Post CSCST Training in

OBSTETRICS & GYNAECOLOGY
Advanced Gynaecological Surgery
This curriculum of training in Advanced Gynaecological Surgery was developed in 2017 and undergoes an annual review by Donal Brennan /Noreen Gleeson, Subject matter Experts, Dr Ann O’Shaughnessy, Head of Education, Innovation & Research and by the Obstetrics and Gynaecology Training Committee. The curriculum is approved by the Faculty of Obstetrics & Gynaecology.

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Introduction

This post CSCST Fellowship in the sub specialty of Advanced Gynaecological Surgery provides special interest training in hysterectomy, laparoscopy and benign open gynaecological surgery. Following completion of this programme the trainee should be able to choose the most appropriate care pathway for the patient following acquisition of hysteroscopic, laparoscopic and benign open gynaecological surgery skills. The trainee should also know when to refer more complex cases. A simulation course in minimally invasive surgery should be completed prior to commencing this module.

Specifically once trained the Fellow should:

- be clinically competent and confident in all aspects of assessment of patients for major gynaecological surgery
- be able to select and counsel appropriate patients for laparoscopic, hysteroscopic or open surgery
- be clinically competent in performing abdominal hysterectomy with and without oophorectomy for benign disease.
- be clinically competent in performing surgery to the ovary, including post-hysterectomy oophorectomy
- be clinically competent in performing other appropriate abdominal procedures, including adhesiolysis
- be clinically competent in laparoscopy skills, including laparoscopic hysterectomy and laparoscopically assisted vaginal hysterectomy in uncomplicated cases.
- have a thorough understanding of complications of surgery, how to manage them and when to involve other specialists
- be able to undertake and use clinical audit
- be able to write evidence-based guidelines
- be aware of the limits of their skills and to refer patients to appropriate colleagues as necessary
- Requirements: At least 3 surgical sessions per week
- 2 surgical audits must be undertaken during the module
- Module may be delivered in more than one unit.

Entry Requirements

Applicants for the Post CSCST Fellowship in Advanced Gynaecological Surgery will have successfully completed the RCPI Higher Specialist Training programme in Obstetrics and Gynaecology within two years of the start date of the Post CSCST Fellowship programme.

Prior experience in Advanced Gynaecological Surgery during Obstetrics and Gynaecology training would be an advantage.

Recruitment and Selection

Post CSCST Fellowship training in Advanced Gynaecological Surgery will build on broad basic and early core specialist training in Obstetrics and Gynaecology. This is in line with training models internationally. Selection of candidates for Post CSCST Fellowship training in Advanced Gynaecological Surgery will be via a competitive recruitment process coordinated by the relevant Training Body. Recruitment will follow similar timeline where possible to HST recruitment and post will commence in July of each year (unless otherwise specified).

Duration and Organisation of Training

The Post CSCST Fellowship in Advanced Gynaecological Surgery is a one year training programme designed to dovetail with the Irish Higher Specialist Training programme in Obstetrics and Gynaecology. The curriculum is competency-based, however it is anticipated that the candidate will complete training within one year.
The curriculum takes into account the major areas of competence required by the subspecialist in Advanced Gynaecological Surgery and will be supervised by the Faculty of Obstetrics and Gynaecology of the Royal College of Physicians in Ireland. Doctors who have successfully completed the RCPI Higher Specialist Training programme in Obstetrics and Gynaecology and are within two years of completion will be deemed eligible to apply for the Post CSCST Fellowship in Advanced Gynaecological Surgery. Completion of this program will ensure the knowledge and competencies in all areas of the curriculum, meeting international standards for best practice and allowing candidates to practice as a subspecialist in Advanced Gynaecological Surgery.

Training Programme

The training programme offered will provide opportunities to fulfil all the requirements of the curriculum of training for Advanced Gynaecological Surgery in approved training hospitals. Each post within the programme will have a named trainer/educational supervisor and the programme will be under the direction of the National Specialty Director in Obstetrics and Gynaecology.

Trainee Numbers

It is expected that the Post CSCST Fellowship in Advanced Gynaecological Surgery will be awarded to one candidate per year.

ePortfolio

The trainee will be required to keep their ePortfolio up to date and maintained throughout their Fellowship training. The ePortfolio will be countersigned as appropriate by the Trainer to confirm the satisfactory fulfilment of the required training experience and the acquisition of the competencies set out in the Curriculum. This will remain the property of the Trainee and must be produced at the end of year Evaluation meeting. At the end of year Evaluation, the ePortfolio will be examined. The results of any assessments and reports by the named trainer/educational supervisor, together with other material capable of confirming the trainee’s achievements, will be reviewed.

Programme Management

- Coordination of the training programme will lie with the Medical Training Department.
- The training year will usually run from July to July in line with HST programmes.
- Annual evaluations will usually take place between April and June each year.
- Each trainee will be registered to the ePortfolio and will be expected to fulfil all requirements relating to the management of yearly training records.
- Opportunities for audit and research may be available.
- Each trainee will be issued with a training agreement on appointment to the training programme and will be required to adhere to all policies and procedures relating to Post CSCST Fellowships.
Specialty Section
Open benign gynaecological surgery

Objective: To understand and demonstrate knowledge, skills and attitudes in relation to open abdominal gynaecological surgery.

Knowledge

- Understand the anatomy and innervation of the genital tract
- Knowledge of equipment, instrumentation and theatre set-up
- Understand the principles of diathermy
- Awareness of potential risks and complications of abdominal surgery (including anaesthesia)
- Understand the principles and management of major haemorrhage
- Knowledge of emergency hysterectomy procedures, complications and risks

Skills

- Appropriate selection of patients appropriately for abdominal surgery
- To perform:
  - abdominal hysterectomy +/- bilateral salpingo-ooophorectomy (BSO)
  - oophorectomy ovarian cystectomy
  - myomectomy
- Adhesiolysis drainage of pelvic abscess post-hysterectomy oophorectomy
- Be able to identify the ureter
- Be able to identify the internal iliac artery
- Control major haemorrhage
- Recognise damage to bowel and bladder and be aware of repair procedures
- Recognise intraoperative complications and management
- Management of postoperative complications
- Awareness of clinical scenarios where emergency hysterectomy is necessary
- To provide counselling regarding the options for the management of benign gynaecological conditions, provide counselling regarding abdominal surgery, complications and alternatives
- Awareness of long-term complications of abdominal surgery

Assessment and Learning

- Observation of techniques and then practice with assistance from supervisor
  - hysterectomy
  - opening and closing abdomen using vertical incision
- Audit of cases
- OSATS:
  - Hysterectomy
  - Opening and closing the abdomen using vertical incision
- Log of cases: TAH +/- BSO x 20 (minimum) at level 5 Competence. (No OSATS until 10 completed)
- Minimum of five cases of:
  - oophorectomy
  - ovarian cystectomy
  - myomectomy
  - adhesiolysis
  - drainage of pelvic abscess
  - post-hysterectomy oophorectomy
Laparoscopic benign abdominal surgery

Objective: To understand and demonstrate knowledge, skills and attitudes in relation to laparoscopic abdominal and gynaecological surgery.

Knowledge

- Anatomy of the abdomen, female genital tract, bladder, ureters and lower bowel
- Knowledge of laparoscopic equipment and theatre set-up
- The principles of safe use of energy sources
- Knowledge of safe entry techniques and port site problems
- Knowledge of potential risks and complications specific to laparoscopic surgery (including anaesthesia)
- Knowledge of the contribution of preoperative investigations, particularly CA125 and transvaginal ultrasound scan findings
- Knowledge of the pathological processes involved in ovarian disease and endometriosis

Skills

- Set up laparoscopic equipment, the theatre environment, patient positioning, optimisation and recording of images
- Proficiency in Veress needle, Hasson direct and Palmer’s point entry techniques
- Position and safe insertion of secondary ports
- Assess peritoneal cavity including ureteric visualisation
- Proficiency in safe tissue handling with laparoscopic instruments, sharp and blunt dissection
- Correct use of various haemostatic techniques
- Provide counselling regarding benefits, risks and alternatives to laparoscopic surgery
- Recognition of the limitations of their operative laparoscopic surgery skills
- Ability to select patients appropriately for operative laparoscopy
- Correct use of tissue retrieval techniques
- Perform laparoscopic suturing
- Checks for bladder and bowel integrity
- Be able to recognise intraoperative complications and manage them, including when to convert to an open procedure
- Be able to recognise delayed-onset complications
- Proficiency in the performance of adhesiolysis
- Proficiency in the performance of ovarian cystectomy and oophorectomy
- Proficiency in the performance of excision and ablation of peritoneal endometriosis and ovarian endometrioma
- Proficiency in the laparoscopically assisted vaginal hysterectomy and laparoscopic hysterectomy

Assessment and Learning

- OSATS: Operative laparoscopy (do not introduce until at least 10 have been performed, then commence logbook)
- Case logbook:
  - Adhesiolysis x 10(min)
  - Ovarian cystectomy and oophorectomy x 10(min)
  - excision and ablation of peritoneal endometriosis and ovarian endometrioma x 10(min)
  - laparoscopically assisted vaginal hysterectomy and laparoscopic hysterectomy x 10(min)
Hysteroscopic benign surgery

Objectives: The safe use of hysteroscopic surgery for benign surgical conditions

Knowledge

- Knowledge of instruments
- Principles of safe use of energy sources; distension media
- Knowledge of
  - potential complications
  - methods of endometrial preparation
  - outpatient/office methods of diagnosis and treatment

Skills

- Ability to:
  - perform first-generation endometrial ablation
  - transcervical resection of the endometrium
  - (TCRE)/transcervical resection of fibroid (TCRF)
  - resect submucous fibroids grade 0–2
  - resect intrauterine adhesions/septum
  - Ability to manage difficult cervical dilatation
- Use of the loop ball, Collins knife and bipolar electrodes
- Manage complications intra- and postoperatively
- Provide counselling regarding hysteroscopic surgery, complications and alternatives
- Ability to perform hysteroscopic procedures in a fluent and safe manner
- Demonstration of safe use of electro-surgery
- Demonstration of safe hysteroscopic fluid management

Assessment and Learning

- OSATS: Operative hysteroscopy (do not introduce until at least 10 have been performed, then commence logbook)
- Record of cases:
  - first-generation endometrial ablation / transcervical resection of the endometrium / (TCRE)/transcervical resection of fibroid (TCRF) x 20(min)
  - resect submucous fibroids grade 0–2 x 5(min)
  - resect intrauterine adhesions/septum x 5(min)
Diagnostic Hysteroscopy - outpatient setting

Objectives: The safe use of hysteroscopic surgery in diagnosis

Knowledge

- Knowledge of instruments
- Principles of safe use of energy sources; distension media
- Knowledge of
  - potential complications
  - methods of endometrial preparation
  - outpatient/office methods of diagnosis and treatment

Skills

- Ability to manage difficult cervical dilatation
- Manage complications intra- and postoperatively

Assessment and Learning

OSATS
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 specialty coordinator.

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<th>Minimum Requirement</th>
<th>Reporting Period</th>
<th>Form Name</th>
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<td><strong>Section 1 - Training Plan</strong></td>
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<td><strong>Personal Goals Plan</strong> (Copy of agreed Training Plan for the module signed by both Trainee &amp; Trainer)</td>
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<td><strong>Benign Gynaecological Surgery Sessions (Min 3 per week)</strong></td>
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<td>First generation endometrial ablation/TRCE/TRCF</td>
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<td>Resect submucous fibroids grade 0-2</td>
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