

**UCSF Residency Program in Obstetrics, Gynecology and Reproductive Sciences
Educational Objectives**

R3 Women's Options Center

The 1.5-month R3 Women's Options Center rotation is designed to give residents broad experience in family planning including contraception counseling, complicated contraception, medical abortion management, and options counseling. The rotation also provides significant procedural experience performing 1st and 2nd trimester surgical abortions. While on this rotation, residents will also participate in inpatient obstetrics and emergency gynecology call.

Residency training reflects a progression of knowledge and skill acquisition through clinical work. The OB/GYN ACGME Milestones map this process across 28 milestones that should be achieved over the 4 years of residency. The UCSF OB/GYN residency program has assigned benchmarks where residents are expected to be in each milestone at 6 months intervals. Thus, understanding the progression of skill across a milestone gives a resident an awareness of where his or her performance should be at different time intervals in residency.

Below are the milestones that pertain to the Women's Options Rotation. Milestones on communication, systems-based practice, professionalism and practice-based learning and improvement are included in each rotation to emphasize their importance in the development of a competent physician. The residency program recognizes that a resident's particular schedule will influence when particular milestones are achieved, and the benchmarks reflect the expected level of skill at 6 months and the end of the year.

The CREOG Objectives highlight what CREOG identifies as key learning topics. The objectives listed below are specific to operative women's options and gynecology, as well as objectives specific to communication, professionalism and advocacy. We have listed the gynecology objectives for all four years acknowledging that these will be accomplished at varying times according to the level of training. We have also included a list of procedures that you will need to understand or perform during your residency. Again, we acknowledge that this will vary according to your rotation schedule and your level of training.

The family planning faculty have identified a number of important articles and references to try to read during the rotation. They are listed below.

Recommended Readings and References

Key Articles

Below are sentinel articles relevant to R3 WOC objectives – additional important papers as well as sentinel articles in other specialties can be found [here](#)

Abortion

Basics and clinical topics

1. The Comparative Safety of Legal Induced Abortion and Childbirth in the United States - Raymond EG, Grimes DA. *Obstet Gynecol.* 2012 Feb;119(2 Pt 1):215-9.
2. A Review of Evidence for Safe Abortion Care - Kapp N, Whyte P, Tang J, Jackson E, Brahmi D. *Contraception.* 2013 Sep;88(3):350-63.
3. Management of postabortion Hemorrhage - Kerns J, Steinauer J. release date November 2012 SFP Guideline #20131. *Contraception.* 2013 Mar;87(3):331-42.
4. ACOG Practice Bulletin #135 Second-Trimester Abortion - Steinauer J, Jackson A, Grossman D. *Obstet Gynecol.* 2013 Jun;121(6):1394-406.

Policy restrictions on abortion

5. A Statement on Abortion by 100 Professors of Obstetrics: 40 Years Later - Darney, et al. One Hundred Professors of Obstetrics and Gynecology. *Contraception.* 2013 Oct;88(4):568-76.

6. ACOG Committee Opinion #613 Increasing Access to Abortion - *Obstet Gynecol.* 2014 Nov;124(5):1060-5.

Disparities

7. Disparities in Abortion Rates: A Public Health Approach - Dehlendorf C, Harris LH, Weitz TA. *Am J Public Health.* 2013 Oct;103(10):1772-9.

Global health implications

8. Induced abortion: incidence and trends worldwide from 1995 to 2008 - Sedgh G, Singh S, Shah IH, Ahman E, Henshaw SK, Bankole A. *Lancet.* 2012 Feb 18;379(9816):625-32.

Contraception

Basics

9. Sonalkar S, Schreiber CA, Barnhart KT. Contraception. *Endotext* (This is an online textbook at www.endotext.org, and also available through pub med.)
10. A Clinical Guide for Contraception - Speroff and Darney, Fifth Edition 2010.

Effect on maternal mortality / future unintended pregnancy

11. Maternal Deaths Averted by Contraceptive Use: An Analysis of 172 Countries - Ahmed S, Li Q, Liu L, Tsui AO. *Lancet.* 2012 Jul 14;380(9837):111-25.

Other important references

Paul: *A Clinician's Guide to Medical and Surgical Abortion*

Speroff and Darney: *A Clinical Guide for Contraception*

Darney: *Protocols for Office Gynecologic Surgery*

World Health Organization, *Medical Eligibility Criteria for Contraceptive Use*

ACGME Milestones (in [Milestones](#) folder)

[R3 SFGH WOC Milestones Evaluated](#)

[CREOG Educational Objectives, A Core Curriculum in Obstetrics and Gynecology, 11th edition](#)

(Procedures listed in Unit 6 of the CREOG Objectives)

The areas specific to this rotation include

Unit 1

I. Basic Science

- C. Describe the anatomy of the abdomen and pelvis
- G. Describe the general principles of drug delivery, distribution, metabolism, and excretion
- H. Describe the mechanism of action of reproductive drugs, including the following
 1. Contraceptives
 2. Prostaglandin inhibitors
- J. Describe the microbiologic principles germane to the diagnosis and treatment of gynecologic infectious diseases.

II. Patient Care

- A. Perform a complete history and examination specific to a patient's symptoms and appropriate for that patient's age and condition.
- C. Describe behavior patterns suggestive of substance abuse
- D. Crisis Intervention

III. Complications

- A. Understand risk factors, etiologies, signs, and symptoms, evaluation, initial management, and indications for referral for the following:
 3. Cardiovascular and pulmonary events (eg. deep vein thrombosis/pulmonary embolism, myocardial infarction, stroke, aspiration pneumonia)

4. Acute and chronic blood loss
5. Allergic drug reactions

IV Nonclinical Overlapping Content

- A. Communication
- B. Demonstrate professionalism
- C. Work with health care professionals in multidisciplinary teams
- D. Describe the process of informed health care decision making
- E. Attend to physician wellness for themselves and for professional colleagues
- F. Practice cost-effective health care and resource allocation while optimizing quality of care
- G. Advocate for the patient, women's health, and the field of obstetrics and gynecology
- H. Acknowledge that patient safety is always the first concern of the physician
- I. Understand risk management and professional liability

Unit 2

I. Basic Science – Mechanism of Disease

- A. Describe and evaluate the major physiologic changes and symptoms in a pregnant patient. Interpret common diagnostic tests in each organ system in the context of normal physiologic changes of pregnancy.
 2. Immune system
 3. Cardiovascular system
 4. Pulmonary system
 5. Hematologic system
 6. Renal system
- B. Describe the musculoskeletal, neurologic, and vascular changes to the pelvis, vulva, and breasts.
 2. Intrapartum
 3. Postpartum

III. Obstetric Complications

IV. Intrapartum Care

V. Newborn Care

VI. Postpartum Care

Unit 3

Gynecology

I. Disorders of the Urogenital Tract and Breast

- A. Perform a pertinent history and physical examination and describe physical findings, serum markers, diagnostic testing, imaging, and initial treatment of benign pelvic conditions, including the following:
 3. Tubo-ovarian abscess
 4. Pelvic inflammatory disease
 5. Adnexal torsion
 6. Diverticulitis
 7. Appendicitis

II. First-Trimester Pregnancy Failure

III. Critical Care

Unit 4
Office Practice

I. Periodic Health Assessment

C. Develop the patient-physician relationship and gain the patient's confidence and cooperation in obtaining a history and performing the physical examination. Appreciate that many factors can affect the individual's overall health.

II. Focused Areas in Gynecologic Care

- A. Describe and counsel patients on contraception
- C. Abortion
- E. Domestic violence and sexual abuse

III. Gynecologic Disorders

A. Define each of the following disorders, perform a pertinent history and physical examination, develop a differential diagnosis, perform appropriate diagnostic testing, and describe the initial management and indications for referral:

- 6. Sexually transmitted infections

Unit 5

Specialty Objectives

I. Overlapping Content

A. For the following conditions, perform an evaluation, including diagnostic procedures, counsel, medically manage, perform surgical treatment, and describe complications, long-term prognosis, and goals:

- 1. Pelvic Masses
- 2. Pelvic pain (acute or chronic), including the following
 - a. Endometriosis
 - b. adenomyosis
- 3. Management of spontaneous or induced abortion
- 4. Ectopic Pregnancy
- 5. Sexually transmitted infections/pelvic inflammatory disease
- 6. Abnormal Uterine Bleeding

D. Common Complications

II. Maternal-Fetal Medicine

B. In consultation with other specialists as needed, counsel and manage patients with the following medical conditions. Describe the effects of the condition on maternal and fetal outcome and develop a plan for monitoring and managing the patient during pregnancy, delivery, and the puerperium period. Describe the prognosis and interventions for this pregnancy to minimize recurrence.

C. For the following medical conditions, describe the effect of pregnancy and the appropriate screening, diagnosis, and treatment, including indications for consultation or referral

D. For the following obstetric complications, describe the differential diagnosis, perform a pertinent history and physical examination, evaluate (using laboratory testing and diagnostic imaging), and manage appropriately. Determine and describe the prognosis and implement interventions to minimize recurrence. Determine the indications for referral to a subspecialist.

E. Counsel and manage patients with the following fetal malpresentations. List pertinent physical findings and describe management, predisposing factors, options for delivery, and maternal and fetal risks.

F. Intrapartum Care

G. Postpartum Care

- 1. Management of the following:
 - a. Breast care including breastfeeding
 - b. Lacerations/episiotomy

IV. Contraception

V. Pediatric and Adolescent Obstetrics and Gynecology

A. Counsel the adolescent patient on the following:

2. Sexuality
3. Contraceptive needs
4. Screening for sexually transmitted infections
6. Pregnancy
7. Psychosocial concerns