

OBSTETRICS AND GYNAECOLOGY ROTATION PLAN

NAME OF ROTATION: FOD Obstetrics and Gynaecology

FOCUS OF THIS ROTATION

- Provide obstetric and gynaecologic care
- Perform uncomplicated vaginal and operative deliveries
- Perform simple gynecologic surgeries

CBD stage(s) for this rotation:

- Foundations of Discipline (FOD)

Length of this rotation:

- 12 blocks (carried out in 1-3 block periods over the first two years of residency)

PGY Level(s) for this rotation:

- PGY1 and PGY2

Locations for rotation:

- Sunnybrook Health Sciences Centre (SHSC), St. Michael's Hospital (SMH), Mount Sinai Hospital (MSH), Michael Garron Hospital (MGH), North York General Hospital (NYGH), Trillium Health Partners – Credit Valley (CVH)
- NOSM stream residents will complete community blocks at Thunder Bay Regional Health Centre.

Required training experiences included in this rotation

- FOD 1.1 Obstetrics clinic
- FOD 1.2 Gynecologic clinic
- FOD 1.3 Hospital Settings
 - FOD 1.3.1 Obstetric triage
 - FOD 1.3.2 Labour and Delivery
 - FOD 1.3.3 Inpatient obstetrics service
 - FOD 1.3.4 Inpatient gynecology service
 - FOD 1.3.5 Gynecology operative experience
 - FOD 1.3.6 Consultative service to the emergency department and inpatient services
 - FOD 1.3.7 After-hours coverage

Other training experiences that may be included in this rotation

- SF FOD 2.1. Surgical Foundations (SF) education program (Tuesday mornings – PGY1 only)
- OG FOD 2.1. Formal instruction during OBGYN education program (Tuesday afternoons)
- OG FOD 1.1.3.7. On-call per schedule
- OG FOD 2.5 Participation in quality assurance/improvement activities (e.g. presentation at rounds)
- OG FOD 2.6 Orientation to gynaecologic surgical equipment
- OG FOD 2.9 In-training examinations, including objective structured clinical examinations (OSCEs)

	EPAs Mapped to this rotation:	Total # of Entrustments expected, or encouraged, on <i>this</i> rotation	Total # of Entrustments Expected by the end of the CBD Stage
1.	OG EPA FOD-1 Providing routine prenatal care to a low-risk, healthy population	1-3	3
2.	OG EPA FOD-2 Performing assessments of fetal well-being	3-5	5
3.	OG EPA FOD-3 Assessing and providing initial management for patients with common obstetric presentations	5-10	10
4.	OG EPA FOD-4 Managing labour and childbirth	5 (mandatory)	5

	EPAs Mapped to this rotation:	Total # of Entrustments expected, or encouraged, on <i>this</i> rotation	Total # of Entrustments Expected by the end of the CBD Stage
5.	OG EPA FOD-5A Performing uncomplicated cesarean sections with a skilled assistant: Procedure Skills	5 (mandatory)	5
6.	OG EPA FOD-6 Providing early postpartum care	3 (mandatory)	3
7.	OG EPA FOD-7 Providing consultation and initial management for patients with urgent and emergent gynecologic presentations	5 (mandatory)	5
8.	OG EPA FOD-8A Counselling and management for patients requiring family planning: Assessment and Management	1-2	3
9.	OG EPA FOD-8B Counselling and management for patients requiring family planning: LARC Insertion/Removal	1-2	2
10.	OG EPA FOD-9 Providing consultation for patients with gynecologic conditions	5 (mandatory)	5
11.	OG EPA FOD-10 Performing minor gynecologic operative procedures	3-5	5
12.	SF EPA FOD-4 Providing risk assessment and management for preoperative patients in preparation for surgery	1-2	4
13.	SF EPA FOD-5 Providing patient education and informed consent in preparation for surgical care	1-2	3
14.	SF EPA FOD-6 Participating in surgical procedures	1-2	4
15.	SF EPA FOD-7 Managing patients with an uncomplicated postoperative course	1-2	4
16.	SF EPA FOD-8 Managing postoperative patients with complications	1-2	8
17.	SF EPA FOD-9 Supervising junior learners in the clinical setting	1-2	3

	Other assessments during this rotation:	Tool Location / Platform
1.	Procedure logging	My Resident File: Training Portfolio
2.	ITAR (In-Training Assessment Report)	POWER
3.	OSCE (Nov/Dec & May/June) - during PGY2 only	My Resident File: Assessments

	Key Objectives for this Rotation: By the end of the rotation the resident should be able to	CanMEDS Role(s):
1.	Obtain a complete, systematic, and appropriate history from a patient. Conduct the physical assessment, detect important findings, and recognize the significance.	Medical Expert
2.	Demonstrate knowledge of common obstetrical and gynaecologic conditions and formulate an appropriate differential diagnosis and treatment plan. Relate clinical findings to the clinical picture. Determine appropriateness of common invasive investigations.	Medical Expert
3.	Manage the labour and delivery of obstetric patients, achieving competence with low-risk patients and demonstrating an understanding of participative care of high-risk obstetric patients in collaboration with more senior colleagues.	Medical Expert
4.	Interpret fetal heart rate tracings accurately.	Medical Expert
5.	Demonstrate competency in Gynaecologic procedure skills, including uncomplicated D&C, basic hysteroscopic procedures, basic laparoscopic procedures (tubal ligation, ovarian cystectomy, Salpingo-oophorectomy), abdominal entry using Pfannenstiel or midline incision, and uncomplicated abdominal hysterectomy.	Medical Expert

	Key Objectives for this Rotation: By the end of the rotation the resident should be able to	CanMEDS Role(s):
6.	Demonstrate competency in Obstetrics procedure skills including spontaneous vaginal delivery, outlet vacuum deliveries, repair of perineal lacerations and episiotomies, uncomplicated primary caesarean section, and uncomplicated repeat caesarean section.	Medical Expert
7.	Establish therapeutic relationship with patients/families. Elicit the trust and cooperation of the patient. Teach patients/families, as appropriate. Listen effectively, and discuss appropriate information with patients/families. Convey bad news with empathy to patients and families.	Communicator
8.	Teach medical students, junior residents, and other staff in the obstetrical unit and operating room.	Scholar