



**INSTITUTE OF
OBSTETRICIANS &
GYNAECOLOGISTS**

ROYAL COLLEGE OF
PHYSICIANS OF IRELAND

BASIC SPECIALIST TRAINING IN

**OBSTETRICS &
GYNAECOLOGY**



This curriculum of training in Obstetrics and Gynaecology was developed in 2010 and undergoes an annual review by Dr Azriny Khalid & Dr Etaoin Kent, National Specialty Directors, Dr Ann O’Shaughnessy, Head of Education, and by the Obstetrics and Gynaecology Training Committee. The curriculum is approved by the Institute for Obstetricians and Gynaecologists.

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Introduction

The Institute of Obstetricians and Gynaecologists is one of the Faculties of the Royal College of Physicians of Ireland. This curriculum outlines the Institute's approach to accreditation and certification of Basic Specialist Training (BST) in Obstetrics and Gynaecology. Completion of BST is an essential step for a career in Obstetrics and Gynaecology.

This curriculum is based on a three year programme and is aimed at SHOs in training and their supervising trainers and comprehensively outlines the knowledge, skills and attitudes that should be developed during BST.

Key elements of BST:

Clinical experience gained from direct patient care, supervised by senior clinicians and based on a clinical curriculum and professional and ethical practice learnt through mentorship by senior clinicians and supported by RCPI's mandatory courses.

The core curriculum has been updated to ensure that these key elements are completed to the satisfaction of the Institute. Accreditation and certification will now focus on evaluation of trainee progress and the educational validity of the posts they occupy. This will be done by formal registration of all trainees with RCPI, completion of an ePortfolio, which will ensure that specific competencies are achieved and that formal supervision by trainers is undertaken during each post.

It is desirable that trainees at SHO level sit the Diploma in Women's Health (DOWH) in preparation for the MRCPI in Obstetrics and Gynaecology.

In order to present for the MRCPI in Obstetrics and Gynaecology examination, candidates will be expected to have completed MRCOG Part 1 and have two years' experience in Obstetrics and Gynaecology. The MRCOG Part 1 can be attempted at Intern level. On completion of two years of BST, trainees will be eligible to present for the MRCPI in Obstetrics and Gynaecology, which forms part of the exit criteria for BST certification.

Overview of Curriculum

This curriculum outlines the educational content of the three year BST programme. The BST programme follows the educational principles of a 'spiral curriculum'. Learning builds on previous experiences and is linked to future skills obtained in Higher Specialist Training.

The curriculum is laid out in four sections:

- The first section covers a short overview of the BST programme. Trainees should note these policies carefully.
- The second section, *Teaching, Learning and Assessment Methods*, describes the different methods of assessing trainees' progress through the BST programme. It is important for trainees to understand the role of the BST ePortfolio and to be familiar with the methods of assessment they will encounter on the BST programme.
- The third section lists the generic skills (e.g. communication skills) that are applicable to trainees on the BST programme.
- The fourth section is specialty-specific and lists the knowledge and skills that should be acquired while in each specialty/subspecialty, as well as the relevant assessment and learning methods.

Trainees will be assessed in the workplace at intervals throughout the BST programme. These assessments must be recorded in the BST ePortfolio. Trainees are also required to attend an annual assessment in RCPI, at which their BST ePortfolio is checked and they are given the opportunity to provide feedback on their rotation.

The BST ePortfolio must be kept up to date throughout the year. It is designed to record progress through the programme, in particular whether trainees have satisfactorily completed all requirements for training.

While this document sets out the curriculum for BST and lists the core knowledge, skills and attitudes required at the end of the BST Programme, this list is not exclusive and there will be many opportunities within the programme for trainees to acquire additional knowledge and skills over and above the core content defined here.

BST: Requirements and Policies

Overview of BST in Obstetrics and Gynaecology

BST consists of at least three years of training, two years in Senior House Officer (SHO) and one year in Junior Registrar. SHO grade is the initial training grade after Internship, and for most doctors the minimum period spent in this grade will be two years. Junior Registrar is the next grade, preceding Specialist Registrar.

It has been mandatory to register for BST in Obstetrics & Gynaecology since July 2008.

BST in Obstetrics & Gynaecology is regulated and certified by the Institute of Obstetricians & Gynaecologists and the Speciality Training Committee of the Institute, a constituent training body of RCPI. Completion of training within the BST programme is a mandatory requirement for entry into Higher Specialist Training (HST) Programme (at Specialist Registrar level).

In Obstetrics and Gynaecology from July 2014 the programme is a three year BST rotation programme in order to receive certification from RCPI. It will no longer be possible to obtain credit for BST by working in stand-alone, SHO posts. Trainees will also be required to pass the MRCPI in Obstetrics and Gynaecology in order to successfully complete BST to certification.

The BST programme must be undertaken in rotations approved for training by the Institute of Obstetricians & Gynaecologists.

In addition to the acquisition of specific clinical skills and competencies, it is emphasised that personal development - including leadership and team working, communication and presentation skills, basic management and audit are important core components of BST and all other phases of training.

Training Environment

Training posts require the approval of the Institute of Obstetricians and Gynaecologists. Regular inspection of all posts via hospital inspections is the basis for monitoring the training content of these posts. Additional monitoring data may derive from questionnaires sent to post-holders. All posts will be expected to conform to statutory guidelines on hours and conditions of work for doctors in training.

Generic Components

This chapter covers the generic components which are relevant to BST trainees of all specialties but with varying degrees of relevance and appropriateness, depending on the specialty.

As such, this chapter needs to be viewed as an appropriate guide of the level of knowledge and skills required from all BST trainees with differing application levels in practice.

Good Professional Practice

Objective: Trainees must appreciate that medical professionalism is a core element of being a good doctor and that good medical practice is based on a relationship of trust between the profession and society, in which doctors are expected to meet the highest standards of professional practice and behaviour.

Medical Council Domains of Good Professional Practice: Relating to Patients, Communication and Interpersonal Skills, Professionalism, Patient Safety and Quality of Patient Care.

KNOWLEDGE

Effective Communication

- How to listen to patients and colleagues
- The principles of open disclosure
- Knowledge and understanding of valid consent
- Teamwork
- Continuity of care

Ethics

- Respect for autonomy and shared decision making
- How to enable patients to make their own decisions about their health care
- How to place the patient at the centre of care
- How to protect and properly use sensitive and private patient information in accordance with data protection legislation and how to maintain confidentiality
- The judicious sharing of information with other healthcare professionals where necessary for care following Medical Council Guidelines
- Maintaining competence and assuring quality of medical practice
- How to work within ethical and legal guideline when providing clinical care, carrying research and dealing with end of life issues

Honesty, openness and transparency (mistakes and near misses)

- Preventing and managing near misses and adverse events.
- When and how to report a near miss or adverse event
- Incident reporting; root cause and system analysis
- Understanding and learning from errors
- Understanding and managing clinical risk
- Managing complaints
- Following open disclosure practices
- Knowledge of national policy and National Guidelines on Open Disclosure

Raising concerns about patient safety

- Safe working practice, role of procedures and protocols in optimal practice
- The importance of standardising practice through the use of checklists, and being vigilant
- Safe healthcare systems and provision of a safe working environment
- Awareness of the multiple factors involved in failures
- Knowledge and understanding of Reason's Swiss cheese model
- Understanding how and why systems break down and why errors are made
- Health care errors and system failures
- Human and economic costs in system failures
- The important of informing a person of authority of systems or service structures that may lead to unsafe practices which may put patients, yourself or other colleagues at risk
- Awareness of the Irish Medical Councils policy on raising concerns about safety in the environment in which you work

SKILLS

- Effective communication with patients, families and colleagues
- Co-operation and collaboration with colleagues to achieve safe and effective quality patient care
- Being an effective team player
- Ethical and legal decision making skills
- Minimising errors during invasive procedures by developing and adhering to best-practice guidelines for safe surgery
- Minimising medication errors by practicing safe prescribing principles
- Ability to learn from errors and near misses to prevent future errors
- Managing errors and near-misses
- Using relevant information from complaints, incident reports, litigation and quality improvement reports in order to control risks
- Managing complaints
- Using the Open Disclosure Process Algorithm

ASSESSMENT & LEARNING METHODS

- Feedback in the workplace and at evaluation of progress
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Educational supervisor's reports on observed performance (in the workplace): prioritisation of patient safety in practice
- RCPI BST Leadership in Clinical Practice
- Medical Council Guide to Professional Conduct and Ethics
- Reflective learning around ethical dilemmas encountered in clinical practice
- MRCPI Examination

Infection Control

Objective: To be able to appropriately manage infections and risk factors for infection at an institutional level, including the prevention of cross-infections and hospital acquired infection

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care; Management (including Self-Management).

KNOWLEDGE

Within a consultation

- The principles of infection control as defined by the HIQA
- How to minimise the risk of cross-infection during a patient encounter by adhering to best practice guidelines available, including the 5 Moments for Hand Hygiene guidelines
- The principles of preventing infection in high risk groups e.g. managing antibiotic use to prevent *Clostridium difficile*
- Knowledge and understanding of the local antibiotic prescribing policy
- Awareness of infections of concern, e.g. MRSA, *Clostridium difficile*
- Best practice in isolation precautions
- When and how to notify relevant authorities in the case of notifiable infectious disease
- Understanding the increased risk of infection to patients in surgery or during an invasive procedure and adhering to guidelines for minimising infection in such cases

In surgery or during an invasive procedure

- Comply with the guidelines for needle stick injury prevention and management

During an outbreak

- Guidelines for minimising infection in the wider community in cases of communicable diseases and how to seek expert opinion or guidance from infection control specialists where necessary

SKILLS

- Practicing aseptic techniques and hand hygiene
- Following local and national guidelines for infection control and management
- Prescribing antibiotics according to antibiotic guidelines
- Encouraging staff, patients and relatives to observe infection control principles
- Communicating effectively with patients regarding treatment and measures recommended to prevent re-infection or spread
- In the case of infectious diseases requiring disclosure:
 - Working knowledge of those infections requiring notification
 - Undertaking notification promptly
 - Collaborating with external agencies regarding reporting, investigating and management of notifiable diseases
 - Enlisting / requiring patients' involvement in solving their health problems, providing information and education
 - Utilising and valuing contributions of health education and disease prevention and infection control to health in a community
- A non-judgemental approach to patients with infectious diseases
- Effectively uses health education for disease prevention and infection control

ASSESSMENT & LEARNING METHODS

- Consultant feedback
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Completion of infection control induction in the workplace
- Personal Protective Equipment Training Course (In hospital)
- MRCPI Examination

Self-Care and Maintaining Well-Being

Objectives:

- To ensure that trainees understand how their personal histories and current personal lives, as well as their values, attitudes, and biases affect their care of patients so that they can use their emotional responses in patient care to their patients' benefit
- To ensure that trainees care for themselves physically and emotionally, and seek opportunities for enhancing their self-awareness and personal growth

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care, Relating to Patients, Communication and Interpersonal Skills, Collaboration and Teamwork, Management (including self-management).

KNOWLEDGE

- Self-awareness including preferences and biases
- Personal psychological strengths and limitations
- Understand how personality characteristics, such as need for approval, judgemental tendencies, needs for perfection and control etc., affect relationships with patients and others
- Knowledge of core beliefs, ideals, and personal philosophies of life, and how these relate to own goals in medicine
- Know how family-of-origin, race, class, religion and gender issues have shaped own attitudes and abilities to discuss these issues with patients
- Understand the difference between feelings of sympathy and feelings of empathy
- Know the factors between a doctor and patient that enhance or interfere with abilities to experience and convey empathy
- Self-awareness of attitudes toward uncertainty and risk taking and own need for reassurance
- How own relationships with certain patients can reflect attitudes toward paternalism, autonomy, benevolence, non-maleficence and justice
- Recognise own feelings in straightforward and complex patient-doctor interactions
- Recognising the symptoms of stress and burn out

SKILLS

- Exhibiting empathy and showing consideration for all patients, their impairments and attitudes irrespective of cultural and other differences
- Ability to create boundaries with patients that allow for therapeutic alliance
- Challenge authority appropriately from a firm sense of own values and integrity and respond appropriately to situations that involve abuse, unethical behaviour and coercion
- Recognise own limits and seek appropriate support and consultation
- Work collaboratively and effectively with colleagues and other members of health care teams
- Manage effectively commitments to work and personal lives, taking the time to nurture important relationship and oneself
- Ability to recognise when falling behind and adjusting accordingly
- Demonstrating the ability to cope with changing circumstances, variable demand, being prepared to re-prioritise and ask for help
- Utilising a non-judgemental approach to patient's problem
- Recognise the warning signs of emotional ill-health in self and others and be able to ask for appropriate help
- Commitment to lifelong process of developing and fostering self-awareness, personal growth and well being
- Be open to receiving feedback from others as to how attitudes and behaviours are affecting their care of patients and their interactions with others
- Holding realistic expectations of own and of others' performance, time-conscious, punctual
- Valuing the breadth and depth of experience that can be accessed by associating with professional colleagues

ASSESSMENT & LEARNING METHODS

- On-going supervision
- RCPI BST Leadership in Clinical Practice course

Communication in Clinical and Professional Setting

Objective: To demonstrate the ability to communicate effectively and sensitively with patients, their relatives, carers and with professional colleagues in different situations.

Medical Council Domains of Good Professional Practice: Relating to Patients; Communication and Interpersonal Skills.

KNOWLEDGE

Within a consultation

- How to effectively listen and attend to patients
- How to structure an interview to obtain/convey information; identify concerns, expectations and priorities; promote understanding, reach conclusions; use appropriate language.
- How to empower the patient and encourage self-management
- Communicate the importance of essential information

Difficult circumstances

- Understanding of potential areas for difficulty and awkward situations
- How to negotiate cultural, language barriers, dealing with sensory or psychological and/or intellectual impairments and how to deal with challenging or aggressive behaviour
- Knowing how and when to break bad news
- How to communicate essential information where difficulties exist, how to appropriately utilise the assistance of interpreters, chaperones, and relatives.
- How to deal with anger and frustration in self and others
- Selecting appropriate environment; seeking assistance, making and taking time

Dealing with professional colleagues and others

- How to communicate with doctors and other members of the healthcare team
- How to provide a concise, written, verbal, or electronic, problem-orientated statement of facts and opinions
- The legal context of status of records and reports, of data protection confidentiality
- Freedom of Information (FOI) issues
- Understanding of the importance of legible, accessible, records to continuity of care
- Knowing when urgent contact becomes necessary and the appropriate place for verbal, telephone, electronic, or written communication
- Recognition of roles and skills of other health professionals
- Awareness of own abilities/limitations and when to seek help or give assistance, advice to others; when to delegate responsibility and when to refer

Maintaining continuity of care

- Understanding the relevance of continuity of care to outcome, within and between phases of healthcare management
- The importance of completion of tasks and documentation, e.g. before handover to another team, department, specialty, including identifying outstanding issues and uncertainties
- Knowledge of the required attitudes, skills and behaviours which facilitate continuity of care including, being available and contactable, alerting others to avoid potential confusion or misunderstanding through communications failure
- When and how to communicate urgently with a GP by telephone
- How to write a competent discharge summary, a competent letter for outpatients after referral from a general practitioner

Giving explanations

- The importance of possessing the facts, and of recognising uncertainty and conflicting evidence on which decisions have to be based
- How to secure and retain attention avoiding distraction
- Understanding how adults receive information best, the relative value of the spoken, written, visual means of communication, use of reinforcement to assist retention

- Knowledge of the risks of information overload
- Tailoring the communication of information to the level of understanding of the recipient
- Strategies to achieve the level of understanding necessary to gain co-operation and partnership; compliance, informed choice, acceptance of opinion, advice, recommendation

Responding to complaints

- Value of hearing and dealing with complaints promptly; the appropriate level, the procedures (departmental and institutional); sources of advice, and assistance available
- The importance of obtaining and recording accurate and full information, seeking confirmation from multiple sources
- Knowledge of how to establish facts, identify issues and respond quickly and appropriately to a complaint received

SKILLS

- Ability to appropriately elicit facts, using a mix of open and closed-ended questions
- Using “active listening” techniques such as nodding and eye contact
- Giving information clearly, avoiding jargon, confirming understanding, ability to encourage co-operation, compliance; obtaining informed consent
- Showing consideration and respect for other’s culture, opinions, patient’s right to be informed and make choices
- Respecting another’s right to opinions and to accept or reject advice
- Valuing perspectives of others contributing to management decisions
- Conflict resolution
- Dealing with complaints
- Communicating decisions in a clear and thoughtful manner
- Presentation skills including formal presentations and bedside summary
- Maintaining (legible) records
- Being available, contactable, time-conscious
- Setting realistic objectives, identifying and prioritising outstanding problems
- Using language, literature (e.g. leaflets) diagrams, educational aids and resources appropriately
- Accepting responsibility, involving others, and consulting appropriately
- Obtaining informed consent
- Discussing informed consent
- Giving and receiving feedback

ASSESSMENT & LEARNING METHODS

- RCPI Leadership in Clinical Practice
- Consultant feedback
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Presentations
- MRCP Examinations

Leadership

Objective: To have the knowledge, skills and attitudes to act in a leadership role and work with colleagues to plan, deliver and develop services for improved patient care and service delivery.

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care; Communication and Interpersonal Skill; Collaboration and Teamwork; Management (including Self-Management); Scholarship.

KNOWLEDGE

Personal qualities of leaders

- Knowledge of what leadership is in the context of the healthcare system appropriate to training level
- The importance of good communication in teams and the role of human interactions on effectiveness and patient safety

Working with others

- Awareness of own personal style and other styles and their impact on team performance
- The importance of good communication in teams and the role of human interactions on effectiveness and patient safety

Working in a complex service

- The structure and function of Irish health care system
- Awareness of the challenges of managing in healthcare
 - Role of governance
 - Clinical directors
- Understand the need for managing resources

SKILLS

- Effective communication with patients, families and colleagues
- Co-operation and collaboration with others; patients, service users, carers colleagues within and across systems
- Being an effective team player
- Understanding the social and governmental aspects of health care provision
- Understanding the cost-effectiveness of individual forms of care

Demonstrating personal qualities

- Efficiently and effectively managing one-self and one's time especially when faced with challenging situations
- Continues personal and professional development through scholarship and further training and education where appropriate
- Acting with integrity and honesty with all people at all times
- Developing networks to expand knowledge and sphere of influence
- Building and maintaining key relationships
- Adapting style to work with different people and different situations
- Contributing to the planning and design of services

ASSESSMENT & LEARNING METHODS

- RCPI BST Leadership in Clinical Practice
- Consultant feedback at annual assessment
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Involvement in hospital committees

Quality Improvement

Objective: To demonstrate the ability to identify areas for improvement and implement basic quality improvement skills and knowledge to improve patient safety and quality in the healthcare system.

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care; Communication and Interpersonal Skills; Collaboration and Teamwork; Management; Relating to Patients; Professionalism

KNOWLEDGE

Personal qualities of leaders

- The importance of prioritising the patient and patient safety in all clinical activities and interactions

Managing services

- Knowledge of systems design and the role of microsystems
- Understanding of human factors and culture on patient safety and quality

Improving services

- How to ensure patient safety by adopting and incorporating a patient safety culture
- How to critically evaluate where services can be improved by measuring performance, and acting to improve quality standards where possible
- How to encourage a culture of improvement and innovation

Setting direction

- Knowledge of the wider healthcare system direction and how that may impact local organisations

SKILLS

- Improvement approach to all problems or issues
- Use of quality improvement methodologies, tools and techniques within every day practice
- Ensuring patient safety by adopting and incorporating a patient safety culture
- Supporting a culture of improvement and innovation

Demonstrating personal qualities

- Encouraging contributions and involvement from others including patients, carers, members of the multidisciplinary team and the wider community
- Considering process and system design, contributing to the planning and design of services

ASSESSMENT & LEARNING METHODS

- RCPI BST Leadership in Clinical Practice

Management

Objective: To understand the organisation, regulation and structures of the health services, nationally and locally, and to be competent in the use and management of information on health and health services, to develop personal effectiveness and the skills applicable to the management of staff and activities within a healthcare team.

Medical Council Domains of Good Professional Practice: Management.

KNOWLEDGE

Health service structure, management and organisation

- The administrative structure of the Irish Health Service, services provided in Ireland and their funding and how to engage with these for best results
- Department of Health, HSE and hospital management structures and systems
- The national regulatory bodies, health agencies and patient representative groups
- Knowledge of resources providing updates, literature reviews and digests
- Embrace principles of clinical governance

Maintaining medical knowledge with a view to delivering effective clinical care

- Understanding the contribution that current, accurate knowledge can make to establishing clinical effectiveness, best practice and treatment protocols
- Obtaining information of value in maintaining medical knowledge with a view to delivering effective clinical care
- Knowledge of sources providing updates, literature reviews and digests

Personal effectiveness

- How to assess and develop personal effectiveness, improve negotiating, influencing and leadership skills
- How to manage time efficiently, deal with pressure and stress
- How to motivate others and operate within a multidisciplinary team
- Have a flexible approach
- Be aware of the needs of others

SKILLS

- Managing risks
- Managing time
- Managing interpersonal relationships

ASSESSMENT & LEARNING METHODS

- RCPI BST Leadership in Clinical Practice
- Consultant feedback on management and leadership skills

Scholarship

Objective: To develop skills in personal/professional development, teaching, educational supervision and research

Medical Council Domains of Good Professional Practice: Scholarship

KNOWLEDGE

Application of clinical governance

- Understand the principles of evidence-based practice, clinical audit and effectiveness, the development/application of best-practice protocols
- Risk management
- Systems, procedures for identifying (clinical) risk; correct procedures and action when things go wrong; how to handle complaints, when to seek help
- Employer's procedures and policy for accidents
- Potential complications or side effects of treatments, procedures and investigations; importance of accurate, recent information and available records
- Openly discuss mistakes
- Able to learn from previous experience, from complaints received, errors.
- Be honest in recognising misjudgements

Lifelong learning

- Understand the role of appraisal, assessment methods available, and their application
- Identify source, resources, opportunities for self-directed and group learning including IT
- Recognise and makes effective use of learning opportunities, maximise the potential for personal study, plans personal development
- Self motivated, inquisitive, eager to learn

SKILLS

- Practice evidence based medicine
- Appropriately use technology and other sources of information
- Logical use guidelines, texts, reference literature and related sources
- Critically evaluate research papers
- Seek education opportunities and monitor own performance in order to continuously update and refresh knowledge and skills
- Basic research and audit skills
- Bed-side undergraduate and intern teaching

ASSESSMENT & LEARNING METHODS

- Health Research (online) – Optional
- BST Leadership in Clinical Practice
- Record of attendance at in-house training, grand rounds and academic meetings

Standards of Care

Objective: To be able to consistently and effectively assess and treat patients' problems

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care; Relating to Patients; Communication and Interpersonal Skills; Collaboration and Teamwork: Management (including Self-Management); Clinical Skills.

KNOWLEDGE

Diagnosing Patients

- How to carry out appropriate history taking
- How to appropriately examine a patient
- How to make a differential diagnosis

Investigation, indications, risks, cost-effectiveness

- The pathophysiological basis of the investigation
- Understand the clinical significance of reference ranges, positive and negative predictive value and potential risks of inappropriate tests
- The procedures for commonly used investigations, common or/and serious risks
- Understanding of the sensitivity and specificity of results, artefacts, PPV and NPV
- Understanding significance, interpreting and explaining results of investigations
- Logical approach in choosing, sequencing and prioritising investigations

Treatment and management of disease

- Natural history of diseases
- Quality of life concepts
- How to accurately assess patient's needs, prescribe, arrange treatment, recognise and deal with reactions / side effects
- How to set realistic therapeutic goals, to utilise rehabilitation services, and use palliative care approach appropriately
- Recognising that illness (especially chronic and/or incapacity) has an impact on relationships and family, having financial as well as social effects e.g. driving

Disease prevention and health education

- Screening for disease: methods, advantages and limitations
- Health promotion and support agencies; means of providing sources of information for patients
- Risk factors, preventive measures, and change strategies applicable to smoking, alcohol, drug abuse, and lifestyle
- Disease notification; methods of collection and sources of data

Notes, records, correspondence

- Functions of medical records, their value as an accurate up-to-date commentary and source of data
- An understanding of the need and appropriate use of problem-orientated discharge notes, letters, more detailed case reports, concise out-patient reports and focused reviews
- Appreciating the importance of up-to-date, easily available, accurate information, and the need for communicating promptly e.g. with primary care

Prioritising, resourcing and decision taking

- How to prioritise demands, respond to patients' needs and sequence urgent tasks
- Establishing (clinical) priorities e.g. for investigations, intervention; how to set realistic goals; understanding the need to allocate sufficient time, knowing when to seek help
- Understanding the need to complete tasks, reach a conclusion, make a decision, and take action within allocated time
- Knowing how and when to conclude

Handover

- Know what are the essential requirements to run an effective handover meeting
 - Sufficient and accurate patients information
 - Adequate time
 - Clear roles and leadership
 - Adequate IT
- Know how to prioritise patient safety
 - Identify most clinically unstable patients
 - Use ISBAR (Identify, Situation, Background, Assessment, Recommendations)
 - Proper identification of tasks and follow-ups required
 - Contingency plans in place
- Know how to focus the team on actions
 - Tasks are prioritised
 - Plans for further care are put in place
 - Unstable patients are reviewed

Relevance of professional bodies

- Understanding the relevance to practice of standards of care set down by recognised professional bodies – the Medical Council, Medical Colleges and their Faculties, and the additional support available from professional organisations e.g. IMO, Medical Defence Organisations and from the various specialist and learned societies

SKILLS

- Taking and analysing a clinical history and performing a reliable and appropriate examination, arriving at a diagnosis and a differential diagnosis
- Liaising, discussing and negotiating effectively with those undertaking the investigation
- Selecting investigations carefully and appropriately, considering (patients') needs, risks, value and cost effectiveness
- Appropriately selecting treatment and management of disease
- Discussing, planning and delivering care appropriate to patient's needs and wishes
- Preventing disease using the appropriate channels and providing appropriate health education and promotion
- Collating evidence, summarising, recognising when objective has been met
- Working effectively with others including
 - Effective listening
 - Ability to articulate and deliver instructions
 - Encourage questions and openness
 - Leadership skills
- Ability to prioritise
- Ability to delegate effectively
- Ability to advise on and promote lifestyle change
- Involve patients' in solving their health problems, by providing information and education
- Availing of support provided by voluntary agencies and patient support groups, as well as expert services e.g. detoxification / psychiatric services
- Act in accordance with, up to date standards on palliative care needs assessment
- Valuing contributions of health education and disease prevention to health in a community
- Compile accurate and appropriate detailed medical notes and care reports including the results of examinations, investigations, procedures performed, sufficient to provide an accurate, detailed account of the diagnostic and management process and outcome, providing concise, informative progress reports (both written and oral)
- Transfer information in an appropriate and timely manner
- Maintaining legible records in line with the Guide to Professional Conduct and Ethics for Registered Medical Practitioners in Ireland

ASSESSMENT & LEARNING METHODS

- Consultant feedback
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Medical Council Guide to Professional Conduct and Ethics
- Ethics, safe prescribing and blood transfusion course
- MRCPI Examination

Dealing with & Managing Acutely Ill Patients in Appropriate Specialties

Objectives: To be able to assess and initiate management of patients presenting as emergencies, and to appropriately communicate the diagnosis and prognosis. Trainees should be able to recognise the critically ill and immediately assess and resuscitate if necessary, formulate a differential diagnosis, treat and/or refer as appropriate, elect relevant investigations and accurately interpret reports.

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care, Clinical Skills.

KNOWLEDGE

Management of acutely ill patients with medical problems

- Presentation of potentially life-threatening problems
- Indications for urgent intervention, the additional information necessary to support action (e.g. results of investigations) and treatment protocols
- When to seek help, refer/transfer to another specialty
- ACLS protocols
- Ethical and legal principles relevant to resuscitation and DNAR in line with National Consent Policy
- How to manage acute medical intake, receive and refer patients appropriately, interact efficiently and effectively with other members of the medical team, accept/undertake responsibility appropriately
- Management of overdose
- How to anticipate / recognise, assess and manage life-threatening emergencies, recognise significantly abnormal physiology e.g. dysrhythmia and provide the means to correct e.g. defibrillation
- How to convey essential information quickly to relevant personnel: maintaining legible up-to-date records documenting results of investigations, making lists of problems dealt with or remaining, identifying areas of uncertainty; ensuring safe handover

Managing the deteriorating patient

- How to categorise a patients' severity of illness using Early Warning Scores (EWS) guidelines
- How to perform an early detection of patient deterioration
- How to use a structured communication tool (ISBAR)
- How to promote an early medical review, prompted by specific trigger points
- How to use a definitive escalation plan

Discharge planning

- Knowledge of patient pathways
- How to distinguish between illness and disease, disability and dependency
- Understanding the potential impact of illness and impairment on activities of daily living, family relationships, status, independence, awareness of quality of life issues
- Role and skills of other members of the healthcare team, how to devise and deliver a care package
- The support available from other agencies e.g. specialist nurses, social workers, community care
- Principles of shared care with the general practitioner service
- Awareness of the pressures/dynamics within a family, the economic factors delaying discharge but recognise the limit to benefit derived from in-patient care

SKILLS

- BLS/ACLS
- Dealing with common medical emergencies
- Interpreting blood results, ECG/Rhythm strips, chest X-Ray, CT brain
- Giving clear instructions to both medical and hospital staff
- Ordering relevant follow up investigations
- Discharge planning, including complex discharge
- Knowledge of HIPE (Hospital In-Patient Enquiry)
- Multidisciplinary team working
- Communication skills
- Delivering early, regular and on-going consultation with family members (with the patient's permission) and primary care physicians
- Remaining calm, delegating appropriately, ensuring good communication
- Attempting to meet patients'/ relatives' needs and concerns, respecting their views and right to be informed in accordance with Medical Council Guidelines
- Establishing liaison with family and community care, primary care, communicate / report to agencies involved
- Demonstrating awareness of the wide ranging effects of illness and the need to bridge the gap between hospital and home
- Categorising a patients' severity of illness
- Performing an early detection of patient deterioration
- Use of structured communication tools (e.g. ISBAR)

ASSESSMENT & LEARNING METHODS

- ACLS course
- Mini-CEX (acute setting)
- Case Based Discussion (CBD)
- Consultant feedback
- MRCPi Examination

Therapeutics and Safe Prescribing

Objective: To progressively develop ability to prescribe, review and monitor appropriate therapeutic interventions relevant to clinical practice in specific specialities including non-pharmacological therapies and preventative care.

Medical Council Domains of Good Professional Practice: Patient Safety and Quality of Patient Care.

KNOWLEDGE

- Pharmacology, therapeutics of treatments prescribed, choice of routes of administration, dosing schedules, compliance strategies; the objectives, risks and complications of treatment cost-effectiveness
- Indications, contraindications, side effects, drug interaction, dosage and route of administration of commonly used drugs
- Commonly prescribed medications
- Adverse drug reactions to commonly used drugs, including complementary medicines
- Identifying common prescribing hazards
- Identifying high risk medications
- Drugs requiring therapeutic drug monitoring and interpretation of results
- The effects of age, body size, organ dysfunction and concurrent illness or physiological state e.g. pregnancy on drug distribution and metabolism relevant to own practice
- Recognising the roles of regulatory agencies involved in drug use, monitoring and licensing e.g. IMB, and hospital formulary committees
- Procedure for monitoring, managing and reporting adverse drug reaction
- Effects of medications on patient activities including potential effects on a patient's fitness to drive
- The role of The National Medicines Information Centre (NMIC) in promoting safe and efficient use of medicine
- Differentiating drug allergy from drug side effects
- Know the difference between an early and late drug allergy, and drug side-effects
- The management of constipation in adult patients receiving palliative care

SKILLS

- Writing a prescription in line with guidelines
- Appropriately prescribing for the elderly, children and pregnant and breast feeding women
- Making appropriate dose adjustments following therapeutic drug monitoring, or physiological change (e.g. deteriorating renal function)
- Reviewing and revising patients' long term medications
- Anticipating and avoiding defined drug interactions, including complementary medicines
- Advising patients (and carers) about important interactions and adverse drug effects including effects on driving
- Providing comprehensible explanations to the patient, and carers when relevant, for the use of medicines
- Being open to advice and input from other health professionals on prescribing
- Participating in adverse drug event reporting
- Take and record an accurate drug allergy history and history of previous side effects

ASSESSMENT & LEARNING METHODS

- Consultant feedback
- Workplace based assessment e.g. Mini-CEX, DOPS, CBD
- Guidance for health and social care providers - Principles of good practice in medication reconciliation (HIQA)
- Ethics, safe prescribing and blood transfusion course

Specialty Section

Clinical Skills in Obstetrics & Gynaecology

Obstetrics

Early Pregnancy

- Early Pregnancy Problems

General Obstetrics

- Common Pregnancy Problems
- Antenatal Care of a Patient with Previous Caesarean Section
- Care of a Patient with Threatened or Established Preterm Labour
- Fetal Assessment
- Care of Patients with Complications During the Puerperium

Maternal Medicine

- Care of a Patient With Diabetes in Pregnancy
- Care of a Patient with Pregnancy Induced Hypertension

Intrapartum & Operative Obstetrics

- Labour and Delivery
- Skilled Birth Attendance for Obstetricians
- Management of Induction of Labour
- Caesarean Section
- Dystocia in Labour
- Labour in the Presence of a Previous Caesarean Section
- Operative Vaginal Delivery
- Pre-operative Management
- Third Degree Tears
- Postpartum Haemorrhage

Gynaecology

Clinical Gynaecology

- Menstrual Problems and Abnormal Bleeding
- Care of Patients with Menorrhagia
- Care of Patients with First Trimester Miscarriage
- Care of patients with Suspected or Confirmed Ectopic Pregnancy
- Care of Patients with Acute Pelvic Pain and Dysmenorrhea

Operative Gynaecology

- Preoperative Care
- Postoperative Care
- Care of Patients Suffering From Complications Following Gynaecological Surgery
- Basic Surgical Skills for Open Surgery
- Wound Care and management
- Diagnostic Hysteroscopy
- Diagnostic Laparoscopy
- Audit
- Urinary problems
- Uterovaginal Prolapse
- Abdominal Distension or Mass/Pelvic Pain
- Problems of the Vulva and Vagina
- Fertility and Family Planning problems
- Menopausal problems

Clinical Skills in Obstetrics & Gynaecology

Objective: To be able to provide obstetric and gynaecological medical and surgical care that is appropriate to the patient's needs and uses resources appropriately.

KNOWLEDGE

- History taking for women with obstetric and gynaecological medical and surgical problems
- Examination of a pregnant woman including abdominal examination
- Speculum examination
- Bimanual examination
- Cervical Smears
- Microbiology swabs
- Knowledge of:
 - Genetic History
 - Contraceptive history

SKILLS

- Abdominal examination
- Bimanual examination
- Cervical smears
- Vaginal swab taking

ASSESSMENT & LEARNING METHOD

- Mini-CEX
- Ethics, safe prescribing and blood transfusion
- Family Planning

Early Pregnancy Problems

Objective: To be able to diagnose and organise safe care for a patient in early pregnancy

KNOWLEDGE

- Diagnosis of pregnancy
- Testing in early pregnancy
- Investigation of early pregnancy bleeding
- Management of miscarriage, including infection and haemorrhage
- Competence in assessment in ectopic pregnancy
- Knowledge of the etiology of recurrent miscarriage
- Termination of Pregnancy

SKILLS

- Vaginal assessment of pregnancy
- Ultrasound assessment of early pregnancy

ASSESSMENT & LEARNING METHODS

- BST Certificate in Basic Ultrasound course RCPI and relevant OSATS
- Case-based Discussion

Common Pregnancy Problems

Objective: To be able to evaluate a patient with a history of common pregnancy problems

KNOWLEDGE

- Knowledge of:
 - Pregnancy induced hypertension/Pre eclampsia
 - Bleeding in 3rd Trimester
 - Malpresentation
 - Prolonged pregnancy
 - Induction of labour
 - Multiple pregnancies
- Knowledge and management of maternal conditions in pregnancy:
 - Maternal hypertension
 - Asthma
 - Urinary tract infection
 - Anaemia
 - Thromboembolic disease
 - Diabetes
 - Epilepsy

SKILLS

- Ultrasound
- Assessment of bleeding
- Assessment of cervix re induction of labour
- Examination of pregnant women with medical problems
- Measuring BP/Urinalysis

ASSESSMENT & LEARNING METHODS

- BST Certificate in Basic Ultrasound course RCPI Mini-CEX
- Case-based Discussion

Antenatal Care of a Patient with a Previous Caesarean Section

Objective: To be able to evaluate a patient with a history of previous Caesarean section and make an appropriate plan for safe delivery

KNOWLEDGE

- Know current literature on VBAC benefits and risks
- Know local auditable outcomes for patients with one previous CS
- Be able to evaluate patients with a previous CS
- Be able to counsel patients about VBAC
- Discuss a patient's expectations and fears about delivery
- Impart information in a way that patient can understand
- Negotiate an appropriate plan for delivery

SKILLS

- Counselling patient regarding VBAC

ASSESSMENT & LEARNING METHODS

- Mini-CEX
- Case-based Discussion

Care of a Patient with Threatened or Established Preterm Labour

Objective: To be able to carry out specialist assessment of a patient with threatened or established preterm labour and make appropriate decisions about management

KNOWLEDGE

- Know gestation specific benefits and risks of interventions with tocolytics, steroids, Caesarean section
- Knowledge of cervical changes
- Knowledge of chorioamnionitis and abruptio placenta
- Perform ultrasound biometry
- Make appropriate decisions about delivery and in utero transfer
- Participate in multidisciplinary discussion with neonatologists and parents in cases of delivery at limits of viability
- Liaise with neonatologists
- Impart accurate information about prognosis in a compassionate way

SKILLS

- Diagnosis and management of patient with threatened or established preterm labour

ASSESSMENT & LEARNING METHODS

- Case-Based Discussion

Fetal Assessment

Objective: To assess the fetus and deliver safe and appropriate care.

KNOWLEDGE

- Assessing fetal well-being including movement and growth in third trimester
- Interpretation of CTG
- Understanding of ultrasound in terms of fetal growth and biophysical profiles
- Diagnosing pre-term rupture of membranes
- Assess for IUGR
- Knowledge of diagnosis and management of intra-uterine death

SKILLS

- Fetal Assessment by ultrasound including:
 - Presentation/lie
 - Placental localisation
 - Amniotic fluid volume
 - Other assessments of fetal wellbeing
- Interpretation of CTGs

ASSESSMENT & LEARNING METHODS

- BST Certificate in Basic Ultrasound course RCPI Case-based Discussion - CTG

Care of Patients with Complications During the Puerperium

Objective: To recognise and intervene appropriately in the care of women experiencing difficulties or complications during the puerperium.

KNOWLEDGE

- Know the physiology of the puerperium
- Know the physiology of lactation
- Investigate, diagnose and treat the causes of puerperal pyrexia
- Recognise and treat mastitis and breast abscesses
- Recognise puerperal depression
- Recognise puerperal psychosis
- Liaise with psychiatrist in the care of women at risk of or affected by psychiatric disease in the puerperium
- Liaise with midwives, general practitioners, psychiatrists in the care of women during the puerperium

SKILLS

- Knowledge of issues around post natal depression
- Multidisciplinary team working

ASSESSMENT & LEARNING METHODS

- Case Based Discussion

Care of a Patient with Diabetes in Pregnancy

Objective: To be able to organise safe and effective care for a woman with a pregnancy complicated by diabetes

KNOWLEDGE

- Know the pathophysiology of pregnancy in patients with pre-existing diabetes
- Know the indications for screening for gestational diabetes
- Refer patients appropriately to specialised clinic
- Exercise good judgement in making decisions about timing and mode of delivery
- Appreciate importance of multidisciplinary team of endocrinologist, dietician, nurse practitioner

SKILLS

- Diagnosis and management of a patient with diabetes
- Referral to appropriate clinics
- Multidisciplinary team working
- Attendance at combined diabetic antenatal clinic

ASSESSMENT & LEARNING METHODS

- Case-Based Discussion

Care of a Patient with Pregnancy Induced Hypertension (PIH)

Objective: To be able to organise safe and effective care for a woman with a pregnancy complicated by PIH

KNOWLEDGE

- The pathophysiology of pregnancy in patients with PIH
- How to make appropriate arrangements for antenatal care
- Appreciate need for careful surveillance of fetal well being
- Exercise good judgement in making decisions about timing and mode of delivery
- The role of antihypertensive agents
- The importance of postnatal care

SKILLS

- Manage patient appropriately
- Explain the problem, prognosis and planned management to patients

ASSESSMENT & LEARNING METHODS

- Case Based Discussion

Labour and Delivery

Objective: To manage and assist in the first, second and third stages of labour. To be able to provide safe and effective care to a woman who requires a Caesarean section

KNOWLEDGE

- Diagnosing labour
- Clinical assessing progress in labour
- Management of first, second and third stages of normal labour
- Assessment and repair of laceration and perineal tears and recognising anal sphincter involvement
- Performing and repairing episiotomy
- Assessing severity of postpartum haemorrhage
- Awareness of unit guidelines in management of postpartum haemorrhage
- How to initiate management of uterine atony
- Observation or assessment at manual removal of placenta
- Basic neonatal assessment and resuscitation

SKILLS

- Vaginal assessment of cervix
- Manage normal spontaneous vaginal delivery
- Suture of laceration or episiotomy
- Operative delivery – assessment for and performing straightforward operative delivery
- Assisting at caesarean section, progressing to performing caesarean section
- CTG interpretation in labour
- Initiate management of a postpartum haemorrhage and other obstetric emergencies

ASSESSMENT & LEARNING METHODS

- OSATS:
 - Manual removal of placenta
 - Uterine evacuation
 - Open and close an abdomen
 - Fetal blood sampling
 - Caesarean Section
 - Operative vaginal delivery
- Basic Surgical Skills
- Emergency Surgical Skills

Skilled Birth Attendance for Obstetricians

Objective: To be able to provide appropriate care for normal pregnancy, labour, and birth.

KNOWLEDGE

- Woman centered care and midwifery
- Supportive care (Safety Competence, Humanity)
- Normal Pregnancy
- Normal Labour
- Normal Birth
- Normal Postnatal care of mother and newborn

SKILLS

- Woman Centered Antenatal care consultation
- Normal First stage labour support
- Normal birth attendance
- Normal newborn care
- Normal postnatal care
- Parentcraft education

ASSESSMENT & LEARNING METHOD

- OSATS Normal Birth
- OSATS Normal Newborn care

Management of Induction of Labour

Objective: To have the knowledge, skills and attitudes required to assess patients requiring induction of labour and supervise safe and effective induction

KNOWLEDGE

- Know and understand the indications, benefits and hazards of induction of labour
- Know and understand the physiology of cervical ripening
- Be able to exercise good judgement in selecting patients for induction of labour
- Be able to assess the suitability of the cervix and select an appropriate method of induction
- Be able to work closely with midwives and anaesthetists in organising the work of the labour ward
- Be able to communicate with women in labour about decisions relating to induction of labour

SKILLS

- Assess and perform induction of labour

ASSESSMENT & LEARNING METHODS

- Case Based Discussion
- Mini-CEX

Caesarean Section

Objective: To be able to perform Caesarean section speedily and with a low rate of complications.

KNOWLEDGE

- Know pelvic anatomy in pregnancy
- Perform Caesarean section safely and with appropriate speed
- Act as a team leader, working with midwives, anaesthetists, theatre staff
- Communicate appropriately with patient and partner during operation

SKILLS

- Open and close abdomen
- Reflect bladder
- Safe delivery of baby – cephalic or breech
- Prescribe thromboprophylaxis and antibiotics appropriately
Prescribe oxytocin

ASSESSMENT & LEARNING METHODS

- OSATS

Dystocia in Labour

Objective: To be able to assess a patient whose labour is not progressing normally and intervene appropriately

KNOWLEDGE

- Define the causes of dystocia
- The indications and contraindications to the use of oxytocin
- Recognise all malpositions and malpresentations
- Exercise good judgement in prescribing oxytocin
- Exercise good judgement in deciding on the need for delivery by Caesarean section
- Respect opinion of midwifery staff but be able to think independently
- Counsel patient appropriately

SKILLS

- Diagnosis and management of dystocia

ASSESSMENT & LEARNING METHODS

- In house training; Skills and drills
- Case Based Discussion

Labour in the Presence of a Previous Caesarean Section

Objective: To be able to provide safe and effective care to a woman in labour who has had one previous Caesarean section

KNOWLEDGE

- Know the current literature on labour following a previous Caesarean section
- Know the incidence of uterine scar dehiscence
- Know the risk factors for uterine scar dehiscence
- Recognise the clinical signs of uterine scar dehiscence
- Exercise good judgement in deciding when to proceed with attempted vaginal delivery and when to perform a repeat Caesarean section
- Communicate with patients about progress in labour and encourage realistic expectations

SKILLS

- Care of patient in labour with a history of a previous Caesarean section

ASSESSMENT & LEARNING METHODS

- Case based discussion

Operative Vaginal Delivery

Objective: To be able to perform instrumental vaginal delivery with a low rate of morbidity in women and their babies

KNOWLEDGE

- Know criteria for safe operative delivery
- Be familiar with current literature on operative delivery
- Be able to assess presentation and position of head
- Be skilled in the use of non-rotational forceps
- Be skilled in the use of ventouse
- Be skilled in the after care of a women following operative vaginal delivery, particularly in relation to bladder function
- Communicate plans for delivery with patient
- Liaise with midwives and work as a part of team second stage
- Review events at delivery with patient before discharge from hospital

SKILLS

- Instrumental vaginal delivery

ASSESSMENT & LEARNING METHODS

- OSATS

Pre-Operative Management

Objective: To be able to deliver safe and effective pre-operative care to women preparing for surgery

KNOWLEDGE

- Arrange preoperative investigation
- Arrange for surgery
- Obtaining informed consent
- Prophylaxis
- Knowledge of:
 - Risk and complication of procedures
 - Postoperative management and discharge
 - Common postoperative complications such as wound care, infection, haemorrhage

SKILLS

- Prescribing Skills
- Obtaining consent

ASSESSMENT & LEARNING METHODS

- Ethics, safe prescribing and blood transfusion courses
- Case-based Discussion
- Mini-CEX

Third Degree Tears

Objective: To be able to recognise third and fourth degree tears

KNOWLEDGE/SKILLS

- Recognise third degree tears
- Observe repairs
- Manage Puerperium after TDT
 - Prescribe antibiotics/stool softeners
 - Arrange physiotherapy and follow-up
 - Recognise infection of dehiscence

ASSESSMENT & LEARNING METHODS

- Case-based discussion

Postpartum Haemorrhage

Objective: To be able to intervene in a case of postpartum haemorrhage to reduce the risk of mortality and morbidity in the woman.

KNOWLEDGE

- Define primary and secondary postpartum haemorrhage and their causes
- Be aware of the mortality and morbidity associated with postpartum haemorrhage
- Know the pharmacology of oxytocin, ergometrine, misoprostol, PGF2 alpha
- Knowledge of how to perform manual removal of retained placenta
- Knowledge of how to perform exploration of the genital tract under anaesthesia

SKILLS

- Recognition and initial management of PPH
 - Basic resuscitation
 - IV Access
 - Bloods
 - Cross-match for blood appropriately
 - Call for help appropriately

ASSESSMENT & LEARNING METHODS

- In house training: Skills and Drills
- Case Based Discussion

Clinical Gynaecology

Objective: The fully trained specialist in Gynaecology will be able to investigate all common gynaecological complaints, make appropriate diagnoses and advise patients about appropriate management options, and make appropriate subspecialist referrals

Menstrual Problems and Abnormal Bleeding

Objective: To be able to evaluate, investigate and plan appropriate treatment of a woman with menstrual problems

KNOWLEDGE

- Failure to start periods
- Cessation of periods
- Abnormal (Heavy or irregular) periods
- Painful periods
- Vaginal bleeding after the menopause
- Vaginal bleeding before puberty

SKILLS

- Abdominal and vaginal examination
- Ability to perform a speculum examination, HVS, cervical smear, pipelle biopsy
- Request appropriate blood tests and scans

ASSESSMENT & LEARNING METHODS

- Mini-CEX

Care of Patients with Menorrhagia

Objective: To be able to evaluate, investigate and plan treatment of a women with excessive menstrual blood loss

KNOWLEDGE

- Know the physiology and normal of menstruation
- Know the causes of menstrual abnormalities
- Know the pharmacology of agents available for management of menorrhagia
- Be able to take a competent menstrual history
- Exercise good judgement in assessing severity of the problem
- Be able to perform appropriate gynaecological examination
- Be able to insert Mirena device
- Be able to communicate appropriately with patient
- Be able to discuss all treatment options for menstrual abnormalities

SKILLS

- Take a competent menstrual history
- Perform an appropriate gynaecological examination
- Insert Mirena device
- Perform hysteroscopy D&C

ASSESSMENT & LEARNING METHODS

- OSATS
- Case Based Discussion
- Mini-CEX

Care of Patients with First Trimester Miscarriage

Objective: To provide safe, effective, compassionate care of women with first trimester pregnancy loss.

KNOWLEDGE

- Aetiology, epidemiology and recurrence risk of spontaneous miscarriage
- The predictive value and limitations of ultrasound and HCG measurements
- Investigations indicated in patients with recurrent miscarriage

SKILLS

- Interpret findings of ultrasound
- Make a diagnosis in a timely manner
- Make appropriate judgements on need for surgical management
- Make appropriate arrangements for follow-up and referral to specialist clinics
- Counselling for patients with first trimester miscarriage

ASSESSMENT & LEARNING METHODS

- Case Based Discussion
- Mini-CEx – one Mini-CEx should be undertaken each six months in the gynaecology outpatients covering different clinical problems encountered during training

Care of Patients with Suspected or Confirmed Ectopic Pregnancy

Objective: To make an appropriate diagnosis of ectopic pregnancy and manage it in a safe and timely manner.

KNOWLEDGE

- Know the aetiology, epidemiology and recurrence risks of ectopic pregnancy.
- Know the predictive value and limitations of ultrasound and HCG measurements.
- Know the guidelines for use of methotrexate.

SKILLS

- Recognise typical and atypical clinical presentations of ectopic pregnancy.

ASSESSMENT & LEARNING METHODS

- Diagnosis: Case Based Discussion

Care of Patients with Acute Pelvic Pain and Dysmenorrhoea

Objective: To be able to evaluate, investigate and plan appropriate treatment of a woman with acute pelvic pain

KNOWLEDGE

- Know the differential diagnosis of acute pelvic pain
- Recognise signs of intra-abdominal haemorrhage
- Recognise symptoms and signs of ectopic pregnancy
- Recognise symptoms and signs of ovarian torsion
- Exercise good judgement in triaging patient
- Respect patient's need for privacy for history taking and pelvic examination in A&E setting

SKILLS

- Perform appropriate clinical assessment of a patient with acute pelvic pain
- Communicate suspected diagnosis and planned management with patient

ASSESSMENT & LEARNING METHODS

- Case Based Discussion

Operative Gynaecology

Objective: The fully trained Specialist in Gynaecology should demonstrate good judgement in selecting patients for surgery, provide perioperative care to a high standard and be able to perform a number of standard gynaecological operations safely, with a low rate of morbidity.

Preoperative Care

Objective: To be able to deliver safe and effective care to women preparing for gynaecological surgery.

KNOWLEDGE

- Evidence based guidelines for perioperative thromboprophylaxis
- Evidence based guidelines for perioperative antibiotic cover

SKILLS

- Evaluate patient's fitness for surgery
- Obtain appropriate consent
- Exercise good judgement in balancing risks of surgery versus anticipated benefits
- Give realistic information to patients about nature of surgery and anticipated risks and benefits
- Liaise with anaesthetists and physicians in patients with concurrent disease

ASSESSMENT & LEARNING METHODS

- Mini-CEX
- OSATS

Postoperative Care

Objective: To be able to deliver safe and effective care to women following gynaecological surgery

KNOWLEDGE

- The normal postoperative course of patients following gynaecological operations

SKILLS

- Assess patients' recovery following surgery
- Recognise deviations from the normal postoperative course
- Communicate details of surgery and anticipated postoperative course with patients
- Arrange appropriate follow-up

ASSESSMENT & LEARNING METHODS

- OSATS
- Mini-CEX

Care of Patients Suffering from Complications Following Gynaecological Surgery

Objective: To be able to recognise complications of surgery and organise safe and effective clinical and psychological care for patients suffering from these complications

KNOWLEDGE

- Know the complications of gynaecological surgery in general and those specific to particular operations
- Recognise postoperative haemorrhage and hypovolaemia
- Exercise good judgment in making a decision about returning patient to operating theatre

SKILLS

- Evaluate patient's fitness for surgery
- Consent
- Assess recovery following surgery
- Diagnose and manage:
 - Postoperative haemorrhage and hypovolaemia

ASSESSMENT & LEARNING METHODS

- Case based discussion

Basic Surgical Skills for Open Surgery

Objective: To adopt surgical techniques and principles that reduce morbidity

KNOWLEDGE

- Knows appropriate scrub technique and principles of sterility in theatre
- Knows principles of electrosurgery
- Handles needles and scalpels safely
- Economic in movements
- Handles tissues gently
- Gives assistant and scrub nurse clear and appropriate directions
- Ties knots safely
- Communicates well with all other personnel in theatre

SKILLS

- Basic surgical skills

ASSESSMENT & LEARNING METHODS

- OSATS
- Basic surgical skills course attended in BST

Wound Care and Management

Objective: To understand and apply principles of care of surgical wounds that are associated with reduced morbidity

KNOWLEDGE

Basic Skills

- Knows physiology of wound healing
- Chooses appropriate incision
- Uses appropriate suture materials
- Uses appropriate technique to close wound
- Recognises early signs of wound infection, dehiscence, abscess formation, haematoma formation
- Communicates appropriately with nursing staff about wound care and suture removal

SKILLS

- Wound care and management

ASSESSMENT & LEARNING METHODS

- In house training
- Case based discussion

Diagnostic Hysteroscopy

Objective: To be able to perform diagnostic hysteroscopy safely

KNOWLEDGE

- Understands principles of hysteroscopy
- Knows principles of electrocautery

SKILLS

- Assess pelvis clinically
- Can insert hysteroscopy through internal cervical os
- Demonstrate anatomical landmarks
- Biopsy endometrium appropriately
- Insert mirena IUS appropriately

ASSESSMENT & LEARNING METHODS

- OSATS

Diagnostic Laparoscopy

Objective: To be able to perform diagnostic laparoscopy safely

KNOWLEDGE

- Is familiar with guidelines for safe laparoscopic entry
- Exercises good judgement in selecting patients for laparoscopic surgery
- Shows awareness of the potential for catastrophic complications associated with laparoscopic surgery

SKILLS

- Insert Veress needle safely
- Employ an alternative technique for laparoscopic entry in a patient with adhesions
- Demonstrate anatomical landmarks on abdominal wall
- Insert ports safely
- Use bipolar diathermy safely

ASSESSMENT & LEARNING METHODS

- OSATS

Audit

Objective: The fully trained specialist in Obstetrics and Gynaecology should be able to organise, conduct, present, interpret and discuss regular audits of outcomes of his personal and departmental work.

Urinary Problems

Objective: To be able to evaluate a woman with urinary incontinence

KNOWLEDGE

- Urinary Incontinence:
 - Genuine stress incontinence
 - Urge incontinence
- Other bladder problems
- Therapies available

SKILLS

- Clinical history and examination
- Interpretation of basic urodynamic traces
- Completion of a continence diary
- Exposure to physiotherapy

ASSESSMENT & LEARNING METHODS

- Mini-CEX

Uterovaginal Prolapse

Objective: To be able to assess a woman with symptoms of uterovaginal prolapse

KNOWLEDGE

- Assessment of history
- Assessment of symptoms
- Knowledge of types and degree of prolapse
- Knowledge of:
 - Conservative management e.g. physiotherapy, ring pessary
 - Surgical management

SKILLS

- Vaginal examination
- Diagnose type of prolapse
- Use of vaginal ring pessaries

ASSESSMENT & LEARNING METHODS

- Mini-CEX

Abdominal Distension or Mass / Pelvic Pain

Objective: To be able to diagnose and appropriately refer a patient with an abdominal mass

KNOWLEDGE

- Detailed history of pain
- Relation of pain to menstrual cycle
- Appraisal of associated symptoms
- Understanding of the history and examination suggestive of malignancy
- Differential diagnosis of abdominal mass

SKILLS

- Abdominal examination and appropriate investigations e.g. CT, MRI, ultrasound

ASSESSMENT & LEARNING METHODS

- Mini-CEX
- Case-based Discussion

Problems of the Vulva and Vagina

Objective: To diagnose problems with the vulva and vagina

KNOWLEDGE

- Vulvo-vaginal pain
- Vulval swelling
- Discharge from the vagina
- Itching around the vulva
- Warts around the vulva

SKILLS

- Ability to take appropriate swabs (see how they are handled in the laboratory) and arrange appropriate treatment and follow-up
- Biopsy of suspicious lesions

ASSESSMENT & LEARNING METHODS

- Mini-CEX

Fertility and Family Planning Problems

Objective: To understand fertility and family planning problems.

KNOWLEDGE

- Difficulty in becoming pregnant
- Difficulty in having a baby because of repeated miscarriages
- Understanding of basic investigations for sub-fertility
- Knowledge of:
 - Relative induction agents
 - Artificial reproductive technology
- Hormonal barrier and sterilisations
- Understanding the potential importance of psychosexual problems
- Clinical assessment of a woman with hirsutism
- Differentiate between hirsutism and virilism
- Understanding of the etiology of hirsutism
- Understanding of the difficulty of interaction
- Appreciate the differential diagnosis of superficial dyspareunia
- Appreciate the differential diagnosis of deep dyspareunia

SKILLS

- Vaginal examination
- Fit IUS/ IUCD
- Arrange HycoSy / hysterosalpingogram/ laparoscopy and dye testing as appropriate
- Semen analysis

ASSESSMENT & LEARNING METHODS

- Ethics, safe prescribing and blood transfusion
- Mini-CEX
- Case-based Discussion

Menopausal Problems

Objective: To be able to diagnose women with menopausal symptoms.

KNOWLEDGE

- Physiology of menopause
- Appropriate vasomotor symptoms and management
- Understanding HRT types, uses, benefits, risks and limitations
- Long term consequences of menopause e.g. CVD, CVS, Osteoporosis

SKILLS

- Prescribe HRT

ASSESSMENT & LEARNING METHODS

- Case-based Discussion

Documentation of Minimum Requirements for Training

- These are the minimum number of cases you are asked to document as part of your training. It is recommended you seek opportunities to attain a higher level of exposure as part of your self-directed learning and development of expertise.
- You should expect the demands of your post to exceed the minimum required number of cases documented for training.
- If you are having difficulty meeting a particular requirement, please contact your speciality coordinator.

Curriculum Requirement	Required/Desirable	Minimum Requirement	Reporting Period	Form Name
Section 1 - Training Plan				
Personal Goals Plan (Copy of agreed Training Plan for your current training year signed by both Trainee & Trainer)	Required	1	Training Post	Personal Goals Plan
Section 2 - Training Activities				
Obstetrics Outpatient Clinics	Required	40	Year of Training	Clinics
Gynaecology Outpatient Clinics	Required	40	Year of Training	Clinics
Ward Rounds/Consultations				Clinical Activities
Clinical Handover/ward rounds	Required	80	Year of Training	
Theatre Commitment	Required	40	Year of Training	Clinical Activities
Labour Ward	Required	40	Year of Training	Clinical Activities
Balanced mix of emergencies and non-emergencies in both obstetrics and gynaecology	Required	1	Training Year	Cases
Procedures/Practical Skills/Surgical Skills				Procedures, Skills, & DOPS
Year 1-2:				
Obstetrics				
Normal Labour and Birth, and Newborn Care	Required	10	Year of Training	
Basic Perineal Repair	Required	10	Year of Training	
Fetal Monitoring	Required	5	Year of Training	
Fetal Blood Sampling (Years 1 and 2)	Required	5	Training Programme	
Manual removal of placenta	Required	1	Year of Training	
Operative vaginal delivery (Assist/Observe) Years 1 and 2	Required	5	Year of Training	
Assist Caesarean Section (Year 1)	Required	5	Year of Training	
Perform Caesarean Section (Year 2)	Required	5	Year of Training	
Obstetrics Ultrasound				Ultrasound Procedures

Curriculum Requirement	Required/ Desirable	Minimum Requirement	Reporting Period	Form Name
Fetal Biometry	Required	10	Year of training	
Liquor assessment	Required	10	Year of training	
Early Pregnancy	Required	50	Year of training	
Placental assessment	Required	10	Year of training	
Gynaecology				Procedures, Skills, & DOPS
Diagnostic Hysteroscopy	Required	5	Year of Training	
Opening and Closing the Abdomen	Required	1	Year of Training	
Uterine Evacuation	Required	5	Year of Training	
Assisting in Laparoscopy	Required	5	Year of Training	
Supervised Gynaecological Ultrasound	Required	1	Year of Training	
Abdominal Hysterectomy (Assist)	Required	1	Year of Training	
Vaginal Hysterectomy (Assist)	Required	1	Year of Training	
From Year 3:				
Obstetrics				Procedures, Skills, & DOPS
Twin Delivery	Desirable	1	Year of Training	
Rotational Instrumental Delivery	Desirable	1	Year of Training	
Operative Vaginal Delivery	Required	5	Year of Training	
Gynaecology				
Gynaecology Ultrasound Adnexa	Desirable	1	Year of Training	
Posterior Repair with perineorrhaphy	Desirable	1	Year of Training	
Anterior Repair	Desirable	1	Year of Training	
Diagnostic Colposcopy	Desirable	1	Year of Training	
Diagnostic Laparoscopy	Required	5	Year of Training	
Abdominal Hysterectomy	Desirable	1	Year of Training	
Diagnostic Cystourethroscopy	Desirable	1	Year of Training	
Operative Laparoscopy	Required	1	Year of Training	
Vaginal Hysterectomy	Desirable	1	Year of Training	
Third Degree Tear Repair	Required	2	Year of Training	
Relatively Unusual Cases	Required	1	Year of Training	Cases

Curriculum Requirement	Required/ Desirable	Minimum Requirement	Reporting Period	Form Name
Subspecialty Obstetrics & Gynaecology	Required	5	Year of Training	Procedures, Skills, & DOPS
Section 3 - Educational Activities				
Mandatory Courses				Teaching Attendance
O&G Practical Scenarios Modules (7 online modules)	Required	1	Training Programme	
HSE Courses: Child Protection, Fire Safety, Manual Handling (Induction courses)	Required	1	Training Programme	
BST Leadership in Clinical Practice: Online	Required	1	Training Programme	
BST Leadership in Clinical Practice: Leadership Skills	Required	1	Training Programme	
BST Leadership in Clinical Practice: Communication Skills	Required	1	Training Programme	
Ethics, Transfusion, and Prescribing for Obstetrics & Gynaecology	Required	1	Training Programme	
Family Planning	Required	1	Training Programme	
Thriving in BST	Desirable	1	Training Programme	
Basic Practical Skills Course RCPI (ideally during first three months of training)	Required	1	Training Programme	
Certificate in Basic Ultrasound	Required	1	Training Programme	
RCPI ISOT Course (Year 2+)	Required	1	Training Programme	
An Introduction to Health Research Methods	Required	1	Training Programme	
PROMPT or ALSO or MOET (in main teaching hospitals)	Required	1	Training Programme	
Infection Control (Can be part of hospital induction day)	Required	1	Training Programme	
HSE Children First online course	Required	1	Training Programme	
Non – Mandatory Courses	Desirable	1	Training Programme	Teaching Attendance
Study Days	Required	4	Year of Training	Teaching Attendance
Participation at In-House Activity				Attendance at Hospital Based Learning
MDT/Specialty Meeting e.g. perinatal, cancer, colposcopy	Required	40	Training Programme	
Journal club/Educational Meetings (Peer Led acceptable) (1 hour per week)	Required	40	Year of Training	
Examinations				Examinations
MRCPI (O&G), [MRCOG Part 1, ideally year 1]	Required	1	Training Programme	
Diploma in Women's Health or DRCOG	Desirable	1	Training Programme	
Delivery of Teaching				Additional Professional Experience

Curriculum Requirement	Required/ Desirable	Minimum Requirement	Reporting Period	Form Name
Undergraduate/intern/inter-professional teaching	Required	30	Year of Training	
Research	Desirable	1	Training Programme	Additional Professional Experience
Clinical Audit Report Form	Desirable	1	Training Programme	Additional Professional Experience
Publications	Desirable	1	Training Programme	Additional Professional Experience
Oral or Poster Presentation	Required	1	Year of Training	Additional Professional Experience
National/International meetings	Desirable	1	Year of Training	Additional Professional Experience
Additional Qualifications	Desirable	1	Year of Training	Additional Professional Experience
Section 4 – Assessments				
OSATS				OSATS
Year 1-2:				
Obstetrics				
Fetal Blood Sampling	Required	1	Training Programme	
Manual Removal of Placenta	Required	1	Training Programme	
Normal Birth Attendance and Newborn Care	Required	1	Training Programme	
Caesarean Section	Required	2	Year of Training	
Basic Perineal Suturing	Required	1	Training Programme	
Gynaecology				
Diagnostic Hysteroscopy	Required	1	Training Programme	
Opening and Closing the Abdomen	Required	1	Training Programme	
Uterine Evacuation	Required	1	Training Programme	
From year 3:				
Obstetrics				
Multiple Pregnancy	Desirable	1	Year of Training	
Rotational Instrumental Delivery	Desirable	1	Year of Training	
Operative Vaginal Delivery	Desirable	1	Training Programme	
Caesarean Section	Required	1	Year of Training	
Gynaecology				

Curriculum Requirement	Required/ Desirable	Minimum Requirement	Reporting Period	Form Name
Posterior Repair with Perineorrhaphy	Desirable	1	Year of Training	
Anterior Repair	Desirable	1	Year of Training	
Diagnostic Laparoscopy	Required	5	Year of Training	
Abdominal Hysterectomy	Desirable	1	Year of Training	
Diagnostic Cystourethroscopy	Desirable	1	Year of Training	
Vaginal Hysterectomy	Desirable	1	Year of Training	
ULTRASOUND OSATS				
Ultrasound Machine Controls	Required	1	Training Programme	
Transabdominal and Transvaginal ultrasound examination of early pregnancy	Required	1	Training Programme	
Biophysical Profile Score	Required	1	Training Programme	
Fetal Measurement, Lie and Presentation	Required	1	Training Programme	
Liquor Assessment	Required	1	Training Programme	
Placental Assessment – Ultrasound	Required	1	Training Programme	
Ultrasound Assessment of Endometrium	Desirable	1	Training Programme	
Ultrasound Assessment of the Normal Female Pelvis	Desirable	1	Training Programme	
CBD	Required	4	Year of Training	Case Based Discussion
Mini-CEX	Required	2	Year of Training	Mini-CEX
Quarterly Assessment/End-of-Post	Required	4	Year of Training	Quarterly Assessment/End of Post
End of Year Evaluation	Required	1	Year of Training	End of Year Evaluation

