General Objectives
Upon completion of the rotation, the resident should have acquired a basic understanding of the principles of diagnosis, management, and follow up of patients with gynaecologic intra-epithelial neoplasia. Included in this three-month rotation will be the exposure to the colposcopy coordinating centre and its computerized data collection retrieval system.

Sessions have been established with the Department of Cytology and the Department of Pathology for the resident to acquire the basic knowledge in cytology and histologic processing of gynaecologic specimens. On a weekly basis, sessions to review all cytology and histopathology specimens of new patients evaluated at a colposcopy clinic have been arranged. In addition, similar correlations will be acquired for those patients seen in follow up after a biopsy procedure. This correlation of cytology, colposcopy, and histopathology will enable the resident to acquire practical knowledge of cytology and histopathology in order for him/her to utilize such knowledge in the appropriate application of colposcopy. In addition, the resident will similarly correlate operative specimens, including laser or cold knife conizations and hysterectomies, etc. performed on patients with intraepithelial neoplasia.

Specific Objectives

Medical Expert / Clinical Decision Maker
Definition
Colposcopists possess a defined body of knowledge and procedural skills which are used to collect and interpret data, make appropriate clinical decisions, and carry out diagnostic and therapeutic procedures within the boundaries of their discipline and expertise. Their care is characterized by up-to-date, ethical, and cost-effective clinical practice and effective communication in partnership with patients, other health care providers, and the community. The role of medical expert / clinical decision maker is essential to the function of colposcopists and draws on the competencies included in the roles of scholar, communicator, health advocate, manager, collaborator, and professional.

General Objectives
The colposcopy/pathology resident must demonstrate:
- diagnostic and therapeutic skills for effective and ethical patient care
- the ability to access and apply relevant information to clinical practice
- effective consultation services with respect to patient care and education
- recognition of personal limitations of expertise, including the need for appropriate patient referral and continuing medical education

Specific Objectives
In order to achieve these objectives, the colposcopy/pathology resident must demonstrate both knowledge (cognitive skill) and technical ability in the approach to problems in the practice of colposcopy.

**Cognitive Skills**
The fully trained colposcopy/pathology resident will possess knowledge of the following clinical conditions or problems encountered commonly in the practice of colposcopy. This list should be considered in its totality, and not be considered as comprehensive for all disorders in the practice of this specialty.

An **extensive level of knowledge** is required for the following:
- pelvic anatomy (clinical and histologic)
- interpretation and management of cytology of the genital tract
- dermatologic conditions of the genital tract
- vulvar intraepithelial neoplasia
- vaginal intraepithelial neoplasia
- cervical intraepithelial neoplasia
- human Papilloma viral conditions
- invasive cancer of the female genital tract (vulva, vagina, cervix)
- HPV
- known risk factors for pre-malignant and malignant gynecologic conditions

A **working level of knowledge** is required for:
- embryology of the genital tract
- effects of Diethylstilboestrol (DES) exposure

**Technical Skills**
The colposcopy/pathology resident must acquire a wide variety of technical skills in the practice of colposcopy. The following is a detailed list of the required technical skills, including surgical skills. The list should be considered in its totality and not be considered as exhaustive for all disorders in practice.

**Diagnostic Procedures and Techniques**
The colposcopy/pathology resident will demonstrate an understanding of the indications, risks and benefits, limitations, and role of the following investigative techniques specific to the practice of colposcopy and will be competent in their interpretation.

- Colposcopic assessment of the cervix, vagina and vulva

**Serology and Microbiology**
- culture and serology for sexually transmitted diseases

**Cytology and Histopathology**
- cervical cytology
- vulvar and vaginal biopsy
- colposcopy with directed cervical biopsies, including cervical polypectomy
• endocervical curettage
• endometrial biopsy

The colposcopy/pathology resident will also be able to identify the gross and microscopic characteristics of vulvar dermatoses, genital tract neoplasia, benign pre-malignant and malignant), and trophoblastic and placental disease.

**Therapeutic Technologies**

The fully-trained colposcopy/pathology resident will have a working knowledge of the physics and technological applications of the following therapeutic modalities, including risks, benefits, and complications of these approaches:

**Laser**

**Electrosurgical LEEP**

**Surgical Skills**

• cervical conization

**COMMUNICATOR**

**Definition**

To provide humane, high-quality care, colposcopists establish effective relationships with patients, other physicians, and other health professionals. Communication skills are essential for obtaining information from, and conveying information to patients and their families. Furthermore, these abilities are critical in eliciting patients’ beliefs, concerns, and expectations about their illnesses, and for assessing key factors impacting on patients’ health.

**General Obstetrics**

The colposcopy/pathology resident must be able to:

• establish a therapeutic relationship with patients and their families characterized by understanding, trust, empathy, and confidentiality
• obtain and synthesize relevant history from patients, families, and/or community
• discuss appropriate information with the patient, her family, and other health care providers that facilitates optimal care. This also implies the ability to maintain clear, accurate, timely and appropriate records.

**Specific Objectives**

To achieve these objectives as a communicator, the colposcopy/pathology resident must demonstrate:

• the ability to obtain informed consent for medical and surgical therapies
• the ability to record accurately and succinctly data collected from patients, laboratory tests and radiological studies and to communicate (oral or written) conclusions based on these data to patients and their families, referring physicians and other involved health care personnel
• evidence of good interpersonal skills when working with patients, families, and other members of the health care team
• an awareness of the unique personal, psychosocial, cultural and ethical issues that
surround individual patients with gynaecologic problems

- the ability to prepare and present information to colleagues and other trainees (if applicable) both informally (e.g. ward rounds) and formally (e.g. grand rounds, scientific meetings)

**LEADER**

**Definition**

Colposcopists function as leaders and managers when they make everyday practice decisions involving resources, co-workers, tasks, policies, and their personal lives. They do this in the settings of individual patient care, practice organizations, and in the broader context of the health care system. Thus, specialists require the abilities to prioritize and effectively execute tasks through teamwork with colleagues, and make systematic decisions when allocating finite health care resources. Colposcopists can also assume a managerial role through involvement in health care administration and in professional organizations.

**General Objectives**

The colposcopy resident should be able to:

- manage resources effectively to balance patient care, learning needs and outside activities
- allocate finite health care resources wisely, i.e. liquid based cytology, HPV screening
- work effectively and efficiently in health care organization
• utilize information technology to optimize patient care, life-long learning and practice administration

Specific Objectives
To achieve these objectives, the colposcopy resident should:
• be able to effectively manage a clinical and surgical practice, including the follow up of normal and abnormal test results
• demonstrate an understanding of the principles of quality assurance in the practice of gynaecology, and be able to conduct morbidity and mortality reviews
• demonstrate an understanding of population-based approaches to the provision of medical care, including the costs and benefits of screening tests for gynecologic disease.
• effectively the triage of emergency problems,
• demonstrate an understanding and principles of quality assurance in the practice of colposcopy through exposure to the colposcopy co-ordinating centre and its computerized data collection retrieval system

HEALTH ADVOCATE
Definition
Colposcopists must recognize the importance of advocacy activities in responding to the challenges represented by those social, environmental, and biological factors that determine the health of patients and society. Health advocacy is an essential and fundamental component of health promotion that occurs at the level of the individual patient, the practice population, and the broader community. Health advocacy is appropriately expressed both by the individual and collective responses of gynaecologists in influencing public health and policy.

General Objectives
The fully-trained colposcopy/pathology resident will:
• identify the important determinants of health affecting patients
• contribute effectively to improved health of patients and communities
• recognize and respond to those issues where advocacy is appropriate

Specific Objectives
In order to achieve these objectives as an advocate, the colposcopy/pathology resident should be able to:
• identify the important determinants of health for an individual patient, highlight which determinants are modifiable, and adapt the treatment approach accordingly
• make clinical decision for an individual patient, when necessary, balancing her needs against the needs of the general population and against the available resources
• facilitate medical care for patients even when that care is not provided personally or locally or when that care is not readily accessible
• advise patients about the local and regional resources available for support, education,
• and rehabilitation
• discuss the important function and role of various professional organizations, including the Society of Obstetricians and Gynaecologists of Canada (SOGC) in the support of colposcopists in this country and in the provision and maintenance of optimal health care for Canadian woman

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