CORE CLINICAL CLERKSHIP IN OBSTETRICS & GYNECOLOGY

Information for Students at HUP 2014

Course Director:  Ann Honebrink, MD
honebria@pahosp.com

Associate Course Director:  Holly Cummings, MD
holly.cummings@uphs.upenn.edu

Coordinator:  Roslyn Levit
rlevit@obgyn.upenn.edu
215 662-2459

WELCOME TO OB GYN AT HUP!
I. GENERAL INFORMATION

Welcome to the Clinical Clerkship in Obstetrics and Gynecology at HUP! We hope you have an excellent educational experience and please let us know if you have additional questions after reviewing the information included in this document and the syllabus.

Each student is assigned to in-patient clinical experiences on the obstetrical service, gynecology or gyn oncology service and ambulatory experiences in the Dicken’s Center for Women and our subspecialty practices. Students are excused from clinical responsibilities on Memorial Day, Labor Day and Thanksgiving (Wed at 5 pm until Mon at 6 am). Students should expect to work some nights and weekends during the clerkship.

Each student will also have 1 “learning week” during which time you are expected to attend conferences, Grand Rounds, Friday didactic sessions, 2-3 Ambulatory clinics and small group discussions with the Course Directors and a faculty preceptor. You will also have time for self study free from clinical assignments and conferences.

Students are expected to follow this schedule and changes must be pre-approved by the Course Director. If you are sick or have a family emergency please email Dr. Honebrink and Ms. Levit and be sure to let the chief resident on your assigned service know via text page(can access text pagers for residents at hupobgyn.com web site).

Students are assigned to a small group with a faculty preceptor who will meet with the group at least 4 times during the clerkship for about one hour. During your Learning week the other students assigned to your learning group should attend your preceptor meeting with you. One member of the group should assume responsibility for contacting the faculty preceptor during the 1st week to arrange a time for the group to meet. These sessions are used to review cases, discuss topics, review a journal article; attendance is mandatory and takes precedence over your clinical services- let the residents on your service know you are meeting with your preceptor when this is happening. Your preceptor may also elect to give you an oral exam during the last week of the rotation. If this is done, you will receive cases for study the 5th week of the rotation. The oral exam covers topics you will be
already studying for the shelf and is meant to be a low stress for your preceptor to better evaluate your knowledge.

Students are also expected to attend:

- Weekly conference (generally Tuesday morning weeks 2-6) with Dr. Honebrink or Cummings. Held in Ravdin 7 or Puerce Conference Room (in Ob Gyn Department Offices on 5 Dulles). Ms. Levit will send you an email letting you know where we are scheduled.

- Thursday morning resident didactic lectures, case conferences and Grand Rounds unless they have been on night float the night before. Also, since the residents leave the labor floor for Thursday morning Conferences/Grand Rounds, if you are on labor floor and there are actively laboring patients for you to follow you can stay on the Labor Floor during Thursday am conferences. From time to time the residents meet with their Residency Director during some of Thursday morning conference time and you do not need to attend these conferences- Ms. Levit will let you know if and when this is happening. Resident conferences are generally held in Ravdin 7 and Grand Rounds is held in Hirst Auditorium.

- Service specific conferences occur throughout the week -in general, if the residents on your service are going to a conference, you should too. The hupobgyn.com website generally has the most up to date conference schedule.

- At 8am on the first Tuesday morning of the rotation the Labor and Delivery nurses will orient you to Labor and delivery and the PEC. Everyone should attend this orientation- meet in Ravdin 7 conference room.

II. OVERVIEW OF SERVICES

**NOTE:** Learning objectives, required encounters for clinical rotations and suggested study texts and other materials are listed in the Syllabus which is posted on VC2000. In addition, the Syllabus contains more helpful information. Please READ the Syllabus and refer to it if you have any questions!

There is also an Ob Gyn Student Survival Guide published by the Association of Professors of Gynecology and Obstetrics (APGO) posted on VC2000. You will find more helpful information about how to get the most out of your rotation here.

It is highly recommended that you supplement your clinical experience with reading relevant chapters in one of the recommended textbooks, reference textbooks, ACOG resources and Up to Date.

For all services you can find out who your team is ahead of time by looking at the resident schedule on hupobgyn.com (Left side “2013-2014 Resident blocks”). You can use this to find the name of the PGY4 (or a PGY3 for Gyn-Onc). You can page them using the center of the webpage if you need to find out when rounds are. (Helpful for Gyn and Gyn-Onc because am rounding times vary based on how busy the service is.

**LABOR FLOOR – Ravdin 7**

Your main goals on L&D are:
a. Learn what normal labor and delivery is like by following patients and participating in their deliveries
b. Learn how to recognize and manage common pregnancy complications like preterm labor, preeclampsia and multiple gestations
c. Learn how to “manage” labor- ie when to intervene, when to offer epidural anesthesia, when is a C-section appropriate
d. Participate in C-Sections
e. Follow patients thru their post partum course so you understand what a normal and complicated post partum course is like for both vaginal deliveries and c-sections

- Day begins with rounding on in house patients whose care you are involved, sign-out rounds are at 7:00 am (6:30 on Thursdays) in the multi-purpose room on the Labor Floor; your day ends at 6 pm. You are not required to stay for evening sign-out rounds.

- Wear scrubs

- The OB team covers these services:
  - Labor Floor on Ravdin 7
  - Perinatal Evaluation Center (PEC) on Ravdin 7
  - Post-partum service on Silverstein 8

- The team consists of 4 residents (PGY-4, 3, 2 and 1), 2 OB attending physicians, a midwife (Mon-Fri), a MFM fellow. The PGY-4 is responsible for the service, the PGY-2 runs the LF with assistance from the PGY-3 and the PGY-1 is responsible for the postpartum service and also covers LF.

- The Antepartum Service on Silverstein 7 is covered by the Maternal Fetal Medicine attending, a PGY-3, a PGY-1 and a MFM fellow. There may also be a 300 level student.

- The OB attending on LF and Chief Resident will assign you to a patient or two to follow in labor and attend the delivery, and will assign you to scrub on scheduled C-sections. The midwives are also very happy to take medical students through normal routine vaginal deliveries –try to follow at least one patient with a midwife during your labor floor/night float rotation time.

- When it is not busy on LF you should participate in post-partum rounds and evaluate patients in the PEC.

**NIGHT FLOAT (NF) – Ravdin 7**

- Evening begins at 6 pm with sign-out rounds in the multi-purpose room on the Labor Floor; your day ends at 7 am the following morning. You do not have to stay for morning signout. On Sunday nights, night float begins at 7pm instead of 6pm.

- Wear scrubs.

- Students cover Labor Floor and GYN services with resident night float team. Most of your time will be on LF but you should also go to the ED or OR with the PGY-3, especially if you aren’t following an actively laboring patient.

- Night float team consists of a PGY-4, 3, 2 and 1, and 2 Ob providers (obstetricians, midwives, and MFM fellows). Assignment of patients is same as for Labor Floor.

**WEEKEND CALL SCHEDULE - Labor Floor**

- AM signout on Saturday and Sunday mornings is at 8am. PM signout is at 7pm.
• Wear scrubs.

GYNECOLOGY (GYN) – Silverstein 7

Your main goals on the Gyn and Gyn Onc service are:

a. To scrub on as many surgeries as possible and to understand the patient’s history that brought her to the surgery as well as her post-operative course. Your case assignments will be coordinated with other students on your service by the Chief on the service.

b. When you know your case assignments, it is critical that you read the patient’s chart (it will be accessible to you through Epic).

c. Be sure to round on your patients every day until they leave the hospital.

• Day usually begins at 6:30 am with rounds on Silverstein 7. Students should arrive early to pre-round on patients you operated on or admitted to the Gyn Service. Check daily with the chief resident to see what exact times rounds will begin the next day.

• Wear scrubs and a white coat for morning rounds. On Thursdays the GYN team has pre-op clinic all day so you should dress professionally and wear your white coat.

• The Gyn service is responsible for patients followed in the Dicken’s Center, faculty practices and admitted through the ED. The team operates, performs consults in the ED and in-patient services, and sees patients in Dickens during Pre-op Clinic on Thursdays.

• The senior resident will try to inform you what surgical cases you are assigned to the night before so you can read about the procedure. You can also review the patient’s chart in Epic the night before the surgery. It is a good idea to arrive to the OR 15-20 min prior to surgery to meet the patient. Be sure that you review the chart (available in EPIC) so you know history and indication for surgery. The paper chart is used by many people the morning of surgery.

• You should not scrub on any second trimester termination unless you have already been to the Penn Family Planning and Pregnancy Loss outpatient clinic. If you have a particular interest in this area, please let Dr. Honebrink know early in the rotation. You are also never required to participate in elective pregnancy termination. If you have any questions or concerns about elective pregnancy termination please let Dr. Honebrink know about this as well. As a service, we are respectful of all viewpoints on this complicated issue.

• The Gyn team covers the ED consults during the day. When you are not in the OR, you should see consults with them. Make sure that whoever is carrying the pager has your cell phone so if you are not in surgery they can call you for consults.

• On Thursdays you should attend Pre-op Clinic with the team unless there are floor or ER consults to be seen.

• Day ends with evening rounds at the discretion of the team but you do not need to stay past 8 pm. On some days surgery may extend into the evening; students are not required to stay scrubbed in the OR past 8 pm but are welcome to stay.
GYNECOLOGIC ONCOLOGY (GYN ONC) – Silverstein 7

Your main goals on the Gyn and Gyn Onc service are:

a. To scrub on as many surgeries as possible and to understand the patient’s history that brought her to the or as well as her post operative course. Your case assignments will be coordinated with other students on your service by the Chief on the service.

b. When you know your case assignments, it is critical that you read the patient’s chart (it will be accessible to you through Epic).

c. Be sure to round on your patients every day until they leave the hospital.

- Day generally begins at 6:30 am with rounds on Silverstein 7. Students should arrive early to pre-round on patients in whose cases you were involved. Check daily with the PGY-3 to see what exact times rounds will begin the next day.

- Wear scrubs and a white coat for morning rounds.

- The Gyn Oncology team consists of a PGY-3, 2, 1 and a fellow. Sometimes there is a 300 level student. Patients are admitted for surgery and medical care.

- Students are assigned to OR cases at the discretion of the fellow or resident, and it is always a good idea to ask about next day’s cases so you can read about them and review the patient’s chart in EPIC the night before. Students should arrive to the OR 15-20 min prior to surgery to meet the patient. Be sure to review the patient’s chart in Epic so you know history and indication for surgery.

- Evening rounds are at the discretion of the team but students should be excused by 8 pm. On some days surgery may extend into the evening; students are not required to remain scrubbed in the OR past 8 pm but are welcome to stay.

AMBULATORY PRACTICES (WHERE DO I GO?)

- You will be assigned to a variety of outpatient clinics during the ambulatory and learning weeks your rotation and on the Friday morning of your night float week (week 2-5). Student responsibilities vary by site. You will have the most opportunity to take a history and perform exams in the Dicken’s Center for Women.

- Most morning sessions run from 8:00 to 12 noon except Thursday when students and residents attend didactics from 7:00 to 10:00 am. Urogyn clinic (a common Thursday morning assignment) starts at 9am on Thursday morning and if you are assigned to Thursday morning Urogyn you should leave conference and go at 9am. Double check EPIC and see “Where do I go” for start times and other important information about individual sites.

- Most afternoon sessions run from 1:00 to 5:00 pm except on Thursday when Pre-op clinic begins at 11 am. Colpo Clinic begins 12:45. Double check EPIC for start times.

- You should wear professional attire and your white coat.

- When you arrive please introduce yourself to the attending and/or residents.
• When you are seeing patients with the residents/nurse practitioners in Dickens Clinic, you can update history tabs, medication and allergy tabs in EPIC- this is very helpful!

• When you are attending Fetal Surgery clinic at CHOP PLEASE READ LETTER ABOUT FETAL SURGERY CLINIC ON VC2000 WEBSITE!

WHERE DO I GO? Directions/Information for HUP Out Patent Sites
Most practice sessions run from 8am-12 noon and then from 1pm-5pm, some exceptions are specified below. Please double check epic for start times.

<table>
<thead>
<tr>
<th>Clinic/Practice</th>
<th>Location</th>
<th>Description/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dickens Center for Women</td>
<td>1 West Gates</td>
<td>Prenatal &amp; gynecology care</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hi Risk Clinic</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pre-op clinic</td>
</tr>
<tr>
<td>Dickens Nurse Practitioner (NP)</td>
<td>1 East or West Gates</td>
<td>Prenatal and Gyn Care with Nurse Practitioners</td>
</tr>
<tr>
<td>Clinics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal Fetal Medicine (MFM) Ob</td>
<td>2000 Courtyard</td>
<td>Preconception &amp; prenatal care for women with complex medical conditions, obstetric &amp; fetal problems</td>
</tr>
<tr>
<td>Ultrasound and Antenatal Testing</td>
<td></td>
<td>Observe ultrasounds, learn how to interpret non-stress tests</td>
</tr>
<tr>
<td>Perinatal Diabetes Program</td>
<td>1 West Gates</td>
<td>Learn how to manage diabetes in pregnancy</td>
</tr>
<tr>
<td>Genetic Counselling</td>
<td>5 Dulles</td>
<td>Observe genetic counselors discuss risk for inherited conditions, aneuploidy, screening &amp; testing options. Call Sharon Murrell at 215-662-3232 before 5 pm day before to check schedule</td>
</tr>
<tr>
<td>Penn Family Planning &amp;</td>
<td>1000 Courtyard</td>
<td>Participate in contraceptive counseling, evaluation of pregnancy loss, counseling for reproductive options</td>
</tr>
<tr>
<td>Pregnancy Loss Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colposcopy Clinic</td>
<td>1 West Gates</td>
<td>Learn how to manage abnormal pap smears, see a colposcopy</td>
</tr>
<tr>
<td>Urogynecology</td>
<td>1000 Courtyard</td>
<td>Evaluation of women with incontinence &amp; pelvic floor issues. If assigned on Thursday am, go at 9am.</td>
</tr>
<tr>
<td>Penn Ob/Gyn Associates (POGA)</td>
<td>3701 Market St, 3rd floor</td>
<td>Prenatal and gynecology care</td>
</tr>
<tr>
<td>Penn Health for Women at Radnor</td>
<td>Penn Medicine at Radnor, 2nd Floor, 250 King of Prussia Road Accessible by train(R5) or car*</td>
<td>Multi-disciplinary women’s health care, focus on gynecology &amp; menopause care</td>
</tr>
<tr>
<td>Penn Fertility Care (REI)</td>
<td>3701 Market St., 8th floor</td>
<td>Evaluation &amp; management of infertility, PCOS, IVF</td>
</tr>
<tr>
<td>Location</td>
<td>Details</td>
<td>Contact Information</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>VA Gyn Clinic</td>
<td>7th floor, VA, use the south elevators, follow signs to women's health clinic</td>
<td>Gyn care for female veterans. Attending Dr. Sonya Lee</td>
</tr>
<tr>
<td>HC#3</td>
<td>555 S. 43rd St- need trolley token or good walking shoes!</td>
<td>NP Cara Curley – EITHER PREARRANGE TO MEET HER IN DICKENS OVER LUNCH TIME OR MEET HER AT HC#3 IF YOU DON'T PREARRANGE MEETING, SHE WILL EXPECT YOU TO MEET HER AT HC#3 email:<a href="mailto:cara.curley@uphs.upenn.edu">cara.curley@uphs.upenn.edu</a></td>
</tr>
<tr>
<td>Fetal Surgery</td>
<td>CHOP Special Delivery Conference Room, Clinic follows conference 1pm start</td>
<td>Program for evaluation of pregnancies complicated by fetal anomalies which may be amenable to Fetal Surgery. <strong>SEE LETTER ON VC2000 FROM DR. NAHLA KHALEK BEFORE YOU GO TO CONFERENCE AND CLINIC!</strong></td>
</tr>
</tbody>
</table>

*If driving take 76 west to 476 south to Rte 30 exit then go right on Rte 30, immediate left on King of Prussia Road, Penn Medicine at Radnor on left after Radnor High School. If taking train, from 30th St. take Septa R5 to Radnor, Station is on King of Prussia Road- when you leave the station, turn left on King of Prussia Road(or walk through parking lot to ahead of you after you come under the tracks at the station and then cross King of Prussia Road) and Penn Medicine at Radnor is 1- 1/2 blocks from station, 250 King of Prussia Road ( to your left when facing King of Prussia Road and Station is behind you) – You will walk along the side of the building then see parking lot in front of the building (different from station parking lot) and front entrance to the building. Come to Women’s Health on the second floor and ask for Dr. Honebrink. Office number: 610-902-2500.

**III. EPIC ACCESS (SEE ALSO IX- HUP OBGYN COMPUTER SYSTEM INFORMATION)**

As soon as possible after the beginning of the rotation, please be sure that you have Epic access for the following practices:
16 - Ob Gyn Radnor
33 - Urogyn HUP
35 - OB HUP Dickens
36 - Gyn HUP Dickens
271- Family Planning PFP&PLC, 1000 Courtyard
274 - Gyn 3701
275 - Ob 3701

**Please contact the Epic Help desk if you do not have access- and please let Dr. Honebrink and Helene Weinberg know if the issue isn’t resolved within 24 hrs.**

**Please remember that you should only access the medical records of the patients you are involved in caring for during this rotation.**

**IV. COURSE REQUIREMENTS**
• Written history and physical exam – minimum of 1-you will receive blog invitation for posting in second week of rotation.
  o Complete with all the elements and discussion of differential diagnosis from most to least likely, using history, exam findings, labs and studies, knowledge of natural history, risk factors, etc. Do not recite what is in the textbook. The goal is to show that you can organize a logical history, physical and differential and plan- any patient you have seen can be used for this!
  o Usually due 3rd Monday (SEE BLOG for specific dates). Post your write up on the Mywonderfulwriteup Blog, Dr. Honebrink will notify you if 2nd H&P is required.
  o Comment on 2 of your colleagues (who are not rotating at HUP) by 3rd weds.

• EBM exercise
  o Follow PICO format for Ob Gyn related topic
  o Post question and answer on Mywonderfulwriteup Blog, usually due Monday of 4th week, see blog for more specific dates
  o Post comments on 2 of your colleagues EBM by Wednesday of week 4

• Mini-CEX /Oral presentation cards – 2
  o Found on back of feedback cards.
  o Can do on any service, presented to and must be signed by attending, midwife or resident (see syllabus for more information).
  o Due by last day of Clerkship, can turn in earlier!

• Feedback Cards – 4
  o Try to obtain feedback from a variety of residents, attendings, midwives or nurse practitioners you work with on different services and clinic (see syllabus for more information).
  o Due by last day of clerkship, can turn in earlier.

• Patient Encounter Log
  o Complete on line (see syllabus for instructions).
  o **KEEP IT CURRENT** and let Dr. Honebrink know if you are having a hard time meeting any of the requirements. Remember, this is the **MINIMUM** we expect you to see and do during your time with us!

• Weekly meetings with Dr. Honebrink- all students EXCEPT those on night float should attend, but night float student should consider attending first Tuesday nursing orientation
  o First Tuesday of the rotation you will have orientation to L&D with the labor floor nurses
  o Generally meet at 8 am in the Ravdin 7 or Preucel Conference room on 5 Dulles. Ms Levit will send you an email the first week of the rotation to confirm meeting time/place since this is subject to change.
  o You are expected to present cases you have seen and/or topics you are assigned and discuss any questions that have come up on the rotation.

**V. CONFERENCES**

Conferences are held throughout the week and if you are assigned to a service and the residents are attending the conference you should too. Attendance at Tuesday morning 8am conferences with Dr.
Honebrink/Cummings and Thursday morning conferences/grand rounds from 7 – 10 am is mandatory unless you are on night float. Also, students on Labor Floor can elect to stay on labor floor on Thursday morning if there are actively laboring patients. Check hupobgyn.com for resident conference schedule updates. There are occasionally resident meetings with their Residency director that you do not attend- Roz will let you know when these are happening! During your learning week you will attend additional Case conferences with Dr.Honebrink (generally tues am following weekly HUP student meeting) and Weds am Pennsy Grand Rounds followed by case conference with Dr. Ronner.

I. HUP OBGYN COMPUTER SYSTEMS INFORMATION

There are several different computer systems that are used clinically in our department. Do your best to spend time playing the various systems. Figure out where results are, how to find old records, how to see if labs are received/pending, what medications are active, and how to input H+P info into epic. The more you have your passwords in order and understand the systems the easier you can get involved in patient care on ObGyn and other services in the future.

Please make sure you have logins that work PRIOR to coming to clinics or inpatient floors for:
1) Medview (you use this to log into computers on Silver 7)
2) Sunrise
3) Epic
If you do not have working passwords, please call the Help Desk at 215-662-7474 to get your logins set up prior to your first day.

What all the systems do:
1. **Medview**: can review labs results, radiology results, etc for inpatients and outpatients. You can see scan of old inpatient charts through “medical records□ ewebhealth”
2. **Sunrise**: inpatient order and results system. Place orders, review results for inpatients (these results are also in Medview), make signout documents, and make discharge documents.
3. **Epic**: outpatient systems of orders/notes/lab reviews (if ordered through epic)
   Be sure you have epic access to the following departments:
   - 16 - Ob Gyn Radnor
   - 33 - Urogyn HUP
   - 34 - Family Planning Dickens
   - 35 - OB HUP Dickens
   - 36 - Gyn HUP Dickens
   - 271- Family Planning PFP&PLC, 1000 Courtyard
   - 274 - Gyn 3701
   - 275 - Ob 3701

Please contact the Epic Help desk if you do not have access- and please let Dr. Honebrink and Helene Weinberg know if the issue isn't resolved within 24 hrs.

4. **QS or Centricity**: labor floor system for reviewing tracings. (Password for med students is read-only and written on labor floor).

Lists:
Please set up lists for labor floor, GYN, GYN-ONC, postpartum, antepartum in Sunrise.
File-> maintain list (choose provider “any role” for the GYN list etc. and location under the Silverstein Buildings for all OBGYN locations)

Documents:

- Creating and updating documents is very helpful.
- You may help make discharge documents and update the hospital course, a very helpful task after deliveries or on patients on GYN services.
- Signouts are used to communicate summaries of each patient on the different services. You can always update new labs etc.
- Each service has a different signout document (i.e. Signout HUP, Surgery-OBGYN, postpartum).
- Please download the following acronyms in order to help with documents on labor floor (it will be clear when you are on labor floor how we use these)
  - Preferences □ Acronym Expansion □ Import from Other User □ Colwill, Alyssa
  - find (.pphpi, .pptodo, .ppresults, .pp, .ppnotes, .discharge)

Where to find stuff:
1. Results
   - ALL results no matter where they were ordered are in medview
   - Sunrise for all inpatient lab results
   - Epic has all results ordered through epic
2. Old Records
   - Ewebhealth or OnBase (depending on when they are from), accessed by finding the patient in medview and then connecting through the patient to medical records
   - Op-notes and discharge summaries are both in Epic (usually), or medview under medical records
   - Outpatient notes (including pre-op H&Ps are in epic under encounters)
3. Radiology
   - Can always be found in medview, but also in Sunrise usually for inpatients
4. Fetal heart tracings, vitals on labor floor or in the PEC
   - QS/centricity
5. Vital signs for inpatients (not labor floor or PEC)
   - Sunrise under clinical tab
   - More detail (especially for I/Os can be found under flowsheet, by choosing “intake and outtake” on the left.
6. Active medications
   - Under orders, choose “active” from the dropdown “status/priority

WELCOME TO OUR SERVICE! IF YOU HAVE ANY QUESTIONS, PLEASE ASK US!