Discipline of Obstetrics & Gynecology

Colposcopy (CanMeds Format)

Rotation Objectives
Colposcopy Objectives

Introduction

Colposcopy is an important step in the detection and treatment of pre-malignant and malignant disease of the lower genital tract. It also requires the knowledge of benign disease of the lower genital tract including dermatological conditions as well as solid and cystic lesions. To obtain the necessary skills to competently perform colposcopy takes time and exposure to a sufficient number and variety of clinical cases under the supervision of an experienced preceptor(s).

The colposcopy rotation consists of a three-month clinical rotation taken between PVG I-V. The learner is expected to keep a record of the clinical encounters undertaken during the rotation and to correlate the findings with subsequent pathology findings. The logbook should be returned to the program upon completion of the rotation for review and security of patient information.

A minimum of 100 new patient encounters should be logged, of which at least 30 should be for investigation of HSIL. Each trainee should perform a minimum of 10 procedures in a given treatment modality including LEEP, Cryotherapy and/or LASER. Each learner should review the current guidelines for the management and treatment of abnormal cervical cytology and the suggested reference material for the rotation. It is also important to realize that the field of HPV related disease is quickly evolving and continuing medical education in this area is necessary for life-long competence. Trainees would be required to perform an online colposcopy examination administered by the ASCCP at the beginning of their rotation and again at the end of the rotation to help assess their progress.


Overview of Objectives

Although the Society of Obstetrics and Gynecologists of Canada (SOGC) have published guidelines for training requirements for colposcopy, the current format does not adhere to CanMEDS goals related to competency-based assessment. The following is a brief overview of objectives for our colposcopy rotation, as set out in the framework outlined by the Royal College of Physicians and Surgeons of Canada. Further modification will be forthcoming when CanMEDS 2015 is finally adopted.
MEDICAL EXPERT

As Medical Experts, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of high-quality and safe patient-centered care. Medical Expert is the central physician Role in the CanMEDS framework and defines the physician’s clinical scope of practice.

Knowledge

The resident will have an understanding of:

- The structure and rationale for the Cervical Screening Guidelines for Newfoundland and Labrador and how this program may differ from other provinces.
- The anatomy of the lower genital tract including embryology.
- The principles of colposcopy, including its limitations and the indications for referral for colposcopic assessment.
- How to identify the colposcopic features of pre-cancerous and cancerous lesions of the lower genital tract.
- The relationship between Cytology and Histology in lower genital tract disease.
- The natural history and biology of HPV related disease of the lower genital tract.
- The natural history and pathophysiology of inflammatory skin conditions of the lower genital tract.
- ISSVD classification of vulvar pain/vulvodynia.
- Diagnosis and treatment of common lower genital tract infections.

Technical skills

The resident will gain some experience with these skills during their Colposcopy rotation, as well as during their Gynecologic-oncology rotation:

- Cervical cytology
- Vulvar and vaginal biopsy
- Wide local excision of vulvar lesions for diagnosis and treatment
- Colposcopy with directed cervical biopsy (including LEEP, LETZ)
- Ablative methods including Cryotherapy, CO2 LASER
- Cervical polypectomy
- Endocervical curettage
- Endometrial biopsy
**Data Gathering**

The resident should be able to:

- Obtain a complete history including a sexual history, as well as vulvar pain / vulvodynia when appropriate
- Conduct an appropriate colposcopic assessment and document using current terminology and guidelines

**Communicator**

As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter. In this regard, the resident should demonstrate the ability to:

- Elicit the trust and cooperation of the patient needing colposcopy, taking time to listen to concerns and answer questions.
- Be sensitive to the emotional and psychological effects for HPV related disease.
- Explain clearly the risk, benefits of all potential management strategies.
- Use appropriate communication skills when interacting with clinic administrative staff and other members of the multidisciplinary health care team.
- Document the encounter in a clear and timely manner.

**Collaborator**

As Collaborators, physicians effectively work within a healthcare team to achieve optimal patient care. As an effective collaborator, the resident should be able to:

- Identify the role of the various health care team members and recognize their contribution to colposcopy care.
- Know when to engage with other members of the health care team regarding patient care (Family physician, Dermatologist, Pathologist, Community Health, Social Work . . .)

**Manager**

As Managers, physicians are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system. The resident should demonstrate the ability to:

- Assess patients in an efficient manner in the ambulatory clinics.
- Determine appropriate investigations for diagnosis of the common problems seen in a colposcopy clinic setting
• Demonstrate appropriate utilization of health professionals and resources.
• Coordinate ambulatory patient care including communication with consulting services, follow up of investigations, responding to patient/family queries and timely completion of health records.

**Health Advocate**

As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations. In this regard the resident should be able to:

• Appreciate the socio-economic influences on cervical screening, STI screening, follow-up, treatment options and outcomes.
• Understand the importance of disease prevention in the community and methods to achieve this (HPV vaccine, smoking, safer sex).
• Identify the important determinants of health affecting patients and contribute effectively to improved health of patients and communities.
• Recognize and respond to those issues where advocacy is appropriate.

**Scholar**

As Scholars, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of medical knowledge. During this rotation, the resident will demonstrate the ability to:

• Read and critically appraise the current literature, including current guidelines on the screening and management of lower genital tract disease.
• Assist the learning of patients and their families.
• Assist the learning of medical students on rotation.
• Maintain a log of patient encounters with colposcopic impression and correlation with biopsy results.
• Make use of the suggested reading material.

**Professional**

As Professionals, physicians are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour. The resident will be expected to:

• Participate in the management of patients in the clinic.
• Demonstrate the ability to communicate with attending staff and request assistance in patient management when appropriate.
• Consult ancillary services when required to enhance patient care.
- Develop an individual learning plan with regards to the ever-changing topic of lower genital tract disease, with assistance of the attending staff.
- The resident should be aware of the medico-legal issues and ethical issues with respect to patient confidentiality.
- Be familiar with some of the common ethical issues that arise from investigation and treatment of lower genital tract disease, including but not limited to reportable infectious disease.
- Complete Health Records in a timely manner.