

Obstetrical Ultrasound Junior Rotation

St. Mary's Hospital Centre

Orientation to Rotation

- Rotation duration: One 4-week block
- Rotation supervisor: Dr. I. Girard; igirard6@gmail.com Dr Girard will meet you in the first few days to discuss your objectives at SMHC
- On the first day report to: Obs/Gyn Secretary, Beatrice Gauget at 8h00 in room 4114 (beatrice.gauget@ssss.gouv.qc.ca, Tel: ext. 3050)

Orientation

The Ultrasound Technologist Coordinator (or Attending staff) will provide an Orientation to the US clinic and ensure that residents are familiar with the functioning of the clinic, the techniques of various types of exams and the handling of the equipment. This includes: appropriate handling of equipment, cleaning and disinfection of probes, patient preparation, patient placement, and indications for endovaginal examination.

- Schedule: During this rotation, the Resident is expected to participate in the clinical activities, rounds etc. indicated in below:
 - o **read** an appropriate ultrasound textbook (see references below)
 - o present a case at weekly MFM Rounds ; suitability of case should be discussed with attending staff.
 - **Grand Rounds**: every Wednesday except the first and last one of the month, 7h45 to 8h45, SMHC room 4209
 - Perinatal M&M rounds: Last Wednesday of the month 8h00 to 9h00, SMHC Haynes pavilion room 2750
 - Friday Resident Teaching: 2:00-5:00 pm, RVH Primrose Amphitheatre F3.10

Other pertinent information:

The primary goal of this ultrasound rotation is to provide a comprehensive introductory experience to ultrasound imaging in Obstetrics. This will be accomplished through the attainment of the general objectives below. At the end of the rotation the PGY1-2 ObGyn Resident will be familiar with:

- o Indications for ultrasound, including emergency indications
- o Basic properties of ultrasound imaging
- o Normal fetal and female anatomy
- The most common and most important pathologic states associated with ultrasound studies that are encountered in the emergency setting.

Specific Objectives and CanMEDS competencies

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



1. Medical Expert

a. KNOWLEDGE

By the end of this period the resident should be able to demonstrate a working knowledge of diagnostic ultrasound in the following topics – this relates to knowledge rather than practical proficiency in these areas

- First trimester ultrasound
- Down syndrome screening by first and second trimester ultrasound
- Fetal anatomical scans at 20 weeks (begin to appreciate)
- Fetal biometry for the determination of fetal size and growth determination of large or small for gestational age, including understanding of the limitations of biometry
- Diagnosis and follow-up of multiple gestation
- Determination of fetal position and lie
- Placental evaluation including location and maturity
- Determination of fetal viability
- Determination of ectopic pregnancy
- Evaluation of fetal well-being using ultrasonography
- Principle and use of Doppler ultrasonography

b. SKILLS

Practical skills to be achieved at the end of this period are centered on the following:

Ability to recognize the following <u>normal</u> findings of the **First Trimester**:

- Gestational sac size
- Cardiac activity including normal embryonic heart rate
- Crown-rump length measurement

Ability to recognize the following <u>normal</u> findings of the **Second and Third Trimester**:

- Placenta
- Biometry
- Amniotic fluid volume
- Biophysical profile
- Fetal lie

2. Communicator

- a. Appropriately communicate and interact with patients and their families, colleagues, students and co-workers from other disciplines to develop a shared plan of care.
- b. Accurately elicit, synthesize and document relevant information regarding urgent or unexpected radiologic findings.

- c. Produce radiologic reports that are accurate, concise and grammatically correct.
- d. Be sensitive to patients receiving bad news

3. Collaborator

- a. Interact effectively and professionally with the healthcare team, referring physicians, and ultrasound technologists.
- b. Work with other health professionals and clinic staff to prevent, negotiate, and resolve conflicts.

4. Manager

- a. Participate in activities that contribute to the effectiveness of the healthcare organizations and systems, when appropriate.
- b. Manage their time and healthcare resources effectively

5. Health Advocate

- a. Respond to individual patient health needs and issues as part of patient care
- b. Identify determinants of health of the population they serve
- c. Promote health of individual patients, communities and populations

6. Scholar

- a. Augment medical and ultrasound knowledge by correlating clinical information, medical literature, and other relevant patient studies.
- b. Attend pertinent conferences / rounds
- c. Present cases at Morbidity and Mortality rounds (q 2 Fridays 8 am) when appropriate.

7. Professional

- a. Be on time
- b. Present oneself as a professional in appearance and communication.
- c. Demonstrate respect for patients and all members of the health care team.
- d. Respect patient confidentiality.
- e. Demonstrate a responsible work ethic with regard to work assignments.

Evaluation

- The resident will be required to contact Dr. Isabelle Girard for midway feedback.
- Rotation supervisor 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

<u>Ultrasonography in obstetrics and gynecology</u>, Callen, Peter W., 5th ed. Philadelphia, Pa, Elsevier Saunders: 2008. Call #: WQ 100 U47 2008 Reserve; Location: RVH - Women's Pavilion Library

Obstetric and gynaecological ultrasound made easy, Smith, N. C.; Smith, A. Pat M., 2nd ed. New York, Churchill Livingstone: 2006.

Call #: WQ 209 S4 2006 Reserve; Location: RVH - Women's Pavilion Library

<u>Obstetric ultrasound: how, why and when</u>, Chudleigh, Trish; Thilaganathan, Basky., 3rd ed. Edinburgh, Churchill Livingstone: 2004. Call #: WQ 209 P35o.3 2004 Reserve; Location: RVH - Women's Pavilion Library

<u>Sonography in obstetrics and gynecology: principles and practice</u>, Fleischer, Arthur C; Manning, Frank A; Jeanty, Philippe; Romero, Roberto., 6th ed. New York, McGraw-Hill: 2001. Call #: WQ 240 S69.6 2001 Location: RVH - Women's Pavilion Library

The Society for Maternal-Fetal Medicine

https://www.smfm.org/default.cfm

See the SMH Librarian for more information concerning reference texts