

Academic Support Network
Student Suggestion Sheet
Obstetrics and Gynecology

Overview: The rotation in Obstetrics and Gynecology is often looked upon as being one of two things-completely amazing or downright torture. For most students, it can be quite enjoyable. The rotation consists of 6 weeks of clinical work, broken up into obstetrics, outpatient clinic, and gynecologic surgery. The amount of time spent in each of these disciplines varies by hospital site. The grading of the rotation is broken down into clinical score (2/3) based on resident and attending evaluations, and the shelf exam (1/3).

It can be a demanding rotation, and one must learn to cope with the myriad of emotions expressed not only by patients, but also by their families, the residents you work with, and any ancillary staff.

MUST DO #1: Go into the rotation with open eyes and ears. Try to truly learn OB/GYN and understand what it means to provide prenatal care, deliver a baby, deal with female-related cancer, diagnose STDs, and perform a solid pelvic exam. There is a saying that “one likes what one knows.” Treat this rotation as one where you explore what it really is, until you know as much as you can, and then decide if you like it. You must fulfill the rotation regardless, so get the most out of it.

MUST DO #2: PLAN, PLAN, and PLAN your studying. You will be busy, you will be taking call, and you will be frustrated at times. Devise a study plan that allows for reading time often. You can either base your reading on what you are seeing day in and day out, or you can simply read a book cover to cover. The point is that you will need a textbook. There are no shortcuts to getting through clerkships; you must put in the work.

In regards to texts to use, the Department of OB/GYN recommends Beckman. It appears to be a fairly large book, but is quite easy to read. The common alternative is Blue Prints, which is OK but tends to be short on description. In the end, the main points are covered very similarly in both texts. Take time to read a little each night. Focus on the common things you see day in and day out, as they are also what tend to show up on the exams.

Once you have feel you have a good grasp of basic OB/GYN, a question book is a good idea so that you can start applying your newfound knowledge with clinical case scenarios. There are many to choose from, but Blueprints Clinical Cases and Pre-Test are the most commonly seen. Appleton and Lange also is a good MCQ source. **DO NOT THINK YOU WILL PASS THE TEST SIMPLY BY DOING QUESTIONS!!!**

Now that you have an idea of how you should study, let us touch upon what tends to be important. **Warning:** The following is not intended to depict all you need to know and should not be interpreted as such. It is merely recommendations of what to know well, but does not exclude other material. However, rest assured that learning by doing is the most efficient way of covering ground in this rotation. Seek out the opportunities to practice skills and be involved in patient care. Oh yeah, and know your anatomy!

- Clinical Portion:
 - *Labor and Delivery:* you will be expected to follow several patients from when they are admitted, through delivery, and until they are discharged from the hospital. As always, your History and Physical are the most important aspects of what you do. Understand the previous birth history, learn to love writing G.P.... for each patient. Understand the significance of age, past pregnancies, abortions (various types), complications, duration of past labor, surgeries, medications, social history (including ETOH, illicit drug use, tobacco), and non-obstetrical

- health history. Ask about all those things, as well as the status of children from previous pregnancies. Learn how to assess stages of labor. During delivery, understand and practice proper positioning of patient, maneuvers of delivery, and exam immediately after delivery. Also be familiar with importance of examining the cord and placenta. Understand C-sections. Finally, you are essentially responsible for two lives. Understand the common risks and complications associated with pre-term labor, prolonged labor, and premature rupture of membranes of varying duration, placental abnormalities intra-uterine, and hemorrhage. Be familiar with what the monitoring includes—namely tocometer and fetal strip. Be aware of tocolytic medications, their uses, and side effects.
- *General OB/Gyn Clinic*: This portion varies greatly between sites. You will be exposed to obstetric visits, general yearly pelvic exams and PAP smears, STD clinic, abnormal menstrual cycles, and any types of pre-cancerous and cancerous conditions. Your most important duty once again is History and Physical. Learn to ask pertinent questions regarding general genito-pelvic health in women of every age group. Understand the risks those age groups face, and know the common illnesses or conditions those age groups are susceptible to. Be proficient in both PAP smears and bi-manual pelvic exams. Learn to properly screen for breast cancer. Understand birth control options, risk, benefits, and contraindications. Know common STDs, their symptoms, diagnosis, treatment (if possible).
 - *Gyne Surgery*: This portion focuses on many different conditions. Common areas include tubal ligation, hysterectomy, ovarian cysts, fibroids, endometriosis, incontinence and pelvic floor instability; etc...Again, History and Physical will give you the most information. Learn to evaluate any imaging performed. Understand surgical indications, as well as procedures and pathologic samples. Be aware of follow up requirements post-operatively.
 - Shelf Exam: 100 multiple-choice questions. Invariably, nearly each question will start with something like “A xx year-old, G.P.... female presents with...”. Get used to it, thus do plenty of practice questions. By this time, you have read a text and are familiar with most things. It is now up to you to fine-tune and review high yield points. These tests are notorious for throwing some curveballs, and often test your ability to take a test as much as your knowledge related to the clerkship. Focus on the topics discussed above, as the clinical experience guides the shelf exam.
 - Memorize the specifics of the menstrual cycle, alterations to it, and how to treat it; a review of Physiology from the Spring semester with all the involved hormones might be helpful to you. Memorize varying birth control options and their contraindications. Memorize important numbers in fetal monitoring, stages of labor. Memorize the common teratogens and their effects. Know the various types of cancers (ovarian, uterine, cervical, breast) and how to diagnose and/or treat them. Also know how to differentiate masses in the breast which are benign from those that might be malignant and a differential diagnosis of breast tenderness. Know the common causes of amenorrhea and how to work that up.
 - In regards to the test itself, pace your time. The last 15 or so questions tend to be longer, so it may benefit you to do those first. Do not spend too much time on difficult questions; move on if you do not know the answer. Answer all questions.

GOOD LUCK!