OBJECTIVES FOR PGY2 CORE OBSTETRICS ROTATION

DEFINITION

A specialist in Obstetrics and Gynaecology is a physician with special education and expertise in the field of women’s health and reproduction. They have 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, they 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 obstetrics. They must have acquired the necessary knowledge, skills and attitudes for appropriate and competent management of a wide range of obstetrical conditions. The resident must have the ability to develop the trusting and effective partnership with patients necessary to achieve successful outcomes in normal and complicated pregnancies.

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 obstetrics 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 embryology and normal female development, and the unique biochemistry, physiology, anatomy, and gross and microscopic pathology of the genitourinary tract and neuroendocrine axis. Specifically,
there must be a complete understanding of normal and abnormal changes in physiology and anatomy occurring in the pregnant and postpartum states.

Management of a patient with an obstetric 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 OBSTETRICS OBJECTIVES

This rotation is intended to provide the resident with a clinical opportunity to progress beyond a working level of knowledge to an in-depth understanding of maternal and fetal physiology, antepartum, intrapartum and postpartum care. Technical skill acquisition will be an integral part of the rotation experience.

1. MEDICAL EXPERT / CLINICAL DECISION MAKER

The PGY 2 resident will acquire 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 his/her level of training.

Extensive knowledge is required for the following:

a. Antepartum Care
   • maternal and fetal physiology
   • fetal development
   • antepartum assessment of normal pregnancy
   • antepartum fetal surveillance in normal pregnancy
   • effects of psychosocial conditions on maternal and fetal health

b. Obstetric Complications
The pathophysiology, prevention, investigation, diagnosis, prognosis and/or management of:

- preterm labour
- term and preterm premature rupture of membranes
- antepartum hemorrhage
- post dates pregnancy
- fetal demise
- gestational hypertension
- gestational diabetes

**c. Intrapartum Care:**
- anatomy, physiology, and mechanisms of normal labour
- anatomy, physiology, and mechanisms of normal vaginal delivery
- assessment of labour progress
- indications for, methods of and complications of augmentation of labour
- intrapartum assessment of maternal health
- intrapartum assessment of fetal health
- indications for, method and potential complications of labour induction

**d. Obstetrics Delivery:**
- indications for assisted vaginal delivery
- indications for caesarean section
- risks and benefits of vaginal delivery after previous caesarean section

**e. Postpartum Care:**
- etiology and management of postpartum hemorrhage: early and delayed
- management of shock
- etiology and management of sepsis
- breastfeeding, benefits and complications
- family planning
- understanding of the risk factors for postpartum depression

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

**a. Antepartum Care**
- genetic screening, testing, and counselling
- effects of underlying medical and surgical conditions on fetal and maternal health and management of the same
- antepartum surveillance in high risk pregnancies

**b. Obstetric Complications**
The pathophysiology, prevention, investigation, diagnosis, prognosis and/or management of:
- diet controlled and insulin dependent diabetes, antepartum management
- multiple gestation: twins, monochorionic and dichorionic, triplets & higher
order multiple gestations
• fetal growth restriction
• viral infections in pregnancy

c. **Intrapartum Care:**
• management of shoulder dystocia
• management of cord prolapse
• management of in intrapartum seizure disorder
• management of anaesthesia in labour
• apgar scoring
• intrapartum infection

d. **Obstetric Delivery:**
• recognition and management of a non-vertex presentation
• assisted vaginal delivery: mid-cavitary or rotational forceps
• management of the entrapped head at caesarean section

e. **Postpartum Care:**
• venous thrombolic event, diagnosis and management
• postpartum wound complications, i.e. wound dehiscence

**TECHNICAL SKILLS**

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 Obstetrics & Gynaecology, and will be competent in their interpretation:

a. **Serology and Microbiology:**
• maternal serum screening for aneuploidy and neural tube defects
• screening for Group B streptococcus in pregnancy
• culture and serology for sexually transmitted diseases
• wet mount of vaginal discharge
• urinalysis, urine microscopy, and urine culture

b. **Imaging:**
• screening
• biophysical profile & Doppler flow studies
• Doppler studies, V/Qscans and angiography for thromboembolic disease
• alloimmunization

c. **Cytology, Histopathology:**
• cervical cytology

d. **Other Assessments:**
fetal assessment: non-stress test, contraction stress test, fetal scalp pH
determination
- Bishop’s score
- cervical ripening/induction options with skills in Prostin, cervidil and Foley
catheter placement

e. **Therapeutic Technologies:**
- electrocautery

**Obstetric Procedures:**

a. The PGY2 resident must be competent to independently perform the following
   procedures and discuss with the patient the risks benefits and complications of
   these interventions as well as any available non-surgical treatment alternatives
   and the consequences of the absences of the procedure:
   - spontaneous vaginal delivery
   - episiotomy & repair
   - artificial rupture of membranes
   - application of scalp electrode

b. The PGY2 resident will understand and be able to perform with supervision:
   - repair of perineal and vaginal tears including 3rd & 4th degree tears and
cervical lacerations
   - vacuum extraction
   - low transverse caesarean section, primary and repeat
   - abdominal delivery of multiple gestation
   - manual removal of a placenta
   - management of shoulder dystocia, cord prolapse, and antepartum
   hemorrhage
   - insertion of IUPC
   - amnioinfusion

c. The PGY2 resident will understand but may not have the opportunity to see:
   - low vertical or classical caesarean section
   - vaginal breech delivery
   - repair of would dehiscence
   - endotracheal intubation

2. **COMMUNICATOR**

Communication skills are essential for obtaining information from and conveying
information to patients and their families. Furthermore, these abilities are critical to
eliciting patients’ beliefs, concerns, and expectations about their illness and are also
key factors impacting patient’s health.
To provide humane, high-quality care, obstetricians 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 Objectives**

The OB PGY2 resident in obstetrics must be able to:

- establish therapeutic relationships 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 health care. This also implies the ability to maintain clear, accurate, timely and appropriate records

**Specific Objectives:**

To achieve these objectives as a communicator, the OB PGY2 resident must demonstrate:

1. ability to obtain informed consent for medical and surgical therapies
2. the ability to record accurately and succinctly data collected from patients, laboratory tests and radiological studies
3. the ability to communicate (oral or written) conclusions based on these data to patients and their families, referring physicians and other involved health care personnel
4. 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 obstetric problems
5. 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)
6. the ability to prepare accurate, concise and complete operative notes

3. COLLABORATOR

PGY2 residents must learn to effectively and respectfully work with senior residents, consultant Obstetricians, family doctors, midwives and specialists in other fields; anaesthesia and diagnostic imaging.

GENERAL OBJECTIVES

The PGY2 resident must be able to consult effectively with other physicians and with other health care providers and contribute effectively to a multidisciplinary health care team.

SPECIFIC OBJECTIVES

To achieve these objectives as a collaborator, the resident must be able to:

1. function competently in the initial management of patients with conditions that fall within the realm of other medical or surgical specialties

2. demonstrate the ability to function effectively and, where appropriate, provide leadership, in a multidisciplinary health care team, showing respect, consideration and acceptance of other team members and their opinions while contributing personal specialty-specific expertise

3. identify and understand and respect the significant roles, expertise, and limitations of other members of a multidisciplinary team required to optimally achieve a goal related to patient care, medical research, medical education or administration

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

Obstetricians 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 obstetricians in influencing public health and policy.

GENERAL OBJECTIVES

The fully-trained obstetrician 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 obstetricians in the provision and maintenance of optimal health for Canadian women.

6. SCHOLAR

Obstetricians 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 ongoing procedural experience
2. identify gaps in knowledge or skill within the field of obstetrics 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

6. PROFESSIONAL
Obstetricians 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 OB 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 OB 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 identify unprofessional behavior including intimidation and harassment and address this through the appropriate avenues

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


Last Revised: September 2021