Primary and Preventive Care Rotations

Knowledge and experience in primary and preventive care will be gained throughout the four years of residency and are an integral part of the training program.

Primary and preventive care specific educational experiences are addressed in the following settings:

- Continuity clinics
- OB high risk clinics, 2 Maternal Fetal Medicine clinics
- Antepartum rotations
- Gyn and Gyn/Onc clinics/rotations
- Emergency care: OB and Gyn services
- Primary and Preventive Care Ambulatory Rotation

The competency based goals and objectives for primary and preventive care are:

- Comprehensive history taking, including medical, nutritional, sexual, family, genetic, and social behavior data, and the ability to assess health risks
- Complete physical examination
- Appropriate use of laboratory studies and diagnostic techniques
- Patient education and counseling
- Screening appropriate to patients of various stages and risk factors
- Immunizations needed at specific ages and under specific circumstances
- Diagnosis and treatment of the common nonreproductive illnesses affecting women
- Continuous management of the health care of women of all ages
- Appropriate use of community resources and other physicians through consultation when necessary
- Appropriate awareness and knowledge of the behavioral and societal factors that influence health among women of differing socioeconomic and cultural backgrounds
- Behavioral medicine and psychosocial problems, including domestic violence, sexual assault, and substance abuse
- Emergency care
- Ambulatory primary care problems of the geriatric patient
- Basics of epidemiology, statistics, data collection and management, and use of medical literature and assessment of its value
- Ethics and medical jurisprudence
- Community medicine including health promotion and disease prevention
- Health care delivery systems and practice management
- Patient safety
The goals and objectives of the Primary and Preventive Care Ambulatory Rotation the PGY-2 resident should be able to:

- Discuss the general principles of aging, the changing demographics of the female population in the United States and the diseases and chronic conditions prevalent among women older than 50
- Perform competently a history and physical examination, evaluate the functional status of a woman, and provide appropriate periodic screening, evaluation, and preventive services at an ambulatory or inpatient visit
- Discuss the responses to medication and the effects of multiple medication use on the health and well-being of women that are past reproductive age
- Provide the appropriate preoperative evaluation and perform competently the operative procedure and postoperative management for gynecologic and urogynecologic operations required for postmenopausal women
- Develop a positive attitude toward the provision of services to older women; understand the well-being of older women; and understand the problems of chronic disability and the well-being of older women; and understand the problems of chronic disability and the benefits and limitations of advanced directives in end-of-life care
- The resident should understand and be able to explain the relevant information or demonstrate the clinical skills needed to perform care in the following areas:
  - General principles of aging in women
  - Functional assessment of the patient
  - Screening assessments
  - Preventive health services
  - Periodic evaluation, physical examination and tests, health education and the preventive care as recommended by ACOG
  - Surgical care
  - Evaluation for surgery
  - Pre-and postoperative management and evaluation
  - Communication skills and interpersonal interactions
  - Common diseases, disorders, and health concerns of aging women
  - Pharmacology, pharmacokinetics and pharmacodynamics
  - Ethical and legal issues
  - Coding and reimbursement
- Elements of primary care must include the following twenty categories:
  - Allergies: drugs, latex, foods and other environmental
  - List of current medications
  - Menstrual history or history of abnormal vaginal bleeding
  - Previous Pap smear
  - Contraception (age 15-50 years)
  - Immunization history
  - Smoking history
  - Alcohol use
  - Substance abuse
  - Family history
• Depression screening
• History of sexual dysfunction
• History of sexual, physical or mental abuse
• Blood pressure
• Dietary assessment/ appropriate weight/nutritional counseling/exercise counseling
• Seat belt use
• Recommendation or evidence of query re: mammography (age>50 or family history)
• Recommendation or evidence of query re: lipid screening (age>50)
• Recommendation or evidence of query re: testing or treatment for osteoporosis (age>60)

The Program Director or a designee will review five charts from each resident’s Continuity Clinic every six months for compliance with 20 essential components of primary and preventive care listed above. Records will be kept of each individual resident for at least each year of continuity clinic experience as part of the resident portfolio. The reports will be discussed at each resident’s semi-annual meeting, with the Program Director reviewing summary data for each year.

For further information or clarification please reference the CREOG Educational Objectives at http://www.acog.org/About_ACOG/ACOG_Departments/CREOG/Educational_Objectives