

**Jersey Shore University Medical Center
Ob/Gyn Residency Program
Educational Goals and Objectives for OBSTETRICS – PGY2
2011-2012**

These are the Educational Goals and Objectives for the Obstetrics Rotation. Please review and become familiar with these goals and objectives. As a Second Year Resident you should have mastered the educational objectives listed for PGY1.

The PGY2 rotation on the Obstetric Service is characterized by progression of responsibilities. The 2nd Year Resident on the Obstetric Service is expected to continue to master previous skills. In addition, the resident should focus on understanding and managing the more complicated obstetric patients. The resident should work toward achieving competency in operative vaginal and cesarean delivery. They will also become more involved in management of antepartum patients.

The resident should be able to supervise and teach first year residents and medical students. The resident must review all work done by medical students and interns.

The resident is responsible for completing history and physical examinations for all patients admitted to the Antepartum Service. The resident will make sure all labs and pending studies have been addressed, discussed with senior residents and faculty as appropriate, and documented.

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

Educational Goals and Objectives for this rotation:

1. Continue to acquire skills and knowledge required to understand and manage high risk obstetric patients.
2. Learn how to manage all aspects of first and second trimester accidents of pregnancy, including complications and methods for termination and ectopic pregnancy.
3. Understand management of antepartum, intrapartum and postpartum hemorrhage, including obstetrical shock.
4. Understand management of medical and surgical conditions that complicate pregnancy.
5. Comprehend management of hospitalized antenatal patients.
6. Comprehend and manage preterm labor and premature rupture of membranes.
7. Learn how to perform a complete fetal diagnostic evaluation including amniocentesis and genetic counseling.
8. Learn to supervise and mentor medical students and interns and direct other healthcare providers in Labor and Delivery.
9. Be able to work under the supervision of senior residents and faculty.
10. Demonstrate accountability for ones actions and clinical decisions.

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Procedural Goals for this rotation:

Understand:

- Cerclage, transabdominal
- Uterine artery ligation
- Dilation and evacuation, 2nd trimester
- Shoulder dystocia management

Understand and perform:

- Amniocentesis, 3rd trimester, for fetal lung maturity
- Fetal assessment (NST, BPP, CST, vibroacoustic stimulation)
- Cerclage, transvaginal
- Cesarean delivery, primary
- Cesarean delivery, repeat
- Cesarean delivery, low transverse
- Cesarean delivery, low vertical
- Cesarean delivery, classical
- Cordocentesis
- External cephalic version
- Intrauterine transfusion
- Operative vaginal delivery, outlet
- Operative vaginal delivery, low
- Labor induction
- Post partum curettage for retained placenta
- Evacuation of intra abdominal hematoma
- Repair of 1st and 2nd degree lacerations
- Vacuum extraction, outlet and low application
- Vaginal hematoma management
- Vulvar hematoma management
- Wound debridement
- Wound closure, secondary

Reading List:

Williams Obstetrics, 23rd Edition
Abnormal Labor
Operative Obstetrics
Common Complications of Pregnancy

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.

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Objectives:

1. Recognize and evaluate abnormal fetal presentation and position.
2. Select and perform the most appropriate procedure for delivery.
3. Perform and interpret surveillance tests for the post term fetus:
 - a. Nonstress testing
 - b. Biophysical profile
4. Document an accurate history of a patient's previous operative delivery.
5. Recognize and treat possible complications of vaginal birth after cesarean (VBAC) such as uterine scar dehiscence, hemorrhage, fetal compromise, and infection.
6. Recognize and treat maternal and fetal complications of anesthesia and analgesia.
7. Perform selected procedures related to anesthesia and analgesia.
8. Recognize and treat postpartum affective disorders. Refer as appropriate.
9. Obtain cord blood for:
 - a. Blood gas analysis
 - b. Determination of fetal blood type
 - c. Cord blood banking
10. Diagnose and treat common post partum maternal complications:
 - a. Uterine hemorrhage
 - b. Infection
 - c. Breast engorgement
 - d. Mastitis
11. Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment .

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 contraindications for:
 - a. Epidural
 - b. Spinal
 - c. Pudendal
 - d. Local anesthesia
 - e. General anesthesia
 - f. Intravenous analgesia/sedation
2. Describe appropriate indications for induction of labor.
3. Describe the appropriate criteria for vaginal birth after cesarean (VBAC).
4. Describe the contraindications for VBAC.
5. Describe the indications for cord blood gas analysis and interpret the results.

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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. Describe the appropriate anesthesia criteria and hospital policies for vaginal birth after cesarean (VBAC).
2. Demonstrate commitment to life long learning.
3. Combine personal experience with best available evidence to optimize patient care effectiveness.
4. Incorporate feedback from evaluations to improve skills.
5. Maintain an updated case log.

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. Counsel a patient regarding the impact of maternal medical conditions on pregnancy.
2. Demonstrate accountability for ones actions and clinical decisions
3. Acknowledge errors or omissions and work toward timely resolution

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. Maintain a medical record that is clear, concise, and complete.
2. Demonstrate ability to obtain informed consent and refusal.
3. Demonstrate ability to disclose unforeseen outcomes, mistakes, and untoward events.
4. Counsel patients about the prognosis for abdominal versus vaginal delivery.
5. Counsel a patient about the risks and benefits of vaginal birth after cesarean (VBAC).

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.

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Objectives:

1. Interpret common diagnostic tests in the context of the normal physiologic changes of pregnancy.
2. Counsel a patient regarding appropriate preconception testing.
3. Refer patients with known or suspected substance abuse for counseling and follow up.

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.

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7. CREOG In Training Exam
Performance, self study, and plans for improvement will be discussed.

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I have received and will review the Educational Goals and Objectives for the OBSTETRICS ROTATION – PGY2 at Jersey Shore University Medical Center.

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