

Table 2: Training and Lifelong Learning to Develop Consultation Skills

Subtheme	Neo example quote	MFM example quote
Communication skills		
Informal training	I think it's a lot of observation definitely. A lot of years of training. Modeling others, watching, seeing them do it. And then trying to teach it. I think when you teach things, I think you learn it better yourself, so I think there's been a lot of teaching for me and like incoming fellows and new, you know, residents who are coming on and both, obviously here in Mount Sinai but also in our regional and local boot camp session. (N4)	I definitely didn't learn it, to the degree that I feel like I understand it now in residency. In fellowship, I, we had a lot of, um, this situation, unfortunately. And so I, um, started by just like listening to my attendings doing it. And then, you know, as you get more senior, I would start doing it by myself with the attending in the room, but sort of leading the conversation. Um, so, you know, in training, but like in real time, not like I ever did like a sim or like talking to somebody through a periviable situation. (M13)
Formal training	And then more recently, I've done trainings on how to have professional communication with with patients, through our our neo talk course here at Mount Sinai, and through a course I took at Harvard. (N1)	I would say some of that was actually formally taught. We even just had like a conference yesterday about perinatal loss that included some of some of those lessons. (M8)
Knowledge of periviability		
Data Source	Every year we update our outcome data here at Mount Sinai I so I have a sense of what the numbers are for our unit in the past few years and also what is available at VON. I also follow the literature through up to date and through the AAP and the NICHD and their calculators and outcome projectors. (N1)	I would often use the peri viable NICHD calculator. I didn't really usually get into the specifics of percentages when I was talking to patients, but sometimes I think it's good to go into it ... with a ballpark idea of what are the chances for this baby, depending on the baby's weight or the baby's sex or other comorbidities that are going on. (M8)
Data Accuracy	One of the great parts about being in an academic program is you easily have access to the most updated information just through conferences and through learning. But also, I have to say through reading and making sure that you're reviewing whatever literature is out there. Attending conferences, things like that. (N7)	Yeah, I mean, for like the like maternal fetal medicine side of it, so the obstetric side of what's available, like we all just kind of stay up to date with the literature. But the actual statistics about outcomes for the babies, like that I defer to the NICU attending. And so I hope they're up to date, but I don't I didn't check on that. (M12)