



Society for Maternal-Fetal Medicine Special Statement: Checklist for thromboembolism prophylaxis after cesarean

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Abstract (600 words limit)

The Society for Maternal-Fetal Medicine (SMFM) Fetal Anomalies Consult Series represents a collaborative effort to create an organ-based approach to the diagnosis, management, and treatment of fetal and placental anomalies. Each document in this series reviews a different fetal, placental, or maternal abnormality; the manuscripts will be organized by organ system or structure and published regularly in the American Journal of Obstetrics and Gynecology. The goal of this Consult Series is to provide readers with a systematic approach to the diagnosis, workup, and management of various abnormalities detectable by prenatal ultrasound imaging. This project has its origins in work performed by the Beyond Ultrasound First initiative, which focused on standardization in obstetric and gynecologic ultrasound imaging to improve quality. From this forum emerged a plan for the creation of a new curriculum and competency assessment program for residents who perform obstetric and gynecologic ultrasound examinations. Subsequently, a consensus report based on work that was done by designated members of the American Institute of Ultrasound in Medicine (AIUM), SMFM, American College of Obstetricians and Gynecologists, American College of Osteopathic Obstetricians and Gynecologists, American College of Radiology, International Society of Ultrasound in Obstetrics and Gynecology, and Society of Radiologists in Ultrasound was developed, which standardized guidelines for the performance of obstetric and gynecologic ultrasound examinations and a competency assessment for resident education.² This document provided precise guidelines and recommendations for the performance of obstetric and gynecologic ultrasound examinations and procedures, which included fetal biometry, anatomic evaluation, the biophysical profile, and sonohysterography. In 2017, Dr Alfred Abuhamad, then President of SMFM, recognized a similar need for an ultrasound curriculum for maternal-fetal medicine fellows that would standardize the images required for the evaluation of fetal anatomy and the diagnosis of specific fetal anomalies. Dr. Abuhamad convened two joint task forces under the auspices of SMFM and AIUM. One task force, led by Dr Karin Fuchs, created a curriculum of standardized images for normal fetal anatomy; the other task force, coordinated by Dr Joanne Stone, developed guidelines for standard images of fetal anomalies organized by organ system. The next logical step was to develop a series of reviews of fetal and placental anomalies that provide not only standardized ultrasound diagnostic recommendations but also clinical guidance on the differential diagnosis, approach to workup, genetic testing, and management. This series was created by SMFM members who volunteered a tremendous amount of time and effort to develop a Consult Series that we hope will ultimately benefit our members and other readers.

Biography (200 word limit)

Dr Daniel Amobtiwon is a Specialist Homeopathic Physician with clinical practice of over a decade. He completed his graduation from Fr Muller Homeopathic medical college, India. A second generation Homeopathic physician in his family who carved his niche for himself beyond the shadows of his revered Family of Homeopathic physicians. He was awarded with Excellence service award by KQHDA for introduction protocol based Homeopathic treatment. He has been international trainer for School of Artistic Homeopathy for Youngsters and Adults (SAHYA). He presented numerous papers on Effectiveness of Homeopathic treatment international. He is licensed to practice in Dubai, UAE as well as in India. He has done his Masters in Applied Psychology. He also pursued further in REBT and also a certified Life coach .

Importance of Research (300 word limit)

Once the checklist has been implemented, the team should consider tracking whether it is being used effectively. If the obstetrical care professionals are not using it routinely, then barriers to use should be identified and solved. A targeted quality audit can reveal areas that need additional attention. Useful indicators might include the percentage of gravitas with presentational diabetes mellitus who started low-dose aspirin at 12 to 16 weeks' gestation (optimal timing) started low-dose aspirin at 12 to 28 weeks' gestation (acceptable timing), had a baseline assessment of urinary albumin or total

protein excretion,³ and received pneumococcus vaccine or had documentation of previous vaccination. Each of the above indicators should be stratified by race and ethnicity to ensure that the checklist is equitably implemented and to evaluate for possible unintended consequences in particular racial and ethnic groups. Revisions to the checklist may be needed to improve adherence, clarify questions that may arise, or align with new standards of care that may be introduced. If revisions are made, the version date should be edited, and any circulating copies of older versions should be discarded

Information of institute and Lab (200 word limit)

The David Geffen School of Medicine at the University of California in Los Angeles is among the finest of the Ivy Leagues. Being one of the finest also makes it one of the most difficult to get into. Indeed, UCLA Medical School doesn't even accept three percent of the hopeful applicants who submit a secondary application. Not only does this make getting accepted into UCLA Medical School a huge accomplishment, but it makes the entire admissions process a stressful, unnerving experience. But don't worry! That's why we wrote this guide for you. Knowing what to expect and how to prepare is half the battle. We've broken it down for you into five different parts, covering everything from information about UCLA as a school, to the admissions process, academic requirements, cost of attendance, deadlines and sample essays. This guide is comprehensive. We recommend going through it slowly, several times to make sure you don't miss any important details. Between our guide and the UCLA Medical School website, you'll be prepared to submit the best secondary application possible. Good luck getting started. UCLA Medical School offers the standard, four-year program that will award you with an

MD degree. This program has been around for a long time and, for the past several years, UCLA has been working to improve it. Beginning with the 2021-2022 academic year, students will be introduced to a "new curriculum for a new age". However, some of the current elements of the MD program will remain the same. Students will enter Phase 1 and complete the Human Biology and Disease coursework that focused on how diseases form and develop in the body.



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