KMCWC NRT Trainee Expectations

Hours: 7am-5pm.
Please wear Kapiolani Medical Center for Women & Children (KMCWC) scrubs which can be obtained daily through the PYXIS in Labor and Delivery on the third floor. Please wear your KMCWC ID at all times. Pick up pagers 610 & 315 from the operators (on the first floor) each morning and return it to them at the end of the day. When available, someone can use the 605 medical student pager if two people are training. Please return it to the appropriate slot in the Neonatology office.

EPIC is set up through the EPIC service desk and you will need your work number to obtain a password. All notes will be written under the “Other” category and the Neonatologist, Neonatal nurse practitioner (NNP), Neonatal hospitalist (NH), and resident will still document their own note under procedures.

The trainees for neonatal resuscitation will be directly supervised by the Neonatologist on the “PUKA” Service. This is the Neonatologist who attends C-sections and high risk deliveries. The PUKA attending will be responsible for the trainees and will make sure that they are included in morning rounds with the appropriate NICU team. The training will include:

1. Attendance at deliveries attended by the PUKA Attending/PUKA Pal and/or residents, who are carrying the primary delivery pager. This pager will be called for C-sections, high risk deliveries and neonatal resuscitations. Trainees will be expected to write a note on EPIC after attending deliveries.
2. Become familiar with the delivery room set-up at KMCWC.
3. Optional attendance of NICU rounds with either the “PONO” or “PILI” teams. Our NICU is divided into two “teaching” teams. Each team consists of a Neonatologist, sometimes a Neonatal Fellow, NH, NNP and residents. The PUKA attending will determine which team you should round with.
4. Participation in the admission of new patients. The PUKA attending is aware of all new admissions and will notify trainees. This will be an opportunity to start peripheral IVs, draw labs and participate in other procedures.
5. Participation in the placement of umbilical lines; trainees will scrub into the procedure when possible and learn how to place stabilization UVC’s. Review how to prep for a sterile procedure (gown & glove). You will not place a deep UVC or UAC but can remain scrubbed to assist.
6. Assisting in intubations, securing the ET tube and looking at the CXR for position of ET tube after intubation.
7. Participation in other procedures such as; drawing venous, capillary or arterial blood gases and obtaining venous or capillary blood specimens.
8. Pairing with NICU RN’s caring for interesting patients; i.e., patients on conventional ventilation, CPAP or high flow nasal cannula, <1000 gram premature babies, feeders/growers requiring isolette support and tube feedings.