

PROTOCOL

Emergency cesarean section: Communication tools to reduce the delay Decision-birth

Abstract

Introduction: In obstetric emergencies, maternal and fetal morbidity and mortality depends in part on the duration of the caesarean emergency decision-birth period. The extension of the timeframes is mostly due to poor communication within the obstetric teams, especially in emergency situations, sources of stress.

Objectives: This work aims to assess the benefits of using two communication tools in obstetric emergencies: color codes and the SBAR (Situation, Background, Assessment, Recommendations) tool. The aim is to know if these tools optimize the caesarean decision-to-emergency delay in order to obtain evidence based recommendations to assist in the training of obstetric students and professionals.

Materials and methods: This research was carried out on Medline databases via Pubmed, Cinahl and the Cochrane Library. Finally, the two studies shortlisted tested the use of color-coding in the case of emergency cesarean sections (observational retrospective studies). For the SBAR tool, four scientific articles were selected.

Results: The two studies experimenting with the use of color codes in the implementation of emergency Caesarean sections demonstrate a significant reduction in the decision-birth delay. As for the SBAR tool, the four selected studies highlight its interest in interprofessional telephone communication.

Conclusion: The "color codes" and "SBAR" communication tools improve interprofessional communication and teamwork in hospital departments facing emergencies. In the obstetric field, they could be very useful to optimize the management of emergency caesarean sections, in particular by reducing the time between the caesarean section and the child's birth.

Key words: Communication tools - caesarean emergency – SBAR - color codes - decision-birth delay.