GP Specialty Training Programme



Relevant Sections of the RCGP Curriculum

2.02 Patient safety and quality of care2.03 The GP in the wider professional environment2.04 Enhancing professional knowledge3.01 Healthy people: promoting health and preventing disease3.06 Women's health3.08 Sexual health

Learning Needs

To help identify learning needs in relation to the GP Curriculum the GPStR we recommend that you review the document below and highlight those areas where you feel less, this should be completed before the initial meeting of the GPStR with their Clinical Supervisor. In this meeting an educational plan for the post can be drawn up that identifies how these learning needs can be addressed and how and when they will be assessed, please record this as a placement planning meeting in your ePortfolio.

Assessments and Reviews

During this 6 month post it is the responsibility of the GPStR to arrange the following with their Clinical Supervisor:

- A placement planning meeting reviewing the learning objectives and producing an educational plan (within the first 3 weeks of the post)
- 3 CBD assessments
- 3 mini-CEX assessments
- Suggested CEPS female genital examination, male genital examination, cervical cytology
- An end of post meeting to discuss your progress and entering the Clinical Supervisor's Report on the e-Portfolio

Please note that this is the minimum requirement for assessments and your Clinical Supervisor may feel that more are required in order for you to meet the required competency areas.

GP Specialty Training Programme Learning Objectives & Assessment in O & G

What the GPStR can learn (adapted from AKT content guide)

SEXUAL HEALTH

Symptoms and signs

- o Dysuria
- Genital ulcers
- o Infestations
- Pelvic and abdominal pain
- \circ Systemic manifestations of sexually transmitted infections (STI) such as reactive arthritis
- Vaginal and penile discharge

Investigations

- Interpretation of results including timing of testing for blood-borne viruses
- Investigations of STI including appropriate sampling swabs, urine, blood

Specific conditions

- \bullet Contraception \circ $\:$ male including condoms and spermicides, vasectomy counselling and complications
- female emergency contraception
- hormonal combined oral/patch/ring contraception, progesterone- only methods such as oral, intrauterine system, depot injection, implant non-hormonal methods such as female condoms, diaphragms, natural cycle control, non-hormonal IUCDs, sterilisation counselling
- Infertility and subfertility including both male e.g impaired sperm production and delivery (drug-induced, cystic fibrosis,) and female causes e.g. tubal occlusion (after infection or ectopic pregnancy), ovulatory disorders such as polycystic ovary syndrome, anovulation, genetic disorders (e.g. Turner's syndrome);
- Issues of sexual identity and sexual orientation such as transgender, gender reassignment, men and women who have sex with men and/or women
- Principles of assisted conception with knowledge of the menstrual cycle and associated investigations. Knowledge of drug therapies used in assisted conception that are delegated to primary care
- Sexual abuse (both adult and child) including indicators such as STI in children, skin disorders such as lichen sclerosus
- Sexual problems including loss of libido, anorgasmia
- Sexually transmitted diseases including safe sex and contact tracing including hepatitis B & C, HIV, chlamydia, gonorrhoea, syphilis, lymphogranuloma venereum, genital warts, genital herpes simplex
- Termination of pregnancy indications, methodology, complications, legal and ethical aspects

WOMEN'S HEALTH

Symptoms and signs

- Incontinence faecal and urinary
- Menstrual problems such as amenorrhoea, polymenorrhoea, menorrhagia, dysmenorrhoea, intermenstrual bleeding, post-coital bleeding, premenstrual syndrome
- o Postmenopausal bleeding
- $\circ~$ Vaginal discharge, lumps and prolapse
- $\circ~$ Vulval pain, ulceration, pigmentation, leukoplakia, lesions

Investigations

- Investigations for gynaecological malignancy e.g. colposcopy, blood tests such as CA125, transvaginal ultrasound
- Investigations for recurrent miscarriage
- Investigations within primary care such as hormonal levels, cervical smears, swabs, pelvic examinations, ultrasound
- abdominal and pelvic, and secondary care such as laparoscopy and hysteroscopy, urodynamics

• Pregnancy investigations including urinary and serum β -HCG and testing for congenital abnormalities: \circ blood tests such as triple tests, immunity testing

- o chorionic villus sampling, amniocentesis
- o infection screening such as syphilis, HIV, rubella
- o routine ultrasound

• Screening and prevention programmes such as cervical screening including HPV, HPV vaccination programme

Specific conditions

Menopause

• Menopause including premature menopause, perimenopause, types of hormone replacement therapy, atrophic vaginitis, postmenopausal bleeding.

o Non-gynaecological symptoms such as skin changes, psychological symptoms

• Pelvic problems

- o Chronic pelvic pain, dyspareunia, sexual dysfunction, psychosexual problems
- o Infection including STI such as pelvic inflammatory disease (overlap with Sexual Health)
- o Ovarian cysts, endometriosis, malignancy including adenocarcinoma and teratoma

 $\circ~$ Polycystic ovary syndrome : gynaecological and associated metabolic disorders such as insulin resistance and hirsutism

- o Urinary problems such as prolapse, overactive bladder syndrome, stress and/or urge incontinence
- o Uterine prolapse

• Pregnancy

• Antenatal complications such as • bleeding including miscarriage, ectopic pregnancy, placenta praevia, placental abruption

haematological problems such as haemolytic disease including rhesus incompatibility and prophylaxis,

haemoglobinopathies such as sickle cell disease and thalassaemia, thromboembolism
infections such as rubella, cytomegalovirus, group B streptococcus, chickenpox, parvovirus, listeriosis, herpes

simplex, hepatitis

 metabolic problems such hyperemesis, obesity, gestational and pre-existing diabetes, thyroid disorders, causes of jaundice in pregnancy including cholestatic, hepatitis, drugs

- multiple pregnancies and associated complications
- neurological problems such as epilepsy and associated drug treatment, migraine, thrombosis
- pre-eclampsia and eclampsia
- urinary tract infections

 National guidelines on pre-conceptual care and normal antenatal care including routine checks, investigations and treatment such as supplements e.g. folic acid, vitamins, iron

 Postnatal problems including retained products, uterine infection, postnatal depression and psychosis, breastfeeding problems

• Problems of labour including premature, late, breech, obstructed deliveries, Caesarean sections and associated complications

- o Recurrent miscarriage risk
- o Trophoblastic disease including hydatidiform moles and choriocarcinoma

• Vaginal bleeding

 Abnormal vaginal bleeding including intermenstrual, dysfunctional uterine bleeding, post-coital or postmenopausal bleeding and causes such as drug-induced, endometrial hyperplasia, endometrial malignancy, cervical and endometrial polyps, cervical ectropion, cervical dysplasia and carcinoma

- Menstrual problems
- pain such as endometriosis, primary and secondary dysmenorrhoea
- bleeding such as menorrhagia, amenorrhoea and underlying causes such as drug-induced, weight related, pregnancy
- irregular cycles such as anovulatory
- Premenstrual syndrome
- o Uterine fibroids and adenomyosis

• Vulval and vaginal problems

Discharge, including infections such as bacterial vaginosis, candidiasis, genital warts; and pain with causes such as atrophic changes, dysaesthesia, vulvadynia. Malignancy including vulval intraepithelial neoplasia (VIN), melanoma.
 Skin diseases such as lichen sclerosus, psoriasis, intertrigo, pigmented lesions

- o Female genital mutilation/ cosmetic genital surgery
- o Recognition and safe response to domestic violence affecting women