cases)?

Mark only one oval.

- Yes
 No

36. Did you receive a formal assessment during your anaesthetic rotation?

Check all that apply.

- None
- Written test
- Performing a real case in theatre
- Simulation assessment

Other: _____

37. Did you perform pre-operative assessments on patients prior to CS?

Mark only one oval.

	1	2	3	4	5	
Never	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Always

38. Where did you perform the majority of pre-operative assessments on CS patients?

Mark only one oval.

- In the ward
- In theatre holding area
- In theatre
- Not done

39. Did you experience inadequate blocks or failed spinals?

Mark only one oval.

- Yes
- No
- Not applicable - I never performed a spinal on an obstetric patient

40. Were you taught how to manage a failed spinal?

Mark only one oval.

- I was never taught how to manage failed spinals
- I was taught in a simulation centre
- I was taught in theatre on a real case
- Other: _____

41. Did you perform any difficult spinals?

Check all that apply.

- Increased BMI
- Labouring patient
- Spinal abnormalitiesNot applicable

Other: _____

42. Did you perform any general anaesthetics for CS patients?

Mark only one oval.

- None
- 1-2
- 3-5
- >5
- >10

43. What aspects of the pregnant patient's airway did you manage?

Check all that apply.

- Pre-oxygenation
- Bag mask ventilation
- Rapid sequence intubation
- Extubation
- Not applicable - I never managed any aspects of the patient's airway

Other: _____

44. Pregnant patients commonly have difficult airways. Were you taught an approach on how to manage a difficult and failed intubation?

Check all that apply.

- No, I did not have teaching on this
- Yes, I had theoretical teaching on approaches to difficult/failed intubation
- Yes, I had simulation teaching on approaches to difficult/failed intubation
- Yes, I received informal teaching in theatre on approaches to difficult/failed intubation

Other: _____

45. A high spinal is a life-threatening complication if spinal anaesthesia. Were you taught how to manage a high spinal?

Check all that apply.

- No, I did not have teaching on this
- Yes, I had theoretical teaching on management of high spinal
- Yes, I had simulation drills on how to manage this
- Yes, I received informal teaching in theatre on how to approach this
- Yes, I was taught in theatre on a real case of a high spinal

Other: _____

46. Did you manage the hypotensive complications following spinal anaesthesia?

Mark only one oval.

1 2 3 4 5

No, the senior always took over Yes, I was always allowed to manage the complications

47. What principles of managing spinal hypotension were you taught?

Check all that apply.

- Vasopressors
- Wedge insertion
- Assessment of spinal level
- Management of a high spinal
- None, I was not taught how to manage spinal hypotension

Other: _____

48. What principles of managing obstetric haemorrhage during CS were you taught?

Check all that apply.

- Uterotonics
- Tranexamic acid administration
- Inotrope administration
- Blood administration
- None, I was not taught how to manage obstetric haemorrhage

Other: _____

These next questions relate to your confidence in your anaesthetic ability after completion of your 2 month Anaesthetic rotation

49. Do you feel confident in adequately assessing a patient prior to CS?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

50. Do you feel confident in performing a spinal?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

51. Do you feel confident in managing complications from a spinal?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

52. Do you feel confident in performing a rapid intubation sequence in a pregnant patient?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

53. Do you feel confident in converting a spinal to a general anaesthetic in an emergency situation?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

54. Do you feel confident in using the anaesthetic machine for ventilation?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

55. Do you feel confident in checking the anaesthetic machine at your current hospital?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

56. Do you feel confident in managing obstetric haemorrhage during CS?

Mark only one oval.

	1	2	3	4	5	
Not confident at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very confident

Current Situation

The following questions are related to your current situation working as a Community Service Doctor

57. With regards to being the primary surgeon at CS do you currently have senior supervision while performing the procedure?

Mark only one oval.

- Senior is scrubbed in for the case
- Senior is in theatre
- Senior is on the hospital premises
- Senior is available telephonically
- No senior supervision
- Not applicable - I have not been the primary surgeon as a COSMO

58. With regards to giving the anaesthetic for CS, do you have supervision available?

Mark only one oval.

- Senior is in theatre
- Senior is on the hospital premises
- Senior is available telephonically
- No senior supervision
- Not applicable - I have not given an anaesthetic for CS as a COSMO

59. Do you ever perform single operator CS at your current hospital? (A single doctor performs the anaesthetic and surgery for CS)

Mark only one oval.

- Yes
- No
- Not applicable

60. When you are performing the anaesthetic for a CS, are you required to leave the mother unattended and help resuscitate the baby?

Mark only one oval.

- Yes, frequently
- Occasionally, when it is an unexpected neonatal resuscitation
- Very infrequently as the midwife attends to the baby
- Other: _____

61. Do you have access to difficult airway equipment in your theatre?

Check all that apply.

- Bougie
- Short-handled laryngoscope blades
- Video laryngoscope
- Laryngeal masks
- Surgical cricothyrotomy sets
- None of these are available

Other: _____

62. Did you receive outreach visits (before lockdown) from your referral hospitals?

Mark only one oval.

- Yes
- No

63. Who did these outreach visits?

Check all that apply.

- Anaesthetic specialist
- Anaesthetic registrar
- Anaesthetic medical officer
- Obstetric specialist
- Obstetric registrar
- Obstetric medical officer
- Not applicable

Other: _____

64. Do you receive telephonic support on ANAESTHETIC decisions from your referral hospital?

Mark only one oval.

- Yes
- No
- Not applicable, I don't perform anaesthesia as a COSMO
- Not applicable, I have anaesthetic support from my current hospital and don't require "outside" assistance

65. How do you access ANAESTHETIC support currently?

Check all that apply.

- I have access to senior anaesthetic support at my current hospital "Phone a friend"- personal contact who has more anaesthetic knowledge
- Phone a designated person from my referral hospital
- Phone the on-call doctor at my referral hospital
- Unable to access support
- Not applicable- I am not involved in performing anaesthesia as a COSMO

Other: _____

66. Do you receive telephonic support on OBSTETRIC decisions from your referral hospital?

Mark only one oval.

- Yes
- No
- Not applicable, I have Obstetric support from my current hospital and don't require "outside" assistance
- Not applicable, I do not work in obstetrics as a COSMO

67. How do you access OBSTETRIC support currently?

Check all that apply.

- I have access to senior obstetric support at my current hospital "Phone a friend" - personal contact who has more obstetric knowledge
- Phone a designated person at my referral hospital
- Phone the on-call doctor at my referral hospital
- Unable to access support
- Not applicable - I don't work in obstetrics as a COSMO

68. Suggestions for improvement: Please select the options which you feel will improve your skills and knowledge

Check all that apply.

- Visiting doctors performing monthly visits
 - Inreach option, where you can work at a referral hospital for a period of time to upskill
 - Obstetric surgical skills refresher course
 - Anaesthetic obstetric courses at a central location aimed at COSMOS
 - Orientation courses for Obstetrics and Anaesthesia at the beginning of Community Service Year
 - Simulation courses offered which are aimed at improving skills in managing emergencies
 - Online courses
- Other: _____

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