

PGY-3 Rotation Descriptions

Female Pelvic Medicine & Reconstructive Surgery (FPMRS)

The rotation consists of 1 month spent learning FPMRS on the urology service. The goals of the rotation are: to build on previously attained gynecologic surgery skills, perform a urogynecologic history, participate in performing a urogynecologic physical exam (including POP-Q), solidify knowledge of pelvic anatomy, recognize, diagnose and initiate management of pelvic floor pathology, counsel patients regarding the etiology, progression and treatment options for pelvic floor dysfunction including risks, benefits and expected outcomes, describe and begin to participate in pelvic floor reconstruction and anti-incontinence procedures, learn when referral to subspecialist FPMRS care is appropriate, and participate in managing advanced perioperative care and planning for FPMRS patients.

Gynecologic Oncology at University of Texas Health Science Center San Antonio (UTHSCSA)

This rotation provides the opportunity for the resident to participate in comprehensive team-based gynecologic oncology care. The exposure to gynecologic oncology outpatient and inpatient care is critical, given the fact that generalist ob/gyn physicians are often primarily responsible for providing evidence-based and patient-centered education, screening, and risk-reduction; treatment of many premalignant conditions; emergent care for gynecologic oncology patients; primary, gynecologic, and obstetric care throughout the lifecycle for women impacted by gynecologic malignancies; determining when referral to a gynecologic oncologist is appropriate; and working with gynecologic oncology teams to manage comprehensive care. Gynecologic oncology patients are often medically complex and exposure to their intensive inpatient management supplements residents' critical care, wound management, and general medicine inpatient skillset. UTRGV residents are also responsible for understanding disparities in care and outcomes related to gynecologic malignancies as they pertain to the population of the Rio Grande Valley and other vulnerable and underserved populations, and for considering strategies for improving access and care for these populations.

Through this rotation, the resident will: broaden and deepen their knowledge in the area of gynecologic oncology, fine-tune their physical exam skills, increase competency performing procedures expected in gynecologic specialty practice and assisting in complex gynecologic oncology surgery, strengthen their knowledge base in perioperative and inpatient care, become a more effective member of interdisciplinary care teams, and advance their teaching skills through interactions with more junior learners and peers.

Gynecologic Oncology (DHR)

Much of the improvement in the survival of women with gynecologic cancer can be attributed to more reliable screening techniques and an enhanced awareness of early symptoms on the part of both physicians and patients. Because the distinction between a precursor lesion and its malignant counterpart is often subtle, knowledge of both premalignant and malignant lesions of the reproductive tract is necessary. The treatment—whether surgical, radiologic, or chemotherapeutic—of a particular patient may or may not fall to the practicing general gynecologist, but s/he is expected to provide

education, counseling, and follow-up for these patients. To do so, the resident physician must possess a basic understanding of the principles underlying radiation therapy, chemotherapy and terminal care.

The goals of the rotation are: to build on previously attained gynecologic surgery skills; perform a history and physical exam pertinent to the common diagnoses cared for by gynecologic oncologists; solidify knowledge of relevant anatomy; solidify understanding of the appropriate diagnostic evaluation, treatment, and follow-up of common gynecologic malignancies; learn when subspecialist referral to gynecologic oncology is appropriate; describe in detail staging of common gynecologic malignancies, and participate in the management of perioperative care and planning for gynecologic oncology patients.

Gynecology

This rotation aims to provide an initial senior resident experience in gynecology, allowing the resident to establish foundations in hysterectomy and robotic surgery, expand knowledge in perioperative care, and gain an introduction to more complex gynecologic issues, such as pediatric gynecology.

Obstetrics Night Float (OB-N)

This three-month (nonconsecutive) rotation aims to provide the resident with an initial ob/gyn service chief experience, focusing on the management of acute obstetric and gynecologic care, obstetric and gynecologic complications, and exposure to urgent and emergent procedures.

Obstetrics Days Chief Resident (OB-D)

This two-month (nonconsecutive) rotation allows the resident to serve as leader of the obstetrics team and gain significant experience supervising, managing, and educating a team of more junior trainees while overseeing care for a large obstetric service.

PGY-3 Selectives (2 weeks)