

# OBJECTIVES FOR PGY2 CORE GYNECOLOGY ROTATION

## DEFINITION

A specialist Obstetrics and Gynaecology is a physician with special education and expertise in the field of women's health and reproduction. He/she has the appropriate medical, surgical and obstetrical and gynaecologic knowledge and skills for the prevention, diagnosis and management of a broad range of conditions affecting women's general and reproductive health. As well as providing clinical care and education in normal and complicated obstetrics and gynaecology, he/she may contribute significantly to research.

Two levels of knowledge and proficiency are referred to in this document.

An **extensive level** refers to an in-depth understanding of an area, from basic science to clinical application, and possession of skills to manage independently a problem in the area.

A **working level** indicates a level of knowledge sufficient for the clinical management of a condition, and/or an understanding of an approach or technique sufficient to counsel and recommend it, without having personally achieved mastery of that approach or technique.

## GENERAL OBJECTIVES

Upon completion of training, the resident is expected to be a competent specialist capable of assuming an independent consultant's role in gynecology. He/she must have acquired the necessary knowledge, skills and attitudes for appropriate and competent management of a wide range of gynecological conditions. The resident must have the ability to develop the trusting and effective partnership with female patients necessary to achieve successful outcomes in gynecologic health and illness throughout a woman's life.

The resident must also demonstrate the knowledge, skills and attitudes relating to gender, culture and ethnicity pertinent to reproductive health care, and have the ability to appropriately incorporate gender, culture, and ethnic perspectives into research methodology, data presentation, and analysis. Additionally, the resident must have an understanding of the impact of various factors; including fear, anxiety, depression, socioeconomic status and domestic violence on pain, patient satisfaction and treatment outcomes.

Upon completion of his/her training, the resident in gynecology at a PGY2 level must have a working understanding of the general physical and psychological health of women as it pertains to reproduction. This includes an understanding of the normal function and the pathological processes and diseases that affect the female external genitalia and the pelvic viscera (including the vagina, cervix, uterus, fallopian tubes, and ovaries) the lower urinary tract,

and the bowel. This includes an understanding of embryology and normal female development, and the unique biochemistry, physiology, anatomy, and gross and microscopic pathology of the genitourinary tract and neuroendocrine axis.

Management of a patient with a gynecological condition will require that the resident has the ability to:

1. take a history of the patient's problem
2. conduct a complete physical examination
3. demonstrate an understanding of the value and significance of laboratory, radiological and other diagnostic studies
4. discuss the relative merits of various treatment alternatives
5. list and discuss the indications, contraindications, types, variations, complications, and risks and benefits of surgical and non-surgical treatments
6. discuss the significance of perioperative and postoperative problems that might arise following surgery on the genitourinary tract

### **PGY2 General Gynecologic Objectives**

Upon completion of the second PGY2 rotation in general gynaecology, the resident will have acquired the following competencies and will function effectively as:

#### **1. MEDICAL EXPERT/CLINICAL DECISION MAKER**

The resident must demonstrate both knowledge (cognitive skill) and technical ability in the approach to problems in the practice of general gynaecology.

#### **COGNITIVE SKILLS**

The PGY2 general gynaecology resident will possess knowledge of the following clinical conditions or problems encountered commonly in the practice of general gynaecology. This list should be considered in its totality and not be considered as comprehensive for all disorders in the practice of this specialty.

#### **Extensive knowledge is required for the following:**

##### **a. Pediatric and Adolescent Gynaecology**

Pathophysiology, investigation, diagnosis, management and/or possible psychosocial ramifications of:

- abnormal vaginal discharge and bleeding in children or adolescents
- medico-legal aspects of consent and confidentiality specific to this age group
- contraception

- b. Reproduction and Endocrine Disorders**  
Normal reproductive physiology and pathophysiology, investigation, diagnosis, and/or management of:
- menstrual irregularity
  - dysfunctional uterine bleeding
- c. Human Sexuality**
- normal sexual function
- d. Contraception**
- methods of contraception; including the various mechanisms of action, the indications, contraindications, risks and benefits and possible complications for use of each method
  - strategies to promote adherence to contraceptive methods and encourage safer sex behaviors
- e. Violence against Women**
- identify features of abused women (both physical and psychological)
  - knowledge of appropriate protocols for the acute medical management of rape victims, including post-coital contraception.
  - appropriate referral for legal assistance and psychological counselling for victims of abuse and rape
- f. Infertility**
- multiple etiologies of infertility
  - appropriate indications for subspecialty referral
- g. Pregnancy Loss or Termination**  
Pathophysiology, investigation, diagnosis, and/or management (including counselling and/or referral for grief support) of:
- abortion in the first trimester
  - ectopic pregnancy
- h. Gynaecologic Infections**  
Epidemiology, pathophysiology, investigation, diagnosis, and/or management of:
- vaginal and vulvar infections
  - sexually transmitted infections
  - acute pelvic inflammatory disease
- i. Urogynaecology**  
Pathophysiology, investigation, diagnosis and/or management of :
- acute and recurrent urinary tract infections
  - postoperative voiding dysfunction
- j. Other Non-Malignant Gynaecologic Conditions**

Pathophysiology, investigation, diagnosis and management of:

- benign pelvic masses, including rupture and torsion
- acute and chronic pelvic pain
- endometriosis
- surgical wound hematoma and infection (including abscess)

**k. Pre-operative and Post-operative Care**

- perioperative risk factors and their assessment
- principles and appropriate use of nutritional support
- principles and appropriate use of narcotics and NSAIDs for postoperative pain control
- management of postoperative medical and surgical complications, including indications for consultation with other specialities

**Working level of knowledge is required for the following:**

**a. Pediatric and Adolescent Gynaecology**

Pathophysiology, investigation, diagnosis, management and/or possible psychosocial ramifications of:

- developmental anomalies
- delayed puberty

**b. Reproduction and Endocrine Disorders**

Pathophysiology, investigation, diagnosis and/or management of:

- amenorrhea (primary and secondary)
- galactorrhea
- hirsutism
- polycystic ovarian disease
- menopause

**c. Human Sexuality**

- etiology and management dyspareunia and vaginismus

**d. Infertility**

- indications for and interpretation of first phase evaluations, ie. Semen analysis, HSG
- the effectiveness and complications of current standard treatments for infertility

**e. Pregnancy Loss or Termination**

Pathophysiology, investigation, diagnosis and/or management (including counselling and/or referral for grief support) of:

- intrauterine fetal demise in the second trimester
- termination of pregnancy in the first trimester
- termination of pregnancy in the second trimester

- f. **Urogynaecology**
  - indications and limitations of urodynamic testing
  - pathophysiology, investigation, diagnosis and treatment of:
    - pelvic organ prolapse, including pessary care
    - stress urinary incontinence
    - urge urinary incontinence
  
- g. **Gynaecologic Oncology**
  - principles of colposcopy, including its limitations and the indications for referral for colposcopic assessment
  
- h. **Other Non-Malignant Gynaecologic Conditions**  
Pathophysiology, investigation, diagnosis and management of:
  - colorectal disease; including diverticular disease, colon and rectal cancer, inflammatory bowel disease and appendicitis
  - breast conditions; including benign breast disease, breast cancer screening

### **TECHNICAL SKILLS**

The PGY2 resident must acquire a wide variety of technical skills in the practice of general gynaecology. The following is a detailed list of required technical skills, including surgical skills. This list should be considered in its totality and not considered as exhaustive for all disorders in general gynaecology.

### **Diagnostic Procedures and Techniques**

The PGY2 resident will demonstrate an understanding of the indications, risks and benefits, limitations and role of the following investigative techniques specific to the practice of general gynaecology and will be competent in their interpretation.

- a. **Serology and Microbiology**
  - serial HCG assays in the diagnosis of failing or ectopic pregnancy
  - tumour markers; including Ca-125, HCG and alpha-fetoprotein
  - culture and serology for sexually transmitted diseases
  - wet mount of vaginal discharge
  - urinalysis, urine microscopy and urine culture
  
- b. **Imaging**
  - transabdominal ultrasound for gynaecologic disease
  - transvaginal ultrasound for gynaecologic disease
  - CT and MRI of pelvis
  - Doppler studies and angiography for thromboembolic disease
  
- c. **Cytology and Histopathology**
  - cervical cytology
  - cervical polypectomy
  - endocervical curettage

- endometrial biopsy
- vulvar and vaginal biopsy

### **Therapeutic Technologies**

The PGY2 resident will have a working knowledge of the physics and technological application of the following therapeutic modalities; including the risks, benefits and complications of these approaches.

- electrocautery
- global endometrial ablation

### **Surgical Skills**

The list of surgical skills is divided into categories reflecting the frequency with which these procedures are encountered during residency training in general gynaecology, as well as in the general practice of the specialty. The categorized list also reflects the level of technical skill competency for each surgical procedure expected upon completion of the second PGY2 rotation in gynaecology.

### **SURGICAL PROCEDURES LIST A**

The PGY2 resident must be competent to independently perform the following procedures in List A. He/she should be able to manage a patient prior to, during and after all of the following procedures. The resident must be able to discuss with the patient the risks, benefits and complications of these surgical treatments, as well as any available non-surgical treatment alternatives and the consequences of the absence of surgical treatment.

#### **Open Gynaecologic Procedures**

- pfannensteil incision
- vertical midline incision

#### **Vaginal Gynaecologic Procedures**

- drainage and marsupialization of Bartholin's gland abscess

#### **Endoscopic Procedures**

- diagnostic laparoscopy (including assessment of tubal patency)
- laparoscopic sterilization
- diagnostic hysteroscopy

#### **Other Gynaecologic Procedures**

- dilatation and curettage for incomplete abortion, therapeutic abortion and dysfunctional uterine bleeding
- fractional D&C for postmenopausal bleeding
- insertion and removal of an intrauterine contraceptive device
- fitting of a diaphragm

### **Surgical Procedures List B**

The PGY2 resident in general gynaecology will understand and be able to perform with assistance the following procedures in List B. The resident will be able to explain the indications for each of these procedures, as well as the perioperative management and complications.

#### **Open Gynaecologic Procedures**

- total abdominal hysterectomy
- salpingo-oophorectomy
- oophorectomy
- ovarian cystectomy

#### **Vaginal Gynaecologic Procedures**

- vaginal hysterectomy
- cervical conization

#### **Endoscopic Procedures**

- salpingectomy and linear salpingotomy for management of ectopic pregnancy  
laparoscopic lysis of adhesions
- cauterization of endometriosis
- global endometrial ablation

## **2. COMMUNICATOR**

As Communicators, gynaecologists effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.

The junior resident in gynaecology must be able to:

- develop rapport, trust, and ethical therapeutic relationships with patients and families
- accurately elicit and synthesize relevant information and perspectives of patients and families, colleagues and other professionals
- accurately convey relevant information and explanations to patients and families, colleagues, and other professionals
- develop a common understanding on issues, problems, and plans with patients and families, colleagues, and other professionals to develop a shared plan of care
- convey effective oral and written information about a medical encounter (including the ability to maintain clear, accurate, timely and appropriate records)
- prepare accurate, concise, and complete operative notes

### **3. COLLABORATOR**

As collaborators, gynaecologists effectively work within a healthcare team to achieve optimal patient care.

The junior resident in gynaecology must be able to:

- participate effectively and appropriately in an inter-professional healthcare team
- effectively work with other health professionals to prevent, negotiate, and resolve inter-professional conflict

### **4. LEADER**

The PGY2 resident must acquire the abilities to prioritize and effectively execute tasks through teamwork with colleagues and make appropriate decisions when allocating resources.

#### **GENERAL OBJECTIVES**

- manage resources effectively to balance patient care, learning needs and outside activities
- work effectively and efficiently in a health care organization
- utilize information technology to optimize patient care, life-long learning.

#### **SPECIFIC OBJECTIVES:**

To achieve these objectives as a leader, the resident should:

- 1 effectively manage the birth unit including minimizing patient wait times
- 2 triage emergency problems
- 3 be involved in morbidity and mortality reviews.

### **5. HEALTH ADVOCATE**

Gynecologists 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 gynecologists in influencing public health and policy.



### **GENERAL OBJECTIVES**

The fully-trained gynecologist 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:**

1. The PGY2 resident will identify the important determinants of health for individual patients
2. Make clinical decisions for an individual patient balancing her needs against the needs of the general population against the available resources.
3. Facilitate medical care for patients even when care is not provided personally or locally or when that care is not readily accessible, i.e. therapeutic abortion.
4. Advise patients about local and regional resources available for support, education, and rehabilitation.
5. Discuss the important function and role of various professional organizations, including the Society of Obstetricians and Gynaecologists of Canada in the support of gynecologists in the provision and maintenance of optimal health for Canadian women.

## **6. SCHOLAR**

Gynecologists must engage in a lifelong pursuit of mastery of their domain of professional expertise. They must constantly critically evaluate and modify their clinical practice in the context of new information, usually in the form of clinically relevant research. They recognize the need to be continually learning and appropriately integrating research findings into clinical practice, while modeling these competencies for others. Through their scholarly activities, they contribute to the generation, collection, appraisal, understanding, and dissemination of accurate and relevant health care knowledge for women, and facilitate the education of their colleagues, students, patients, and others.

### **GENERAL OBJECTIVES:**

- be able to critically appraise sources of medical information and appropriately integrate new information into clinical practice
- facilitate patient and peer education placing new research findings in appropriate and clinically relevant context.

### **SPECIFIC OBJECTIVES:**

1. identify gaps in personal knowledge and skill and develop strategies to correct them by self directed reading, discussion with colleagues, and on-going procedural experience
2. identify gaps in knowledge or skill within the field of gynecology to generate the clinical questions that will drive research
3. understand the basic principles of basic and applied clinical research, especially epidemiology and biostatistics
4. be able to critically appraise and summarize the literature on a given subject and judge whether a research project or publication is sound, ethical, unbiased, and clinically valuable
5. use medical research appropriately in clinical care by appropriately adapting research findings to the individual patient situation

## **7. PROFESSIONAL**

Gynecologists have a unique societal role as professionals with a distinct body of knowledge, skills, and attitudes dedicated to improving the health and well-being of women. They are committed to the highest standards of excellence in clinical care and ethical conduct, and to continually perfecting mastery of their discipline.

### **GENERAL OBJECTIVES**

The fully-trained Gyne PGY2 resident must:

- deliver the highest quality of medical care with integrity, honesty, compassion, and respect
- exhibit appropriate personal and interpersonal professional behaviours
- practice medicine in a way that is consistent with the ethical obligations of a physician

### **SPECIFIC OBJECTIVES**

In order to achieve these general objectives in the role of a professional, the Gyne PGY2 resident must:

- i. foster a caring, compassionate and respectful attitude towards patients, families, and other members of the health care team
- ii. provide medical care that is ethical, and seek advice or second opinion appropriately in ethically difficult situations

- iii. monitor patients appropriately and provide appropriate follow up medical care, particularly after starting a new treatment or following a surgical procedure
- iv. maintain patient confidentiality at all times
- v. complete reports, letters and summaries in a timely fashion and maintain medical records that are consistently accurate, informative and legible
- vi. understand medical protective procedures and the role of the Canadian Medical Protective Association in areas of patient-physician dispute
- vii. be able to deal with professional intimidation and harassment
- viii. show self-discipline, responsibility and punctuality in attending to ward duties, in the operating room, and at meetings and other activities, and be a moral and ethical role model for others
- ix. be able to appropriately delegate clinical and administrative responsibilities
- x. have the ability to balance professional and personal life

NOTE: CBD Curriculum Map and EPAs - <https://med.uottawa.ca/obsgyne/postgraduate-education/residency-training-program/competency-based-medical-education>

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