HAP 571 OBSTETRICS AND GYNECOLOGY CLERKSHIP

The purpose of the OB/GYN rotation is to provide the student with practical clinical experience in the differential diagnosis, evaluation, and management of normal and abnormal conditions in obstetrics and gynecology. Students will gain skills in obtaining patient histories, physical diagnosis and medical decision making through exposure to a broad base of patients with a wide variety of personal and social issues that influence patient care. In addition, this rotation provides the student with practical experience in the areas of family planning, ante- and postpartum care, and patient counseling. Further, through formulation of complete medical records, the student will augment skills previously acquired in inpatient and ambulatory diagnostic and therapeutic procedures.

I. INSTRUCTIONAL OBJECTIVES

Upon completion of the Obstetrics and Gynecology rotation, based on supervised clinical practice, utilization of appropriate reading or reference materials, attendance at case conferences, grand rounds, morning reports and rounds, and sessions with program faculty coordinating the clerkships the student will broaden and reinforce medical skills and knowledge pertaining to each of the instructional objectives below, as they relate to signs, symptoms, differential diagnosis and management of clinical problems in the problem list. Student evaluation will consist of the following criteria: preceptor evaluation, faculty evaluation, clinical skills practicum (CSP), and written examination. The student must seek appropriate preceptor supervision for all the tasks listed below, particularly those related to management. At the end of the rotation the student should be able to:

1. Elicit and record a medical, obstetric and gynecologic history based on the patient’s chief complaint including history of present illness (HPI) with applicable review of systems (ROS), past medical history (PMH), family history (FH) and social history (SH) to include:
   a. effective communication skills, recognizing and addressing any barriers to communication
   b. an organized approach
   c. interpretation of normal and abnormal historical data

2. Obtain and document an appropriate physical examination to include the following:
   a. proper hand-washing/universal precaution
   b. an organized approach
   c. utilization of proper technique, including pelvic examination, prenatal evaluation, ante-partum and postpartum evaluation with appropriate modifications as need based on the patient’s age, mobility and mental status
   d. draping appropriately, offering explanations, respecting patients privacy and dignity and displaying a professional demeanor during the examination
   e. interpreting normal and abnormal physical examination findings in the context of the patient’s history.

3. Interpret the information obtained from the history and physical examination and generate a differential diagnosis to include a consideration of the most likely primary diagnosis, secondary diagnoses and the most severe and/or life-threatening diagnoses.

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4. Select, justify and interpret clinical tests and diagnostic procedures with attention to risks and benefits, sensitivity and specificity, cost, consent requirements, and time needed to obtain results.

5. Manage, with physician collaboration, common obstetrical or gynecological conditions.

6. Formulate and record a patient data base including admission history, physical examination, documentation of laboratory/diagnostic information, assessment and plan and progress notes in the SOAP (subjective/objective/assessment/plan) format.

7. Make verbal case presentations to the clinical preceptor in an organized and time efficient manner.

8. Identify the relationship between medical and socioeconomic problems.

9. Provide patient and family counseling to include:
   a. empathy and compassion, support and reassurance
   b. respect for patients’ and families’ religious, spiritual, cultural or health-related beliefs, and lifestyle choices
   c. appropriate referral when indicated to community resources for continuity of care

10. Demonstrate knowledge of the etiology, epidemiology, pathophysiology, anatomy, prognosis and complications pertinent to each clinical problem in the problem list.

11. Develop skills in counseling patients as to available contraceptive measures, and their indications and precautions, including:
    a. hormonal contraceptives: oral, subdermal, IM, intravaginal, topical
    b. diaphragm
    c. condoms (male and female)
    d. intrauterine device (IUD)
    e. tubal ligation/Essure device
    f. spermicidal agents
    g. male, female sterilization techniques
    h. natural family planning
    i. emergency contraception

12. Observe and/or assist in the insertion and fitting of diaphragms.

13. Observe and/or assist in IUD insertions/removals.

14. Distinguish between the positive, probable and presumptive signs of pregnancy.

15. Become proficient in providing routine prenatal care.

16. Examine the pregnant patient and identify and/or explain:

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a. current duration of the pregnancy
b. fetal position, presentation and lie
c. fetal heartbeat
d. fetal distress
e. need for dietary supplementation or change
f. factors associated with preeclampsia or eclampsia
g. medical complications during pregnancy such as diabetes mellitus, anemia, cardiac and thyroid disorders

17. Differentiate the four stages of labor and be able to assess the patient's presenting stage of labor and degree of cervical dilation and effacement.

18. Summarize initial labor assessment and techniques for evaluating the progress of labor and outline the management of a patient during normal labor.

19. Summarize the utilization of the fetal monitor and the interpretation of data obtained.

20. Recognize obstetric complications and emergencies and be prepared to assist in institution of appropriate procedures.

21. Perform uncomplicated deliveries with physician supervision.

22. Assist the physician during complicated vaginal deliveries and cesarean deliveries.

23. Perform and/or assist in an episiotomy, including the repair of same, with physician supervision.

24. Describe postpartum care including:
   a. episiotomy care
   b. breast care/feeding/mastitis
   c. control of postpartum hemorrhage
   d. prevention of deep vein thrombosis and pulmonary emboli
   e. depression
   f. discharge instructions

25. Become proficient in the performance of the breast examination, describe indications for diagnostic and radiographic procedures relative to the breast, and provide instruction to the patient in breast self-examination and screening guidelines.

26. Assist the gynecologist during common surgical procedures.

27. The student will develop proficiency in the following skills:

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II. PROBLEM LIST
The student will demonstrate the knowledge and skills described above pertaining to the following diagnoses:

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**GYNECOLOGIC CONDITIONS**

**Infections**
- Bartholin’s gland infections
- Periurethral gland infections
- Monilial infections
- Bacterial vaginosis
- Trichomoniasis
- Genital herpes
- Human papillomavirus
- Chlamydia
- Gonorrhea
- Syphilis
- Condyloma acuminata
- Pelvic Inflammatory Disease
- HIV/AIDS

**Benign Disorders of the Reproductive Tract**
- Uterine leiomyomas
- Endometriosis
- Adenomyosis
- Ovarian cysts/tumors
- Bartholin cysts
- Cervical/Endometrial polyps
- Adnexal torsion
- Lichen sclerosis

**Abnormalities of Menstruation**
- Primary/Secondary dysmenorrhea
- Chronic pelvic pain
- Primary/Secondary amenorrhea
- Abnormal/Dysfunctional uterine bleeding
- Premenstrual syndrome

**Gynecologic Malignancies**
- Vulvar cancer
- Cervical cancer
- Endometrial cancer
- Ovarian cancer

**Gynecologic Conditions**
- Menopause
- Infertility
- Sexual assault

**OBSTETRIC CONDITIONS**

**Complications of Pregnancy**
- Gestational diabetes
- Hypertensive disorders in pregnancy
- Preeclampsia/Eclampsia
- Rhesus Isoimmunization
- Hyperemesis gravidarum
- Thyroid disease
- Spontaneous abortion: threatened, missed inevitable, incomplete, complete, septic
- Intrauterine growth restriction
- Intrauterine fetal demise
- Multifetal gestation
- Abruptio placenta
- Thromboembolic disorders
- Substance abuse
- First trimester bleeding
- Ectopic pregnancy

**Complications of Delivery**
- Malpresentation
- Dystocia/Macrosomia
- Cephalopelvic disproportion
- Failure to progress
- Obstetric hemorrhage
- Fetal distress
- Fetal/perinatal/maternal death
- Placenta previa
- Preterm labor
- Post term pregnancy
- Premature rupture of membranes
- Cervical laceration
- Cesarean delivery
- Forceps delivery
- Vacuum extraction

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**III. PROFESSIONAL GROWTH**

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The student’s attitudes and behavior that contribute to professional growth will be monitored by core PA faculty and clinical preceptors throughout the clerkship. The student will demonstrate professionalism by:

1. displaying a high level of motivation and interest
2. recognizing personal strengths, and limitations in knowledge and skill, and actively seeking help and advice from preceptors when needed
3. identifying areas for improvement and implementing strategies to enhance knowledge, skills and attitudes
4. eliciting and acknowledging feedback, and then modifying behavior accordingly
5. seeking and maintaining competence by reading and utilizing principles of evidence based medicine
6. providing compassionate care to all patients regardless of the patient’s diagnosis, prognosis, age, gender, race, sexual orientation, ethnicity, religious, cultural or health-related beliefs, citizenship or socioeconomic class
7. forming and maintaining positive interpersonal relationships with patients, peers, staff and supervisors
8. maintaining appropriate boundaries in relationships with patients, peers, staff and supervisors
9. being considerate and helpful to all members of the health care team; collaborating appropriately and respecting the roles and professional expertise of all health care professionals
10. recognizing and reporting unprofessional behavior
11. maintaining a calm and sensible manner in stressful and/or emergency situations
12. showing respect for patients privacy by maintaining appropriate confidentiality of the patient’s record
13. being punctual, and displaying appropriate dress and grooming
14. attending to one’s own well being
15. adhering to the American Academy of Physician Assistants (AAPA) Code of Ethics

IV. STUDENT EVALUATION

- Clinical site supervisor evaluation.................................................................50%
● Written clinical examination..........................................................................................................................15%

● Program faculty grade....................................................................................................................................5%
  (H&Ps, patient presentations, professional behavior)

● Clinical skills practicum
  (CSP).......................................................................................................................................................10%

● Appropriate utilization of Cbase..................................................................................................................5%

● EMO
  exam..........................................................................................................................................................10%

● HPI.............................................................................................................................................................5%

Failure to hand in or present assignments on time or any unprofessional behavior will result in a lowering of the grade for the rotation.

If a student earns a grade below a “C“ for the OB/GYN Clerkship, he/she will be placed on academic probation and required to repeat the clerkship. This will extend the length of time required for completion of the clinical year.

Failure to earn a grade of C or better on the repeated OB/GYN Clerkship will result in a recommendation to the Dean for termination from the program.

Americans with Disabilities Act:

If you have a physical, psychological, medical or learning disability that may impact your course work, please contact Disability Support Services, ECC (Educational Communications Center) Building, room128, (631) 632-6748. They will determine with you what accommodations, if any, are necessary and appropriate. All information and documentation is confidential.

Academic Integrity:

Each student must pursue his or her academic goals honestly and be personally accountable for all submitted work. Representing another person's work as your own is always wrong. Faculty are required to report any suspected instances of academic dishonesty to the Academic Judiciary. Faculty in the Health Sciences Center (School of Health Technology & Management, Nursing, Social Welfare, Dental Medicine) and School of Medicine are required to follow their school-specific procedures. For more comprehensive information on academic integrity, including categories of academic dishonesty, please refer to the academic judiciary website at http://www.stonybrook.edu/uaa/academicjudiciary/

Critical Incident Management:

Stony Brook University expects students to respect the rights, privileges, and property of other people. Faculty are required to report to the Office of Judicial Affairs any disruptive behavior that interrupts their ability to teach, compromises the safety of the learning environment, or inhibits students' ability to learn. Faculty in the HSC Schools and the School of Medicine are required to follow their school-specific procedures.

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