



Training Programme (essential elements)
Clinical Practical Year (CPY)
at the Medical University of Vienna, Austria

CPY-Tertial C

Gynaecology and Obstetrics

Valid from academic year 2020/21

Responsible for the content

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This training programme applies to the subject of "Gynaecology and Obstetrics" within CPY tertial C "Electives". The training programmes for the elective subjects in CPY tertial C are each designed for a duration of 8 weeks. If the subject in CPY tertial C is being completed over a period of 16 weeks, the specified content shall be treated in greater depth.

3. Learning objectives (competences)

The following skills must be acquired or deepened in the subject of Gynaecology and Obstetrics during the CPY.

3.1 Competences to be achieved (mandatory)

A) History taking

1. Taking a systematic medical history (symptoms, current complaints, the patient's life situation, his/her understanding of the disease and concerns, social and cultural background, illness experience, and warning signals/indicators of physical and sexual violence)
2. Taking a medical history regarding gynaecological conditions
3. History taking from a woman who has recently given birth
4. Taking a specific medical history from women with menstrual cycle disorders who wish to have children
5. Lifestyle history
6. Family history
7. Elaborating a clinical question and searching for its solution in the literature

B) Performance of examination techniques

8. Palpation of abdomen (abdominal wall, colon, liver, spleen, aorta, abdominal masses, pain on release of finger pressure, acute abdominal pain on palpation)
9. Eliciting renal tenderness
10. Inspection and palpation of breasts including regional lymph nodes
11. Inspection and palpation of female external genitalia (vulva, perineum): assessment of prolapse
12. Description of the external genitalia
13. Preparation of a diagnostic plan for women with menstrual cycle disorders who wish to have children
14. Getting to know pre-natal diagnostics (indications, explaining objectives and limits, communication with pregnant patient)
15. Performance of basic obstetric ultrasound (determination of position of child and placenta, vitality assessment, amniotic fluid assessment)
16. Description of cardiotocogram (CTG) and interpretation
17. Examination of a woman who has recently given birth
18. Performing and reading of urine stick test
19. Recommendations for further examinations/tests and discussion of therapeutic consequences

C) Performance of routine skills and procedures

20. Intravenous injection and cannulation
21. Subcutaneous and intramuscular injection
22. Venepuncture and drawing blood
23. Removal of wound sutures/stiches

24. Preparation to watch/to assist in operating theatre (scrub-up, gown up, put on sterile gloves, etc.), conduct in operating room
25. Urinary catheterization
26. Pre-operative preparation of the operative field for gynaecological and obstetric surgery
27. Performance of vaginal examination
28. Performance of vaginal palpation examination
29. Suturing a skin incision
30. Taking a swab
31. Assistance in gynaecological, obstetric or endocrinological surgery in the operating room
32. Internal and external obstetric examination including Leopold's manoeuvres
- D) Therapeutic measures
 33. Preparation of a therapy plan for women with menstrual cycle disorders who wish to have children
- E) Communication with patient/team
 34. Clarifying the patient's expectations and requests for the gynaecological/obstetric consultation
 35. Working with local, national and international guidelines and protocols with the mentor
 36. Management of pregnant patients and mother-child booklet (*Mutter-Kind-Pass*)
 37. Learning communication skills with obstetric, chronically ill or oncology patients
 38. Learning to deal with critical situations for an informed consent
 39. Discussion of diagnoses/prognoses with team
 40. Discussion of further diagnostic and therapeutic steps with team
- F) Documentation
 41. Documentation in the patient files with mentor
 42. Diagnostic coding with mentor
 43. Writing patient referral letters/medical reports with mentor
 44. Patient presentation

3.2 Competences to be achieved (optional) relating to the care of victims of violence

45. Taking a medical history exploring the type of assault and the present complaints (including detailed exploration of place, time, duration and type of assault and weapons involved in the attack), careful and thorough exploration of experiences of violence, identifying causes of injuries and complaints
46. Reporting incidences of violence to the police (according to §54 Ärztegesetz)
47. Offering professional help to victims of violence
48. Recognizing violence as a cause of a variety of symptoms and complaints: Identifying warning signals of physical, sexual and psychological violence and correctly interpreting typical patterns of injuries/complaints

49. Performing a physical examination with collection of forensic evidence from body surface and cavities
50. Producing a written report and (photo) documentation of injuries (even minor ones), other findings and complaints using a standardized forensic examination protocol

4. Information on verification of performance, on-going assessments

4.1 Examples of activities that can be assessed in the Mini-CEX:

1. History taking, examination and presentation of a patient with common obstetrical or gynaecological complaints
2. History taking, examination and presentation of a patient who has been reappointed to an out-patient clinic
3. Visitation, examination and presentation of an in-patient with a clear and well-structured obstetrical or gynaecological condition at the ward round (e.g., a woman who has recently given birth, or a patient with an uncomplicated postoperative course)
4. Case presentation including medical history, findings and therapy plan

4.2 Examples of skills that can be assessed in the DOPS:

1. Gynaecological swab taking
2. Gynaecological examination with specula and bimanual palpation
3. Obstetric examination
4. Palpation of breasts and axilla
5. Venepuncture and positioning a permanent cannula
6. Basic obstetric ultrasound (determination of position of child and placenta, vitality assessment, amniotic fluid assessment)