UNIVERSITY OF MINNESOTA GRADUATE MEDICAL EDUCATION

2013-2014 Program Policy & Procedure Manual

Obstetrics and Gynecology Residency Program

INTRODUCTION

Dear Residents:

Welcome to our residency program. As the only OB/GYN residency in the Twin Cities—and one of only two programs in the state—our residents are in a unique position to take advantage of one of the best healthcare environments in the country. You will work with some of the finest physicians, surgeons and researchers in the area. With rotations at four hospitals, have access to thousands of births, major and minor surgeries, and specialty cases in gynecologic oncology, maternal-fetal medicine, reproductive endocrinology, mature women's health and urogynecology. Because of our wide range of training opportunities, our residents are highly recruited by practices in and outside of Minnesota. Our graduates repeatedly tell us that this residency prepared them extremely well for life in their OB/GYN practice. We also have an excellent record of placing our residents in fellowships across the country.

We are also fortunate to have the Deborah E. Powell Center for Women's Health, a Nationally Designated Center of Excellence, <u>www.womenshealth.umn.edu</u> on our campus. The University was chosen as a National Center of Excellence in Women's Health site because of its breadth and depth in clinical care for women, research, education and community outreach. Because this is the only research-intensive medical school with a woman dean, the University is specially positioned to mentor women students and faculty.

This Program Policy and Procedure Manual contain guidelines and policies that apply to all Obstetrics, Gynecology and Women's Health residents throughout the University of Minnesota, Academic Health Center. The Institution Policy Manual is specific to trainees of the University of Minnesota, Department of Obstetrics, Gynecology and Women's Health. Policies are written in accordance with the American Board of Obstetrics and Gynecology and the Accreditation Council for Graduate Medical Education. Policies are subject to periodic review and change by the faculty, program director, and department chair.

Residents should familiarize themselves with the policies and guidelines contained in this handbook. Again, welcome! We think you'll see that the Twin Cities Integrated Residency Program combines the best elements of many learning and clinical opportunities.

Sincerely,

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Linda F. Carson, MD Professor and Chair

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Phillip N. Rauk, MD Program Director

DEPARTMENT VISION STATEMENT

Define the standard of care for all women, today and tomorrow.

PROGRAM MISSION STATEMENT

The goal of the University of Minnesota Twin Cities Integrated Residency in Obstetrics, Gynecology and Women's Health is to produce competent, sensitive, compassionate and respectful Obstetrician/Gynecologists who will enhance and further the knowledge of women's health care.

CHIEF ADMINISTRATIVE RESIDENTS

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SITE DIRECTORS

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DIVISION DIRECTORS

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ROTATION DIRECTORS

TBD. M.D. University of Minnesota Medical Center Gynecologic Oncology Mark Damario, M.D. University of Minnesota Medical Center Reproductive Endocrinology Carrie Terrell, M.D. University of Minnesota Medical Center General Gynecology Tracy Prosen, M.D. University of Minnesota Medical Center Maternal-Fetal Medicine University of Minnesota Medical Center High Risk, U/S, Genetics, Counseling Tracy Prosen, M.D. Carrie Terrell, M.D. **Riverside Women's Health Specialists** Virginia Lupo, M.D. Hennepin County Medical Center Obstetrics & Gynecology Jeffrey Warshaw, M.D. Hennepin County Medical Center Urogynecology Methodist Hospital Gynecologic Obstetrics Ieanette Thomas, M.D. Kimberly Gerten, MD Methodist Hospital Urogynecologic Surgery **Regions Hospital Emergency Medicine** Kelly Barringer, M.D. Kamalini Das, M.D. Regions Hospital Obstetrics/Gynecology Carol Ball, M.D. **Regions Hospital GYN Special Services**

PLANNED PARENTHOOD/REGIONS SAME DAY SURGERY PGY 2 RESIDENT ROTATION

Goals of the Rotation:

The overall goals of the rotation are:

- 1. To obtain the knowledge needed to counsel for and perform a termination of pregnancy and to know the complications associated with the procedure and how to manage complications.
- 2. To be able to effectively counsel on all methods of temporary and permanent birth control.
- 3. To obtain the skills needed to perform outpatient minor gynecologic surgeries in outpatient surgery center setting.
- 4. To utilize any downtime for:
 - Research and to work with advisor on resident's research project
 - Coverage of Labor and Delivery and Gyn surgery at Regions as needed
 - Coordinate coverage of surgical cases both at HealthPartners Same Day Surgery Center and Regions Hospital with G1 and G3 Gyn residents with a goal that all surgical cases are covered by residents

Objectives of the rotation for the Operative Gynecology Component:

- 1. The resident will perform, under direct supervision, common diagnostic and operative hysteroscopy procedures (diagnostic hysteroscopy, endometrial ablation procedures of several types, polypectomy, myomectomy, Essure tubal sterilization)⁽¹⁾
- 2. The resident will perform, under direct supervision, common diagnostic and operative laparoscopic procedures (diagnostic laparoscopy, tubal ligation procedures of several types, removal of cysts/masses/adnexal structures, tubal dye study)⁽¹⁾
- 3. To become familiar and perform outpatient hysteroscopic sterilization procedures, i.e., Essure, under local anesthesia. ^(1, 2)
- 4. Attend all gynecologic operations scheduled at the HealthPartners Specialty Center with Health Partners Ob/Gyn staff physicians and participate in these surgeries under the supervision and guidance of those staff physicians. The level of involvement in each operation will be determined by the staff physician and will be dependent on the resident's skill level.

Objectives of the rotation for the Pregnancy Termination Component:

- 1. To become familiar with pregnancy termination process in order to be able to counsel patients who choose pregnancy termination regarding the procedure itself and risks, benefits and alternatives. ^(1,2,4)
- 2. To become competent in performing the suction curettage procedure whether for elective pregnancy termination or failed pregnancy. ^(1,2)
- 3. To become familiar with protocols for medical pregnancy termination. ^(1,2)
- 4. To become familiar with the various ways of dating pregnancies and particularly the use of ultrasound for pregnancy dating, pregnancy termination procedures, and evaluation of potential pregnancy termination complications ^(1,2)
- 5. To become familiar with the possible complications of pregnancy termination, their evaluation and treatment. ^(1,2)
- 6. To become familiar with counseling patients on different birth control options available and to become comfortable with intrauterine contraceptive (IUC) and contraceptive implant placements in clinic. ^(1,2)
- 7. To become familiar with ultrasound equipment and the basics of ultrasound technique
- 8. The resident will become familiar with dating early pregnancy with the use of ultrasound for crown-rump (CRL) length, gestational sac and be able to identify the viability and location of the pregnancy with transvaginal ultrasonography⁽¹⁾

In order to meet the above objectives, the resident will:

- 1. Participate in the counseling of patients who present for elective termination of pregnancy ^(1,2,4,5)
- 2. Participate in the initial medical evaluation of these patients, including evaluation of gestational age and possible complicating medical issues. ^(1,2)
- 3. Residents will participate in the counseling for subsequent birth control and perform intrauterine contraceptive (IUC) and contraceptive implant insertions, and birth control prescribing for these patients. ^(1,2)
- 4. Participate in suction curettage procedures for failed pregnancy and, at the resident's discretion, or elective pregnancy termination. ^(1,2)
- 5. Resident will also participate in evaluation of patients who present for 2nd trimester pregnancy termination elective and indicated, including the use of osmotic cervical dilators and other agents for cervical ripening and dilation. ^(1,2)
- 6. Resident will evaluate patients who present for follow-up visits after undergoing suction curettage and 2nd trimester pregnancy terminations. ^(1,2)
- 7. Resident will perform ultrasound evaluation for gestational age determination and for other indications. ^(1,2)
- 8. Perform outpatient hysteroscopic sterilization procedure (Essure) under local anesthesia. ^(1,2)
- 9. Perform outpatient hysteroscopic and laparoscopic procedures at Same Day Surgery Center. ^(1,2)
- 10. Spend non-clinical time participating in resident research project. (2,5,6)

******Schedule of time (where the resident is expected to be each day):

Mon: Same Day Surgery Center Mon PM: Resident conference

Tues AM: Planned Parenthood (see instructions below) Tues PM: Planned Parenthood

Wed AM: Planned Parenthood Wed PM: Planned Parenthood

Thurs AM: Same Day Surgery Center Thurs PM: Same Day Surgery Center

Fri AM: Same Day Surgery Center Fri PM: Same Day Surgery Center

Sat AM: as needed Sat PM: as needed

<u>Planned Parenthood</u> is located at 671 Vandalia Street, St. Paul The clinic is one block north of University at Vandalia. The residents should drive into the driveway at the building where there will be valet parking for them. There is no cost for this service. They should arrive at the clinic at 0800 so they can observe the intake process, consent, lab work and ultrasound. Dr. Ball will arrive in clinic after 10:00 and the resident will work with her for the rest of the day.

- The residents should NOT wear scrubs, we will provide them with scrubs upon their arrival. This is for the resident's safety and we are quite insistent about not wearing scrubs into the clinic.
- There are always protesters. The protesters may not come onto our property, or impede access to our building. The protesters may not touch or block anyone accessing our clinic.
- Residents will be asked to provide proof of malpractice insurance and to sign a confidentiality agreement with us.
- If someone is ill or not able to come in on their scheduled day, it would be helpful if they e mailed or called me to let me know.
- If you have any other questions, please email or give me a call. I look forward to working with you.