I. Rotation Description

Obstetrics and Gynecology is the medical specialty concerned with the reproductive health and medical needs of adolescents and women. The specialty encompasses preventive health, reproductive health, maternal care and surgery for women of all ages. Obstetricians and gynecologists develop enduring relationships with their patients and deliver medical care that may include adolescent gynecology, infertility, endocrinology, and health maintenance during pregnancy, treatment of medical problems in pregnancy, operative gynecology and gynecological oncology. The diversity of the specialty is apparent in all practice settings and you will appreciate the challenges and thrill during your third year clerkships.

The Department of Obstetrics and Gynecology Department aims to embody competent and compassionate care and facilitate students' professional growth. The practice of obstetrics and gynecology occurs in the
outpatient office setting, labor and delivery unit and in the operating room. Due to the variety of practice opportunities and formats in obstetrics and gynecology, students should review their specific site instructions for a more detailed description of their specific practice setting. Regardless of your chosen area of specialty, you will be caring for women. This rotation is designed to best prepare each medical student to develop competence in areas of reproductive and preventive health care for women. The curriculum relies heavily upon the national learning objectives for medical student education outlined by the Association of Professors of Gynecology and Obstetrics.

The curriculum is taught through structured reading assignments, on-line case modules and lectures, and through the student-preceptor experience. Students are expected to complete their assignments for both obstetrics and gynecology and the longitudinal OMM course.

II. Course Goals and Objectives

A. Goals of the Course

Prior to the completion of the rotation, the student should demonstrate knowledge of the following:
(adapted from Association of Professors of Obstetrics and Gynecology Medical Student Objectives, ninth edition)

1. Develop competence in the medical interview and physical examination of women and incorporate ethical, social, and diverse perspectives to provide culturally competent health care.
2. Apply recommended prevention strategies to women throughout the life-span.
3. Recognize his/her role as a leader and advocate for women.
4. Demonstrate knowledge of preconception care including the impact of genetics, medical conditions and environmental factors on maternal health and fetal development.
5. Explain the normal physiologic changes of pregnancy including interpretation of common diagnostic studies.
6. Describe common problems in obstetrics.
7. Demonstrate knowledge of intrapartum care.
8. Demonstrate knowledge of postpartum care of the mother and newborn.
9. Describe menstrual cycle physiology, discuss puberty and menopause and explain normal and abnormal bleeding.
10. Describe the etiology and evaluation of infertility.
11. Develop a thorough understanding of contraception, including sterilization and abortion.
12. Demonstrate knowledge of common benign gynecological conditions.
14. Describe common breast conditions and outline the evaluation of breast complaints.
15. Demonstrate knowledge of perioperative care and familiarity with gynecological procedures.
16. Describe gynecological malignancies including risk factors, signs and symptoms and initial evaluation.
17. Provide a preliminary assessment of patients with sexual concerns.

B. Clinical Performance Objectives

While the end-of-rotation exam is derived from the didactic curriculum and objectives described above in the “Clinical Modules – Required Curriculum” section, the end-of-rotation evaluation completed by your obstetrics and gynecology preceptor is based on clinical core competencies. These core competencies reflect student performance in 6 key areas: communication, problem solving, clinical skills, medical knowledge, osteopathic medicine and professional and ethical considerations. Your end-of-rotation evaluation from your preceptor will be based directly on your performance in these 6 core competencies as described below.
1. **Communication** - the student should demonstrate the following clinical communication skills:
   a. Effective listening to patient, family, peers, and healthcare team
   b. Demonstrates compassion and respect in patient communications
   c. Effective investigation of chief complaint, medical and psychosocial history specific to the rotation
   d. Considers whole patient: social, spiritual & cultural concerns
   e. Efficiently prioritizes essential from non-essential information
   f. Assures patient understands instructions, consents & medications
   g. Presents cases in an accurate, concise, well organized manner

2. **Problem Solving** – the student should demonstrate the following problem solving skills:
   a. Identify important questions and separate data in organized fashion organizing positives & negatives
   b. Discern major from minor patient problems
   c. Formulate a differential while identifying the most common diagnoses
   d. Identify indications for & apply findings from the most common radiographic and diagnostic tests
   e. Identify correct management plan considering contraindications & interaction

3. **Clinical Skills** - the student should demonstrate the following problem solving skills:
   a. Assesses vital signs & triage patient according to degree of illness
   b. Perform good auscultory, palpatory & visual skills
   c. Perform a thorough physical exam pertinent to the rotation

4. **Osteopathic Manipulative Medicine** - the student should demonstrate the following skills in regards to osteopathic manipulative medicine
   a. Apply osteopathic manipulative medicine successfully when appropriate
   b. Perform and document a thorough musculoskeletal exam
   c. Utilize palpatory skills to accurately discern physical changes that occur with various clinical disorders
   d. Apply osteopathic manipulative treatments successfully

5. **Medical Knowledge** – the student should demonstrate the following in regards to medical knowledge
   a. Identify & correlate anatomy, pathology and pathophysiology related to most disease processes
   b. Demonstrate characteristics of a self-motivated learner including demonstrating interest and enthusiasm about patient cases and research of the literature
   c. Are thorough & knowledgeable in researching evidence based literature
   d. Actively seek feedback from preceptor on areas for improvement
   e. Correlate symptoms & signs with most common disease

6. **Professional and Ethical Behaviors** - the student should demonstrate the following professional and ethical behaviors and skills:
   a. Is dutiful, arrives on time & stays until all tasks are complete
   b. Consistently follows through on patient care responsibilities
   c. Accepts & readily responds to feedback, is not resistant to advice
   d. Assures professionalism in relationships with patients, staff, & peers
   e. Displays integrity & honesty in medical ability and documentation
   f. Acknowledges errors, seeks to correct errors appropriately
   g. Is well prepared for and seeks to provide high quality patient care
   h. Identifies the importance to care for underserved populations in a non-judgmental & altruistic manner
III. Rotation Design

A. Educational Modules
Educational modules using lectures, cases, and other forms of delivery are used for third year curriculum. Each student must complete a post-rotation exam to assure that the expected basic content or medical knowledge has been acquired during the rotation. In addition to the experiences received in the clinical training sites, students are expected to read the content of the assigned textbooks and online materials in order to complete the entire curriculum assigned for the clinical module.

B. Formative Evaluation
Student competency based rating forms are used by the preceptor to evaluate each student’s clinical skills and the application of medical knowledge in the clinical setting. These forms are only completed by the clinical faculty member or preceptor. Performance on rotations will be evaluated by the primary clinical faculty member precepting the student. VCOM uses a competency based evaluation form which includes the osteopathic core competencies. These competencies evaluated include:

a. Medical knowledge;
b. Communication;
c. Physical exam skills;
d. Problem solving and clinical decision making;
e. Professionalism and ethics;
f. Osteopathic specific competencies; and
g. Additional VCOM values.

Student competency is judged on clinical skill performance. Each skill is rated as to how often the student performs the skill appropriately (i.e. unacceptable, below expectation, meets expectation, above expectation, exceptional).

C. Procedure Log
Students are required to maintain a log to identify the procedures performed, and the number of essential patient encounters. The faculty member will verify the information at the end of the rotation either online using a password signature, or by signing the log.

IV. Credits
5 credit hours

V. Course Texts
A. Required Textbooks
  Available in electronic format on the VCOM Library – in LWW the Point Beckmann: Obstetrics and Gynecology 7e
  Available in electronic format on the VCOM Library – on LWW Osteopathic Medicine Collection
B. Recommended Textbooks
- **APGO Case book** - The Association of Professors of Gynecology and Obstetrics has developed multiple case summaries based on the APGO Medical Student learning objectives. These cases can enhance the reading and discussion of the VCOM medical student learning objectives.

VI. Course Grading and Requirements for Successful Completion

A. Requirements
- Attendance according to VCOM and preceptor requirements as defined in the College Catalog and Student Handbook.
- Completion of all Clinical Modules in the required curriculum.
- Understanding of and facility with all Clinical Modules in the Required Curriculum.
  - The goal of the curriculum is to ensure that you have learned the core objectives for medical students in the areas of women’s and reproductive health. The curriculum provides multiple tools including practice questions, reading assignments, cases and videos to assist in your learning. In addition, many of the topics were reviewed in your second year curriculum and a PowerPoint and lecture are available for your review on VCOM TV. You are not required to complete each of the reading assignments, however you are required to have a facility with the material and will be tested on the objectives now and during your clinical board exam. Use the resources for the topics that will be most conducive to your learning and will ensure that you know the material.
- Completing the uWISE examination questions.
  - uWISE is a series of interactive self-exam questions linked to the assigned reading objectives. Each uWISE clinical vignette is a multiple-choice question with five (5) possible answers with immediate explanation and feedback. Some questions are enhanced with images to augment the learning process. The uWISE questions are very similar in format and content to the final examination questions for your clerkship and your medical board exams.
  - Register for uWISE – Please see your “Welcome to Your Rotation” email for instructions on how to register.
- Completing the online fetal monitoring course.
  - East Tennessee State University has created a self-guided Electronic Fetal Monitoring Course. The course should require 2 hours of your time and teaches you the basic interpretation of fetal monitoring strips. Please work through the module. Additionally, you may complete quizzes and case scenarios if you desire.
- Procedure Log:
  - Please submit completed procedure logs electronically on the VCOM Portal by the last day of the rotation.
  - Please print out a copy of the procedure log.
  - During the rotation, keep track of the number of each procedures you perform or witness.
  - At the end of the rotation, your preceptor must review and sign the procedure log.
  - Input the number of each procedure into the electronic log on the Portal once rotation has been completed. Please see the website at: www.vcom.edu/sites/default/files/clinical/files/Online%20Procedure%20Logs%20Instructions.pdf for instructions. Note: Once this information is submitted, you cannot re-enter the log on the Portal.
  - Keep the signed paper copy for your records. (It does not need to be turned into the site coordinator or VCOM.)
• Rotation Evaluations:
  o Student Site Evaluation: Students must complete and submit at the end of rotation. See the VCOM website at:
    http://intranet.vcom.vt.edu/clinical/Login/index.cfm?fuseaction=LoginInfo&LoginPage=ViewStudentSchedule to access the evaluation form.
  o Third-Year Preceptor Evaluation: It is the student's responsibility to ensure that all clinical evaluation forms are completed and submitted online or turned in to the Site Coordinator or the Clinical Affairs Office at the completion of each rotation. Students should inform the Clinical Affairs Office of any difficulty in obtaining an evaluation by the preceptor at the end of that rotation. See the VCOM website at:
    www.vcom.edu/academics/clinical-forms to access the evaluation form.
  o Mid-Rotation Evaluation: The mid-rotation evaluation form is not required but highly recommended. See the VCOM website at:
    www.vcom.edu/academics/clinical-forms to access the mid-rotation evaluation form.
• Successful completion of the end-of-rotation written exam. The end-of-rotation exam questions will be derived directly from the specific objectives presented in each of the below modules.

B. Grading
Students must pass both the "module" and "rotation" portions of the course. All rotations have a clinical rotation grade and clinical modules/exam grade. The clinical rotation grade uses the Honors, High Pass, Pass, Fail system; these grades are not calculated in the GPA. The rotation modules are graded through the end of rotation exam.

<table>
<thead>
<tr>
<th>OMS 3 End-of-Rotation Exam Grade</th>
<th>OMS 3 Traditional Rotation Grades</th>
</tr>
</thead>
<tbody>
<tr>
<td>A 90-100</td>
<td>4.0 Honors</td>
</tr>
<tr>
<td>B+ 85-89</td>
<td>3.5 HP High Pass</td>
</tr>
<tr>
<td>B 80-84</td>
<td>3.0 Pass</td>
</tr>
<tr>
<td>C+ 75-79</td>
<td>2.5 F Fail</td>
</tr>
<tr>
<td>C 70-74</td>
<td>2.0 IP In Progress</td>
</tr>
<tr>
<td>F &lt;70</td>
<td>1.0 IP Incomplete</td>
</tr>
<tr>
<td>IP Incomplete</td>
<td>0.0 IP Incomplete</td>
</tr>
</tbody>
</table>

B. Remediation
Students who fail one or more rotations or more than one post-rotation exam will be reviewed and referred to the Promotion Board. No grade will be changed unless the Office of Clinical Affairs certifies to the Registrar, in writing, that an error occurred or that the remediation results in a grade change. A student may appeal to the Campus Dean for consideration only after the Promotion Board has met and only if new and meaningful information exists for the appeal. If a student fails the professionalism and ethics portion of the evaluation he or she may be removed from the rotation and referred to the Professionalism and Ethics Standards Board.

• Failure of a Post Rotation Exam
  Failures of a module or post-rotation exam have a second opportunity to pass the exam within 30 days of notification. If the student fails the second attempt at the post-rotation exam, an F is recorded on the module/exam grade, and the rotation must be repeated.

• Failure to Make Academic Progress
  Any additional curriculum or required remediation will be based on the performance measure. In general, rotations should show a progression of improvement in performance.
Students who receive a mere "pass" on a rotation may be counseled about overall performance. Pass level performance is anticipated from time to time on one entry but not on the overall evaluation. Students who receive several rotations at the overall performance level of "pass" may be required to perform additional curriculum to improve performance.

Those students who continually score in the "unsatisfactory" category or repeated "performs some of the time, but needs improvement" consistently and do not improve over time may be deemed as not making academic progress and, as a result, may be required to complete additional curriculum or may be referred to the Promotion Board.

In addition, repeated performance of a specific competency area where many items performed in a specific category or across categories are rated as never, or seldom, will be a reason for remediation at the discretion of the Associate Dean for Clinical Affairs in consultation with the clinical chair, the preceptor, and/or the Promotion Board.

Poor ratings on the clinical rotation evaluation in the professional and ethical areas of the assessment of a student are addressed by the Associate Dean for Clinical Affairs and may result in a remediation appropriate to correct the behavior or referral to the Professionalism and Ethics Board. In the case of repeated concerns in a professional and/or ethical area, or in the case the Associate Dean for Clinical Affairs deems this to be concern in professional and ethical behaviors, the Associate Dean may refer the student to the Campus Dean for a Behavioral Board or Promotion Board hearing. The Campus Dean will act upon this referral depending on the severity and the area of the performance measure.

- **Failure of a Rotation**
  All rotations on which a student receives a failing rotation grade must be repeated. The grade earned on the repeated clinical rotation will be recorded on the transcript. The prior U (Unsatisfactory - Fail) grade will also remain on the transcript. Students who fail a clinical rotation are referred to the Promotion Board who may require the student to complete additional curriculum, repeat an academic year, or be dismissed from VCOM. Failing of a rotation will result in academic probation.

- **Failure of Multiple Rotations or Repeat Rotations**
  Students who have a repeat failure or fail more than one rotation will always come before the Promotion Board.

**VII. Academic Expectations**
Grading policies, academic progress, and graduation requirements may be found in the *College Catalog and Student Handbook* at: [http://www.vcom.edu/handbooks/catalog/index.html](http://www.vcom.edu/handbooks/catalog/index.html)

A. **Attendance**
  Attendance for all clinical rotations is mandatory. Students are required to work a minimum of 20 days in a four week rotation period but should not work greater than 12 out of every 14 days or more than 12 hours daily exclusive of call assignments. Students may be required to work up to 24 days in a 4 week period or 25 days in a one month rotation including call and weekends at the discretion of the clinical faculty member providing the educational experience. For those rotations consisting of shift work such as Emergency Medicine or Hospitalist services, students should work a minimum of 160 and up to 200 hours for the month as required by the clinical site.

  It should be noted that preceptors will have final determination of the distribution of hours, which may vary from this policy but should not in general be less than 160 hours.
Students must complete an Excused Absence Clinical Rotations Approval form. Forms are available from the Office of Clinical Affairs or from the Frequently Requested Forms web page at: www.vcom.edu/academics/clinical-forms. The Office of Clinical Affairs requires that the medical student complete and submit this form for any time "away" from clinical rotations. The student must have this form signed by their preceptor and others designated on the form to obtain an excused absence. The form must be completed prior to the beginning of the leave. If an emergency does not allow the student to submit this prior to the absence, the “Excused Absence Clinical Rotations Approval” form must be submitted as soon as the student is physically able to complete the form. In addition to completion of the form, students must contact the Department of Clinical Affairs by 8:00 AM of the day they will be absent due to an illness or emergency and contact the Site Coordinator and preceptor(s). No excused absence will be granted after the fact except in emergencies as verified by the Associate Dean for Clinical Affairs. Regardless of an excused absence, students must complete a minimum of 160 hours.

OMS 3 students who have any unexcused absences will be referred to the Promotion Board and/or Professional and Ethics Standards Board as determined by the Associate Dean. Clinical site coordinators and preceptors document attendance on the student’s rotation evaluation form. This information is reviewed by the Director of 3rd Year Clinical Rotations and the Associate Dean for Clinical Affairs.

A student is expected to arrive on time to all clinical rotations. If a student is late, he or she must notify the site coordinator and the preceptor prior to or at the time they are scheduled to arrive. Students must have a reason for being late such as illness or vehicle issues and it is not anticipated that this would occur more than one occasion AND it is important the student call in prior to being late. Repeated tardiness is a reason for a referral to the Promotion Board and/or Professional and Ethics Standards Board as determined by the Associate Dean.

Any time missed must be remediated during the course of the month for credit to be issued. Students may remediate up to four missed days or 48 hours missed during any rotation period by working on normal days off.

VIII. Professionalism and Ethics

It is advised that students review and adhere to all behavioral policies including attendance, plagiarism, dress code, and other aspects of professionalism. Behavioral policies may be found in the College Catalog and Student Handbook at: http://www.vcom.edu/handbooks/catalog/index.html

A. VCOM Honor Code

The VCOM Honor Code is based on the fundamental belief that every student is worthy of trust and that trusting a student is an integral component in making them worthy of trust. Consistent with honor code policy, by beginning this exam, I certify that I have neither given nor received any unauthorized assistance on this assignment, where “unauthorized assistance” is as defined by the Honor Code Committee. By beginning and submitting this exam, I am confirming adherence to the VCOM Honor Code. A full description of the VCOM Honor Code can be found in the College Catalog and Student Handbook at: http://www.vcom.edu/handbooks/catalog/index.html
IX. Pre-requisites to a Successful Clerkship
Please ensure that you are familiar with these four review topics prior to beginning your obstetrics and gynecology clerkship.

1. Female Reproductive Physiology
   Reading Assignment: Beckmann, pp 47-59
   Online PowerPoint Presentation: Female Reproductive Physiology
   Learning Objectives:
   i. Review female reproductive physiology including:
      a. Hypothalamic-pituitary-ovarian axis
      b. Follicular and luteal phases of menstrual cycle
      c. Proliferative and secretory phases of the endometrium

2. Intrapartum Fetal Surveillance
   Reading Assignment: Beckmann, pp 113-119
   Online Fetal Monitoring Course: Tennessee State University has created a self-guided Electronic Fetal Monitoring Course. The course should require 2 hours of your time and teaches you the basic interpretation of fetal monitoring strips. Please work through the module. Additionally, you may complete quizzes and case scenarios if you desire.
   uWISE Questions: Objective 26: Intrapartum Fetal Surveillance
   Learning Objectives:
   i. Learn to interpret basic EFM patterns using a systematic approach
   ii. Learn to use standardized terminology to appropriately document the patterns
   iii. Learn to properly manage the clinical situations represented by the EFM pattern

3. Obstetrics and Gynecologic History and Exam
   Reading Assignment: Beckmann, pp 1-22
   Online PowerPoint Presentation: Women’s Health History
   uWISE Questions: Objective 7: Preventative Care and Health Management
   Learning Objectives:
   i. Perform a thorough obstetric-gynecologic history as a portion of a general medical history
   ii. Interact with the patient to gain her confidence and to develop an appreciation of the effect of her age, racial and cultural background, and economic status on her health
   iii. Communicate the results of the obstetric-gynecologic and general medical history by well-organized written and oral reports
   iv. Interact with the patient to gain her confidence and cooperation, and assure her comfort and modesty
   v. Perform a painless obstetric-gynecologic examination as part of a woman’s general medical examination
   vi. Communicate the relevant results of the examination in well-organized written oral reports
   vii. Educate the patient regarding breast self-examination

4. Embryology and Pelvic Anatomy
   Reading Assignment: Beckmann, pp 33-45
   Online PowerPoint Presentation: Comprehensive Review of the Female Reproductive System Anatomy by Dr. Danielson
   Learning Objective:
   i. Review pelvic anatomy, with a particular focus on surgical pelvic anatomy in preparation for clinical surgical experiences.
X. Obstetric Clinical Modules

5. Osteopathic Manipulative Medicine

Reading Assignment:
- Foundations of Osteopathic Medicine, pp. 961-973.
  - Chapter 63: Lower Extremity Swelling in Pregnancy
  - Chapter 64: Low Back Pain in Pregnancy.
- Osteopathic Considerations in Systemic Dysfunction, pp. 149-158

VCOMTV Video: Obstetrics and Osteopathy, Palmer

Learning Objectives:
- Identify the 2 most common complaints of an obstetrical patient as the pregnancy progresses.
- Name the causes (differential diagnosis) for a pregnant patient with lower extremity edema.
- Identify common osteopathic structural findings in pregnancy which occur to accommodate the shifting center of gravity.
- Name the fascial regions/diaphragms which can restrict lymphatic flow.
- Identify structures / regions to that may be treated with OMT in order to balance the autonomic nervous system.
- From a list, identify common diagnoses/approaches to be considered in an obstetrical patient with low back pain.
- Distinguish the 5 models used in osteopathic patient care for an obstetrical patient with lower extremity edema and low back pain.
- Discern an Osteopathic approach to the diagnosis and treatment of an obstetrical patient with somatic dysfunction of the lumbar spine, sacrum, pelvis, and lower extremity.

6. Maternal-Fetal Physiology

Reading Assignment: Beckmann, pp 47-58

On-line PowerPoint Presentation:
- Fetal and Neonatal Circulation, Dr. Danielson
- Physiology of Pregnancy, Dr. Reilly

uWISE Questions: Objective 8: Maternal-Fetal Physiology

Learning Objectives:
- Discuss the maternal physiologic anatomic changes associated with pregnancy
- Describe the physiologic functions of the placenta and fetus
- Discuss the effect of pregnancy on common diagnostic studies

7. Preconception Care/Antepartum Care

Reading Assignment: Beckmann, pp 61-78; 85-91

uWISE Questions: Objectives 9 and 10: Preconception and Antepartum Care

Learning Objectives:
- Describe how certain medical conditions affect pregnancy
- Describe how pregnancy affects certain medical conditions
- Counsel patients regarding a history of genetic abnormalities
- Counsel patients regarding advanced maternal age
- Counsel patients regarding nutrition and exercise
- Counsel patients regarding medications and environmental hazards
- Counsel patients regarding immunizations
8. Intrapartum Care  
**Reading Assignment:**  
- Beckmann, pp 93-104  
- *ACOG Management of Meconium at Delivery*  
**uWISE Questions:** Objectives 11 and 26: Intrapartum Care and Intrapartum Fetal Surveillance  
**Learning Objectives:**  
   i. Describe characteristics of true and false labor  
   ii. Describe initial assessment of the laboring patient  
   iii. Describe stages and mechanism of normal labor and delivery  
   iv. Describe techniques to evaluate the progress of labor  
   v. Describe pain management during labor  
   vi. Describe methods of monitoring the mother and fetus  
   vii. Describe management of normal delivery  
   viii. Describe indications for operative delivery

9. Postpartum Care

A. Normal Postpartum Physiology and Care  
**Reading Assignment:** Beckmann, pp 129-135  
**On-line PowerPoint Presentation:** Postpartum Care  
**Learning Objectives:**  
   i. Describe maternal physiologic changes of the postpartum period  
   ii. Describe normal postpartum care  
   iii. Describe appropriate postpartum patient counseling  
   iv. Describe vaginal repair  
   v. Describe immediate postpartum care of the mother

B. Postpartum Hemorrhage  
**Reading Assignment:** Beckmann, pp 137-143  
**On-line PowerPoint Presentation:** Postpartum Care  
**uWISE Questions:** Objective 27: Postpartum Hemorrhage  
**Learning Objectives:**  
   i. List risk factors for postpartum hemorrhage  
   ii. Describe differential diagnosis of postpartum hemorrhage  
   iii. Describe the immediate management of the patient with postpartum hemorrhage, including:  
      a. Inspection for lacerations  
      b. Use of uterine contractile agents  
      c. Management of volume loss  
      d. Management of coagulopathy

C. Postpartum Infection  
**Reading Assignment:** Beckmann, pp 129-135  
**On-line PowerPoint Presentation:** Postpartum Care  
**uWISE Questions:** Objective 28: Postpartum Infection  
**Learning Objectives:**  
   i. List the risk factors for postpartum infection  
   ii. Describe differential diagnosis of infectious organisms  
   iii. Describe evaluation and management of the patient with postpartum infection  
   iv. List indications for the use of prophylactic antibiotics
10. Complications of Pregnancy

A. Ectopic Pregnancy

Reading Assignment: Beckmann, pp 179-186; 268-270

uWISE Questions: Objective 15: Ectopic Pregnancy

Learning Objectives:
   i. Develop a differential diagnosis of first trimester bleeding
   ii. List risk factors predisposing patients to ectopic pregnancy
   iii. Describe symptoms and physical findings suggestive to ectopic pregnancy
   iv. Understand methods and tests used to confirm the diagnosis of ectopic pregnancy
   v. Explain treatment options

B. Spontaneous Abortion

Reading Assignment: Beckmann, pp 185-188

uWISE Questions: Objective 16: Spontaneous Abortion

Learning Objectives:
   i. Develop a differential diagnosis for first trimester vaginal bleeding
   ii. Differentiate the types of spontaneous abortion
   iii. Define recurrent abortion
   iv. List the complications of spontaneous abortion
   v. Identify the causes and complications of septic abortion
   vi. Counsel a patient following a spontaneous abortion

C. Medical and Surgical Conditions in Pregnancy

Reading Assignment: Beckmann, pp 197-203; 211-213; 215-218

uWISE Questions: Objectives 17a and 17b: Medical and Surgical Complications in Pregnancy

Learning Objectives:
   i. Anemia
   ii. Urinary tract disorders
   iii. Infectious diseases
   iv. Cardiac disease
   v. Asthma
   vi. Surgical abdomen
   vii. Gestational Diabetes
      a. Describe the incidence and risk factors for gestational diabetes
      b. Define gestational and pre-gestational diabetes and describe White’s classification
      c. Describe the protocol for screening and diagnosis of gestational diabetes
      d. Describe the maternal and fetal complications of gestational and pre-gestational diabetes
      e. Describe the management and monitoring of gestational and pre-gestational diabetes in pregnancy

D. Pre-eclampsia-Eclampsia Syndrome

Reading Assignment: Beckmann, pp 205-211

uWISE Questions: Objective 18: Preeclampsia-Eclampsia Syndrome

Learning Objectives:
   i. Classify the types of hypertension in pregnancy
   ii. Describe the pathophysiology of preeclampsia-eclampsia
   iii. Describe the signs and symptoms to diagnose preeclampsia-eclampsia
   iv. Explain the management of a patient with preeclampsia-eclampsia
   v. List the maternal and fetal complications associated with preeclampsia-eclampsia
E. Alloimmunization

Reading Assignment: Beckmann, pp 218-222

uWISE Questions: Objective 19: Rh Isoimmunization

Learning Objectives:
   1. Describe the pathophysiology of alloimmunization, including:
      a. Role of red blood cell antigens
      b. Clinical circumstances under which D alloimmunization is likely to occur
      c. Discuss the use of immunoglobulin prophylaxis during pregnancy for the prevention of alloimmunization
      d. Discuss the methods used to determine maternal alloimmunization and the severity of fetal involvement

F. Multifetal Gestation and Malpresentation

Reading Assignment: Beckmann, pp 145-156

uWISE Questions: Objective 20: Multifetal Gestation

Learning Objectives:
   1. Describe the etiology of monozygotic, dizygotic and multizygotic gestation
   2. Describe symptoms, physical findings and diagnostic methods
   3. Describe approach to antepartum, intrapartum, and postpartum management

G. Fetal Death

Reading Assignment:
   1. Prine LW. Office Management of Early Pregnancy Loss
   2. Van Dinter MS. Managing Adverse Birth Outcomes: Helping Parents and Families Cope

uWISE Questions: Objective 21: Fetal Death

Learning Objectives:
   1. Describe the common causes of fetal death in each trimester
   2. Describe the symptoms, physical findings, and diagnostic methods to confirm the diagnosis and etiology of fetal death
   3. Describe the medical and psychosocial management of a patient diagnosed with a fetal demise

H. Abnormal Labor

Reading Assignment: Beckmann, pp 105-113

uWISE Questions: Objective 22: Abnormal Labor

Learning Objectives:
   1. List abnormal labor patterns
   2. List methods of evaluating fetopelvic disproportion
   3. List fetal and maternal complications resulting from abnormal labor
   4. List indications and contraindications for oxytocin administration
   5. List strategies for management of abnormal fetal presentations
   6. List indications for vaginal birth after cesarean delivery
   7. List strategies for emergency management of breech and shoulder dystocia

I. Third-Trimester Bleeding

Reading Assignment: Beckmann, pp 163-167; 175-178

uWISE Questions: Objective 23: Third Trimester Bleeding

Learning Objectives:
   1. Describe the approach to the patient with third-trimester bleeding
   2. Compare symptoms, physical findings and diagnostic methods that differentiate patients with placenta previa, abruption placenta and other causes of third-trimester bleeding
   3. Describe complications of placenta previa and abruption placenta
iv. Describe immediate management of shock secondary to third-trimester bleeding
v. Describe components of the various blood products and indications for their use

J. Preterm Labor
Reading Assignment: Beckmann, pp 157-161
On-line PowerPoint Presentation: Preterm labor
uWISE Questions: Objective 24: Preterm Labor
Learning Objectives:
i. Cite factors predisposing to preterm labor
ii. Cite signs and symptoms of premature uterine contractions
iii. Cite causes of preterm labor
iv. Cite management of preterm labor, including:
   a. Tocolytics
   b. Steroids
   c. Antibiotics

K. Premature Rupture of Membranes
Reading Assignment: Beckmann, pp 169-173
On-line PowerPoint Presentation: Premature Rupture of Membranes
uWISE Questions: Objective 25: Preterm Rupture of the Membranes
Learning Objectives:
i. Summarize the history, physical findings, and diagnostic methods to confirm ROM
ii. Cite the factors predisposing to premature rupture of membranes
iii. List the risks and benefits of expectant management vs. immediate delivery based on gestational age
iv. Describe methods to monitor mom and fetus during expectant management

L. Post Term Pregnancy
Reading Assignment: Beckmann, pp 175-178
uWISE Questions: Objective 30: Postterm Pregnancy
Learning Objectives:
i. Describe normal period of gestation
ii. Describe complications of post-maturity
iii. Describe management of prolonged gestation

M. Fetal Growth Abnormalities
Reading Assignment: Beckmann, pp 151-156
uWISE Questions: Objective 31: Fetal Growth Abnormalities
Learning Objectives:
i. Define macrosomia and fetal growth restriction
ii. Describe etiologies of abnormal growth
iii. Cite methods of detection of fetal growth abnormalities
iv. Cite associated morbidity and mortality

N. Obstetric Procedures
Reading Assignment: Beckmann, pp 66-71; 90-91; 105-119; 154
uWISE Questions: Objective 32: Obstetric Procedures
Learning Objectives:
i. Student will be able to describe each procedure and list the indications and complications of each of the following:
   a. Ultrasound
   b. Chorionic villous sampling
c. Amniocentesis and cordocentesis

d. Antepartum fetal assessment

e. Intrapartum fetal surveillance

f. Induction and augmentation of labor

g. Episiotomy

h. Spontaneous vaginal delivery

i. Vacuum-assisted delivery

j. Forceps delivery

k. Breech delivery

l. Cesarean delivery

m. Vaginal delivery after Cesarean section

n. Newborn circumcision

XI. Gynecology Clinical Modules

11. Menstrual Cycle and Vaginal Bleeding

A. Normal and Abnormal Bleeding

Reading Assignment: Beckmann, pp 337-342

On-line PowerPoint Presentation: Menstrual Cycle, A Problem-based Tutorial

uWISE Questions: Objective 45: Normal and Abnormal Uterine Bleeding

Learning Objectives:

i. Abnormal Bleeding
   a. Describe endocrinology and physiology of the normal menstrual cycle
   b. Distinguish abnormal uterine bleeding from dysfunctional uterine bleeding
   c. List causes of abnormal uterine bleeding
   d. Evaluate and diagnose abnormal uterine bleeding
   e. Describe the therapeutic options of abnormal bleeding

ii. Leiomyomas
   a. Describe the prevalence of uterine leiomyomas
   b. Describe the symptoms and physical findings
   c. Describe the methods to confirm the diagnosis
   d. Describe the indications for medical and surgical treatment

B. Amenorrhea

Reading Assignment: Beckmann, pp 337-342; 349-354

uWISE Questions: Objective 43: Amenorrhea

Learning Objectives:

i. Define:
   a. Primary amenorrhea
   b. Secondary amenorrhea
   c. Oligoamenorrhea

ii. List causes of amenorrhea

iii. Describe evaluation methods

iv. Describe treatment options

C. Premenstrual Syndrome

Reading Assignment: Beckmann, pp 381-386

uWISE Questions: Objective 49: Premenstrual Syndrome

Learning Objectives:

i. Define premenstrual syndrome

ii. Describe theories of etiology
iii. Describe methods of diagnosis
iv. Describe management strategies

12. Contraception and Sterilization

Reading Assignment: Beckmann, pp 236-258

uWISE Questions: Objective 33: Contraception and Sterilization

Learning Objectives:
i. Describe the physiologic basis of contraception
ii. Describe the effectiveness of each form of contraception
iii. Counsel the patient regarding the benefits and risks for each form of contraception
iv. Cite the financial considerations of the various forms of contraception
v. Describe the methods of male and female sterilization
vi. List the risks and benefits of procedures including:
   a. Potential surgical complications
   b. Failure rates
   c. Reversibility

13. Vulvar and Vaginal Disease

Reading Assignment: Beckmann, pp 259-263

uWISE Questions: Objective 35: Vulvar and Vaginal Disorders

Learning Objectives:
i. Describe normal vaginal appearance and secretions
ii. Evaluation and management of vaginitis due to:
   a. Bacteria
   b. Fungi
   c. Trichomonas
iii. Evaluation and management of common vulvar problems, including:
   a. Atrophy
   b. Dermatological conditions of vulva
   c. Bartholin’s gland disease
   d. Vulvodynia
   e. Trauma

14. Sexually Transmitted Infections

A. Sexually transmitted Infections

Reading Assignment: Beckmann pp 265-276

uWISE Questions: Objective 36: Sexually Transmitted Infections

Learning Objectives:
i. Describe the guidelines for STI screening and partner notification including HIV
ii. List the causative pathogens of common STI's
iii. Describe the symptoms and physical exam findings associated with common STI’s
iv. Discuss the steps in the evaluation and initial management of common STI’s
v. Review the CDC guidelines for treating the following sexually transmitted infections:
   a. Bacterial vaginosis
   b. Chlamydia
   c. Gonorrhea
   d. Syphilis
   e. Chancroid
   f. Trichomoniasis
   g. HSV
vi. Know the most common side effects and drug interactions of the antimicrobials used in the treatment of STI's

B. Pelvic Inflammatory Disease
   Reading Assignment: Beckmann, pp 269-270
   uWISE Questions: Objective 36: Sexually Transmitted Infections and Urinary Tract Infections
   Learning Objectives:
   i. Describe the pathogenesis of salpingitis
   ii. List the signs and symptoms of salpingitis
   iii. Describe the management of salpingitis
   iv. Counsel the patient about the public health concerns of STI, including screening programs, prevention and immunizations and partner evaluation and treatment
   v. Identify the long-term sequelae of salpingitis including tubo-ovarian abscess and chronic salpingitis

15. Cervical Dysplasia
   Reading Assignment:
   • Beckmann, pp 409-421
   • New Cervical Cancer Screening Recommendations from the U.S. Preventive Services Task Force and the ACS/ASCCP/ASCP
   uWISE Questions: Objective 52: Cervical Disease and Neoplasia
   Learning Objectives:
   i. Describe the epidemiology and clinical burden of HPV
   ii. Identify the risk factors for cervical and vulvar neoplasia and cancer
   iii. Describe the indications for screening
   iv. Describe the appropriate utilization of new techniques for evaluating cervical neoplasia
   v. Describe the technique for obtaining an adequate Pap smear
   vi. f. Describe the management of a patient with an abnormal Pap smear

16. Pelvic Pain

A. Endometriosis and Dysmenorrhea
   Reading Assignment: Beckmann, pp 287-294; 295-297
   uWISE Questions: Objective 38: Endometriosis and Objective 46 Dysmenorrhea
   Learning Objectives:
   i. Define premenstrual syndrome
   ii. Define primary and secondary dysmenorrhea
   iii. Cite the causes of dysmenorrhea
   iv. Describe the evaluation and management of dysmenorrhea
   v. Describe the theories of the pathogenesis of endometriosis
   vi. List the common sites of endometriosis implants
   vii. List the chief complaints a patient with endometriosis may present
   viii. List the physical exam finding a patient with endometriosis may have
   ix. Describe how endometriosis is diagnosed
   x. Outline a plan for managing endometriosis

B. Chronic Pelvic Pain
   Reading Assignment: Beckmann, pp 297-300
   uWISE Questions: Objective 39: Chronic Pelvic Pain
   Learning Objectives:
   i. Define chronic pelvic pain
   ii. Cite the incidence and etiologies
iii. Describe the clinical manifestations and diagnostic procedures
iv. d. List management options
v. Cite the psychosocial issues associated with chronic pelvic pain
vi. Define vulvodynia
vii. Examine possible etiologies of vulvodynia

17. Breast Disorders
Reading Assignment: Beckmann, pp 301-310
uWISE Questions: Objective 40: Disorders of the Breast
Learning Objectives:
   i. Describe standards of surveillance of an adult woman, including breast self-examination, physical examination and mammography
   ii. Diagnose the approach to a woman with the chief complaint of breast mass, nipple discharge or breast pain
   iii. List history and physical findings that might suggest the following abnormalities:
      a. Intraductal papilloma
      b. Fibrocystic changes
      c. Fibroadenoma
      d. Carcinoma
      e. Mastitis
   iv. Be able to teach a woman how to perform breast self-examination

18. Infertility
Reading Assignment: Beckmann, pp 371-380
On-line PowerPoint Presentation: Infertility, Dr. Mulligan King College
uWISE Questions: Objective 48: Infertility
Learning Objectives:
   i. Define infertility
   ii. Describe the causes of female infertility
   iii. Describe the evaluation and management of infertility
   iv. List the psychosocial issues associated with infertility

19. Pelvic Relaxation and Urinary Incontinence
Reading Assignment: Beckmann, pp 277-286
uWISE Questions: Objective 37: Pelvic Relaxation and Urinary Incontinence
Learning Objectives:
   i. Identify the following elements on physical exam
      a. Cystocele
      b. Rectocele
      c. Vaginal vault / prolapse
   ii. List behavioral, medical and surgical methods to appropriately treat incontinence and pelvic organ prolapse
   iii. Incorporate screening questions for urinary incontinence when eliciting a patient history
   iv. Discuss the difference between stress, urge, and overflow incontinence
   v. Obtain pertinent history components to differentiate between incontinence types
20. Menopause/ Climacteric
Reading Assignment: Beckmann, pp 363-370
uWISE Questions: Objective 47: Menopause
Learning Objectives:
 i. Describe physiologic changes in the hypothalamic-pituitary-ovarian axis associated with perimenopause / menopause
 ii. Describe appropriate management of menopausal / perimenopausal symptoms
 iii. Counsel patients regarding menopausal issues
 iv. List long term changes associated with menopause

21. Abortion
Reading Assignment: Beckmann, pp 187-188
uWISE Questions: Objective 34: Abortion
Learning Objectives:
 i. Describe surgical and non-surgical pregnancy termination methods
 ii. List potential complications of abortion, such as:
   a. Hemorrhage
   b. Infection
   c. Describe the psychosocial considerations of abortion

22. Hirsutism and Virilization
Reading Assignment: Beckmann, pp 355-362
On-line PowerPoint Presentation: Hirsutism, Dr. Mulligan
uWISE Questions: Objective 44: Hirsutism and Virilization
Learning Objectives:
 i. Cite normal variations in secondary sexual characteristics
 ii. List definitions of hirsutism and virilization
 iii. List causes including ovarian, adrenal, pituitary and pharmacological
 iv. Evaluate the patient with hirsutism or virilization

23. Gynecology Oncology

A. Vaginal / Vulvar Cancer
Reading Assignment: Beckmann, pp 399-408
uWISE Questions: Objective 51: Vulvar Neoplasms
Learning Objectives:
 i. List risk factors for vulvar neoplasms
 ii. Describe methods of diagnosis including the indications for vulvar biopsy
 iii. Review management of vulvar neoplasms

B. Endometrial Carcinoma
Reading Assignment: Beckmann, pp 427-434
uWISE Questions: Objective 54: Endometrial Carcinoma
Learning Objectives:
 i. List risk factors for endometrial carcinoma
 ii. Describe symptoms and physical findings
 iii. Describe management of the patient with postmenopausal bleeding
 iv. Describe methods to diagnose endometrial carcinoma
 v. Understand impact of staging on management and prognosis
 vi. Describe management of the patient with endometrial cancer
C. Ovarian Neoplasms
   **Reading Assignment:** Beckmann, pp 435-446
   **uWISE Questions:** Objective 55: Ovarian Neoplasms
   **Learning Objectives:**
   i. Evaluation of the patient with an adnexal mass
   ii. Characteristics of:
      a. Functional cysts
      b. Benign neoplasms
      c. Carcinomas
   iii. Evaluation and management of carcinomas of the ovary
      a. Symptoms and physical findings
      b. Risk factors
      c. Histologic classification
   iv. Impact of staging on management and prognosis

D. Gestational Trophoblastic Disease
   **Reading Assignment:** Beckmann, pp 393-398
   **uWISE Questions:** Objective 50: Gestational Trophoblastic Neoplasia
   **Learning Objectives:**
   i. Describe symptoms and physical findings of gestational trophoblastic disease
   ii. Describe diagnostic methods
   iii. Describe management and follow-up

24. Sexual Assault/Domestic Violence
   **Reading Assignment:** Beckmann, pp 329-336
   **uWISE Questions:**
   - Objective 57: Sexual Assault
   - Objective 58: Intimate Partner Violence
   **Learning Objectives:**
   i. Identify patients at increased risk for sexual assault
   ii. Describe the medical and psychosocial management of a victim of sexual assault
   iii. Cite prevalence and incidence of violence against women, elder abuse, child abuse
   iv. Demonstrate screening methods for domestic violence
   v. Communicate the available resources for a victim of domestic violence including short-term safety