



# UNIVERSITY OF ALBERTA

## Enhanced Skills Family Medicine Obstetrics Program

Welcome to our program

The University of Alberta Enhanced Skills (ES) Family Medicine Obstetrics (FMOB) Program is a 12-16 week (3-4 block) category 2 non-surgical program designed to provide additional training for family physicians committed to providing late gestation antepartum, intrapartum, and postpartum care as part of their practice. Residents will acquire knowledge and skills to help them feel competent and confident in the management of pregnant patients in a range of clinical settings. To support family physicians as lifelong learners and scholars, residents will also have opportunities to develop skills and comfort as medical educators.

For the 2023-2024 academic year, only applicants in their current PGY2 year in the University of Alberta Family Medicine Residency Program will be eligible. Applicants are encouraged to outline their learning and future practice goals with the program so that their experiences can be tailored to meet their needs.

Dr. Sanja Kostov, ES FMOB Program Director  
Dr. Emily King, ES FMOB Assistant Program Director

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## Objectives

### MEDICAL EXPERT

The PGY3 resident will demonstrate the following knowledge base and procedural skills:

Knowledge of:

#### 1. Routine antenatal & postpartum care:

- Standard prenatal care
- Routine prenatal investigations and optional genetic screening
- Commonly used and avoided medications in pregnancy & infant feeding
- Diagnosis and management of sexually transmitted infections in pregnancy
- Diagnosis and management of mental health disorders in pregnancy
- Screening for Intimate partner violence and appropriate referral resources in pregnancy
- Management of early pregnancy loss
- Management of postpartum issues (e.g., mental health, puerperal pain and infection, pelvic floor dysfunction, breast concerns, infant feeding issues, contraception)

#### 2. Management of complicated pregnancy:

- Vaginal bleeding
- GDM

- IUGR
- Pregnancy Induced Hypertension/pre-eclampsia
- TOLAC
- Substance use and dependence in pregnancy
- Major medical illness in pregnancy
- PROM
- Antepartum hemorrhage
- Preterm labour
- Post dates pregnancy
- Fetal death

### **3. Intrapartum Care:**

- Diagnosis of normal and abnormal patterns of labour progress and delivery
- Assessment and appropriate management of labour progress
- Intrapartum fetal surveillance (intermittent auscultation and electronic fetal monitoring)
- Fetal scalp sampling interpretation\* (if available)
- Diagnosis and management of patient and/or fetal problems in labour
- Indications for, methods and complications of induction of labour
- Indications for, methods and complications of augmentation of labour
- Anesthesia in labour (risks and benefits of medications available intrapartum)
- Diagnosis of complicated labour and indications for assisted vaginal birth and c-section

### **4. Treatment of obstetrical emergencies:**

- Fetal surveillance classified as atypical and abnormal
- Shoulder dystocia
- Postpartum hemorrhage
- Malpresentation\*
- Uterine abruption or rupture\*
- Cord prolapse\*
- Eclampsia\*

(\* indicates knowledge of principles and as much experience as possible)

### **5. Newborn Care:**

- Newborn resuscitation\* (including evidence of completion of NRP course within the past 2 years)
- Newborn assessment
- Approach to common problems in the newborn (e.g., respiratory distress syndrome, hypoglycemia, hyperbilirubinemia, infant feeding difficulties)

### **Procedural Skills:**

- Cervical ripening and induction of labour (mechanical or chemical)
- Labour assessment (e.g., cervical assessment, determination of rupture of membranes)
- Interpretation of fetal surveillance including IA, CFM
- Artificial rupture of membranes (ARM)
- Application of fetal scalp electrode
- Fetal scalp sampling\* (if available)
- Repair of 1st and 2nd degree tears and episiotomies

- Assist with repair of 3rd and 4th degree tears\*
- Assist with manual removal of placenta\*
- Vaginal delivery
- Vacuum delivery\*
- Assist with forceps delivery\*
- Assist with C-section\*

(\*) indicates knowledge of principles and experience where possible

## COMMUNICATOR

As a communicator, the resident will demonstrate:

- The ability to establish rapport and therapeutic relationships with pregnant and labouring patients and their families
- An awareness of the unique issues surrounding pregnant patients (including psychosocial and cultural issues)
- Effective communication within the interprofessional team of health care workers
- Accurate and timely record keeping

## COLLABORATOR

As a collaborator, the resident will:

- Function effectively within the multidisciplinary team of the labour and delivery unit recognizing the roles and responsibilities of the different team members to ensure the provision of high quality care for the patient

## LEADER

As an effective leader, the resident will:

- Demonstrate an understanding of the resources available to pregnant patients and their families and the appropriate use of these resources within the health care system
- Coordinate the care of the patient both within the community and the hospital to ensure provision of the best possible care

## HEALTH ADVOCATE

As a health advocate, the resident will:

- Identify and respond appropriately to the needs of each individual patient
- Identify opportunities to advocate for the health care needs for the antepartum, intrapartum and postpartum patient and their family
- Advise patients about local resources available to them and their families

## SCHOLAR

As a scholar, the resident will:

- Have an understanding of the seminal research in obstetrical care and its application into their daily practice
- Demonstrate a commitment to maintaining and enhancing professional knowledge and activities through ongoing learning

- Effectively manage and teach multiple learners at various levels of training in a clinical setting
- Effectively deliver curriculum to learners in a non-clinical setting

## PROFESSIONAL

As a professional, the resident continually strives to:

- Commit to the provision of the best possible care for their pregnant patients
  - Demonstrate respect and compassion towards all patients and their families
  - Recognize and appropriately respond to ethical issues in practice
  - Demonstrate integrity and honesty
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## Assessment:

Each trainee will obtain formative assessment through field notes and a record of procedures done. This should be intermittently reviewed with their mentor and preceptor(s) to ensure that learning objectives are being met. For each labour management and birth the following information should be included:

- Intrapartum events and interventions
- Type of delivery
- Procedures performed
- Complications if any

Summative assessment using an In-Training Evaluation Report (ITER) will be completed at the end of each block by their chief supervisor/mentor. All summative assessment will be reviewed by the program director and assistant program director who will determine if the trainee has met objectives for completion of the program.

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## Program Evaluation:

Trainees will be asked to complete program evaluation following all clinical and non-clinical curricular delivery. Informal feedback throughout the program is welcome.

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*Goals and objectives adapted from University of Toronto and McGill University with permission (2023).*