

Obstetrics and Gynecology: Reproductive Endocrinology and Infertility Rotation Objectives, Core of Discipline

CanMEDS Framework: Medical Expert, Communicator, Collaborator, Leader, Health Advocate, Scholar, Professional.

Reproductive Endocrinology and Infertility Learning Objectives

It is recognized that the resident may not be exposed to all elements of the objectives listed in this document; however, at the end of the rotation, the resident should demonstrate knowledge or ability in the following:

Medical Expert

1. Demonstrate diagnostic and therapeutic skills for effective and ethical patient care.
2. Demonstrate the ability to access and apply relevant information to clinical practice.
3. Demonstrate effective consultation services concerning patient care, education, media relations, and legal opinions.
4. Recognize personal limitations of expertise, including the need for appropriate patient referral and continuing medical education.

Procedural Skills:

- Full Physical Examination
- Advanced Hysteroscopy
- Gynecologic Ultrasound
- Management of Reproductive Challenges
- Endometrial biopsy

The fully trained obstetrician and gynecologist must be able to:

1. Take a history of the patient's problem.
2. Conduct a complete physical examination.
3. Demonstrate an understanding of the value and significance of laboratory, radiological, and other diagnostic studies.
4. Discuss the relative merits of various treatment alternatives.
5. List and discuss the following: indications, contraindications, types, variations, complications, and risks and benefits of surgical and non-surgical treatments.
6. Discuss the significance of perioperative and postoperative problems that could arise following genitourinary tract surgery.

Other Educational Objectives:

1. **Reproduction and endocrine disorders**
 - 1.1 Normal reproductive physiology
2. **The pathophysiology, investigation, diagnosis, and/or management of:**
 - 2.1 Menstrual irregularity
 - 2.2 Amenorrhea (primary and secondary)
 - 2.3 Dysfunctional uterine bleeding
 - 2.4 Galactorrhea
 - 2.5 Hirsutism
 - 2.6 Polycystic Ovarian Disease
 - 2.7 Premature ovarian insufficiency
 - 2.8 Menopause and urogenital aging (management, risks, and benefits of hormonal and non-hormonal treatment approaches).
3. **Infertility**
 - 3.1 Understand the complex etiology of infertility.
 - 3.2 Interpretation of tests and procedures including hormonal evaluation, semen analysis, ovulation prediction, endometrial biopsy, hysterosalpingography, hysteroscopy and laparoscopy
 - 3.3 Understand the effectiveness/complications of current standard treatments for infertility, as well as appropriate indications for subspecialty referral.
 - 3.4 Etiology and the management of ovulatory disorders, including the role of clomiphene citrate, letrozole, and progestogens.

Rotation Information

Rotation Contact

Dr. Peggy Sagle

Reading material:

Prior to this rotation, the resident should read the following to prepare for this rotation: SOGC Guidelines, and ASRM Resident Education Resources.

Rotation duration:

Two 4-week blocks

Vacation and time off: Preferably none

Maximum 1 week (see vacation guidelines)

Review of rotation objectives: Rotation objectives should be reviewed with the resident as the rotation begins.

Assessment:

At the end of this rotation the resident's knowledge, skills and abilities will be assessed through an oral examination.

EPAs

During this rotation, the following EPAs should be achieved.

Core of Discipline:

- | | |
|-------------|---|
| C9 | Assessing and initiating management for patients with reproductive challenges.
5 successes |
| C10 | Diagnosing and managing pediatric and adolescent patients with common gynecologic conditions
2 successes |
| C14A | Performing advanced Hysteroscopy
1 success |

Suggest new EPA:

C 8 Providing care for patients with complex gynecologic conditions and /or medical comorbidities
1 success from Menopause clinic

4. Pediatric and adolescent gynecology

The pathophysiology, investigation, diagnosis, management and possible psychosocial ramifications of:

- 4.1 Developmental anomalies
- 4.2 Precocious and delayed puberty
- 4.3 Abnormal vaginal discharge and bleeding in a child or adolescent
- 4.4 Contraception and adolescent pregnancy
- 4.5 The medico-legal aspects of consent and confidentiality specific to this age group.

5. Contraception

The fully trained obstetrician and gynecologist must be able to:

- 5.1 Identify methods of contraception, various mechanisms of action, and the indications, contraindications, risks, and benefits and possible complications for the use of each method.
- 5.2 Outline strategies to promote adherence to contraceptive methods and encourage safe sex behaviors.

6. Pregnancy Loss

The pathophysiology, investigation, diagnosis, and management of:

- 6.1 Spontaneous abortion in the first trimester
- 6.2 Ectopic pregnancy
- 6.3 Recurrent pregnancy loss

Working level of knowledge is required for the following:

1. Complex regimens for ovulation induction using GnRH analogues and gonadotropins.
2. Assisted reproductive technologies currently available, including IUI, IVF, and ICSI, including their comparative success and potential complications.
 - 2.1 Appropriate indications for referral for such technologies, including the use of donor gametes.
 - 2.2 Appropriate indications for the use of preimplantation genetic diagnosis (PGT-M) and preimplantation genetic screening (PGT-A).

Communicator

The fully trained obstetrician and gynecologist must be able to:

1. Establish effective relationships with patients and their families by eliciting trust, demonstrating empathy and understanding, and maintaining confidentiality.
2. Gather relevant history from patients and families and discuss appropriate information with the patient, her family, and other health care providers to ensure the best health care is provided.
3. Maintain accurate and complete records in a timely fashion.
4. Demonstrate the ability to obtain informed consent for medical and surgical therapies.
5. Demonstrate the ability to record accurately and succinctly data collected from patients, laboratory tests and radiological studies and to communicate (oral or written) conclusions based on these data to patients and their families, referring physicians and other involved health care personnel.
6. Demonstrate excellent interpersonal skills when working with patients, families, staff, and other health care professionals.
7. Communicating with patients around the psychosocial, cultural, and ethical issues that surround individual patients with reproductive and sexual disorders, including prognosis and breaking difficult news
8. Demonstrate the ability to take a sexual history in a non-judgmental fashion.

Leader

1. Understand resource stewardship (appropriate tests, treatment options and choosing wisely).
2. Assess patients in a respectful and efficient manner.
3. Determine cost-effective investigations for diagnosis of the common problems seen in a reproductive endocrinology and infertility setting.
4. Determine proper examinations for diagnosis of pediatric and adolescent gynecology disorders.
5. Organize patient care, including responding to patient and family queries, communicating with consulting services, following up on examinations, and completing health records in a timely way.
6. Able to recognize personal limitations and seek assistance when necessary.

Health Advocate

1. Strives to improve the health of patients and communities.
2. Identifies the important determinants of health affecting patients.
3. Responds to challenges where support is suitable.

4. Understands cultural impacts on sexuality, puberty, contraception, and pregnancy.
5. Understands the individuality of adolescents concerning their health care.
6. Understands cultural and socio-economic influences on treatment and management options.

Scholar

1. Develops a strategy for continued learning.
2. Facilitates patient and peer education.
3. Aims to contribute to the development of new knowledge in the field of obstetrics and gynecology.
4. Critically assesses sources of medical information.
5. Identifies gaps in personal knowledge and skill, and develop strategies to correct them by self-directed reading, discussion with colleagues, and ongoing procedural experience.
6. Understands the principles of basic and applied clinical research, including biostatistics.

Professional:

1. Recognize the unique ethical dilemmas that arise in REI (PGT, donor gametes, surrogacy).
2. Endeavor to monitor learning and seek feedback by attempting EPAs regularly.
3. Demonstrate the highest level of personal and professional ethics and patient confidentiality.
4. Demonstrate a professional and respectful attitude with patients, health care professionals, and all levels of staff.
5. Report absences in a timely manner.
6. Recognize issues and respond where advocacy is appropriate.
7. Request assistance in patient management when appropriate.
8. Demonstrate awareness of the role of child protective agencies concerning sexual abuse

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