



## Objectives of Training

# Gynecology Junior Rotation

**Jewish General Hospital, Royal Victoria Hospital**

## Orientation to Rotation

- **Rotation duration:** One 4-week block(s)
- **Rotation supervisors:**  
**JGH:** Dr. Cleve Ziegler (cleve.ziegler@mcgill.ca; TEL 514-340-8222 ext 5248 )  
**RVH:** Dr Srinivasan Krishnamurthy (srinivasan.krishnamurthy@muhc.mcgill.ca; Tel: 514-934-1934 ext 35005; Office: F9.26)
- **On the first day report for orientation with Objectives of Training document to:**  
**JGH:** Cleve Ziegler in Room H 333.2 at 9:00 am  
**RVH:** RVH F5 Gynecology Inpatient Unit at 6:30 am
- **Schedule:** During this rotation, the Resident is expected to participate in the clinical activities, rounds etc. indicated in below:

### JGH:

Monday	Tuesday	Wednesday	Thursday	Friday
Inpatient Rounds 7-8				
OR (Ziegler, Marcoux) 07:45-15:30	OR (Tulandi) 07:45-15:30		OR –Lasalle (Hum, Marcoux, Tulandi, Ziegler) 0800-15:30	OR (Marcoux, Hum) 07:45-15:30
Ziegler Teaching Rounds 16:00-17:00				<b>Resident Teaching</b> 2:00-5:00 pm RVH F3.10

### Other pertinent information:

- ER Consults
- Rounding on GYN ONC patients
- Encouraged to attend GYN and Colposcopy Clinics if possible
- Possibility to attend Tumor Board and GYN ONC clinic if interested

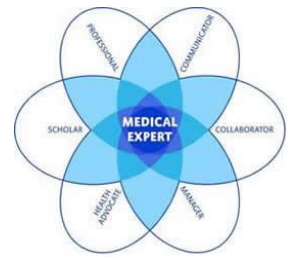
### RVH:

#### Gyne Inpatient Unit F5

- Rounds are from 6:30 am to 7:30 am
- Sign out to each other
- Sign out to nurses from 7:30 to 8:00 am
- Prepare discharge prescriptions and discharge summaries

# Specific Objectives and CanMEDS competencies

The role of **medical expert** is central to the function of the obstetrician-gynaecologist, and draws on the competencies for the roles of **scholar, communicator, health advocate, manager, collaborator, and professional**.



## 1. Medical Expert

### KNOWLEDGE

- **Medical knowledge:** Able to make appropriate diagnoses and treatment plans Based on knowledge of common gynecological conditions:
  - Hyperemesis gravidarum
  - Early pregnancy bleeding/loss and ectopic pregnancy
  - Contraception (counseling, iud, hormonal, surgical)
  - Abnormal uterine bleeding (e.g. Menorrhagia, post-menopausal bleeding, dysfunctional uterine bleeding)
  - Pelvic pain (endometriosis, fibroids, cysts, pelvic inflammatory disease)
  - Acute abdomen
  - Pre-op/post-op assessment and management
  - Bartholin's cyst
- **Anatomy/physiology:** Knowledge adequate to understand pathophysiology of women's health and common problems.
- **History taking:** Complete, accurate and systematic. Able to ask appropriate questions.
- **Physical exam:** Organized, complete and appropriate. Important signs detected and significance understood.
- **Clinical reasoning:** Able to relate clinical findings to clinical picture and to determine appropriateness of common invasive investigations.
- **Medical management:** Clinical course appropriately followed and charted.

### SURGICAL SKILLS

- **Operative judgment:** Able to relate operative care to clinical picture. Seeks appropriate advice when necessary.
- **Technical Skills:** Technically competent in O.R. with common problems for a junior level:
  - Open and close and laparoscopic ports entry
  - D+C and suction curettage
  - Simple, uncomplicated TAH +/- BSO
  - Simple, uncomplicated myomectomy
  - Laparoscopy : diagnostic, tubal ligation, simple cystectomy, simple salpingo-oophorectomy

## 2. Communicator

- Establish therapeutic relationship with patients/families
- Obtain and synthesize relevant history from patients/families/communities
- Listen effectively , discuss appropriate information with patients/families and the health care team

### 3. Collaborator

- Consult effectively with other physicians and health care professionals; Maintains good communication with team members. Able to recognize needs of the team
- Contribute effectively to other interdisciplinary team activities; accept team responsibilities
- Establish therapeutic relationship with patients/families

### 4. Manager

- Uses time efficiently. Completes the majority of tasks in a timely manner. Well organized.
- Understands the benefits and limitations of noninvasive and invasive imaging techniques. Considers cost effectiveness in decision making.
- Able to organize the ward service effectively with appropriate inter-personal considerations. Interacts well and utilizes other allied health professionals.

### 5. Health Advocate

- 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
- Recognizes psycho-social and economic factors in conditions pertaining to Gynecology such as post partum depression, adherence to therapy and response to treatment.

### 6. Scholar

- Motivation to read and acquire knowledge
- Critically appraises medical literature
- Teaches students and other health professionals with enthusiasm on an ongoing basis
- Specifically teaches:
  - Orientation of clerks to the clinical service
  - Teaching of basic surgical principles and procedures to other learners, e.g.: knot tying, fluid and electrolytes etc.
  - Organizes formal or informal case based presentations
  - Is perceived by those junior as “accessible and receptive” to teaching

### 7. Professional

- Reports to work and call on time (OR or Clinics)
- Recognizes own limitations, seeking advice when needed
- Responsibility and self discipline (note in chart / OR dictations)
- Understands and considers ethical implications of medical practice.
- Demonstrates integrity and honesty with colleagues and patients
- Respect of individual diversity
- Able to perform with skill and competence in stressful situations. Recognizes how stress impacts on personal performance and is able to delegate tasks and mobilize resources quickly and efficiently.

## Evaluation

- The resident will be required to contact rotation supervisor for midway feedback.
- Resident will be responsible for organizing face-to-face feedback at the end of every four week block.
- The final evaluation will be posted on MRESone45.

## Recommended reading

Comprehensive Gynecology, 5<sup>th</sup> Edition by Katz