OBSTETRICS AND GYNAECOLOGY ROTATION PLAN (2020-21)

NAME OF ROTATION: Chief Resident

FOCUS OF THIS ROTATION

- Synthesize all obstetrics and gynaecologic knowledge and experience in the management of the inpatient service
- Assume administrative and educational leadership of the resident and student team
- Emphasize surgical experience, particularly of complex and urgent cases, and as a surgical teacher

CBD stage(s) for this rotation:

• Core of Discipline (COD)

Length of this rotation:

• 6 blocks total, generally 3 blocks at a time

PGY Level(s) for this rotation:

PGY3 / PGY4 / PGY5

Locations for rotation:

- Mount Sinai Hospital
- Sunnybrook Health Sciences Centre
- St. Michael's Hospital
- North York General Hospital
- Michael Garron Hospital
- Credit Valley Hospital (Trillium Health Partners).

Required training experiences included in this rotation

- COD 1.1.3. Obstetrics Inpatient service
- COD 1.1.5. Obstetrics Obstetrics in a community setting
- COD 1.1.6. Obstetrics After-hours coverage
- COD 1.2.1. Gynecology Inpatient service
- COD 1.2.2. Gynecology Consultative service to the emergency department and inpatient services
- COD 1.2.3. Gynecology Gynecology/gynecologic oncology operative experience
- COD 1.2.4.1.– Clinics in General gynecology
- COD 1.2.5. Gynecology in a community setting
- COD 1.2.6. Gynecology After hours coverage
- COD 1.4. Longitudinal clinics in Obstetrics and Gynecology
- COD 1.5. Participation in interprofessional rounds, such as tumour board
- COD 2.2. Supervision of junior learners
- COD 2.3. Participation in hospital committees (e.g., patient safety, QA/QI)

Recommended training experiences included in this rotation

COD 3.2. Gynecologic pathology

Other training experiences that may be included in this rotation

- AHD
- Grand rounds (most sites require a chief to present grand rounds)

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	EPAs Mapped to this rotation:	Total # of Entrustments expected, or encouraged, on <i>this</i> rotation.
1.	OG COD-4 Performing complex cesarean sections	0-2
2.	OG COD-7 Providing definitive management for patients with acute gynaecologic emergencies	1-3
3.	OG COD-8 Providing care for patients with complex gynaecologic conditions and /or medical comorbidities	8
4.	OG COD-12 Assessing, diagnosing and managing patients with chronic pelvic pain and sexual health concerns	0-1
5.	OG COD-14 Performing advanced hysteroscopy	2-5
6.	OG COD-15 Performing major vaginal and vulvar procedures	2-5
7.	OG COD-16 Performing major laparoscopic gynecologic procedures	3-5
8.	OG COD-17 Performing major open abdominal gynecologic procedures	3-5
9.	OG COD-18 Managing patients with surgical complications	3-5
10.	OG COD-19 Managing the birthing unit	0-4
11.	TTP-1 Managing complex patients, including those requiring longitudinal care	2-4
12.	TTP-2 Discussing difficult news	1-2

	Other assessments during this rotation:	Tool Location / Platform (e.g. POWER, Entrada):
1.	Procedure logging	Microsoft Web Forms (Office 365)
2.	ITAR (In-Training Assessment Report)	POWER
3.	OSCE (Nov/Dec & May/June)	
4.	In-training exam	

	Key Objectives for this Rotation By the end of the rotation the resident should be able to	CanMEDS Role(s):
1.	Demonstrate a thorough knowledge of the diagnosis and management of obstetric and gynaecologic conditions approaching the level of an autonomous consultant.	Medical Expert
2.	Elicit the trust and cooperation of the patient and their family, listen effectively and discussed appropriate information with patients/families.	Communicator
3.	Document interactions with patients and their families and completes health records in a timely manner.	Communicator
4.	Demonstrate exemplary team leadership skills in providing direction, guidance, and support to junior housestaff and other healthcare professionals. Work collaboratively and effectively with supervising faculty to ensure excellent patient care.	Leader Collaborator
5.	Provide knowledge and expertise to junior housestaff for all aspects of gynaecologic patient care, including emergency consults, hospital ward rounds, operating room, and Chief-Resident clinic encounters.	Scholar Leader

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	Key Objectives for this Rotation By the end of the rotation the resident should be able to …	CanMEDS Role(s):
6.	Complete duties of Chief Resident (e.g. Prepares call and duty schedules to ensure all clinical service requirements are met, adhering to appropriate guidelines (e.g. PARO, program specific); Ensure that all hospital policies and procedures are well known to residents.)	Leader
7.	Independently manage the Chief Resident clinic, including appropriate follow up of results and coordination of patient care.	Leader Health Advocate Communicator Collaborator
8.	Teach both informally and formally in small group sessions, during patient- care rounds, in the ambulatory-care setting, and in the operating room.	Scholar
9.	Provide verbal/written feedback to junior learners; Contribute to performance evaluations of all junior housestaff (medical students to PGY3s).	Scholar

Other:

Procedure Skills:

(1) Demonstrate the ability to perform hysteroscopic, vaginal, open, and laparoscopic gynecologic surgeries as the primary surgeon.