These are the Educational Goals and Objectives for the Gynecology Rotation. Please review and become familiar with these goals and objectives.

The Chief Resident on the Gynecology Rotation is responsible for the complete management of gynecology patients. The Chief Resident will also supervise and allocate residents and medical students on the service. The Chief Resident should use this rotation as an opportunity to strengthen any weakness they may have in their surgical training or simply gain experience in the areas they are competent in. They are expected to participate in the most challenging cases.

The resident is responsible for management decisions and care of all gynecologic patients. The resident must review all work done by medical students, interns, 2nd and 3<sup>rd</sup> year residents. The resident will be supervised by the attending faculty.

By the end of this rotation the Educational Goals and Objectives should be met.

## Educational Goals and Objectives for this rotation:

- 1. Master knowledge and skills necessary to manage complicated gynecologic patients including geriatric care.
- 2. Learn how to communicate effectively with patients and other services and serve as a competent gynecologic consultant.
- 3. Learn how to supervise, mentor and teach the junior resident on the service and to master the concept of life-long learning and teaching in the discipline of gynecology.
- 4. Learn how to objectively evaluate and modify one's care through weekly morbidity and mortality presentations and review of cases.
- 5. Learn how to function in the health care system to deliver care that is timely and effective.
- 6. Understand and encourage other members of the health care team to understand the importance of good communication.
- 7. Demonstrate accountability for ones actions and clinical decisions.

#### Procedural Goals for this rotation:

#### Understand:

- o Breast, fine needle aspiration
- Laparoscopic myomectomy
- Laparoscopic supracervical hysterectomy
- Presacral neurectomy

o Trachelectomy

### **Understand and Perform**:

- o Ablation/excision of endometriosis implants
- o Ablative procedures of the
  - o Cervix
  - o Endometrium
  - o Vagina
  - o Vulva
- o Enterotomy repair
- o Perinorrhaphy
- o Colporrhaphy, anterior and posterior
- o Culdoplasty, abdominal and vaginal
- Hysterectomy
  - o Laparoscopic assisted
  - o Vaginal
  - o Total laparoscopic
- Trigger point injection
- o Hysteroscopy, operative
- Myomectomy
  - Abdominal
  - o Hysteroscopic
  - o Laparoscopic
- o Hernia repair
  - o Incisional
  - o Umbilical
- Hypogastric artery ligation
- o Ultrasound abdominal and endovaginal

### Reading List:

Williams Gynecology

Female Pelvic Medicine and Reconstructive Surgery

Aspects of Gynecologic Surgery

Menopausal Transition

Pediatric Gynecology

TeLinde's Operative Gynecology

The Ethics of Pelvic Surgery

Surgical Anatomy of the Female Pelvis

Wound Healing, Suture Material, and Surgical Instrumentation

Incisions for Gynecologic Surgery

Control of Pelvic Hemorrhage

#### PATIENT CARE

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

## Objectives:

- 1. Obtain essential and accurate information about patients
- 2. Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- 3. Develop and carry out patient management plans
- 4. Counsel and educate patients and their families
- 5. Use information technology to support patient care decisions and patient education
- 6. Demonstrate competency in procedures considered essential to the practice of gynecology and gynecologic surgery
- 7. Provide health care services aimed at preventing problems or maintaining health
- 8. Provide patient focused care by working along with health care professionals, including those from other disciplines

#### MEDICAL KNOWLEDGE

Residents must demonstrate up to date knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, and be able to apply this knowledge to patient care.

### Objectives:

- 1. Describe the surgical management of pelvic inflammatory disease (PID).
- 2. Describe the major causes of pelvic masses, including:
  - a. Fibroids
  - b. Adnexal masses
  - c. Tubo ovarian abscess
  - d. Adnexal torsion
  - e. Ovarian cysts/benign neoplasms
  - f. Appendicitis
- Understand the indications for common interventions and treatments used in gynecology and gynecologic surgery.
- 4. Summarize the theories of the pathogenesis of endometriosis.
- 5. Describe the typical history of a patient with endometriosis.
- 6. Compose appropriate preoperative preparation plans for patients undergoing gynecologic surgery, including:
  - a. Mechanical bowel preparation
  - b. Antibiotic use
  - c. Thromboembolism prophylaxis
  - d. Preoperative anesthesia consultation

### PRACTICE BASED LEARNING AND IMPROVEMENT

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices through constant self-evaluation and commitment to life long learning.

### Objectives

- 1. Demonstrate commitment to self assessment and study.
- 2. Demonstrate commitment to life long learning.
- 3. Conduct reviews of critical cases with a systematic approach.
- 4. Combine personal experience with best available evidence to optimize patient care effectiveness.
- 5. Incorporate feedback from evaluations to improve skills.
- 6. Maintain an updated case log.
- 7. Participate in quality assurance activities of the department.

#### **PROFESSIONALISM**

Residents must demonstrate professionalism as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

### Objectives:

- 1. Be punctual.
- 2. Dress appropriately.
- 3. Demonstrate accountability for ones actions and clinical decisions.
- 4. Acknowledge errors or omissions and work toward timely resolution.
- 5. Demonstrate truthful and timely disclosure of adverse outcomes to the patient and designated individuals.
- 6. Maintain sensitivity to issues of diversity with patients and staff.

#### INTERPERSONAL AND COMMUNICATION SKILLS

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates.

### **Objectives**

- 1. Communicate effectively with patients and families across a diverse range of socioeconomic, cultural, and educational backgrounds.
- 2. Communicate effectively with physicians, health professionals, and health care agencies.
- 3. Maintain a medical record that is clear, concise, and complete.
- 4. Demonstrate ability to obtain informed consent and refusal.
- 5. Demonstrate ability to convey bad news to patients and families.

6. Demonstrate ability to disclose unforeseen outcomes, mistakes, and untoward events.

#### SYSTEMS BASED PRACTICE

Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide optimal health care.

## Objectives

- 1. Consider cost and risk-benefit analysis in patient care.
- 2. Work to enhance patient safety and improve patient care quality.
- 3. Effectively use consultants and ancillary services.
- 4. Help coordinate outpatient services with office/nurse manager.
- 5. Order diagnostic tests with attention to cost effectiveness and clinical relevance.
- 6. Follow clinical pathways as detailed in approved protocols.
- 7. Develop appreciation for the cost of laboratory and radiological studies ordered in the evaluation of patients.
- 8. Participate in quality improvement activity of the department.
- 9. Begin to understand the medicolegal aspects of medical practice.
- 10. Participate in risk management discussions and meetings.

### METHOD OF EVALUATION

Residents will be evaluated during this rotation and throughout residency via several methods including: focused assessments, global assessments, in-training exams, professional associate evaluations, patient satisfaction surveys, participation at Journal Club, self-assessment, Life Long Learning assignments, and participation in group discussions, sign out, work rounds, and contribution to discussions and plans to improve the residency educational experience.

### Objectives:

#### 1. Case Log and Resident Statistics

The resident is expected to maintain a case log and input their procedure statistics on a regular basis.

## 2. Focused Assessment Competencies (FAC)

The resident should complete focused assessment competencies (FAC) for the Educational Goals and Objectives listed for this rotation.

#### 3. Global Evaluation

Global evaluation of the resident will be performed quarterly. Evaluation will be based on feedback from peers, medical students, attending faculty and patient satisfaction questionnaire. Residents will also undergo self evaluation.

### 4. Resident Portfolio

The resident is expected to maintain a resident portfolio developed during the time the resident is enrolled in the program. It will contain a variety of information reflecting the resident's progress, evaluations, commendation, letters, and ambition and achievements during residency.

## 5. Self Evaluation

The resident will complete regular self evaluations for review and discussion with the Program Director. Research and scholarly activity will be reviewed. Patient surveys will be discussed.

## 6. Feedback

The resident should give timely feedback to attendings and department as to the effectiveness and quality of the educational experience on this rotation. Strengths, weaknesses and opportunities to improve this rotation will be examined.

## 7. CREOG In Training Exam

Performance, self study, and plans for improvement will be discussed.

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Please sign and return to the Program Director's Office.