BCC 7130
Obstetrics and Gynecology Clerkship
2022-2023

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<table>
<thead>
<tr>
<th>Campus</th>
<th>Clerkship Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daytona</td>
<td>Pamela Carbiener, MD</td>
</tr>
<tr>
<td>Fort Pierce</td>
<td>Heidi McNaney-Flint, MD</td>
</tr>
<tr>
<td>Orlando</td>
<td>Kristin M. Jackson, MD</td>
</tr>
<tr>
<td>Pensacola</td>
<td>Jill Prafke, MD</td>
</tr>
<tr>
<td>Sarasota</td>
<td>Jon Yenari, MD</td>
</tr>
<tr>
<td>Tallahassee</td>
<td>David O’Bryan, MD</td>
</tr>
<tr>
<td>Rural Program Site</td>
<td>Clerkship Administrator</td>
</tr>
<tr>
<td>Marianna</td>
<td>John D. Byrd, MD</td>
</tr>
<tr>
<td>Thomasville</td>
<td>Calvin Reams, MD</td>
</tr>
</tbody>
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Florida State University College of Medicine | Last Updated: 05/19/2022
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Overview

Course Description
Students will participate in this clerkship as either a 6-week block or through the Longitudinal Integrated Curriculum (LIC). The Obstetrics and Gynecology Clerkship is a community-based clerkship coordinated by the regional campus Clerkship Director and supervised by the assigned Clerkship Faculty members. The purpose of the Obstetrics and Gynecology Clerkship is to develop a level of clinical competency in the obstetrical and gynecological care of women that is appropriate for the general education of all medical students. Students work in ambulatory, inpatient, and surgical settings, experiencing the breadth of both obstetrical and gynecological care. Students will deliver basic preventive care for women compassionately and insightfully and learn to apply appropriate screening practices. Students will communicate appropriate health education to patients and will work collaboratively with healthcare team members. Under the close supervision of experienced Clerkship Faculty, students are expected to assume increasing responsibility for providing ambulatory and in-patient patient care. Students are expected to fully participate in the prenatal, labor, delivery, and postpartum experiences of assigned patients. Students are also expected to participate in the surgical care of patients including the preoperative evaluation, operative care, and postoperative care, and to participate in the performance of obstetrical and gynecologic procedures. Students are expected to work effectively with others in each of the clinic settings.

Orientation and Syllabus Review
Students are required to view the Obstetrics and Gynecology Orientation video and read the syllabus to be familiar with clerkship expectations before beginning the clerkship. In addition, students must read the Welcome Letter, 10 things to Do Before You Begin the OBGYN Rotation, and the APGO OBGYN Clerkship Guide to Success located on the AY2022-23 MD Clerkship Org Site OBGYN page. A site-specific orientation will occur at the assigned clinical site before the initiation of clinical activities. Students are responsible for communicating with their Clerkship Faculty before the start date of the clerkship to coordinate meetings.

Longitudinal Integrated Curriculum (LIC)
General information and policy regarding the Longitudinal Integrated Curriculum (LIC) in Marianna can be found on the syllabi page of the Office of Medical Education website. Students in the LIC should plan to take the NBME Internal Medicine Clinical Subject Examination during the spring semester after other clerkship requirements have been met.

Scheduled Hours/On-Call
Students will work at least 4 full days per week with assigned Clerkship Faculty, as one day per week is allotted for participation in Doctoring 3 and Longitudinal Clerkship. During off-cycle rotations during which Doctoring 3 is not scheduled, students will work 5 or more days per week with Clerkship Faculty. Students will also participate in on-call activities during the first five weeks of the Obstetrics and Gynecology Clerkship, for a total of 5-6 “calls” during the rotation. Students may take call from home if commute time is less than 15 minutes from the hospital; if travel time is more than 15 minutes, students are encouraged to spend time “in house” rather than to risk driving while tired or sleep deprived.

There are two call types in the Clerkship, short call and overnight call. Student call schedules will include at least one overnight call (24 hours), which occurs on a Friday or Saturday to allow for a recovery day before the next week begins. Short call begins after daytime clinical activities and ends at 10 pm unless otherwise directed by the Clerkship Director (unplanned deliveries, operative emergencies). The Clerkship Director will work with students to create, implement and monitor the final call schedule. During the last week of the clerkship, call is not required unless requirements have not been met. Work hours are to be documented in ETS on a daily basis.

Required Assignments

Required Assignment 1: First Delivery Reflection
The purpose of this exercise is for the student to mentally and emotionally process the experience of the delivery of a baby as a health professional (first delivery preferred). The student will reflect on type of delivery, experience from a personal standpoint, participation as part of the healthcare team and the impact of becoming part of a significant life experience for a woman and her family. Complete instructions are located on the AY2022-23 MD Clerkship Org Site OBGYN page.

Submission
Students will upload their First Delivery Reflection to the “Project Documents” tab for the course in Student Academics by midnight on Sunday at the end of the third week of the clerkship. Students are encouraged to send a copy of this report to both the Education Director AND the Clerkship Director via email if the electronic submission system (Student Academics) is down or otherwise unavailable.

Evaluation
The evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>First Delivery Reflection Rubric</th>
<th>Present</th>
<th>Absent</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interprofessional identified, role, interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concerns documented</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Context Identified</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insight/observation of student’s mental/emotional process in the encounter</td>
<td></td>
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</tbody>
</table>

Required Assignment 2: History and Physical Project
The student will produce a focused, context-specific documentation of a clinical encounter. Their written documentation should contain key components of the intake history for a new obstetrical patient, gynecological problem visit, or well-woman exam. The document must include a breast exam, complete pelvic exam, an ordered differential diagnosis and/or problem list with plan and follow-up patient education. Complete instructions are located on the [AY2022-23 MD Clerkship Org Site OBGYN page](#).

Submission
Students will upload their History and Physical Project to the “Project Documents” tab for the course in Student Academics by midnight on Sunday at the end of the third week of the clerkship. Students are encouraged to send a copy of this report to both the Education Director AND the Clerkship Director via email if the electronic submission system (Student Academics) is down or otherwise unavailable.

Evaluation
The evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>History and Physical Project Rubric</th>
<th>Present</th>
<th>Incomplete</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Complaint</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HPI</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>PMH, PSH, MED, ROS Allergy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Pelvic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment/Problem List</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Patient Education</td>
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</tbody>
</table>

Required Assignment 3: Labor & Delivery Project with Integrated Pediatrics
Labor is an amazing event. How women deal with the process is often even more amazing. A physician may never know what a woman and her family go through unless time is spent with a patient in labor from start to finish. Even an OBGYN, whose attention is divided amongst multiple concerns, is unlikely to ever spend this concentrated amount of time with a single patient in labor again. The student will report and analyze the labor, delivery, postpartum and immediate care of the newborn process which contains fundamental knowledge found to be on the subject exam. Common NBME subject exam questions will require interpretation of abnormalities in fetal heart tracings and stages of labor, anesthesia, and cord gas interpretation. To complete the total obstetrical experience, a physician must always consider the newborn’s progress as well as the maternal postpartum care. An ideal newborn to follow would be that of the patient whose labor, delivery, and the post-partum course were followed for the L&D packet. However, if due to time constraints, that newborn cannot be followed in continuity, the student will use a newborn of another patient to complete these tasks or questions in the Labor & Delivery Project. Complete instructions are located on the [AY2022-23 MD Clerkship Org Site OBGYN page](#).

Submission
AY2022-2023 Obstetrics and Gynecology Clerkship
Students will upload their Labor & Delivery Project to the “Project Documents” tab for the course in Student Academics by 5:00 PM on the last day of the clerkship. Students are encouraged to send a copy of this report to both the Education Director AND the Clerkship Director via email if the electronic submission system (Student Academics) is down or otherwise unavailable.

**Evaluation**

Evaluation of this assignment will be completed by the Education Director after the clerkship, according to the rubric below. Completion of this assignment in a satisfactory fashion is a clerkship requirement.

<table>
<thead>
<tr>
<th>Labor &amp; Delivery Project Rubric</th>
<th>Present</th>
<th>Incomplete</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor-Normal/Abnormal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labor Curve Corresponds to Labor described</td>
<td></td>
<td></td>
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<tr>
<td>Assessment of the delivery, blood loss, complications if any described</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn immediate resuscitation with APGAR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immediate Postpartum recovery of dyad Mother/Baby</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn exam observed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Requirements for discharge of a newborn to include looking for social service involvement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall comments by the student documenting their insight into the complete process</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Questions answered with annotated EBM</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Required Assignment 4: Mini-Oral Exam**

The mini-oral examination is an end of clerkship formative assessment administered by the Clerkship Director. The purpose of the mini-oral exam is to assess the student’s ability to synthesize a History and Physical Examination, present it succinctly, and prioritize differential diagnosis with a basic plan. The oral exam offers an opportunity to demonstrate clinical reasoning and medical knowledge in a different format. Complete instructions are located on the AY2022-23 MD Clerkship Org Site OBGYN page.

**Submission**

- Students will upload their mini-oral case list to the “Project Documents” tab for the course in Student Academics by the end of week 5 of the clerkship.
- Students will also document as an Educational Activity in ETS by selecting “[OBGYN] Completion of Mini-Oral Exam Case List” in the drop-down menu.

**Evaluation**

Evaluation of the oral exam will be completed by the Clerkship Director or their designee, in their final assessment with immediate feedback to the student.

**Patient Care**

Patient Care is delivered in a variety of settings. Students are expected to develop patient care skills that are compassionate, appropriate, and effective for treating health problems and promoting health. In this clerkship, students will participate in the care of patients in the following settings:

1. Physician’s office, ambulatory clinic, emergency department, or hospital
2. Surgical care of patients (ambulatory or inpatient)
3. Evaluation and management of patients in Labor and Delivery
4. On-call responsibilities in the hospital setting or emergency department

**Patient Log Requirements using the Encounter Tracking System (ETS)**

Students should enter patient encounter data into the Encounters Tracking System (ETS) daily. Students are required to see a minimum of 100 patient encounters during the Obstetrics and Gynecology clerkship. Students will record all clinical problems and procedures that were part of patient encounters. The table below lists the required visit types, problems, and procedures including the expected level of participation. Failure to record required patient care by 5:00 pm on the last day of the Clerkship will result in a grade of “IR” (incomplete, requires remediation); the student will therefore be ineligible for honors and additional time on the Clerkship may be required. If a student fails to meet this deadline, they risk failure for the clerkship. The problems/conditions and procedures marked with an asterisk* must be completed in the clinical setting and require direct patient contact.
### Visit Type

<table>
<thead>
<tr>
<th>Minimum Required</th>
<th>Problems</th>
<th>Location of Service</th>
<th>Minimum Level of Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Periodic preventive care (health maintenance)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Periodic preventive care (health maintenance)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Abnormal 1st trimester bleeding</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Abnormal uterine bleeding</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Diabetes in pregnancy</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Hypertensive disorder in pregnancy</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Labor*</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Pelvic pain (acute or chronic)</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Third trimester bleeding</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Abnormal cervical cancer screening (results of cervical cytology)</td>
<td>Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Menopause or menopause transition</td>
<td>Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Postpartum care</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Prenatal care</td>
<td>Inpatient or Outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Sexually transmitted infection or vaginitis</td>
<td>Outpatient</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Procedures

<table>
<thead>
<tr>
<th>Minimum Required</th>
<th>Procedures</th>
<th>Minimum Level of Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast exam*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Fetal well-being assessment*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Cervical cancer screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Contraception counseling *</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Culture, cervical or vaginal*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Domestic violence screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Incontinence assessment*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Lactation counseling*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Sexually transmitted infection counseling/prevention*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Sexually transmitted infection screening</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Substance abuse screening (general or opioid)*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Tobacco use screening*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Use of folic acid (preconception counseling)*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>APGAR score determination*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Coach second stage labor *</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Foley placement*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Wound repair/suturing*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Cesarean section*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Major surgical procedure</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Minor surgical procedure</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Vaginal delivery*</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Colposcopy</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Epidural/spinal anesthesia</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Laparoscopic surgery</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Surgical safety timeout</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Ultrasound (OB or GYN)</td>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

One (1) breast exam must be performed in the clinical setting with direct patient contact, while others may be completed on a simulator/model. In addition, the table below provides an example of several optional procedures that provide an excellent learning experience but are not always possible to see and document in a 6-week clerkship.

| Abnormal pap management | Endometrial ablation | KOH/wet prep | Tubal ligation |
| Dilation and curettage | Intrauterine device (IUD) insertion | Mammogram |

**Patient Log (ETS) Monitoring Policy**

Encounter data are monitored by the Clerkship Directors to assure that students are meeting clerkship requirements. If it becomes apparent that students are not encountering the required patient conditions, efforts will be made to specifically select the patients with the required conditions. The level of participation in the care of patients is determined by the student's involvement during the history, physical exam, assessment, and treatment plan. The complexity of these components will vary, but for the purposes of choosing a level of participation, three categories have been created, all of which include supervision of the medical student. The student will select the level of...
participation that most closely describes their involvement in the patient encounter, and will receive credit for documented participation at the required level or higher.

- Observe should be selected when the student observes a clinician conducting the patient encounter.
- Assist should be selected when the student assists a clinician in conducting the patient encounter.
- Perform should be selected when the student leads or conducts the patient encounter.

Alternate Educational Experiences

Should the student be unable to complete and record a required clinical encounter or other clerkship requirements due to circumstances beyond their control, the Education Director will determine an appropriate alternative educational experience. Students may be exposed to the conditions/diseases secondarily through reading assignments, completion of Aquifer or OnlineMedEd cases, or discussions with the Clerkship Director, and will record as instructed in the ETS. The utilization of alternative educational activities is monitored by the curriculum committee regularly.

Online Curriculum

APGO uWISE

The APGO uWise is available online and is a supplemental student learning tool consisting of sample quizzes. These are not required and not part of the grade, but it is highly recommended that the quizzes are completed each week. This question bank is very beneficial in preparation for the end of clerkship NBME subject exam. Initial sign-up instructions “APGO uWISE Interactive Self-Evaluation Guide” can be found on the AY2022-23 MD Clerkship Org Site OBGYN page.

Meetings

Clerkship Director Meeting

Students meet with the Clerkship Director weekly for teaching, evaluation, review of patient log, cases, work hours and feedback, and review of case-based learning modules which are interspersed with NBME-style questions. The Clerkship Director facilitates the sessions building medical knowledge, fostering the students’ critical thinking, clinical reasoning, and team (IPE) participation. These sessions are matched to the readings assigned each week, keeping students on task for completion of material by the fifth week of the clerkship. The students are asked give an oral presentation of a patient encounter most weeks, working on their poise, content and proficiency. Near the end of the clerkship, students’ skill will be assessed via simulated breast and pelvic exam and the mini-oral exam.

Clerkship Exams

Formative

Meaningful mid-rotation feedback requires self-assessment. The student will complete a timed online test through the APGO uWise (free of charge).

Submission

- After completion, the student will upload their score to Student Academics at the end of week 3 to assess the gaps in medical knowledge and identify content areas to improve by the end of the clerkship.
- Students will also document as an Educational Activity in ETS by selecting as “[OBGYN] Completion of NBME or APGO Self-Assessment” in the drop-down menu.
- Students are required to discuss their score and improvement plan with their Clerkship Director during mid-rotation formative feedback meeting.

The NBME’s Self-Assessment Services (NSAS) Clinical Science Mastery Series offers a $20 clerkship-specific exam preparation that includes in-depth answer explanations. Students may purchase an NSAS examination for any clerkship. Students in academic need should contact their Student Support Coordinator for more information on the institutional paid voucher availability policy. Students should use the practice questions from the APGO uWise or the NBME NSAS as other test banks are not as reliable for the OB/GYN medical knowledge of the OBGYN subject exam.

Summative

At the end of the clerkship, students will take the 110-question NBME Clinical Subject Examination for Obstetrics and Gynecology. LIC students will schedule the exam according to the LIC policies document.
Learning Resources

Institutional Resources
The Maguire Medical Library offers 24/7 remote access to online resources such as Mobile Resources, Point of Care, and Subject Guides to support the core clerkships.

Required Reading
Students are introduced to the core content of Obstetrics and Gynecology through readings in the required textbooks located on the OB/GYN subject guide. A weekly outline of reading assignments and cases is available on the AY2022-23 MD Clerkship Org Site OB/GYN page.


Electronic Resources
These resources are commonly used by obstetricians and gynecologists, and available on the OB/GYN subject guide:
- The Period App
- MenoPro App
- Sprout Pregnancy App
- PMS Tracker
- Infertility Survival Kit
- Yeast App (ISSVD)
- PTB Toolkit (Prevention of Preterm Birth Algorithms) Also includes what to do for PPROM
- Ovia Fertility (Ovulation calculator and period tracker)
- ACOG App (with a link to the pregnancy calculator)
- ASCCP (ultimate source for all things PAP/HPV, but cost $11)
- The PAP App (not quite as good as ASCCP APP, but it's free)
- PregWheel (but we prefer the Pregnancy Calculator APP on the ACOG App)
- WUSM APP OB GUIDE (Washington University School of Medicine OB Guide/The Washington Manual)
- The CDC Apps for Contraception, STI/STD Screening and Treatment, AND Opioid Guidelines
- Contraception ($10/yr)

Evaluation

Clerkship Specific Grading
The standardized clerkship policy can be found on the Office of Medical Education website.

1. Any assignments that are submitted late or require remediation renders the student ineligible for honors and will result in the assignment of an initial grade of IR (Incomplete Remediation) until remediation has been completed
2. Any breach in professionalism renders a student ineligible for honors
3. Failure to document work hours timely and accurately renders a student ineligible for honors
4. Document a minimum of 100 patient encounters in the ETS (pass/fail)
5. Timely documentation of all required problems and procedures in ETS (pass/fail)
6. Satisfactory and timely performance of first delivery reflection (pass/fail)
7. Satisfactory and timely performance of history and physical project (pass/fail)
8. Satisfactory and timely submission of labor and delivery project (pass/fail)
9. Satisfactory completion of mini oral exam (pass/fail)
10. Timely completion of formative exam and satisfactory creation of self-improvement plan (pass/fail)
11. Clinical performance must be exemplary to be considered for honors
12. NBME must be at or above the 75th percentile or higher to be eligible for honors consideration and must be at the 10th percentile to pass the clerkship
**Formative Evaluation**
A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback to students on their progress in the clerkship. This will include progress toward the achievement of clerkship objectives, competencies, assignments, and required encounters. A student workflow guide is available on the [AY2022-23 MD Clerkship Org Site](#).

**Summative Evaluation**
An evaluation of student clinical performance will be completed by the assigned Clerkship Faculty at the end of the clerkship, as well as by the resident the student worked with during the clerkship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of the clerkship and include an assessment of each in the final grade summary.

**Grade Assignment**
The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude, and performance during the weekly meetings with the Clerkship Director, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and any student can earn a grade of honors.

**Course Objectives**
The following table outlines the clerkship objectives and assessment method for each, intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives (EPOs)](#) and [ACGME Core Entrustable Professional Activities (EPAs)](#). To view the complete table and for an overview of the curricular map for the clerkship years at the Florida State University College of Medicine, please visit the syllabi page of the [Office of Medical Education](#) website.

<table>
<thead>
<tr>
<th>Obstetrics and Gynecology Clerkship Objectives</th>
<th>Educational Program Objectives (EPOs)</th>
<th>Entrustable Professional Activities (EPAs)</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routinely includes information about the patient’s menstrual, obstetric, gynecologic, sexual and/or contraceptive histories when performing the medical history.</td>
<td></td>
<td>1.1</td>
<td>Clerkship Director observation; Education Director evaluation of assignments; Faculty observation; Online modules; Oral presentation</td>
</tr>
<tr>
<td>Routinely includes a pelvic exam and a standard breast exam when appropriate in the physical exam.</td>
<td></td>
<td>1.2</td>
<td>Education Director evaluation of assignments; Faculty observation</td>
</tr>
<tr>
<td>Demonstrate best practice techniques when collecting gynecological specimens.</td>
<td></td>
<td>1.3</td>
<td>Education Director evaluation of assignments; Faculty observation</td>
</tr>
<tr>
<td>Identify and implement age-appropriate preventive services.</td>
<td>1.4</td>
<td>1</td>
<td>Faculty observation</td>
</tr>
<tr>
<td>Utilize evidence-based screening tools to identify women at risk for: depression, domestic violence, opioid/substance use, tobacco use, urinary incontinence and osteoporosis.</td>
<td>1.5</td>
<td>3</td>
<td>Education Director evaluation of assignments; Faculty observation; Patient documentation</td>
</tr>
<tr>
<td>Use evidence-based digital resources at the point of care to access clinical information.</td>
<td>1.6</td>
<td>7</td>
<td>Faculty observation</td>
</tr>
<tr>
<td>Demonstrate sound clinical reasoning by: 1) constructing organized and thorough patient presentations; 2) generating reasonable patient problem lists; 3) formulating appropriate differential diagnoses; and, 4) generating logical diagnostic and management plans.</td>
<td>1.7</td>
<td>2, 3, 5, 6</td>
<td>Clerkship Director observation; Education Director evaluation of assignments; End of clerkship exam; Faculty observation; Oral presentation</td>
</tr>
<tr>
<td>Demonstrate core knowledge and basic skill in the delivery of routine prenatal care, including: 1) diagnosing of pregnancy; 2) discussing the rationale behind initial and subsequent laboratory assessment of the pregnant patient; 3) discussing the appropriate use of diagnostic ultrasonography during pregnancy; 4) identifying women at high risk throughout the pregnancy; 5) recognizing and offering assistance for the common concerns of the pregnant woman; and, 6) recognizing the common complications of pregnancy.</td>
<td>2.0, 3.2</td>
<td>1, 2, 3</td>
<td>Clerkship Director observation; End of clerkship exam; Faculty observation; Online modules; Patient documentation</td>
</tr>
</tbody>
</table>
| Demonstrate core knowledge and basic skill in the delivery of care of the woman in labor, including: 1) diagnosing labor; 2) diagnosing ruptured membranes; 3) determining cervical dilatation; 4) monitoring the progress of labor utilizing Friedman’s curve; 5) interpreting basic patterns on a fetal monitoring strip; 6) assisting/performing at least 3 vaginal deliveries; 7) assisting/performing at least 3 perineal repairs; and, 8) assisting/observing at least one operative delivery. | 2.0, 3.3, 7.1, 7.2 | 1, 2, 3, 10 | • Clerkship Director observation  
• Education Director evaluation of assignments  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrate core knowledge and basic skill in the delivery of routine post-partum care, including: 1) encouraging successful breastfeeding and recognizing common breastfeeding problems; 2) recognizing the symptoms and signs of an uncomplicated post-partum course; 3) identifying common post-partum conditions/complications; and, 4) assisting the patient with choosing appropriate post-partum contraception. | 2.0, 3.4 | 1, 2, 4 | • Clerkship Director observation  
• Education Director evaluation of assignments  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrate core knowledge and basic skill in the delivery of pre-operative and post-operative care, including: 1) demonstrating appropriate scrubbing and sterile technique; 2) demonstrating basic skills as an operative assistant; 3) performing surgical-associated procedures (dressing changes, suture/staple removal, catheter care, etc.); and, 4) identify common post-operative complications in OB/GYN. | 2.0, 3.5 | 2, 12 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrate core knowledge and basic skill in the delivery of ambulatory gynecologic care: Can complete the initial evaluation--history and physical exam--and identify the appropriate diagnostic testing for a patient presenting with: 1) vaginal discharge; 2) abnormal PAP smear results; 3) abnormal uterine bleeding, including post-menopausal bleeding; and, 4) breast mass/abnormal mammogram. | 2.0, 3.6 | 1, 3, 5 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrate basic patient education skills when informing and educating patients about common health concerns. | 2.1 | 3, 5, 11 | • Clerkship Director observation  
• Education Director evaluation of assignments  
• Faculty observation |
| Demonstrate basic counseling skills when addressing the following issues with patients: 1) contraception choices; 2) lactation/breast feeding; 3) osteoporosis prevention; 4) preconception recommendations; 5) prevention of sexually transmitted infections; and, 6) smoking cessation. | 2.2 | 3 | • Faculty observation  
• Patient documentation |
| Demonstrate shared decision-making techniques when negotiating and communicating patient management plans. | 2.3 | 3 | • Faculty observation |
| Demonstrate core knowledge and basic skill in the delivery of preconception care: Every fertile patient; every visit. | 3.1 | 1 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Assess knowledge and create a self-improvement plan that demonstrates a commitment to self-directed learning. | 3.2, 3.3 |  | • Education Director evaluation of assignments  
• Faculty observation |
| Demonstrate knowledge of the ethical conflicts that arise in the practice of obstetrics and gynecology self-awareness of personal bias re: the ethical conflicts that arise in the practice of obstetrics and gynecology, and is both respectful and helpful to patients who hold different ethical beliefs. | 4.1, 4.2 | 9 | • Clerkship Director observation  
• End of clerkship exam  
• Faculty observation  
• Patient documentation |
| Demonstrate effective communication and work effectively with other health care professionals as a team member when caring for maternity and surgical patients. | 4.3, 4.4, 7.1, 7.2 | 9 | • Clerkship Director observation  
• Education Director evaluation of assignments  
• Faculty observation |
| Recognize the system-based process, a surgical “timeout,” as a means to prevent medical error and create a culture of safety in an inter-profession team. | 4.3, 6.6, 7.1, 7.2, 7.4 | 9, 13 | • Faculty observation  
• Patient documentation |

**Policies**

**Absence and Attendance Policy**
The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See FSUCOM Student Handbook for details of the attendance policy, a notice of absences, and remediation. Students must use the student absence request form that is located on Student Academics. Extended absences from the clerkships are not permitted. Any absence from the clerkships must be pre-approved by the Regional Campus Dean before the beginning of the clerkship, using the student absence request form. The Clerkship Faculty, Clerkship Director, and Education Director must be notified of any absence in advance by the student, once approved by the campus dean. Under no circumstances should a student arrange with the Clerkship Faculty or elective faculty to be away from the rotation without first obtaining the approval of the campus dean. Any approved absence from a required clerkship may result in the student receiving a grade of “incomplete” and the student is expected to make up missed time and/or complete alternative/additional assignments before a final grade will be assigned. Unapproved absences during the clerkship are considered unprofessional behavior, will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship. In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible.

**Academic Honor Policy**

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of students' academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at [http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy](http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy).

**Americans with Disabilities Act**

Florida State University (FSU) values diversity and inclusion; we are committed to a climate of mutual respect and full participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. FSU is committed to providing reasonable accommodations for all persons with disabilities in a manner that is consistent with academic standards of the course while empowering the student to meet integral requirements of the course.

To receive academic accommodations, a student: (1) must register with and provide documentation to the Office of Accessibility Services (OAS); (2) must provide a letter from OAS to the instructor indicating the need for accommodation and what type; and, (3) should communicate with the instructor, as needed, to discuss recommended accommodations. A request for a meeting may be initiated by the student or the instructor. Please note that instructors are not allowed to provide classroom accommodations to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in alternative format upon request. For more information about services available to FSU students with disabilities, contact the Office of Accessibility Services, 874 Traditions Way, 108 Student Services Building, Florida State University, Tallahassee, FL 32306-4167; (850) 644-9566 (voice); (850) 644-8504 (TDD), oas@fsu.edu, [https://dsst.fsu.edu/oas/](https://dsst.fsu.edu/oas/)

**Clinical Experience and Education (formerly Duty Hours or Work Hours) Policy**

The FSU COM uses the ACGME requirements regarding clinical experience and education as a guideline for our policy. Our goal is to provide a structure that supports patient safety and student education and facilitates personal-professional balance and well-being.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week when averaged over 4 weeks.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over 4 weeks.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, with the exception that up to 4 hours of additional time may be used for effective transitions of care or student education. No additional patient care responsibilities may be undertaken during these 4 hours. After 24 hours continuously on call, students must have at least 14 hours free of clinical work and scheduled educational activities.
- Students should have 8 hours off between scheduled clinical experience and education periods.

**Documentation** of time spent on clinical experience and education:

Students will use ETS to document by self-report their daily work hours on required clerkships and courses. Students must enter daily hours to include both clinical experience and required educational activities. Failure to report work hours is considered a breach of professionalism.
Students will report the following:

- Clinical experience, including documentation in the medical record
- Required educational meetings (i.e., Doctoring 3, clerkship meetings, meetings with clerkship faculty, educational meetings at residency programs)
- **Hours that should not be included** in self-reported “work” hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules, and assigned reading.

**Office of Student Counseling Services**
Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine’s Director of the Office of Student Counseling Services and the FSU Office of Accessibility Services (OAS) to determine whether they might be eligible to receive accommodations needed to train and function effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to a medical degree.

**Student Mistreatment Policy**
“Mistreatment” arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age or sexual orientation. If a student feels they are being mistreated, the student should report this concern to the Division of Student Affairs (Student Support Coordinator, Assistant or Associate Dean for Student Affairs or the Regional Campus Dean). We treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind. Please refer to the Student Mistreatment Policy in the FSUCOM Student Handbook and report incidents of mistreatment as soon as possible.

**Syllabus Change Policy**
Except for changes that substantially affect the implementation of the evaluation (grading) statement, this syllabus is a guide for the course and is subject to change with advance notice.