OB/GYN
Clerkship Learning Objectives

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General Description
4 CREDIT HOURS

Required Rotation
This required rotation of four (4) weeks is intended to be a structured clinical experience under direct supervision. In a short time, all of Obstetrics and Gynecology cannot possibly be covered; this must therefore be considered an introductory experience. This rotation is a time to build a foundation in clinical problem solving and decision-making, a time to build clinical experience and acumen on a foundation of didactic information. Students on this service will be in their third year. The College of Osteopathic Medicine, Department of OB/GYN will administer a post-rotation examination when the student has completed this required rotation. The COMAT Obstetrics and Gynecology examination is a Standardized National Exam developed by the National Board of Osteopathic Medical Examiners, specifically designed for end of the OB/Gyn clerkship assessment. Students are required to achieve a passing exam score. Students should access the D2L site for detailed instructions regarding the requirements of this rotation.

Purpose
Clinical experiences are intended to assist the student’s transition from didactics to integrated clinical evaluation, decision-making, and management of obstetrical patients and patients with obstetrical and gynecological problems. In addition to gaining specific skills during this rotation, the student should also develop skill in systematic medical problem solving and patient management abilities, establish or reinforce patterns of independent learning and self-evaluation, and improve skills in communication and medical record keeping.

At the completion of this rotation, the student should have reached certain broad goals, including:

- improved basic skills in physical diagnosis;
- familiarity with ancillary diagnostic procedures (ultrasound, laparoscopy, etc.);
- an understanding of indications for appropriate laboratory and diagnostic tests.

Students are expected to assist in the management of acute and chronic problems, under supervision. The student should also develop fundamental psychomotor skills by performing routine basic procedures under direct supervision.

Objectives
We recognize that four weeks is insufficient time to cover a comprehensive list of objectives. Clearly, subjects addressed in any clinical rotation are dependent on the numbers of patients and kinds of disease entities presenting to a particular service. Nevertheless, certain minimum content in Obstetrics and Gynecology must be addressed, either by clinical exposure or by didactic materials so that students are prepared for Board examinations, post-rotation examination, and other evaluations. Therefore, the following sections contain relatively broad, basic objectives for which students are responsible.
Affective
1. Be cognizant of the social and health policy aspect of women’s health (ethical issues, sterilization, abortion, domestic violence; adolescent care regarding STDs, contraception, and pregnancy).

Psychomotor Objectives – Gynecology
1. Conduct a medical interview and accurate physical exam with emphasis on obstetrics and gynecology.
   a. Establish rapport with patients.
   b. Generate a problem list.
   c. Form a diagnostic impression, including a differential diagnosis.
   d. Develop a management plan while also considering economic, psychosocial, cultural, and ethical issues.
   e. Recommend age-appropriate screening procedures and time intervals (mammogram, bone density, Pap, etc.).
2. Properly collect a Pap smear and microbiologic cultures.
   a. Provide an explanation to the patient regarding the purpose of the test.
   b. Understand the results.
   c. Develop a treatment plan based on the results.
3. Provide a preliminary assessment of sexual concerns.
   a. Take a sexual history, including sexual function/orientation.
   b. Explain the physiology of the female sexual response.
   c. Classify common disorders of female sexual dysfunction.
   d. Describe risk factors for, evaluation and management of sexual abuse and domestic violence.

Cognitive Objectives – Gynecology
1. Understand current contraceptive technology.
   a. Describe the physiologic basis (OCPs, IUD, emergency contraception, permanent sterilization, etc.).
   b. Describe the effectiveness of each form of contraception.
   c. Be able to counsel the patient regarding the risks and benefits for each form of contraception.
   d. Know surgical and non-surgical methods of pregnancy termination and be able to provide non-directive counseling regarding pregnancy options.
2. Provide a differential diagnosis of an ‘acute abdomen’- pelvic infection, ectopic pregnancy, adnexal torsion, appendicitis, diverticulitis, renal calculi, etc.
3. Describe the changes involved in the menstrual cycle, including changes associated with puberty and menopause.
   a. Describe the normal menstrual cycle.
   b. Define abnormal uterine bleeding.
   c. Describe etiologies of abnormal uterine bleeding.
   d. Define amenorrhea, oligomenorrhea, and dysmenorrhea.
   e. Perform an assessment of symptoms and physical findings associated with hypoestrogenism and the management of these menopausal/perimenopausal symptoms.
4. Discuss common gynecologic disorders.
   a. Describe symptoms and physical findings in patients with uterine leiomyomas.
   b. Describe symptoms and physical findings in patients with endometriosis.
   c. Define chronic pelvic pain, cite etiologies, and list diagnostic procedures for its evaluation.
   d. Describe normal pelvic floor support and common disorders of pelvic floor support in women, the symptoms, evaluation, and management options.
5. Basically describe causes, evaluation, and treatment of infertility.
   a. Define infertility.
   b. Describe male and female factors of infertility, the evaluation and management options for infertility.
6. Understand common vaginal and vulvar disorders and the appropriate diagnostic and management options.
   a. Be able to interpret a wet mount.
   b. Describe symptoms, evaluation and management of common types of vaginitis.
   c. Describe signs, symptoms, and treatment of sexually transmitted diseases, including gonorrhea, Chlamydia, herpes simplex virus, human papillomavirus, human immunodeficiency virus and hepatitis B virus infection.
   d. Describe diagnosis and management of urinary tract infections.
   e. Describe signs, symptoms, evaluation, and management of common vulvar dermatoses.

7. Discuss reproductive cancers.
   a. List risk factors for cervical, endometrial, vulvar and ovarian cancers.
   b. Describe symptoms and physical findings of a patient with endometrial and cervical cancer.
   c. Describe symptoms and physical findings of a patient with ovarian cancer.
   d. Describe symptoms and physical findings of a patient with vulvar cancer.
   e. Outline the proper management of a patient with postmenopausal bleeding.
   f. Describe signs, symptoms, and management of gestational trophoblastic disease.

8. Breast disorders.
   a. Describe common breast disorders of the nonpregnant female, their evaluation, and management options.

**Psychomotor Objectives - Obstetrics**

1. Establish the diagnosis of pregnancy, including interpretation of laboratory and sonographic information.
2. Evaluate an antepartum patient, including assessment of gestational age, fundal height, and fetal heart auscultation. Describe a management plan for a normal antepartum patient.

**Cognitive Objectives – Obstetrics**

1. Understand the basic physiologic adjustments that accompany normal gestation.
   a. Maternal anatomic changes associated with pregnancy.
   b. Effect of pregnancy on common laboratory test results.
2. Understand embryonic and fetal development, including common teratogens.
3. Describe preconception, antepartum, intrapartum, and postpartum care.
   a. Describe how certain medical conditions affect pregnancy, including substance abuse, nutrition, exercise and immunizations.
   b. Describe how pregnancy affects certain medical conditions.
   c. Know how to diagnose pregnancy and determine gestational age.
   d. Know when to perform diagnostic studies during pregnancy and understand the results.
   e. Know signs and symptoms of labor.
   f. Compare the three stages of labor and recognize common abnormalities.
   g. Be able to interpret basic electronic fetal monitoring, both antepartum and intrapartum.
   h. Describe the steps of a vaginal delivery.
   i. Describe the components of normal postpartum care.
4. Understand breast health issues.
   a. Describe normal physiologic and anatomic changes of the breast during pregnancy and postpartum.
   b. Recognize postpartum abnormalities of the breast and develop a management plan for mastitis.
   c. Identify commonly used medications which are appropriate and inappropriate to use while breastfeeding.
5. Common problems in obstetrics.
   a. Develop a differential diagnosis for bleeding for 1st trimester vaginal bleeding, and/or abdominal pain.
   b. Define and describe the signs of preeclampsia - eclampsia.
   c. Explain the pathophysiology and prevention of isoimmunization.
   d. Develop a differential diagnosis for 3rd trimester bleeding; describe evaluation, initial management, and maternal and fetal complications of 3rd trimester bleeding.
   e. Cite the risk factors for preterm labor and its signs, symptoms, and management options, as
well as complications associated with preterm delivery.

f. Cite the risk factors for premature rupture of membranes and describe the signs, symptoms, and diagnostic methods to confirm rupture of membranes. Also describe maternal and fetal complications associated with premature rupture of membranes.

g. List risk factors, initial evaluation and management for postpartum hemorrhage. Develop a differential diagnosis for postpartum hemorrhage.

h. Identify risk factors and diagnose postpartum blues, depression, and psychosis.

i. Describe the evaluation of and treatment goals for gestational diabetes and contrast with pregestational diabetes.

j. List indications for operative delivery.

Implementation

Course objectives are to be accomplished in a College affiliated hospital or clinical facility, under supervision. Basic objectives must be covered during the rotation to assure adequate student preparation for Board examinations and other evaluations such as post-rotation examinations. The use of diverse methods appropriate to the individual and the clinical site are encouraged, but patient-centered teaching is optimal.

Didactic methods to achieve required objectives include:

- reading assignments
- lectures including those prepared and presented by the student
- computer-assisted programs (if available)
- student attendance at/participation in formal clinical presentations by medical faculty

Clinically oriented teaching methods may include:

- assignment of specific and supervised patient care responsibilities
- participation in clinic visits, daily patient rounds and conferences
- supervised and critiqued clinical work-ups of patients admitted to the service
- obstetrics and gynecology case study assignments and presentations

Three levels of achievement are identified:

- familiarity with a variety of medical procedures through observation and assisting
- proficiency in clinical procedures through actual supervised performance
- awareness of the availability of various medical procedures and their use

uWISE v.2

The APGO (Association of Professors of Gynecology and Obstetrics) Undergraduate Web-Based Interactive Self-Evaluation (uWISE) is a 542-question interactive self-exam designed to help medical students acquire the necessary basic knowledge in obstetrics and gynecology, regardless of future medical specialty choice.

To access uWISE v.2, you must create a new account using your institutional email address (e.g. @dmu.edu). All students must create their own account with a username and password of their choice.

To create a profile, go to https://www.apgo.org/student/uwise2.html

1. Click on “Create your own account”
2. Choose your APGO Member Program (Des Moines University) from BOTH dropdowns, the “medical student” access and the “residency preparation” access.
3. Provide a valid email address associated with this Program (e.g. @medschool.edu). Personal email addresses will not properly associate you with your program.
4. Please submit your answers to the questions as instructed.

REQUIRED TEXTS and RESOURCES:

Obstetrics and Gynecology, 7th edition, Beckman and Ling

uWISE: Interactive Web-based self-assessment quizzes based on nationally recognized objectives (see “Assignments” below) The APGO videos listed below will be an excellent reference to complete before taking the self-assessment test.
REFERENCE TEXTS and RESOURCES:

APGO Videos, especially #7, 8, 11, 13, 15, 18, 20, 22, 23, 24, 25, 26, 27, 28, 29, 31, 33, 35, 37, 43, 47, 48, 50, 51, 52, 59, and 63. Also, the sections numbered 56, 57, and 58 have valuable “teaching cases” material as a resource. The APGO site may be accessed through APGO.org, and proceed to Student Resources, and select the “medical student educational objectives” dropdown. The videos and teaching cases are located in this section.

Blueprints Obstetrics and Gynecology, 6th Ed., Callahan, T and Caughey, AB, Lippincott, Williams, and Wilkins, 2013


Comprehensive Gynecology, 6th Ed Lentz, Elsevier Health Sciences, 2012


Required Assignment

It is expected that students will complete the “Comprehensive Self Assessment Test #1 on the uWise site during the clerkship, and submit answers as indicated on the site. Progress of each student will be monitored through the APGO site by our department. Completing additional uWise questions, though NOT required, will help prepare students for the post clerkship examination.

Post Rotation Examinations

Des Moines University Division of Obstetrics and Gynecology will require the completion of the NBOME-COMAT Obstetrics and Gynecology subject-examination with a standard passing score of 80 or greater. The NBOME-COMAT Obstetrics and Gynecology exam is a web-based exam administered by the NBOME. This exam is accessed via the NBOME website and consists of 125 test items, with a 2.5 hour time limit and a 5-minute tutorial prior to starting the exam. The breakdown of topics for this post-rotation exam can be found at http://www.nbome.org/comat-ob.asp. This exam will provide the student an opportunity to be informed of his or her progress nationally. The Ob/Gyn COMAT exam must be taken on the Thursday or Friday of the last week of the required rotation. However, if this is not possible, you must contact the department via phone or email for consideration of an extension in completing this exam. A DMU approved proctor at your rotation site must proctor your exam. The post rotation exam should be arranged, by the student, through the DMU Ob/Gyn Division and the DMU approved proctor at the site.

A remediation COMAT exam will be available to those not receiving a standard score of 80 or above on the initial exam. The retake examination is to be taken within two weeks of the exam failure email notification.

Those failing the retake COMAT exam by not receiving a standard score of 80 or above will be required to complete an oral examination conducted by the OB/Gyn Division with at least two members of the DMU faculty. The student will be notified by the Ob/Gyn Academic Assistant once the grades are received. If there is a failure of this exam the Ob/Gyn academic assistant will schedule an Ob/Gyn Oral Examination.
The Oral Exam will be video-taped/recorded and cover material provided by the Ob/Gyn Division. The student will be required to answer the questions practically, clinically and specifically on both medical knowledge and application. The final exam grade will be determined by the Division of OB/Gyn at the completion of the oral exam. For any passing score on the retake exam or oral exam, a standard score of 80 will be reported to the office of Clinical Affairs.

The student is responsible for making all arrangements including: scheduling of the exam time with the Division of Ob/Gyn, scheduling time away from their rotation that they are presently on, and all travel arrangements and expenses.

Failure to complete the required examinations within the specified time period will result in failure of the rotation.