

EDUCATIONAL OBJECTIVES

Family Planning

Educational Purpose

The mission of the Department of Obstetrics & Gynecology at Columbia University is to provide the finest comprehensive training for future practitioners in our specialty by using the latest knowledge and innovative research and to provide to the community at large the highest quality of patient care. We hope to create a learning environment that fosters the knowledge, skills, attitudes and behaviors of physicians who exhibit the highest levels of professional competence in women's health care.

The clinical rotations in **Family Planning** will involve direct participation in the care of patients in the ambulatory clinic and ambulatory surgery setting. The resident will gain experience in the management of contraception and pregnancy termination for both healthy and medically complicated patients and will also assist in surgical procedures, including pregnancy termination and ultrasound procedures. Didactic sessions including lectures, journal club and division conferences and research meetings will supplement the core clinical experience.

All residents are required to participate in the Family Planning rotations during PGY-1 and PGY-2. Residents who have an ethical or philosophical objection to abortion will not be required to participate in any activities directly related to the provision of abortion services. Individuals should contact the division director, Dr. Carolyn Westhoff, in advance of the rotation to discuss the level of involvement, if any, with which they feel comfortable participating in the care of patients considering or undergoing voluntary termination of pregnancy. Individuals who do not wish to participate in this aspect of the rotation will still gain a full and rich clinical experience on the service, including the diagnosis and management of miscarriage, and exposure to both medical and surgical methods of contraception. Individuals may also be assigned to work on specific research projects by Dr. Westhoff, to maximize their educational experience during the rotation.

Learning Objectives

We have generated the following set of educational objectives for the rotation, modified from the CREOG Educational Objectives Core Curriculum in Obstetrics and Gynecology, Eighth Edition. Residents at each PGY level must demonstrate mastery of these competencies that have been identified by the Accreditation Council for Graduate Medical Education (ACGME).

Objective 1: *The resident will acquire and demonstrate knowledge about core areas in family planning, including:*

PGY-1

1. The ability to define the terms “method effectiveness” and “user effectiveness”.
2. The ability to describe the mechanisms of hormonal and non-hormonal contraception.
3. The ability to describe the advantages, disadvantages, contraindications, failure rates, complications and appropriate follow up associated with the following methods of contraception:
 - a. sterilization
 - b. combined oral contraception
 - c. progesterone-only oral contraception
 - d. transdermal contraception
 - e. vaginal contraception
 - f. injectable steroid contraception
 - g. intrauterine devices
 - h. barrier methods
 - i. natural family planning
4. The ability to describe the impact of contraception on population growth in the United States and other nations.
5. The ability to describe the factors that influence an individual patient’s choice of contraception.
6. The ability to describe the appropriate methods, use, and effectiveness of post-coital contraception.
7. The ability to describe the principle techniques, possible complications and appropriate follow-up for pregnancy termination, including:
 - a. suction curettage
 - b. dilation and evacuation
 - c. medical abortion

PGY-2

1. Maintenance and refinement of the above areas of knowledge, and additional knowledge to include:
2. The ability to describe how religious, ethical and cultural differences affect providers and users of contraception.
3. The ability to describe areas of value conflict or congruence.

4. The ability to discuss barriers of effective contraceptive use among adolescents and adult women.
5. The differential diagnosis of bleeding and abdominal pain in the first trimester of pregnancy.

*ACGME competency domains addressed: Medical Knowledge
Interpersonal Skills and Communication*

Objective 2: *The resident will develop and demonstrate patient history-taking, diagnostic, and management knowledge and skills, including:*

PGY-1

1. The ability to perform a thorough thorough Ob/Gyn history, including menstrual history, obstetric history, gynecologic history, contraceptive and sexual history.
2. The ability to perform a targeted physical examination to confirm the presence of an intrauterine pregnancy, accurately determine gestational age, and identify other abnormal physical findings that may influence the choice of abortion method.
3. The ability to communicate the results of the history and physical examination, ultrasound findings, appropriate blood test results, and results of other specific tests by well organized written notes and oral reports.
4. The ability to develop a list of appropriate contraception options for individual patients, in both the outpatient and postoperative settings.
5. The ability to develop hypotheses, diagnostic strategies and management plans in patients with gynecologic problems, including routine postoperative care following gynecologic surgery or pregnancy termination.

PGY-2

1. Maintenance and refinement of the above history-taking, diagnostic and management-planning skills.
2. The ability to develop a strategy for providing counseling about family planning and safer sex methods.
3. The ability to appropriately screen women for cervical cancer, including appropriate testing intervals.
4. The ability to manage bleeding and abdominal pain in the first trimester of pregnancy.
5. The ability to identify risk factors and treatment options for patients with ectopic pregnancy.

ACGME competency domains addressed: *Medical Knowledge*
Patient Care
Interpersonal Skills and Communication
Practice-Based Learning and Improvement

Objective 3: *The resident will demonstrate understanding of, and the ability to perform, gynecologic procedures, including:*

PGY-1

1. The following basic gynecologic procedures under direct supervision:
 - a. Pap smear
 - b. Administration of injectable contraception
 - c. Placement of intrauterine devices
 - d. Transvaginal ultrasound for early pregnancy evaluation

2. The ability to describe the accepted indications and risks for the following procedures and perform them under visual supervision:
 - a. Manual vacuum aspiration
 - b. Electric vacuum aspiration
 - c. Laparoscopic bilateral tubal ligation

PGY-2

1. Maintenance and refinement of the above operative and ultrasound skills.

2. The ability to describe the accepted indications and risks for the following procedures and perform them under visual supervision:
 - a. Dilation and evacuation

ACGME competency domains addressed: *Patient Care*
Medical Knowledge
Practice-Based Learning and Improvement

Objective 4: The resident will acquire and demonstrate the ability to interact and communicate with patients in a manner that is culturally sensitive and patient-centered, including:

PGY-1

1. The ability to interact with the patient to gain her confidence and cooperation and assure her comfort, privacy, confidentiality of patient information, dignity, and modesty.
2. The ability to address sensitive issues with compassion and demonstrate sensitivity to human differences and understanding of the impact of gender, ethnic, cultural, socioeconomic and other social factors.
3. The ability to provide non-directive counseling to patients surrounding pregnancy options, in a manner that is sensitive to cultural beliefs.

PGY-2

1. Maintenance and refinement of the above interpersonal and communication skills, with the demonstrated ability to communicate in a professional and empathetic manner with patients and their families, in a way that is consistent with the statements and management plans developed with the attending physicians and senior residents on the team.
2. The ability to effectively and empathetically deliver bad news to patients and their families.

ACGME competency domains addressed: *Interpersonal and Communication Skills*
Professionalism
Systems-Based Practice

Objective 5: The resident will acquire and demonstrate the ability to interact, communicate, and work effectively with clinical and ancillary staff in inpatient, outpatient, and operating room settings, including:

PGY-1

1. The ability to share knowledge effectively with peers.
2. The ability to carry out thoughtful, respectful, and effective communication with junior and senior colleagues, nurses, and ancillary staff, in a way that fosters cooperation and patient-based care.

PGY-2

1. Maintenance and refinement of the above interpersonal and communication skills, with the additional ability to carry out thoughtful, respectful, and effective communication with referring physicians, in a way that fosters cooperation and patient-based care.

ACGME competency domains addressed: *Interpersonal and Communication Skills*
Professionalism
Systems-Based Practice

Objective 6: The resident will acquire and demonstrate the ability to apply knowledge and understanding gained from basic science and clinical research to support one's own education and provide accessible information to patients, by:

PGY-1

1. Developing skills (including use of information technology) required to access, then, critically assess the current medical literature.
2. Learning the appropriate application of research and/or evidence-based studies to patient care and communication.
3. Demonstrating the ability to collect, apply and synthesize patient outcome data to larger population.

PGY-2

1. Maintenance and refinement of the above skills.

ACGME competency domains addressed: *Interpersonal and Communication Skills*
Medical Knowledge
Practice-Based Learning and Improvement

Objective 7: The resident will acquire and demonstrate the ability to use feedback to identify areas and set goals for improvement by:

PGY-1

1. Acknowledging and accepting the limitations of one's own knowledge, understanding and clinical skills, and seeking and accepting feedback from attending physicians and senior residents.
2. Developing goals for improvement in the above areas, commensurate with expectations for PGY-1, with senior members of the team and showing evidence of improvement in above identified areas within an agreed upon time frame.

PGY-2

1. Acknowledging and accepting the limitations of one's own knowledge, understanding and clinical skills, and seeking and accepting feedback from attending physicians and senior residents.
2. Developing goals for improvement in the above areas, commensurate with expectations for PGY-2, with senior members of the team and showing evidence of improvement in above identified areas within an agreed upon time frame.

***ACGME competency domains addressed: Professionalism
Practice-Based Learning and Improvement***

Objective 8: The resident will demonstrate the ability to conduct oneself in a professional manner by:

PGY-1

1. Demonstrating personal integrity; altruism; a commitment to ethical principles pertaining to the provision of clinical care, such as autonomy, benevolence, and nonmaleficence; and a commitment to ethical behavior in all other aspects of professional practice.
2. Exhibiting dependability, responsibility, and self-respect.

PGY-2

1. Demonstrating personal integrity; altruism; a commitment to ethical principles pertaining to the provision of clinical care, such as autonomy, benevolence, and nonmaleficence; and a commitment to ethical behavior in all other aspects of professional practice.
2. Exhibiting dependability, responsibility, and self-respect.

ACGME competency domains addressed: Professionalism

Objective 9: The resident will demonstrate knowledge of important systems and regulatory requirements of medical training and practice; and demonstrate adeptness in using the system of care in a way that is beneficial and vital for excellent patient care, including:

PGY-1

1. Using available system resources to respond to medical errors, should they arise, in an appropriate and timely manner.
2. Demonstrating familiarity with the requirements of the American Board of Obstetrics and Gynecology.
3. Demonstrating knowledge of, and completing all, hospital/university-mandated and regulatory-agency documentation, including:
 - a. Documentation of participation in all surgeries and procedures in the ACGME case log system and completion of Surgical Skills Competency Forms.
 - b. Documentation of all pertinent ambulatory patient encounters in the ACGME case log system
 - c. Completion of all discharge summaries for Sloane patients on the Family Planning service.
4. Demonstrating adherence to NYS and ACGME work rules and regulations.
5. Demonstrating knowledge of the process and system for evaluating faculty and programs, including:
 - d. Completion of all electronic evaluations for the Family Planning rotation in the E*value system.
 - e. Completion of medical student evaluations for every student encountered during the rotation.

****The above tasks must be completed within one week after completion of the rotation****

PGY-2

1. Continuing to demonstrate knowledge and adherence to all the above requirements.

***ACGME competency domains addressed: Professionalism
Systems-Based Practice***

Objective 10: The resident will demonstrate the ability to work on original research by:

PGY-1

1. Developing skills required to assess reports in medical literature.

PGY-2

1. Maintaining and refining skills required to assess reports in medical literature.

PGY-3

1. Maintaining and refining skills required to assess reports in medical literature.
2. Identifying an area of research interest and pursuit of an original project with faculty guidance.
3. Preparing for the option/or possibility of fellowship training.

PGY-4

1. Maintaining and refining skills required to assess reports in medical literature.
2. Continuing to work on an original research project.
3. Presenting original research to the department at the Sloane Academic Assembly as well as national meetings and/or publication of original research project in peer reviewed journals.

ACGME competency domains addressed: Medical Knowledge

Objective 11: The resident will develop and demonstrate teaching skills by:

PGY-1

1. Training and providing assistance in teaching medical students.

PGY-2

1. Assisting in the supervision and teaching of PGY-1 residents and medical students.
2. Providing informal and interactive teaching with colleagues in other areas in the knowledge of obstetrics and gynecology.

ACGME competency domains addressed: *Medical Knowledge*
Interpersonal Skills and Communication

Resident Supervision

This set of learning objectives is designed to communicate clearly what is expected in terms of the knowledge, skills, and attitudes that ideally would be acquired during the **Family Planning** rotation by all residents.

The faculty believes that superior resident education requires the opportunity for decision making by the resident staff as their level of training and knowledge allows. All decisions will be evaluated by the fellows and attending physicians who act as supervisors on the Family Planning service. Residents are encouraged to make decisions on their patients with the help of the fellows and faculty. An attending physician is available for consultation and/ or direct supervision at all times, including nights, weekends and holidays.

Resident Responsibilities

In addition to the educational component of the rotation, certain administrative duties are incumbent upon house officers on each clinical service. The department expects that residents will attend to these administrative tasks with equal diligence and attention to detail. Teamwork and collegiality are key elements to successfully completing these duties in an efficient manner, while emphasizing learning and excellent patient care. The following guidelines have been created by the chief residents in the department to delineate the responsibilities of each team member on the service.

The PGY-1 resident on the Family Planning service should:

1. Attend Family Planning Clinic on Monday mornings and afternoons.
2. Attend the Family Planning Divisional meeting at 8am on Tuesdays, followed by Family Planning clinic on Tuesday mornings and afternoons.
3. On Wednesdays, be present at the Allen Pavilion to assist in the OR at 7 AM or attend Urgi-Care Clinic if no cases are scheduled, followed by the Continuity Clinic session at 21 Audubon in the afternoon.
4. Attend weekly didactic sessions on Thursday morning and Urgi-Care clinic on Thursday afternoons.
5. Have no clinical responsibilities on Fridays.
6. Attend VTOP clinic in the Irving Pavilion on assigned Saturdays.
7. Participate in weekend call coverage on assigned Sundays.

The **PGY-2** resident on the **Family Planning** service should:

1. Have no clinical responsibilities on Mondays.
2. Attend the Family Planning Divisional meeting at 8am on Tuesdays, followed by Family Planning clinic on Tuesday mornings and afternoons.
3. On Wednesdays, be present at the Allen Pavilion to assist in the OR at 7 AM or attend Urgi-Care Clinic if no cases are scheduled, followed by the Continuity Clinic session at 21 Audubon in the afternoon.
4. Attend weekly didactic sessions on Thursday morning and Urgi-Care clinic on Thursday afternoons.
5. Assist in the OR at the Allen Pavilion for second trimester terminations on Fridays.
6. Attend VTOP clinic in the Irving Pavilion on assigned Saturdays.
7. Participate in weekend call coverage on assigned Sundays.

Recommended Reading and Educational Materials

All ACOG Compendium Bulletins pertaining Family Planning:

- #3 – Medical Management of Tubal Pregnancy
- #18 – Use of Hormonal Contraception in Women with Coexisting Medical Conditions
- #46 – Benefits and Risks of Sterilization
- #59 – Intrauterine Device
- #67 – Medical Management of Abortion
- #69 – Emergency Contraception

Method of Evaluation

1. A Surgical Skills Competency Form should be completed by the resident and attending physician involved on every procedure performed during the rotation. Residents should receive timely formative feedback from the attending physician(s) during this rotation. All forms should be submitted to the Residency Coordinator on a weekly basis. These will be maintained in the resident's portfolio and reviewed by the program directors and heads of service at regular intervals.
2. Global 360° evaluations of residents are performed at the completion of each five week block and reflect input from faculty members, nurses, physician extenders, patients, peers and medical students. These evaluations will be available to residents via the E*value electronic system. These evaluations will be reviewed with the program directors during the resident's semi-annual evaluation meeting, and at interim points if deemed necessary.
3. Cognitive assessment of the resident's medical knowledge is achieved by the relevant scores on the CREOG In-Training examination.