

# OBJECTIVES FOR UROGYNECOLOGY AND PELVIC RECONSTRUCTIVE SURGERY - (SENIOR RESIDENT)

**Definition:** Urogynecology is an integral part of the gynecology evaluation and management of a patient with pelvic floor dysfunction.

## Medical Expert

### **General Objectives**

Upon completion of this sub-specialty rotation, the urogynecology resident will have acquired the skills and expertise allowing him/her to function effectively as a professional and medical expert. The resident must demonstrate:

A working knowledge of pelvic anatomy and physiology as it relates to urinary and anal incontinence and pelvic support

- diagnostic and therapeutic skills for effective and ethical care of patients with urogynecologic concerns
- the ability to access and apply relevant information in clinical practice
- effective consultation skills with respect to patient care and education
- a recognition of personal limitations of expertise, including the need for appropriate patient referral

### **Specific Objectives**

In order to achieve the objectives, the urogynecology resident must demonstrate both knowledge (cognitive skill) and technical ability in the approach to problems in the practice of urogynecology. They must demonstrate effective use of all CanMeds competencies relevant to the practice of urogynecology.

1. The urogynecology resident will acquire, apply and maintain clinical knowledge relevant to clinical conditions or problems encountered commonly in the practice of urogynecology. 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 knowledge** is required for the following:

- surgical anatomy of the pelvic floor, including genital, urinary, colorectal, anal, skeletal myofascial elements, and understand the pathologic variance
- functional anatomy and physiology of the continence mechanisms of the urethra and anus
- pathophysiology, investigation, diagnosis and/or management of: stress urinary incontinence and urodynamic stress incontinence, urge urinary incontinence, and detrusor over-activity

- voiding dysfunction, including postoperative and postpartum urinary retention, bladder outlet obstruction, and detrusor hypertonia
- investigation and management of recurrent urinary tract infection
- pelvic organ prolapse, including pessary care

The urogynecology resident should have a **working knowledge** of:

- indications and limitations of urodynamic testing
  - pathophysiology, investigation, diagnosis and management of acute and recurrent urinary tract infection
  - drug interactions with lower urinary tract function
  - recognize and repair operative injuries to the urinary tract
  - manage of emergency situations such as obstructed voiding secondary to severe prolapse; post partum bladder atony
  - recognize and manage urinary fistula,
  - diagnose and manage urethral pain syndrome, non-infectious urethritis, atrophic urethritis, and urethra diverticula
2. The fully trained urogynecology resident will effectively perform a consultation;, including the presentation of well documented assessments and recommendations in written and/or verbal form in response to a request from another health care professional., That skill should include the ability to effectively identify and explore issues and to perform a focused, relevant physical examination.
  3. The urogynecology resident will acquire a wide variety of technical skills in the practice of urogynecology, these are listed below.

The following is a detailed list of required technical skills, including surgical skills. These lists should be considered in its totality and not be considered as exhaustive for all disorders in sub-specialty practice.

The resident will demonstrate an understanding of the indications, risks and benefits, limitations, and know the following investigative techniques specific to the practice of urogynecology.

### **Focused Physical Examination**

### Inspection of genitalia

- screening neurologic evaluation specific to the urinary tract
- elicit the bulbocavernosus and anocutaneous reflexes
- staging the degree of pelvic relaxation (Baden Walker halfway scoring or POP-Q)
- assessment of control of levator ani muscle
- objective demonstration of incontinence
- Q-Tip test

### Serology, Microbiology

- urinalysis
- urine microscopy
- urine culture

### Imaging

- endoanal ultrasound

### Other Investigations

#### Urology

##### Pad test

- Urodynamic studies: understanding of the components of urodynamic testing
- uroflow
- understanding the rationale for urethral pressure profile
- leak point pressure post void residual
- micturition profile
- CMG

A list of surgical skills is divided into categories reflecting the frequency with which these procedures are encountered during residency training in urogynecology as well in the general practice of urogynecology. The categorized list also reflects a level of technical skill competency for each surgical procedure expected after completion of a residency training program in obstetrics and gynecology.

### **List A**

The fully trained urogynecology resident should be competent to independently perform the following:

#### **Open Gynecologic Procedures**

- Pfannensteil incision
- vertical midline incision
- total abdominal hysterectomy
- sub-total abdominal hysterectomy
- repair wound dehiscence
- cystotomy repair
- limited cystoscopy, after inadvertent cystotomy or to confirm ureteric patency

## **Vaginal Gynecologic Procedures**

- vaginal hysterectomy
- anterior colporrhaphy
- posterior colporrhaphy and perineorrhaphy repair
- vagina enterocele repairs
- TVT/TVTO
- McCall culdoplasty

Other gynecologic procedures

pessary fitting and removal

Instruction and understanding of Kegel exercises

Instruction and understanding of bladder drill

### ***List B***

***retropubic bladder neck suspension (colposuspension)  
paravaginal repair, abdominal***

### ***List C***

- abdominal sacral colpopexy
- laparoscopic colposuspension
- sacrospinous fixation of the vaginal vault
- Martius graft advancement
- fistula repair
- vaginoplasty
- use of meshes (including complications and management of same)

### ***Other***

- ureteroureterostomy
- ureteric implantation
- percutaneous nephrostomy

The urogynecology resident will acquire the ability to select medically appropriate investigative methods in a resource effective and ethical manner.

The resident must demonstrate the ability to:

- a. implement an effective management plan
- b. Ensure appropriate informed consent is obtained for therapies

## **COLLABORATOR**

Residents need to develop excellent skills as collaborators. They must learn to effectively and respectfully work with specialists in other fields, including emergency room physicians, anaesthesia, diagnostic radiology, pathology, internal medicine (including gastroenterology), urology and physiotherapy.

## ***General Objectives***

***The resident*** must be able to:

- consult effectively with other physicians
- consult effectively with other health care providers
- contribute effectively to a multidisciplinary health care team

## ***Specific Objectives***

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

- function competently in the initial management of patients with conditions that fall within the realm of other medical or surgical specialties
- demonstrate the ability to function effectively and, where appropriate, provide leadership, in a multi-disciplinary health care team, showing respect, consideration and acceptance of other team members and their opinions while contributing personal specialty-specific expertise
- identify, 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

## **HEALTH ADVOCATE**

### ***Definition***

Urogynecologists 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 urogynecologists in influencing public health and policy.

### ***General Objectives***

The resident will:

- identify the important determinants of health affecting populations of patients ie elderly, postpartum
- 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 urogynecology 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
- Appropriately identify risk factors for pelvic floor dysfunction in peripartum mothers including counseling re: conservative managements and identify modifiable risk factors
- Facilitate the urogynecologic care of elderly patients taking into consideration comorbidities, social issues etc.
- 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
- be able to function effectively in local, regional, and national specialty associations (professional or scientific) to promote better health care for women

## **PROFESSIONAL**

### ***Definition***

Urogynaecologists 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 continually perfecting mastery of their discipline.

### ***General Objectives***

The resident must:

- deliver the highest quality of medical care with integrity, honesty, compassion, and respect
- exhibit appropriate personal and interpersonal professional behaviors
- 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 urogynecology resident must:

- foster a caring, compassionate and respectful attitude towards patients, families, and other members of the health care team
- provide medical care that is ethical, and seek advice or second opinion appropriately in ethically difficult situations
- monitor patients appropriately and provide appropriate follow-up medical care, particularly after starting a new treatment or following a surgical procedure
- maintain patient confidentiality at all times
- complete reports, letters, and summaries in a timely fashion and maintain medical records that are consistently accurate, informative and legible
- show self-discipline, responsibility and punctuality in attending to ward duties, in the operating room, and at meetings and other activities
- be able to appropriately delegate clinical and administrative responsibilities

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

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