

## **GYN Students — What you should know....**

### **General**

1. Do not leave the hospital w/o asking your resident if they need any further help.
2. No one leaves clinic until every pt has been seen.
3. Don't forget to go to CBCs, but if you're in the middle of a cool case, stay to finish.
4. Do not write on MEDICARE or GA MEDICAID charts w/o talking to the resident 1<sup>st</sup>
5. EVERY presentation/note should start: "21-yo G2P1001 w/ IUP @ 12 weeks 1 day by LMP/6 week U/S..."
6. Do not do any pelvic exam/cervix check w/o a resident.
7. Ask the residents the night before which pt(s) they want you to round on or pre-op.
8. Finish your SOAP note at least 15 minutes before rounds so you have time to run it by the resident.
9. Make a copy of the pt you're presenting's H&P and your SOAP note to present during rounds.
10. If there are no "gyn" things going on, take advantage of the opportunity to do OB stuff.
11. **The more you become a part of the team, the more fun stuff you will get to do.**

### **General OR Tips**

1. Pre-op and post-op patients for cases you're involved with, also write the op notes.
2. Post-op notes due ~4-6 hours after end of case for all inpatient surgeries
3. If you're in the OR, keep a pair of gloves on and ask how you can help set up or break down the case.
4. If you don't understand part of the surgery, ask.
5. If you pass out, take a break but then come back. Even attendings pass out some times, it doesn't mean surgery's not for you.
6. Only 1 student at a time should scrub. If you are not in the OR or in clinic, use the time to read.

### **ER recheck**

1. This service is responsible for all floor/ER consults and inpatients admitted through the ER.
2. Offer to return pages or get the paper work of a consult started.

### **ONC**

1. These are big gun attendings. You would do well to read ahead when scrubbing with Benrubi.

### **URO/GYN**

1. Only 1 student at a time should scrub.

### **Clinic**

1. any patient on any hallway is fair game for you to see
2. if you've started to see a patient, you can review that case with any resident you see
3. if you see residents busy and you don't have anything to do, ask if there's something you can help with

### **General Topics to Read**

1. Dysmenorrhea / Pelvic Pain
2. Birth control options and contraindications (breast feeding, med problems, etc).
3. Dysfunctional Uterine Bleeding (DUB)
4. Fibroids
5. Ovarian, Endometrial, Cervical Cancers (and HPV)
6. Pelvic Inflammatory Disease
7. Incontinence

### **Pre-op Note**

If previous H&P more than 30 days old, need to do full H&P

o/w:

S: major complaint inciting need for surgery

O: vitals

Brief exam including general, heart, lungs, abd (with scars), ext

Hgb, and any other labs or imaging related to perioperative morbidity

A/P: 31yo G3P3 with symptomatic pelvic organ prolapse for TVH with A & P repair.

Risks, benefits, alternatives discussed. Consents signed.

Plan for ovaries.

### **Op Note**

Pre-Op Dx:

Post-Op Dx:

Procedure:

Attending:

Residents:

Anesthesia:

IVF:

UOP:

EBL:

Findings:

Specimen:

Complications:

Drains:

Disposition:

### **Post-Op Note**

S: ?pain control, ?voiding, ?ambulating, ? flatus, ?diet

O: vitals

Brief physical including general, heart, lungs, abd (bowel sounds, tenderness), incision (undo dressing POD#1 and leave it undone until resident has seen it), ext (focus on signs of DVT, document SCDs)

Urine output and post op hgb

A/P: 31yo G3P2 POD#1 s/p TAH/BSO LOA for fibroids

1. post op -> doing well, d/c foley, ambulate, incentive spirometry, d/c PCA, advance diet
2. htn -> will restart po meds
3. anemia -> asx, will transfuse if necessary

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### **What is Gynecologic Oncology (Gyn-Onc)?**

Gynecologic Oncology is a subspecialty of Ob-Gyn. The other two Ob-Gyn subspecialties are Maternal Fetal Medicine (High risk Obstetrics, MFM) and Reproductive Medicine (Endocrine and Infertility). Certification in Gyn-Onc requires training and board certification in Ob-Gyn and then 2-4 years of fellowship training in Gyn-Onc. Gynecology Oncologists are involved in the diagnosis, staging, treatment and follow-up of women with cancer of the female reproductive tract. Gynecology Oncologists manage new cancers, recurrences, complications, and end of life care. Unlike other oncology disciplines, Gyn-Onc deals with all treatment modalities in a specialized area rather one modality for the entire body such as Medical Oncology and Radiation Oncology. Gynecology Oncologists are versed in surgery, radiation therapy, and chemotherapy. Most Gynecology Oncologists do not manage breast cancer.

### **What we expect in a week on the Gynecologic Oncology Service:**

At the end of this week you should know what diseases are managed by Gyn-Onc and have some familiarity with gynecology cancer diagnosis, staging, and treatment. Regardless of what area of medicine you eventually go into, we want you to know who to call if you encounter a patient with a suspected gynecology cancer problem. We do not expect you to become an expert in gynecology cancer, but as a result of your experience, we do expect you to become a better physician.

### **Attendings and Residents on the service:**

Division Director: Karl Smith, MD  
Gynecology Oncologist and Ob-Gyn Department Chairman: Guy Benrubi, MD  
Gyn-Onc Chief Resident: PGY4  
Gyn-Onc 2<sup>nd</sup> Year Resident: PGY2

### **Key places at Shands Jacksonville:**

- 3 South - Nursing Unit where most Gyn-Onc patients will be located
- ACC 3<sup>rd</sup> Floor – Clinic location
  - Gyn-Onc clinic meetings are on Thursday 8:30 a.m. until finished (usually about 12:30 p.m.)
  - See patients with a 2<sup>nd</sup>, 3<sup>rd</sup> or 4<sup>th</sup> year resident and present to attending
- Gynecology Infusion Center – 3<sup>rd</sup> Floor Main Hospital
  - Area where outpatient chemotherapy is administered
  - Key nurses: Theresa London, Janice Smith
- Operating Rooms
  - Main OR – Main hospital building, 2<sup>nd</sup> Floor; Tuesday is Main OR day for Oncology
  - L&D OR – Main hospital building, 3<sup>rd</sup> Floor in L&D area
  - Outpatient Surgery Center (OSC) – LRC Building (Faculty Clinic, 1<sup>st</sup> Floor)

## **Learning Objectives:**

### Common Gynecologic Cancers –

- Cervical
  - Be able to recognize normal from abnormal cervix
  - Understand importance of HPV
  - Evaluation of abnormal Pap smears
  - Diagnosis and treatment of cervical dysplasia (cervical intraepithelial neoplasia)
  - Diagnosis, staging and treatment of invasive cervical cancer
  
- Endometrial
  - Who is at risk?
  - Evaluation of postmenopausal uterine bleeding
  - Management of endometrial hyperplasia
  - Diagnosis, staging and treatment of endometrial cancer
  
- Ovarian
  - Know basic types (epithelial, stromal and germ cell)
  - Who is at risk?
  - Understand evaluation process for pelvic masses
  - Diagnosis, staging and treatment of epithelial ovarian cancer
  
- Vulvar
  - Be able to recognize normal from abnormal appearing vulva
  - Recognize the vulvar inflammation from neoplasia
  - Recognize need for vulvar biopsy
  - Diagnosis and treatment of vulvar dysplasia
  - Diagnosis, staging and treatment of vulvar squamous cancer

### Less Common Gynecologic Cancers –

- Vaginal
  
- Fallopian tube
  
- Trophoblastic Disease
  - Gestational
  - Non-Gestational

### Other Cancers of Special interest to Gyn-Onc –

- Breast
  
- Colon

### Treatment Modalities –

- Surgery
- Radiation therapy
  - External beam (teletherapy)
  - Intracavitary (brachytherapy)
- Chemotherapy
  - Cytotoxic
  - Hormone therapy
  - Immunotherapy

### Special Issues –

- Learn pelvic anatomy
- Symptom management
  - Pain
  - Nausea and vomiting
  - Chronic fatigue
  - Clinical depression
  - Diminished activity
- Associated medical problems
  - COPD
  - Heart disease
  - Hypertension
  - Diabetes Mellitus
  - Obesity
  - HIV
  - Others
- Social issues
  - Lack of funding
  - Lack of housing
  - Lack of transportation
  - Non-Compliance

## Guide to Free References for Gyn-Onc Students

- 1. AccessMedicine by McGraw-Hill –**  
<http://www.library.health.ufl.edu/>, <http://www.uflib.ufl.edu/ufproxy.html>  
This website has dozens of McGraw-Hill's textbooks available online for free through the University of Florida Health Sciences Library website. The second link above is to the Off-Campus Proxy access, which can be utilized through the Gatorlink username and password (what you sign into UF Webmail with). Once on the Health Sciences Library website, the "Databases" list can be accessed to view the numerous databases available through UF. This is where access to PubMed, Clinical Pharmacology, UpToDate (which is not On Campus Only), and MD Consult can be found. In the scroll bar on the bottom half of the screen, click on AccessMedicine, which is the fourth database listed. This takes you to the AccessMedicine homepage. There are multiple tabs at the top of the page that allow access to textbooks from many disciplines, pathology images, procedure videos, case files, explanations of different diagnostic tests, and even Board Review material.
- 2. New England Journal of Medicine, Procedure Videos –**  
<http://content.nejm.org/>  
The NEJM has approximately 20 excellent basic procedure videos available that are central to medical care. The videos can be accessed by scrolling down to the "NEJM Audio and Video" box on the right hand side of the screen. Clicking on "More Procedure Videos" will enable access to the downloadable videos. The NEJM website has many other excellent resources available for free.
- 3. American College of Surgeons, Division of Education –**  
<http://elearning.facs.org/login/index.php/>  
This is an excellent site for medical students and first year residents to learn basic surgical skills such as knot tying and use of basic surgical instruments. It has nice videos that are divided into three different phases depending on your skill and knowledge level. It requires a free registration. On the homepage, click on "Create new account" on the right half of the screen. Once registered, click on the phase you wish to review, and then proceed through the videos listed.
- 4. National Comprehensive Cancer Network –**  
<http://www.NCCN.org/>  
This is an excellent online resource for clinical practice guidelines for many different types of cancer. It presents information on cancers in an easy to follow format that includes clinical presentation, treatment options (surgical and medical), recurrence probabilities, staging information, and discussions. It requires a free registration. On the NCCN homepage, the Clinical Practice Guidelines can be accessed by clicking on "NCCN Clinical Practice Guidelines in Oncology" under the "Clinical Recommendations" column on the bottom half of the page. The documents can be downloaded and/or printed from the website.
- 5. Atlas of Pelvic Surgery –**  
<http://www.altasofpelvicsurgery.com/>  
This is Cliff Wheelis's gynecologic surgery book online. It has excellent diagrams and step-by-step approaches to numerous surgeries. All students on their Gynecology or Gynecology-Onc rotation should review these procedures prior to seeing them in the OR.
- 6. ASCCP Colposcopy Course –**  
[ASCCP Colposcopy Course.doc](#)  
This is a course prepared by the American Society for Colposcopy and Cervical Pathology that provides a quick guide to cervical anatomy, histology, and pathology. It also provides a guide to colposcopy, which should be reviewed before seeing patients in the Colposcopy Clinic.
- 7. Understanding Risks of Ovarian Cancer Pamphlet –**  
[http://www.wcn.org/downloads/Understanding\\_Risk\\_of\\_Ovarian\\_Cancer.pdf/](http://www.wcn.org/downloads/Understanding_Risk_of_Ovarian_Cancer.pdf/)  
[Understanding\\_Risk\\_of\\_Ovarian\\_Cancer.pdf](#)  
This pamphlet is an excellent guide to identifying the risk of hereditary gynecologic cancers. It is provided by the Gynecologic Cancer Foundation.