

GOALS & OBJECTIVES

Obstetrics and Gynecology Clerkship Goals

The Obstetrics and Gynecology clerkship provides clinical opportunities to learn comprehensive women's health care, including medical care and counseling services. The rotation focuses on both common obstetrical conditions and gynecological problems. Knowledge of serious, less common conditions is also required.

There are two clinical rotation sites, Prentice Women's Hospital (Northwestern Medicine) and the John H. Stroger, Jr. Hospital of Cook County. Some learning activities at each site are scheduled, including Morbidity & Mortality, Grand Rounds, Sign-Out Rounds and a variety of educational conferences. Daily clinical activities are scheduled for the duration of the clerkship. At times, there is flexibility for each student to select their specific clinical experiences. This is done in coordination with their assigned resident team on Labor and Delivery, Gynecologic Surgery (General Gynecology, Gynecologic Oncology, Urogynecology/Female Pelvic Medicine and Reconstructive Surgery) and in the outpatient clinics.

It is the student's responsibility to identify and pursue learning which complements assigned clinical activities and leads to fulfillment of the course objectives. Students are expected to actively maintain their online clerkship log which includes assessment and evaluation of patients with a variety of common obstetric and gynecologic diagnoses and specific clinical/procedural skills (e.g., speculum examination, suturing, assisting in vaginal and cesarean deliveries). Students will achieve the majority of these objectives through actual patient encounters, and will have access to alternate learning experiences if needed. Students are responsible for obtaining knowledge about each of the assigned topics, as these are high yield for the NBME Subject Examination and the end of rotation Objective Structured Clinical Examination (OSCE). The Department of Obstetrics and Gynecology strives to train all Northwestern Feinberg School of Medicine students to become self-directed, independent learners who take specific reproductive health concerns into consideration no matter the clinical situation.

Phase 2 (All Clerkships) Common Objectives

Objective 1: Perform focused or complete reproductive health histories and physicals when appropriate (including complete pelvic exams with supervision), and document efficiently in the medical record (EPA 1, EPA 2, EPA 5) (PCMC-1; PCMC-2; PCMC-3; PCMC-5; ECIS-1; ECIS-2)

Expectations

It is expected that all students should demonstrate proficiency with the basic pelvic exam during the clerkship and perform at least two complete pelvic examinations. These skills have been previously introduced and practiced during Phase 1. During clerkship orientation, students will work with the Gynecologic Teaching Assistants (GTAs) to hone their breast, speculum and bimanual examination skills. Students will also demonstrate requisite prenatal examination skills including measuring fundal height and auscultating fetal heart tones. Students will be supervised in these exams by residents, fellows, attendings, and by assigned preceptors in the outpatient and operating room settings during the rotation.

Sample gynecologic and obstetrical H&Ps are including in the Introduction to Phase 2 Purple Book. Components of the OB/GYN H&P are reviewed during orientation and students will utilize both EMR templates and free-form H&Ps for documentation in a variety of clinical settings. Ongoing feedback on written H&Ps will be provided throughout the clerkship.

Assessment

A total of two H&Ps will be submitted by students by the end of the clerkship. The first H&P will be reviewed for formative feedback during the mid-clerkship meeting. The second H&P will be reviewed and critiqued by OB/GYN faculty as part of the H&P and MDM assignment will be a required portion of the student's grade.

The physician preceptor (resident, fellow, or attending) will supervise the pelvic examination. Any student who is unable to demonstrate proficiency will work with the GTAs during a scheduled session prior to the completion of the rotation. The student will also perform, at a minimum, two outpatient assessments of fetal heart tones via external Doppler and fetal growth via fundal height measurement. The student will attest to completion of these activities in the Clerkship Log.

Students will perform an observed pelvic examination (external genitalia, speculum, and bimanual examination) on a mannequin model during the OSCE and will be assessed for proficiency by an observer using a standardized rubric.

Objective 2: Acquire and apply evidence-based knowledge about Ob-Gyn conditions and diseases. (EPA 2, EPA 3, EPA 7) (MKS-1b,1c,1d,1e,1f ; MKS-3a,3b; CLQI-3; PBMR-1; PBMR-2 ; PCMC-3)

Expectations

Students will learn about each of the 58 core learning objectives. This list of required objectives aligns with the Association of Professors of Gynecology and Obstetrics and is available via [APGO Medical Student Educational Objectives, 11th Edition](#). Students will care for patients with a variety of medical conditions in both the inpatient and outpatient settings.

1. Students will actively participate in the evaluation and care of patients presenting with a variety of OB/GYN-related concerns or needs.
2. Students will participate in scheduled and unscheduled educational time during the clerkship. This includes didactic lectures, asynchronous learning material, team-based learning, case-based study and small group sessions.
3. Students will read all required topics prior to the examination at the end of the clerkship.

Assessment

1. Students will document all relevant patient encounters in the online clerkship log.
2. If the student has not been actively involved with an actual patient in each of the assigned clerk log categories by the end of the last week of the clerkship, the student will fulfill the requirement by utilizing the online APGO video-based cases and/or simulations provided during the didactic curriculum.
3. Students will demonstrate their acquisition of knowledge by successful completion and passage of the NBME Subject Examination in Obstetrics and Gynecology (minimum score in the 10th percentile nationally).
4. Students may be assessed specifically on their ability to search and analyze the literature using CPA forms (EPA 7), on the History & Physical Medical Decision Making assignment, and on the OSCE

Objective 3: Demonstrate effective interpersonal communications skills with patients and as a member of

the healthcare team (EPA 6, EPA 9) (ECIS-1; ECIS-3; ECIS-4; PCMC-6; SATBC-2a-2b)

Expectations

Students will:

- Establish rapport with patients.
- Work cooperatively with others.
- Establish sufficient visibility and rapport with residents, fellows and attendings to be fairly evaluated.
- Communicate in effectively with patients by avoiding medical jargon and checking back for understanding.
- Contribute information effectively to the team in a clear and timely manner.

Assessment

Students will be assessed specifically on these interpersonal skills through the use of the CPA forms (communication domains and EPA 9) Feedback will be reflected in the Final Grade Narrative.

Objective 4: Demonstrate professional characteristics as a student doctor and a member of the healthcare team (EPA 9) (PBMR-3; PBMR-5; PBMR-6; PBMR-7; SATBC-2a-2b; CLQI-1a-1b; CLQI-2)

Expectations

Students will:

- Demonstrate dependability, truthfulness and integrity.
- Participate actively in learning opportunities and work assignments.
- Acknowledge and demonstrate awareness of own limitations.
- Take initiative for their own learning and patient care.
- Remain open to feedback and implement it.
- Treat all patients with respect and compassion
- Discuss ethical principles and engage in respectful discussion surrounding ethical dilemmas, autonomy, justice, beneficence and non-maleficence
- Protect patient confidentiality and comply with all HIPAA statutes
- Students participating in patient care activities are expected to present a professional image in both conduct and attire, including the following:
 - Adherence to PPE best practices
 - Personal cleanliness
 - Attire appropriate to professional environment
 - Clean white coat
 - Jade green scrubs only in the proper locations, covered when appropriate and never worn outside the hospital
- Professional conduct also includes the following:
 - Charting is to be completed in a timely manner
 - Do not remove hard copies of medical records from the hospital
 - Do not discuss patients in public places
 - Do not argue diagnoses or management plans in front of patients or in the medical record
 - Arrive for clinics on time and well-prepared

Assessment

Students will be assessed specifically on these professionalism skills on the Clinical Performance Assessment (EPA 9 and Professionalism Domains). . Feedback will be incorporated into the Final Grade Narrative where appropriate.

Objective 5: Advocate on behalf of patients. (CES-1, CES-2, SATBC-1)

Expectations

Students will:

- Identify social and systemic barriers to care and link patients to resources to address them.
- Effectively call on system resources to provide care that is of optimal value.

Assessment

Students will be assessed specifically on these skills through the use of the CPA forms. This will be reflected in the Final Grade Narrative.

Ob/Gyn Clerkship Objectives

Adapted from the Association of Professors in Gynecology and Obstetrics (APGO) Medical Student Educational Objectives and set within the framework of the Northwestern University Feinberg School of Medicine competencies

PATIENT-CENTERED MEDICAL CARE

- Efficiently obtain a reproductive health-focused history from a patient in a sensitive manner. **PCMC-1, ECIS-1 (CPA, DO, OSCE)**
- Efficiently obtain a social history including information about patient safety (screen for intimate partner violence, housing and food insecurity) **PCMC-1, ECIS-1 (CPA, DO, OSCE)**
- Efficiently obtain a sexual history, including gender identity, sexual identity, orientation and behaviors in a sensitive manner. **PCMC-1, ECIS-1 (CPA, DO, OSCE)**
- Independently perform a physical exam that is tailored to the nature of the visit or complaint. **PCMC-2 (CPA, DO, OSCE)**
- Perform a supervised pelvic examination (including speculum examination) correctly and with attention to patient comfort. **PCMC-2 (CPA, DO, PE)**
- Efficiently report findings of history, physical exam, studies and prior records in all clinical settings **ECIS-2, PCMC-3 (CPA, MO, DO)**
- Communicate effectively with patients using non-medical jargon. **ECIS-3 (CPA, OSCE, MO)**
- Interpret history and physical exam findings to generate appropriate differential diagnoses. **PCMC-3 (CPA, OSCE, ME, NBME)**
- Formulate a patient care plan based on the most likely diagnosis. Include necessary diagnostic tests, therapeutic treatment, and patient counseling. **PCMC-3, PCMC-6 (CPA, OSCE, NBME)**
- Recognize criteria for admission and discharge from the hospital for obstetrical patients. **PCMC-3 (CPA, NBME)**
- Recognize criteria for admission and discharge from the hospital for gynecologic patients. **PCMC-3 (CPA, NBME)**
- Reassess patients throughout the labor process as required. **PCMC-2 (CPA)**
- Evaluate postoperative patients and recognize when they are ready for discharge or require a higher level of care. **PCMC-2, 3 (CPA)**
- Efficiently share relevant clinical information with the patient's primary OB/GYN provider. **ECIS-3 (CPA)**
- Practice appropriate infection control measures and use of personal protective equipment (PPE) while

caring for patients. PCMC-4 (CPA, MO)

Practice appropriate sterile technique and recognize and maintain the sterile field while in the operating room.

PCMC-4 (CPA, MO) MEDICAL KNOWLEDGE AND SCHOLARSHIP, CONTINUOUS LEARNING AND QUALITY IMPROVEMENT

- Identify normal physiologic changes that occur during pregnancy. MKS-1a (NBME, CPA)
- Provide preconception counseling, antepartum care and intrapartum care for low-risk pregnancies. PCMC-3,6 (CPA, OSCE, CL)
- Recognize the steps necessary for immediate care of the newborn. MKS-3a,3b (NBME)
- Provide care for postpartum patients in the inpatient and outpatient setting and recognize the maternal and fetal benefits of breastfeeding. MKS-3a,3b, PCMC-3 (CPA, OSCE, NBME, CL)
- Recognize signs and symptoms concerning for mood disorders in pregnancy and the postpartum period and utilize appropriate screening tools. MKS-3a (CPA, OSCE, NBME, CL)
- Describe the differential diagnosis, evaluation and management of patients presenting with first trimester bleeding and pregnancy of unknown location. MKS-1d, PCMC-3 (CPA, OSCE, NBME, CL)
- Recognize medical and surgical complications of pregnancy MKS-1d, PCMC-3 (CPA, OSCE, NBME)
- Identify hypertensive disorders of pregnancy (chronic hypertension, gestational hypertension, pre-eclampsia with and without severe features, HELLP syndrome, eclampsia, etc.) and describe evaluation and management. MKS-1b, 1d, 3a, 3b, PCMC-3 (CPA, OSCE, NBME, CL)
- Describe the pathophysiology and diagnosis of alloimmunization and the use of immunoglobulin prophylaxis during pregnancy. Discuss the management of patients with Rh-D sensitization in pregnancy. MKS-1b, 1d, 1e, PCMC-3 (NBME)
- Recognize the risk factors for multifetal gestation, describe the embryology and diagnosis (ultrasound findings that delineate chorionicity/amnionity), and discuss the associated potential maternal and fetal complications. MKS-1b, MKS-1d, MKS-1f, MKS-3a (CPA, OSCE, NBME)
- Describe the symptoms and common causes of pregnancy loss/fetal demise in each trimester including medical, genetic, social, environmental and nutritional factors. MKS-1b, MKS-1c, MKS-1d, MKS-1f, CES-1 (CPA, NBME)
- Describe the diagnosis and management of fetal demise MKS-1b, MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, NBME)
- Define normal and abnormal labor patterns and describe the methods of evaluating labor patterns. List the indications and contraindication for oxytocin administration and discuss fetal and maternal complications of abnormal labor. Recognize the indications for an operative vaginal delivery and cesarean delivery. MKS-1a, 1b, 1e, MKS-3a, 3b (CPA, OSCE, NBME, CL)
- Discuss strategies for emergency management of breech presentation, shoulder dystocia and cord prolapse including the role of the inter-professional team to achieve a safe outcome for mother pregnant person and infant. MKS-1b, 1e, 3b, SATBC-2a, 2b (CPA, OSCE, NBME)
- Describe the differential diagnosis, evaluation and management of patients presenting with third trimester bleeding. Recognize the potential complications of placenta previa and placental abruption and describe the initial evaluation and management plan for acute blood loss. MKS-1a, 1b, 1e, MKS-3a, 3b (CPA, OSCE, NBME, CL)
- Recognize signs and symptoms of preterm labor (PTL) and preterm premature rupture of membranes (PPROM). Describe the initial evaluation and management of patients presenting with these conditions. MKS-1d, MKS-3a, MKS-3b (CPA, OSCE, NBME)
- Recognize signs and symptoms that suggest urgent intervention for fetal or maternal health (Category 3 fetal heart rate tracing or maternal hemorrhage), and discuss initial management steps. MKS-1d,

MKS-3b, PCMC-3 (CPA, OSCE, NBME)

- Discuss the risk factors for postpartum hemorrhage and construct a differential diagnosis for the diagnosis of immediate and delayed postpartum hemorrhage. Develop an evaluation and management plan for postpartum hemorrhage, including the use of uterotonics, additional interventions and the role of the inter-professional team to ensure patient safety. MKS-1d, 1e, 1f, 3a, 3b, SATBC-2a, 2b (CPA, OSCE, NBME, CL)
- Describe the approach to a patient with a postpartum fever and discuss risk factors for, and the initial evaluation and management of, patients with suspected mastitis, endomyometritis, and urinary tract infection. MKS-1d, 1e, 1f, 3a, 3b (NBME, OSCE)
- Identify the normal duration of gestation, list the complications of prolonged gestation, recognize the significance of prolonged gestation on perinatal morbidity and mortality and describe the evidence-based management options for prolonged gestation. MKS-1a, MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME)
- Define fetal growth abnormalities (fetal growth restriction and macrosomia) and evaluate patients for appropriate fetal growth. Describe the management of these abnormalities and list associated morbidity and mortality. MKS-1b, MKS-1d, MKS-1e, MKS-3b, PCMC-2 (CPA, OSCE, NBME)
- Describe common obstetrical procedures and discuss their indications and possible complications: ultrasound, chorionic villous sampling, amniocentesis, induction and augmentation of labor, spontaneous vaginal delivery, vaginal birth after cesarean delivery, operative vaginal delivery, breech delivery, external cephalic version, cesarean delivery, postpartum tubal ligation, cervical cerclage and newborn circumcision MKS-1e, MKS-3b (CPA, OSCE, NBME, CL)
- Describe the mechanism of action and effectiveness of contraceptive methods (oral contraceptives, intrauterine devices, injectables, transdermal devices, implants, vaginal rings, barrier methods, etc.). MKS-1e (CPA, OSCE, NBME, CL)
- Counsel patients regarding the benefits, risks and appropriate use for each contraceptive method, including emergency contraception and recognize how health policy, advocacy and social and environmental factors impact family planning and population health. PCMC-6 (CPA, OSCE, NBME, CL)
- Describe the methods of male and female surgical sterilization MKS-1e (OSCE, NBME, CL)
- Assess reproductive choice and provide non-directive counseling to patients surrounding pregnancy, including unintended pregnancy. PCMC-1, PCMC-6 (CPA, OSCE, NBME, CL)
- List the non-surgical and surgical methods of pregnancy termination and discuss potential complications. MKS-1e, MKS-3b (OSCE, NBME, CL)
- Describe the public health impact of the legal status of abortion and discuss how health policy, advocacy, social and environment factors impact access to abortion. CES-1, CES-2, MKS-1f (NBME, CL, ES, OSCE)
- Formulate a differential diagnosis for vulvovaginitis, discuss the steps in the evaluation and management of patients with these symptoms and interpret a wet mount microscopic examination MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, NBME, CL, OSCE)
- Describe the guidelines for STI screening, partner notification and treatment. Discuss STI prevention strategies, describe the symptoms and physical exam findings associated with common STIs and discuss the evaluation and management of common STIs. MKS-1d, MKS-1e, MKS-1f, MKS-3a, MKS-3b (CPA, OSCE, ES, NBME, CL)
- Describe the evaluation, diagnostic criteria and initial management of salpingitis/pelvic inflammatory disease and identify possible long-term sequelae. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME)

- Describe the evaluation and management of UTIs with consideration of value-based care. Recognize when to screen for and treat asymptomatic bacteriuria. MKS-1d, MKS-1e, MKS-3a, MKS-3b, SATBC-1 (CPA, OSCE, NBME, CL)
- Identify normal pelvic anatomy and describe the pelvic support structures. List risk factors for pelvic floor disorders and describe signs and symptoms of pelvic floor disorders. MKS-1a, MKS-1b, MKS-1d, MKS-1f (CPA, OSCE, NBME, CL)
- Differentiate the types of urinary incontinence, discuss the steps in evaluation and management including the appropriate surgical and non-surgical options. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- Describe the endocrinology and physiology of the normal menstrual cycle. Discuss the role of the hypothalamic-pituitary-ovarian-endometrial axis in the menstrual cycle. Discuss the feedback loops present and identify the points at which medications can impact this cycle to treat illness or impact fertility. Describe the changes that occur during normal puberty and the changes associated with perimenopause/menopause. MKS-1a, MKS-1c, MKS-1e (CPA, OSCE, NBME)
- List the most common sites of endometriosis, describe symptoms and physical exam findings in these patients and describe the theories of pathogenesis. Describe the diagnosis and management options and understanding its implications on social, economic and other health outcomes. MKS-1b, MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME)
- Define chronic pelvic pain, describe symptoms, differential diagnosis and physical exam findings. Discuss the evaluation and management options. Discuss the psychosocial issues associated with this condition. MKS-1e, MKS-1d, MKS-1e, MKS-3a, MKS-3b, CES-1 (NBME)
- Evaluate common gynecologic conditions including: dysmenorrhea, abnormal uterine bleeding, pelvic masses, pelvic pain, abdominal pain, urinary incontinence, vulvar disorders and vaginitis. MKS-1d, PCMC-3 (CPA, CL, OSCE, NBME)
- List risk factors for breast disorders and breast cancer. Describe the long-term cancer risk in patients with genetic mutations such as BRCA-1 and BRCA-2. MKS-1f (CPA, OSCE, NBME)
- Describe symptoms and physical examination findings of benign or malignant breast conditions and correctly perform a breast examination. Discuss the steps and evaluation of common breast complaints including mastalgia, breast masses and nipple discharge. MKS-1d, MKS-1e, MKS-3a, MKS-3b, PCMC-2 (GTA, CPA, NBME, OSCE)
- Explain the normal sequence of pubertal events (including associated psychological issues) and ages at which these changes occur. Define precocious and delayed puberty and describe the steps in the initial evaluation. MKS-1a, MKS-1b, MKS-1c, MKS-3a (NBME)
- Define amenorrhea and oligomenorrhea and explain the pathophysiology and etiology of these conditions. Describe associated symptoms and physical exam findings for amenorrhea. Discuss the evaluation and initial management of amenorrhea (primary and secondary) and oligomenorrhea and describe the consequences of these conditions if left untreated. MKS-1b, MKS-1d, MKS-1e, MKS-3a, MKS-3b (NBME, CPA, CL, OSCE)
- Define hirsutism and virilization and recognize normal variations and abnormalities in secondary sexual characteristics. Describe how hirsutism and virilization manifest in other medical disorders. MKS-1a, MKS-1b, MKS-1d (CPA, OSCE, NBME)
- Define abnormal uterine bleeding, discuss the potential etiologies and describe the evaluation and initial management of patients with this condition. Summarize medical and surgical management options for patients with abnormal uterine bleeding. MKS-1b, MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)

- Define dysmenorrhea, distinguish primary and secondary dysmenorrhea, identify the etiologies and discuss its evaluation and management. MKS-1b, MKS-1d, MKS-1e, MKS-3a, MKS-3b (OSCE, NBME)
- Define menopause and describe symptoms and physical exam findings related to perimenopause/menopause. Discuss management options for patients with these symptoms and counsel patients on this transition and its impact on overall health. Discuss long-term medical disorders associated with menopause. MKS-1a, MKS-1c, MKS-3a, MKS-3b, PCMC-6 (CPA, OSCE, NBME, CL)
- List the causes of male and female infertility and describe the age-appropriate evaluation and initial management of an infertile patient (or couple). Describe management options for infertility. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- Describe ethical issues confronting patients with infertility and access to assisted reproductive technologies. PBMR-1, PBMR-2 (CL, ES)
- Identify patients who are candidates for fertility preservation and describe the process of oocyte and ovarian cryopreservation. PCMC-1, PCMC-2, PCMC-3, MKS-1e (NBME, ES, CL)
- Discuss options for genetic carrier screening and identify screening and diagnostic options for aneuploidy testing in pregnancy. MKS-1d, MKS-3a (CPA, OSCE, NBME, CL)
- Identify the criteria for the diagnosis of Premenstrual Syndrome (PMS) and Premenstrual Dysphoric Disorder (PMDD) and described treatment options. MKS-1d, MKS-1e, MKS-3a, MKS-3b (NBME)
- Describe the symptoms and physical examination findings of a patient with gestational trophoblastic disease and gestational trophoblastic neoplasia and describe the diagnosis, treatment and appropriate follow-up. MKS-1d, MKS-1e, MKS-3a, MKS-3b (OSCE, NBME)
- List risk factors for vulvar neoplasms, describe symptoms and physical examination findings concerning for vulvar neoplasm, list the indications for vulvar biopsy and common vulvar neoplasms. MKS-1d, MKS-1f, MKS-3a (CPA, OSCE, NBME, CL)
- Describe the pathogenesis of cervical cancer, identify risks factors for cervical cancer. MKS-1b, MKS-1f (CPA, OSCE, NBME, CL)
- List the guidelines for cervical cancer screening, describe the initial management of patients with abnormal cervical cancer screening and list current indications for HPV vaccination and its role in the prevention of cervical cancer. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- List the risk factors for endometrial hyperplasia/cancer and describe the symptoms and physical exam findings associated with these diagnoses. Describe the management of endometrial hyperplasia and endometrial cancer. MKS-1d, MKS-1e, MKS-1f, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- Outline the causes, diagnosis and management of postmenopausal bleeding. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- Describe the initial management of a patient with an adnexal mass and compare the characteristics of functional cysts, benign ovarian masses and ovarian cancer. MKS-1d, MKS-1e, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)
- List the risk factors for ovarian cancer and describe the symptoms and physical exam findings associated with this diagnosis. Describe the three histological categories of ovarian neoplasm and describe the management of ovarian cancer. MKS-1b, MKS-1d, MKS-1e, MKS-1f, MKS-3a, MKS-3b (OSCE, NBME, CL)
- Cite the prevalence of uterine leiomyomata and identify symptoms and physical exam findings in patients with this diagnosis. Identify the type of leiomyoma based on anatomic location in the uterus. Describe diagnostic methods, management and treatment options for uterine leiomyomata. MKS-1b, MKS-1d, MKS-1e, MKS-1f, MKS-3a, MKS-3b (CPA, OSCE, NBME, CL)

- Describe the physiology of the female sexual response and the common reasons for female sexual dissatisfaction. [MKS-1a](#), [MKS-1b](#), [MKS-1c](#) (NBME, PBL)
- Recognize the difference between sexual identification and sexual behavior and the increased risk for adverse health outcomes among individuals who identify as LGBTQ. [MKS-1f](#), [CES-1](#) (CPA, DO, OSCE, NBME)
- Recognize signs of physical/sexual abuse in patients. [MKS-1c](#) (NBME, OSCE)
- Identify survivors of sexual assault, describe the medical and psychological management of a survivor using principles of trauma-informed care and discuss available resources. [MKS-1c](#), [MKS-1d](#), [MKS-1e](#), [MKS-3a](#), [MKS-3b](#) (CPA, OSCE, NBME)
- Describe the indications for and use of the following screening tests in routine health maintenance: Pap smears, mammography, bone density, colonoscopy. [MKS-1f](#), [MKS-3b](#) (NBME, CPA, OSCE, CL)
- Describe the general science of immunizations, discuss the recommended vaccination schedule for pregnant patients, their families and non-pregnant individuals. [MKS-1f](#), [MKS-3b](#) (NBME, CPA)
- Consistently apply relevant literature to daily patient care. [MKS-3a,3b](#), [CLQI-3](#) (CPA, OSCE, EPA 7)

COMMUNICATION AND INTERPERSONAL SKILLS

- Communicate effectively with patients and families using non-medical jargon and check back for understanding. [ECIS-1](#), [ECIS-3](#) (CPA, OSCE, MO)
- Provide culturally-sensitive patient education at an appropriate literacy level. [ECIS-3](#), [CES-1](#) (CPA, OSCE, MO)
- Communicate patient information accurately and efficiently to all health care team members in a timely manner. [ECIS-3](#) (CPA, MO)
- Deliver clear, properly-timed, and well-formatted oral presentations. [ECIS-3](#) (CPA, MO)
- Write concise, accurate admission and progress notes in the EHR with up-to-date information including current patient assessments, appropriate physical examination documentation, and problem-based or system-based plans. [ECIS-2](#), [PCMC-3](#), [PCMC-5](#) (CPA, OSCE, MO)

PROFESSIONAL BEHAVIOR AND MORAL REASONING, PERSONAL AWARENESS & SELF-CARE

- Consistently take initiative for own learning and patient care. [PASC-3](#), [PBMR-7](#) (CPA, NBME, CL)
- Demonstrate accountability, dependability, and integrity when interacting with patients, families, and members of the health care team. [PBMR-3](#), [PBMR-5](#), [SATBC-2a](#) (CPA, MO)
- Demonstrate respect, compassion, accountability, dependability, and integrity. [PBMR-3](#) (CPA, DO, OSCE)
- Observe all patient privacy guidelines. [PBMR-6](#) (CPA)
- Adhere to standards regarding punctuality, dress, and professional boundaries. [PBMR-3,5](#) (CPA, MO, MCF)

SYSTEM AWARENESS AND TEAM-BASED CARE

- Participate in discussions of informed consent, review of surgical checklists and the pre-procedural “time out” and recognize the role of the inter-professional team to ensure patient safety. [CLQI-4,5](#) (CPA, OSCE, NBME)
- Describe common peri-operative interventions for the prevention of infection, deep venous thrombosis and other surgical complications. [CLQI-4,5](#) (CPA, OSCE, NBME)

- Describe the key members of an operating room team within a framework of inter-professional teamwork. SATBC-2a, 2b (CPA, OSCE, NBME)
- Recognize how surgical management can emotionally impact a patient and their family with consideration of social, religious, ethnic, cultural and environmental factors. CES-1 (CPA, NBME)
- Work as an effective member of the healthcare team in the outpatient clinics, on Labor and Delivery and in the Gynecology Operating Rooms. SATBC-2a, 2b (CPA, MO, MCF)
- Interact effectively with ancillary staff, nurses, advanced practice providers (PAs, APNs, CNMs), and physicians in a cooperative manner to effectively and efficiently provide patient care. SATBC-2a, 2b (CPA, MO)
- Collaborate effectively to help the healthcare team achieve its goals. SATBC-2a, 2b (CPA, MO)
- Implement provided feedback. CLQI-1a (CPA, MO, MCF, DO)

COMMUNITY ENGAGEMENT AND SERVICE

- Identify a patient's medical needs and assess barriers in accessing care. CES-1, SATBC-1 (CPA, PAT, OSCE)
- Appropriately utilize community resources and multidisciplinary consultants including social work, nutrition, and physical therapy, for patients in both inpatient and outpatient settings. CES-2, SATBC-1, SATBC-2b (CPA, OSCE, PAT, 360)
- Recognize the social, ethnic, racial and economic disparities in access to care and health outcomes and advocate on behalf of patients to mitigate these issues CES-1,2 (CPA, OSCE, PAT, 360)
- Assess and reflect on ethical challenges when caring for pregnant patients. PBMR-1,2 (ES)
- Demonstrate awareness of community/social factors that influence medical decision-making. CES-1, PBMR-2 (CPA, ES)

CPA	Clinical Performance Assessment
MO	Mobile Observation (EPA Assessment)
PE	Pelvic Examination Skill Card
GTA	Gynecologic Teaching Associate
PAT	Nurse Professionalism Evaluation
360	Peer, Patient, Self Evaluations
NBME	Subject (Shelf) Exam
OSCE	Objective Structured Clinical Encounter
ES	Ethics Session
CL	Clerk Log
MCF	Mid-Clerkship Feedback Form