

PAG FELLOWSHIP OBJECTIVES
University of Ottawa

The Pediatric Adolescent Gynecology Fellowship at CHEO (Children's Hospital of Eastern Ontario), University of Ottawa is a one-year funded program. The possibility of a second year (non-funded) exists to do a Masters (Public Health, Clinical Epidemiology or Medical Education).

Attending staff are Drs. Nathalie Fleming, Amanda Black, Tania Dumont, and Helene Gagne.

Location: CHEO, The Ottawa Hospital (TOH), St. Mary's Home and Youville Center.

The fellowship comprises of 3 themes: Clinical, Academic and Research.

Clinical Component:

The Fellowship will focus on the diagnosis and management of: congenital reproductive tract anomalies, pediatric and adolescent gynecologic malignancies, gynecologic disorders in medically ill children, reproductive endocrinopathies affecting children, common problems in pediatric gynecology, adolescent pregnancy and surgical techniques, pre and postoperative care in pediatric patients.

The year will comprise of 9 months of core PAG, 1 month Pediatric Surgery, 1 month Ambulatory Clinics and 1 month of Elective.

During the PAG core blocks, the fellow will attend:

- 2 PAG clinics (half days) per week. Once per month, this includes a specialized pediatric vulvar clinic.
 - In the second 6 months of the year, the fellow will have own PAG clinic twice weekly in parallel with attending staff.
- A full day of adolescent obstetrics at the multidisciplinary community center (St. Mary's Home).
- Weekly adolescent contraception clinic in either of 2 community centers dedicated to high risk youth (Youville Center or St. Mary's Home).
 - 1 to 2 clinics per month will be Fellow's clinic
- Weekly pediatric hematology clinic (hem/gyne clinic monthly; Von Willebrand clinic monthly, clot clinic monthly) and survivor of childhood cancer monthly (adult hospital).
- Pediatric endocrinology clinic
- Participate in multidisciplinary clinical meetings
 - Disorder of sexual differentiation (DSD) (bi-monthly)
 - Hem/gyn (monthly)
 - Tumor board (prn).

During the year, the fellow will rotate through the Pediatric Surgery Service for a period of 4 weeks.

The fellow will also participate in an Ambulatory rotation (4 weeks) comprised of clinics in Adolescent Medicine, Hematology, Dermatology, Child protection, and other services as per fellow's interest.

Finally, the fellow will have the opportunity to have an elective block (4 weeks) in the latter part academic year. The possibilities include are MIS (minimally invasive surgery), outside elective to explore other PAG opportunities, simulation, research, or other choice that would be relevant for career development.

Surgical exposure includes:

- OR 1 day per month (elective cases)
- Surgical emergency cases (prn) when on call
- During pediatric surgery block
- During elective time (MIS or other PAG program)
- Surgical simulation program

Call responsibilities for the fellow include:

- Daytime: done by PAG resident; may be called to review cases with resident
- Nighttime: 1 in 3 home call rota for pediatric gynecology. When not on call, will be given the opportunity to attend interesting cases in OR (not mandatory)
- During the Pediatric Surgery Rotation the fellow will participate in the call rota at the level of a resident.

Locum calls: Moonlighting may be possible as long as it does not interfere with performance (clinical and academic/research) of the fellowship. Your fellowship director must be informed and approve the moonlighting activities.

Academic Component:

The fellow will be invited/ expected to

- Attend weekly Grand Rounds (Pediatric surgery, Adult Ob/Gyn, or Pediatric)
- Present PAG rounds once per 4 weeks (with assistance from PAG resident)
- Participate as PAG examiner in Ob/Gyn OSCE twice per year
- Participate in yearly PAG lectures series residents in Ob/Gyn, Pediatrics as well as for fellows in REI and Pediatric Emergency
- Participate in PAG simulation program
- Participate in Health Advocacy Curriculum
- Attend the bi-monthly Ob/Gyn journal club (epidemiology teaching)
- Have protected time and funding to attend a PAG conference (NASPAG or CANPAGO SOGC) if fellow is presenting research

Research Component:

It is expected that the fellow will participate in a research project throughout the year. The research may be in the following domains: clinical, health advocacy or medical education related to PAG. Preparation and submission of research abstract with aim at presentation at NASPAG (+/- CANPAGO SOGC) and University of Ottawa research day (Ob/Gyn and Pediatric Surgery) and manuscript preparation is also expected. Weekly protected time (up to 2 half days per week) with possibility of a research block elective is available.

Pediatric Gynecology Rotation Objectives

The Fellow is expected to develop the knowledge and skills appropriate to professionally function in the following roles:

Medical Expert
Communicator
Collaborator
Manager
Health Advocate
Scholar
Professional

1. Medical Expert

Knowledge of Anatomy and Physiology

- Develop an understanding of reproductive anatomy including:
 - Normal embryology of the female and male reproductive tract
 - Maturation changes in the reproductive tract from infancy to maturity
 - Relation of congenital anomalies to embryology
 - Understand the effect of endocrinology and common endocrinology dysfunction on reproductive maturation including:
 - Thyroid abnormalities
 - Normal maturation and regulation of the hypothalamic pituitary axis from infancy through puberty
 - Adrenal steroidogenesis and enzyme deficiencies associated with congenital adrenal hyperplasia

Data Gathering

- Be able to obtain a complete history from a child and or parent including developmental, social and medical assessment
- Be able to conduct the physical assessment including growth, development (Tanner Staging) and reproductive tract (age dependent technique) and draw appropriate conclusions from the clinical examination

Clinical Reasoning, Management and Judgment/Diagnostic and Therapeutic

- The fellow will be responsible for the assessment of patients in the outpatient clinic as well as planning the diagnostic and therapeutic approach.
- As such the fellow should manage common and uncommon pediatric and adolescent gynecology disorders:
 - Abdominal/pelvic pain
 - Abnormal genital bleeding
 - Adolescent adherence to therapy
 - Adolescent Sexuality
 - Ambiguous genitalia
 - Amenorrhea
 - Congenital anomalies of the reproductive tract
 - Contraception (including compliance, and the medically complex patient)

- Delayed puberty
 - Dysmenorrhea
 - Eating disorders and their affect on menstrual cycles
 - Endometriosis
 - Gender identity disorders
 - Genital injuries
 - Gonadal dysgenesis
 - Hirsutism
 - Labial agglutination
 - Menorrhagia
 - Pediatric urology – common urologic complaints such as dysfunctional voiding
 - Pelvic or abdominal mass
 - Pediatric and Adolescent Gynecologic Malignancies
 - Precocious puberty/adrenarche/thelarche
 - Prepubertal vulvovaginitis
 - Pediatric dermatologic conditions affecting the genital tract
 - Prescribing to the Pediatric Population (pharmacodynamics of children)
 - Sexual abuse
 - Sexually transmitted diseases
 - Transitional Planning for adolescents embarking on adult care
 - Vaginal agenesis
 - Vulvar disorders
- The fellow will follow patients to get feedback on their management.

Procedural skills

- The fellow will be offered to attend elective operative cases and to monitor the patient postoperatively with the residents and attending staff.
- Depending on the initial skill level of the Fellow, expectations for the surgical aspect of the fellowship year will vary.
- The Fellow will be able to participate in the surgical procedures necessary for surgical reconstruction of the genital tract as it pertains to congenital reproductive anomalies in the pediatric and adolescent age group and genital trauma.
- The Fellow will be able to participate in surgical therapy of pediatric and adolescent gynecologic malignancies.
- The Fellow be able to participate in the operative laparoscopic management of benign ovarian cysts, endometriosis, gonadectomy, ectopic pregnancy and diagnostic procedures.
- The Fellow will be able to perform examination under anaesthesia including vaginoscopy and cystoscopy in the pediatric and adolescent population.
- Included in surgical management, is the preoperative and postoperative care of pediatric and adolescent patients: fluid management, analgesia etc.

Communicator

Physician/Patient Relationship

- The fellow should demonstrate the ability to elicit the trust and cooperation of the child and her family during his/her interactions in ambulatory care settings, the emergency department, and perioperatively.

Verbal Communication Skills

- The fellow should demonstrate appropriate communication skills when interacting with clinic administrative staff and other members of the multidisciplinary health care team.

Collaborator

Team Relations

- The fellow should demonstrate the ability to collaborate with the DSD (disorder of sexual differentiation) team in the evaluation of patients.
- Similarly, the fellow should demonstrate the ability to collaborate with pediatric surgery, radiology, urology, hematology/oncology team as appropriate.
- The fellow will develop strong collegial relationships with the Gynecology Team, including Senior Secretary, Clinic Nurse, Patient Information Clerk, and Junior Housestaff.

Manager

Time Management

- The fellow should demonstrate an ability to assess patients in an efficient manner in the ambulatory clinics.

Resources and Allocation

- The fellow should be able to discuss the cost effective plan for investigation and management of pediatric and gynecology disorders.
- The fellow should be able to determine the appropriate setting for patient management (ambulatory clinic or inpatient care) of pediatric and adolescent gynecology disorders.

Administrative Skills

- The fellow should demonstrate the ability to coordinate ambulatory patient care including communication with consulting services, follow up of investigations, responding to patient/family queries and timely completion of health records.

Health Advocate

Determinants of Health/Health Advocacy

- The fellow should be able to appreciate the unique developmental and social pressures that affect pediatric and adolescent patients and their families, including:
 - Cultural influences on puberty, sexuality, contraception and pregnancy
 - Social and psychological development through childhood and adolescence and how this affects care and counseling

Scholar/ Critical Appraisal

Self Directed Learning

- The fellow should develop a critical approach to the literature regarding investigation, therapeutics and health care delivery with respect to pediatric and adolescent gynecologic care.

Research

- The fellow will present at minimum a Pediatric and Adolescent gynecology round, twice during their year with an attending staff mentor.

Teaching Skills

- The fellow will demonstrate the ability to impart new information in the clinical situation to pediatric/adolescent patients and their families.
- The fellow is responsible to teach medical students and residents in the ambulatory care settings and during the performance of inpatient consults/emergency consults.
- The fellow will present at minimum a Pediatric and Adolescent gynecology round, twice during their year with an attending staff mentor.

Professional

Responsibility

- The fellow will be expected to
 - be punctual during clinical duties
 - be available to the administrative staff and health care team
 - participate in the management of the pediatric and gynecology patients in the clinic in conjunction with the staff, pediatric and gynecology resident and clinic nurse.

Self Assessment Skills/Insight

- The fellow should demonstrate the ability to communicate with attending staff and request assistance in patient management when appropriate.
- The fellow should consult ancillary services when required to enhance patient care.
- The fellow should develop an individual learning plan with regards to pediatric and adolescent gynecology knowledge basis, with assistance of the attending staff.

Ethics

- The fellow should be aware of the medicolegal issues and ethical issues with respect to patient confidentiality
- The fellow should be aware of the role of child protective agencies with regards to sexual abuse.

Written Skills and Record Keeping

- The fellow shall document interactions with patients and families in the ambulatory clinic setting and in telephone interactions.
- The fellow shall complete Health Records in a timely manner.

Pediatric General Surgery Objectives

1. Medical Expert

Operative skills

- Laparoscopy in infants and children
 - Port placement
 - Insufflation parameters
 - Sutures
 - Entry techniques
 - Positioning
 - Specific instruments

- ESU settings
- Laparotomy in infants and children
 - Sutures
 - Positioning
 - Specific instruments
 - ESU settings
- Procedures related to gynecology
 - Appendectomy
 - Running the bowel

Post-op management

- Assessing infants and children: pain, well-being
- Vital signs in infants and children (normal values)
- Fluid management
- Diets
- Analgesic dosing: acetaminophen, NSAIDs, narcotics
- Antibiotic dosing

2. Communicator

Physician/Patient Relationship

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Verbal Communication Skills

- The fellow should demonstrate appropriate communication skills when interacting with clinic administrative staff and other members of the multidisciplinary health care team (staff, surgery fellow, residents, and students)

3. Collaborator

- Team Relationship
 - Surgeons's: vital part of multidisciplinary team with gynecology for oncological pathologies
 - Nurses and nurse practitioners
 - Social work

4. Manager

- Residents and Students on service
- Post op patients with clinical duties and consults

5. Health Advocate

- Sexual health history in teens on the general surgery service – prevention of pregnancy and STIs

6. Scholar

- Present at Surgery Rounds a gynaecological topic that is applicable to surgeons

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