Gynecologic Oncology

Level: PGY-4

Service: Oncology
Length of Rotation: 4 months

Supervision: PGY-4 Resident ———> Oncology Faculty

All resident activity is directly supervised by the attending physician assigned to the oncology service. An attending physician will round daily with the residents and students on the service. Attending coverage for the Oncology service is assigned by the week.

Educational Activities:
9) Required Textbook
   a) *Practical Gynecologic Oncology*, 5th edition. Berek and Hacker, editors. Lippincott Williams and Wilkins, 2009. This text will be mandatory reading with selected chapters reviewed each week.

10) Supplemental Textbooks

11) Conferences
   a) Gyn Onc Tumor Conference, Tuesdays at 0700.
   b) Wednesday Educational Conferences
   c) Thursday afternoon- Resident book chapter review.
   d) Diagnostics in Obstetrics and Gynecology as appropriate.

Typical call assignment:
This resident will be responsible for assuring that any inpatients on the gynecologic oncology service are rounded on during the weekends, either personally or by assignment to another resident on the service. In house call at Nebraska Medicine will be 2 or 3 per month on the weekends.

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Competency Based Educational Goals and Objectives

**Patient Care:** In the fourth year of training, the resident should demonstrate an understanding of procedures used in the treatment of gynecologic cancers including indications, contraindications, and principles and be able to perform them independently (proficiency at the level appropriate to warrant hospital credentialing for independent performance of the procedure).

**Goal:** Be able to appropriately evaluate patients with the diagnosis of premalignant changes.

**Objectives:** The resident will demonstrate the ability evaluate, manage, counsel and provide long term follow up for patients with:
4) Cervical dysplasia.
1) Vaginal dysplasia.
2) Vulvar dysplasia.

**Goal:** Be able to appropriately evaluate patients with the diagnosis of gynecologic malignancy.

**Objectives:** The resident will demonstrate the ability:
1) Assist in the initial evaluation of patients with gynecologic cancer.
2) Obtain an appropriate history from patients with gynecologic cancer.
3) Perform an appropriate physical examination, focusing on site of malignant spread.

In the fourth year of training, the resident should demonstrate an understanding of procedures
used in the treatment of gynecologic cancers including indications, contraindications, and principles and be able to perform them with appropriate faculty supervision.

**Goal:** Be able to perform appropriate procedures for care of patients with gynecologic malignancy.

**Objectives:** The resident will demonstrate the ability to:

1. Perform an examination under anesthesia with proctoscopy and cystoscopy as indicated.
2. Evacuate of molar gestation.
3. First assist major vaginal and abdominal cases.
4. Perform appropriate aspects of cases utilizing operative laparoscopy.

**Goal:** Be able to effectively perform the role of second assistant in surgical cases with invasive gynecologic disease.

**Objectives:** The resident will be able to first assist with:

1. Radical hysterectomy and pelvic lymphadenectomy.
3. Radical vulvectomy.

**Goal:** Provide postoperative care for the oncology patient.

**Objectives:** The resident will demonstrate the ability to:

1. Provide fluid management in the oncology patient.
2. Provide postoperative wound management in the oncology patient.
3. Provide care in the intensive care setting with supervision.
4. Provide appropriate management of chemotherapy with supervision.
5. Provide appropriate outpatient and emergent postoperative management with supervision.

**Goal:** Provide cancer risk assessment to women with personal or family history of breast and/or gynecologic cancer and other cancer risk factors.

**Objectives:** The resident should be able to:

1. Evaluate a patient’s personal or family history of cancer, and make appropriate referrals to genetic counseling services.
2. Interpret results of genetic testing in light of patient’s personal and family history.
3. Evaluate for epidemiologic risk factors for breast cancer, including patient age, parity, ethnicity, lactation history, hormone replacement, and alcohol consumption.
4. Identify candidates for enhanced screening for breast cancer, and provide appropriate screening services and counseling.
5. Counsel patients regarding breast cancer prevention strategies.
6. Provide recommended screening and prevention services to women with known BRCA mutations.

**Medical Knowledge**

**Goal:** Understand the significance of the histologic diagnosis in gynecologic cancer.

**Objectives:** The resident will be able to discuss:

1. The implications of different cell types and origin in the prognosis and treatment of gynecologic cancers.
2. The common sites of local spread and metastatic disease in gynecologic cancers.
3. The common sites of dysfunction based on tumor spread.

**Goal:** Understand the significance of the stage of gynecologic cancer.

**Objective:** The resident will demonstrate knowledge of staging for gynecologic cancers and the significance of stage on treatment.

**Goal:** Know the anatomy of the female pelvis and abdomen to provide appropriate care in the patient with gynecologic cancer.

**Objectives:** The resident will develop appropriate knowledge of anatomy to make surgical decisions regarding:

1. Preoperative assessment with imaging of the pelvis and potential areas of disease spread.
3. Appropriate choice of surgical incisions.
4. Appropriate intraoperative staging.

**Goal:** Understand chemotherapy agents used in gynecologic cancers.

**Objectives:** The resident will demonstrate an understanding of: the risks of common chemotherapy agents.

**Goal:** Be knowledgeable regarding invasive breast cancer.
Objective: The resident will be able to:

1) Describe the staging of invasive breast cancer and prognostic significance of histologic type, regional lymph node metastasis, distant metastasis, and hormone receptor status.
2) Describe indications for lumpectomy versus mastectomy.
3) Describe the indications for adjuvant chemotherapy, hormone therapy, and radiation therapy.
4) Describe the impact of pregnancy on the treatment and prognosis of breast cancer.

Goal: Be knowledgeable regarding hereditary cancer syndromes.

Objectives: The resident will be able to:

1) Describe common hereditary cancer syndromes causing gynecologic and breast malignancies, including BRCA 1&2, Lynch Syndrome, Li-Fraumeni Syndrome, Cowden’s Syndrome.
2) Know current guidelines for screening and risk reduction for women with BRCA gene mutations.

Interpersonal and Communication Skills

Goal: Document patient evaluations and hospital courses in an appropriate and timely manner.

Objectives: The resident will demonstrate the ability to:

1) Enter history and physical examinations of patients evaluated in the Gynecologic Oncology clinic for consultation and evaluation for care secondary to the diagnosis of a malignant process.
2) Enter discharge reports.
3) Communicate effectively with community resources for postoperative care.

Goal: Provide appropriate counseling for patients diagnosed with gynecologic and breast malignancies.

Objectives: The resident will demonstrate the ability to effectively and empathetically counsel patients regarding:

1) The diagnosis of a gynecologic malignancy.
2) The risks and benefits of chemotherapy.
3) The risks and benefits of radiation therapy.
4) The risks and benefits of surgical therapy.

Goal: Communicate effectively as a consulting physician.

Objective: The resident will demonstrate the ability to provide timely consultation as requested, fulfilling documentation and communication with the referring service in a timely fashion.

Goal: Serve as the supervising resident for the Gyn Oncology service at UNMC.

Objectives: The resident will:

1) Communicate directly with the medical students regarding their role in patient care.
2) Communicate directly with the other residents regarding their role in patient care.
3) Communicate directly with attending physician on duty.

Professionalism

Goal: Describe the ethical concepts for appropriate patient care.

Objectives: The resident will be able to describe each of the following as it pertains to the patient with gynecologic cancer:

1) Patient autonomy.
2) Beneficence.
3) Justice.
4) Nonmalfeasance.

Goal: Maintain patient confidentiality

Objectives: The resident will demonstrate:

1) Knowledge regarding regulations regarding patient confidentiality in the HIPAA
2) The ability to protect health-related patient information to comply with HIPAA
3) List and be aware of sites on labor and delivery where loss of privacy for the patient may occur.

Goal: Maintain appropriate professional relationships.

Objectives: The resident will demonstrate professional interactions with:

1) Medical students.
2) Nursing and support staff.
3) Supervising faculty.
4) Consulting residents.
5) Physician peers.
6) Use of social media, email, and other communication platforms.

**Practice-Based Learning and Improvement**

**Goal:** Use medical evidence to evaluate patient care practices in oncology.

**Objective:** The resident will demonstrate the ability to:
1) Discuss studies regarding surgical management of gynecologic cancers.
2) Evaluate literature associated with chemotherapy and radiation therapy.

**Systems-Based Practice**

**Goal:** Discharge patients with gynecologic cancers with appropriate follow up.

**Objectives:** The resident will demonstrate the ability to:
1) Refer patients appropriately to home health services.
2) Refer patients appropriately for psychiatric services.
3) Refer patients appropriately for social services.
4) Schedule appropriately timed visits for postoperative care and radiation or chemotherapy.

**Goal:** Provide safe patient care in oncology surgery.

**Objectives:** The resident will:
1) Follow recommended operating room protocols in for patient safety based on the principles of Crew Resource Management.
2) Demonstrate compliance with Nebraska Medicine policy for surgical site identification.
3) Demonstrate compliance with Nebraska Medicine policy for patient identification.

**Duties and Responsibilities:**
1) The Gyn Onc resident is expected to attend at least 2 Gyn Onc clinic sessions, unless in surgery, continuity clinic or otherwise approved by Oncology staff physicians.
2) The Gyn Onc resident is expected to examine and evaluate every in-house patient prior to morning rounds, and again prior to afternoon rounds.
3) The Gyn Onc resident should assure that one of the team is available for rounds each weekend day, in the context of duty hours to assure that there is appropriate continuity of care for the patients.
4) The Gyn Onc resident should pre-round with the students prior to attending rounds allowing for appropriate, professional supervision of student teaching in light of the educational goals.
5) The Gyn Onc resident is expected to know the detailed history and status of all in-house patients including any problems, all consult recommendations, laboratory results, and X-rays.
6) Progress notes will be written by the Gyn/Onc resident each morning and placed in the patient chart prior to morning rounds.
7) All clinic notes, H&P’s, discharge summaries and tumor conference notes will be sent to referring physicians, primary care physician and any others involved in the care of the patients.
8) The Gyn/Onc resident is responsible for all admissions, (medical, surgical and chemotherapy), discharges and consults.
9) Contact attending oncologist with any questions or problems.
10) Participate in daily rounds on the oncology service: evaluate patients, outline plan of care, write pertinent orders, and educate medical students.
11) Participate in surgical procedures as assigned.
12) Triage calls, if requested by the Gyn/Onc staff.
13) Prepare and present cases at weekly oncology conference.
14) Prepare and present weekly cases at Case Conference.
15) Maintain patient handoff tool in One Chart.
16) Take night call as assigned.

**Evaluation:**
1) Global evaluation will be performed by the Gynecologic Oncology physicians at the completion of the rotation.
2) Surgical skills evaluations should be completed by the resident and faculty using the My TIP Report system. The resident should obtain evaluations for most procedures.
3) For Oncology at the fourth year level the following should be evaluated by completion of the rotation: Hysterectomy for malignancy, Exploratory laparotomy/debulking, Vulvectomy, simple, Laser ablation of vulvar lesions, robotic hysterectomy.

4) At the conclusion of the resident’s service period, he/she should complete an evaluation form assessing the quality of the rotation; he/she should also address the teaching undertaken by the attending physician.