



Core Clerkship in Women's Health

Welcome to the Core Clerkship in Women's Health! We hope you will have a productive and exciting learning experience through patient care, interaction with women's health providers, simulation, and other formal learning activities. As every physician will encounter female patients in his/her career, the purpose of this core clerkship includes:

- ❖ To introduce students to the depth and breadth of women's health issues
- ❖ To experience how OB/GYN merges surgery, medicine, and primary preventive care into a single practice
- ❖ To learn how overall mental and physical health interacts with reproductive function
- ❖ To gain comfort in taking an appropriate OB/GYN history and performing the breast and pelvic exam
- ❖ To introduce the principles of surgery related to women's health

The Women's Health Core Clerkship is an eight week clinical rotation, during which students will be assigned primarily to rotations at three hospitals - Johns Hopkins Hospital, Johns Hopkins Bayview Medical Center/GBMC, or Sinai Hospital/GBMC. Each student's experience will include two weeks each on an Inpatient Obstetric and Inpatient Gynecology service, a Longitudinal Ambulatory Clinic experience, and a two week blocks on two of the following Selectives:

- Female Pelvic & Reconstructive Medicine
- Gynecologic Ambulatory Specialties
- Gynecologic Oncology
- Gynecologic Pathology
- Maternal Fetal Medicine
- Primary Care Ambulatory OB/GYN
- Reproductive, Endocrine & Infertility
- Reproductive Health (Family Planning)
- Women's Mood Disorders

Any questions regarding the rotation should be addressed to:

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PRECEDE

Your clerkship seminars will be primarily offered during PRECEDE. The first week of the program (3 days) covers basic knowledge and clinical skills deemed prerequisites to a successful clinical experience in obstetrics and gynecology. During Week 5, PRECEDE will cover subspecialty topics and skills. You will report to your primary rotation site for orientation and scheduling on Week 1 of the clerkship, on the afternoon of PRECEDE Day 3.

Various other conferences are given weekly at each clinical location and schedules of these will be supplied to the appropriate student rotation groups. Attendance is required for all PRECEDE activities.

Schedules

Information on when to report to your site will be given at the orientation on the first day of the clerkship. You will receive PRECEDE, Rotation, Selective, Longitudinal Clinic, Obstetric Day/Night Float, and Examination schedules in your orientation folder.

Clinical Responsibilities

While on the Obstetrics and Gynecology Service, the student is considered an integral part of the clinical team with certain responsibilities, as well as the opportunity for a broad range of clinical experiences. It is hoped that each student will come away from this clerkship with an understanding and appreciation of the role of the obstetrician/gynecologist as a primary health care provider for women; the importance of the gynecologic history and physical examination in the overall assessment of the health of women; and the importance of competent obstetrical care in public health and preventive medicine.

Gynecology

**** All students participating in an obstetric or gynecological operative procedure, must meet the patient pre-operatively and must be included on the patient's consent form.**

Inpatient Service

Students will be assigned patients by the Chief Resident and/or Attending on the service. Assignment will vary according to the number and diagnoses of patients admitted. Students are expected to perform a complete history and physical examination on their assigned patients admitted directly from the clinic or ER to the floor; patients admitted via the operating room should have brief history and physical examinations performed prior to surgery in the pre-operative evaluation area. *The breast and pelvic exam should always be performed concurrently with a resident/attending/nurse midwife or nurse practitioner AND a nurse/nursing assistant chaperone.* At times the pelvic exam will be deferred to the OR, at which time an exam under anesthesia (EUA) should be performed. Students should follow their assigned patients throughout their hospital course and scrub on any surgical procedures performed. Students should assist the resident in evaluation and management of the patients, which includes seeing the patient pre-rounds, presentation of the patient at morning and evening rounds, and writing progress notes. Students may also be asked to assist with consults from other services or the emergency department.

Operating Room

The student is expected to scrub on surgical procedures performed on his/her assigned patients. In addition, the Chief Resident or Attending may assign the student to other inpatient or outpatient operative cases. The student should remind the Chief Resident of the need for some variety in cases and his/her learning goals. Feel free to share your OASIS Clinical Experience guidelines with your chief so that he/she can help you meet your clinical experience objectives. Please make clear your willingness to participate in elective abortions - participation is *not* required.

Obstetrics

**** All students participating in an obstetric or gynecological operative procedure, must meet the patient pre-operatively and must be included on the patient's consent form.**

Inpatient Service/Labor and Delivery

Students will be assigned to patients in L&D or on the antepartum floor by the Chief Resident and/or Attending on the service. Students are expected to perform a history and physical examination on their assigned patients and follow them throughout labor, delivery and the post-partum period where possible. *The breast and pelvic exam should always be performed concurrently with a resident/attending/nurse midwife or nurse practitioner AND a nurse/nursing assistant chaperone.* Responsibilities include following assigned patients as outlined above, assisting in deliveries and operations, and assisting the residents in evaluation of patients in L&D, triage and on the floor.

On a daily basis, responsibilities include seeing assigned patients on work rounds, presentation of patients at formal rounds, and writing progress notes.

Ambulatory Care Longitudinal Preceptorship

Ambulatory clinical experience is extremely important in developing a broad clinical base in obstetrics and gynecology. Students will be assigned to a preceptor at an ambulatory care site. Depending on the preceptor and student's schedule, expect to spend 4 – 6 half days with your preceptor during an eight week clerkship. Please email your preceptor during week 1 to confirm dates and times. *All breast and pelvic exams must be performed under supervision of a resident/attending/nurse midwife or nurse practitioner AND a nurse/nursing assistant chaperone.* All student notes should be reviewed and countersigned. Each site has its own ambulatory requirements and processes, and should be discussed with the preceptor at the first session. Be sure to introduce yourself to clinic personnel. Student level of involvement with increase developmentally throughout the quarter. If you are ready to increase your level of involvement, be sure to have this discussion with the preceptor outside the patient's room. It is always a good idea to arrive a few minutes early to review the patient schedule for the day and discuss your learning goals for the session with your preceptor.

Selectives

Students are assigned to 2 two-week selectives which focus on subspecialty experiences within Women's Health. Each selective is administered by a Selective Director in that specialty, and students are provided with a short syllabus and schedule unique to that selective/site. Be sure to introduce yourself

to your preceptor and clinic personnel upon arrival at all venues. Student involvement—shadowing, interviewing/examining/presenting/educating patients, medical documentation, and procedures—will depend on patient population, medical student scope of practice/ability, and preceptor preference. If you are ready to increase your level of involvement, be sure to have this discussion with the preceptor outside the patient's room. It is always a good idea to arrive a few minutes early to review the patient schedule for the day and discuss your learning goals for the session with your preceptor.

General Clinical Considerations

1. All orders written by students must be co-signed by a resident or attending prior to execution. It is the responsibility of the student, not the nurse or unit clerk, to notify the provider that a signature is pending.
2. The student should not perform any independent procedures without the presence of a resident or attending. Blood draws or IV starts may be supervised by nursing personnel.
3. The breast and pelvic exam should always be performed concurrently and in the presence of a resident or attending or nurse midwife/practitioner, *AND* nursing staff.
4. Call Rooms/Lockers:
 - a. JHH:
 - ❖ Located 1st floor off Lobby in Doctor's Lounge.
 - ❖ Located for obstetric students on Zayed 8E in the resident/student call room suite and L&D locker room.
 - ❖ Located for gynecologic students in Weinberg OR Locker rooms.
 - b. JHBMC:
 - ❖ Room 01-1358 (located next to medical records on the first floor). Badge swipe gets you in.
 - ❖ Lockers assigned to medical students in the L&D locker rooms.
 - c. Sinai
 - ❖ Located at the end of the Maternal Fetal Medicine Division hallway; not far from L & D.
 - ❖ Use your Sinai student badge to access the call room.
 - ❖ Lockers near double doors to L & D. Once you use your badge to access hallway, female locker room is the first door on the left, male locker room is the third door on the left.
 - d. GBMC
 - ❖ Personal items can be placed in the residents' work room. Use your GBMC badge, only residents and medical students have access to this room.

Selective Short Topic Presentation

Students should expect to prepare two short presentations during the clerkship, one required for each selective. On selectives, topics may be assigned/ negotiated with preceptors.

1. 10-15 minutes long, informal.
2. Topic – obstetric or gynecologic, may be related to a specific patient or tailored to the student's area of interest in medicine, and tied to your selective.
3. Presented to your clinical team (medical students, residents, faculty, nursing as available).
4. Handouts/PowerPoint optional.
5. Evaluation to be completed by faculty member or chief resident present (provide senior team member with copy of evaluation prior to beginning your presentation; may review with evaluator following presentation; faculty/chief should fax to Rebecca Slattery when completed).
6. Suggest student review grading sheet prior to preparation.

Recommended Texts/Resources:

“Essentials of Obstetrics and Gynecology”

Edition 5e

Editors: Hacker, Gambone, Hobel

“Obstetrics and Gynecology”

Edition 7e

Editors: Charles Beckman, et. al.

ACOG Practice Bulletins and Committee Opinions

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