

Resident Rotation in Urogynecology

The urogynecology rotation is one month in duration. The house officer III / IV works closely with the urogynecology attending both in the clinical setting and in the operating room. The house officer III/ IV will also follow patient with the attending in his private clinics. In the operating room the house officer IV will participate in different aspects of pelvic reproductive surgery. Urogynecology surgeries will be performed at Northshore Regional Medical Center and Slidell Memorial Hospital. Call will include obstetrics and gynecology coverage at University Hospital and /or Tulane-Lakeside Hospital.

Didactic requirement:

1. Resident on this rotation will attend weekly Tulane-Lakeside Grand Round , Tulane Obstetrics and Gynecology Resident Conference, Journal Club conference.

Clinical Duty:

Monday -

AM - Surgery at either Northshore Reigonal Medical Center (100 Medical Center Drive, Slidell, LA 70461, Phone # 985 - 645 - 7070) or Slidell Memorial Hospital (1001 Gause Blvd, Slidell, LA 70458, Phone #985 -643-2200)

PM - GYN / GU Clinic with Dr. Hebert *

Tuesday -

Part of the Ob/Gyn team at University Hospital. Participate in obstetrics/gynecological clinics and / or labor and delivery management.

Wednesday -

AM - Surgery at either Northshore Reigonal Medical Center or Slidell Memorial Hospital in am.

Wednesday -

PM - GYN - GYN/GU clinic with Dr. Hebert *

Thursday -

Part of the Ob/Gyn team at University Hospital. Participate in obstetrics/gynecological clinics and / or labor and delivery management.

Friday -

Part of the Ob/Gyn team at University Hospital. Participate in obstetrics/gynecological clinics and / or labor and delivery management.

**Dr. Hebert's Office - 2364 Gause Blvd East, Suite 101, Slidell, LA 70461*

The above schedule is the primary duty of the resident rotating in Uro-gynecology; however, if there is no clinic or surgery scheduled at the designated time in Uro-gynecology, the resident will share in the clinical duties at University Hospital.

EDUCATIONAL OBJECTIVES FOR UROGYNECOLOGY FOR HOUSE OFFICER III

Medical Knowledge

- **Urogynecology**
- Develop an understanding of common issues in urogynecology including:
 - Normal anatomic supports and dynamics of the vagina, rectum, bladder, urethra, and uterus
 - Principal etiologies of pelvic support defects
 - Symptoms experienced by a patient with a urogynecologic disorder
 - Types of incontinence and appropriate management
 - Type of pelvic support defects and Prolapse
 - Medical and surgical treatment of pelvic support defects
 - Interstitial cystitis
 - Fistulas
 - Care of the geriatric patient
 - Indications and use of pessaries
 - Follow-up care of a patient who has been treated for a pelvic support defect
- Build upon core knowledge:
 - Abdominal surgery principles
 - Vaginal surgery principles

Patient Care

- **Urogynecology:**
- Perform:
 - A pertinent history in a patient with a suspected pelvic support defect
 - A focused physical examination to determine the cause of a urogynecologic disorder
 - Examination of the genitourinary organs during a Valsalva maneuver, urethral and vaginal supports, assessment of perineal and levator ani muscle strength
 - Urinalysis
 - A thorough preoperative evaluation
 - Assessment for residual urine
 - Multichannel urodynamics
 - Cystoscopy
 - Pessary fitting and placement

- Vaginal hysterectomy
- Anterior colporrhaphy
- Posterior colporrhaphy
- Abdominal culposuspension
- Vaginal culposuspension
- Enterocele repair
- Colpocleisis
- Urethral dilatation
- Bladder hydrodystension and instillation
- Techniques for surgical management of stress incontinence
- Identify the ureter from the kidney to the bladder
- Identify and manage intraoperative complications
- Hemorrhage
- Ureteral injury
- Cystotomy
- Prescribe medications appropriately for the geriatric patient
- Manage postoperative urinary retention
- Medical management of urinary incontinence

Interpersonal and Communication Skills

- Demonstrate your knowledge by teaching the junior residents and medical students
- Communicate appropriately with consult services as needed
- Work with the office staff to provide comprehensive care in the outpatient setting
- Communicate appropriately with referring physicians
- Counsel patients and their families in easily understood and culturally sensitive language
- Provide adequate sign-out for urogynecological patients to the on call team at night

Professionalism

- Demonstrate a commitment to excellent patient care
- Refine your skills in dealing with the geriatric patient
- Accept constructive criticism to improve surgical skills
- Demonstrate the ability to serve as a consultant to other physicians and health care professionals
- Maintain comprehensive, timely, and legible medical records
- Demonstrate a consistent willingness to discuss errors in management and/or surgical complication with the affected patient

Practice Based Learning

- Improve your knowledge of CPT and ICD-9 codes

- Increase awareness of patient's rights as a research subject
- Continue to use information technology to improve fund of knowledge and technical skills
- Continue to use information technology to provide better care to patients
- Understand the clinical and economic significance of outcomes research
- Understand methods for analyzing practice-based outcomes research

System Based Practice

- Demonstrate an understanding of costs of inpatient care versus outpatient care
- Understand the need for pre-authorization for admission and surgical procedures
- Understand the concept of limitation of resource and rationing of care
- Understand the concept of cost-containment and cost-effectiveness
- Understand methods to use scarce resources in a sound, thoughtful, and cost-effective manner

Learning Resources

- The Obstetrics and Gynecology Library and the Tulane Matas Library have major gynecology textbooks, instructional videos and access to computers.
- Residents attend Grand Rounds and didactic resident's conference
- Residents attend Journal Club
- Daily teachings in the clinical setting by the Urogynecologist attending

Evaluations

- Direct verbal feedback is encouraged by the faculty so that resident performance can be commended or improved during the rotation
- Surgical competency is being evaluated with the use of Global rating scale of operative performance. Immediate feed-back is available for the resident to review and discuss with the attending physician
- Residents are evaluated via a Web-based evaluation system at MyEvaluations.com at the end of each rotation using a standardized evaluation form given to supervising Obstetrics and Gynecology attendings. These evaluations are available for immediate review by the resident once completed.
- Problems, which appear to be of a more urgent nature, will be brought immediately to the attention of the resident, faculty, and residency program directors for discussion.
- Residents will receive a form at the end of each rotation via MyEvaluations.com soliciting feedback regarding the rotation and

faculty. This information is shared anonymously and used for course/faculty improvement activities.

EDUCATIONAL OBJECTIVES FOR UROGYNECOLOGY FOR HOUSE OFFICER IV

Medical Knowledge

- **Urogynecology**
- Develop an understanding of common issues in urogynecology including:
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 - Principal etiologies of pelvic support defects
 - Symptoms experienced by a patient with a urogynecologic disorder
 - Types of incontinence and appropriate management
 - Type of pelvic support defects and Prolapse
 - Medical and surgical treatment of pelvic support defects
 - Interstitial cystitis
 - Fistulas
 - Care of the geriatric patient
 - Indications and use of pessaries
 - Follow-up care of a patient who has been treated for a pelvic support defect
- Build upon core knowledge:
 - Abdominal surgery principles
 - Vaginal surgery principles

Patient Care

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- Hemorrhage
- Ureteral injury
- Cystotomy
- Prescribe medications appropriately for the geriatric patient
- Manage postoperative urinary retention
- Medical management of urinary incontinence

Interpersonal and Communication Skills

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