Impact of Formal Family Planning Training on Residents' Transferable Obstetrics and Gynecology Skills

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Background: Outpatient Surgery

- Many gynecological procedures are preferentially being done in the office.
 - Hysteroscopy
 - D&C
 - Diagnostic, early pregnancy failure and termination
 - Endometrial ablation
- Require operating on awake patients
 - Management of analgesia and anesthesia
 - Efficient surgical skills

Background: Resident Teaching

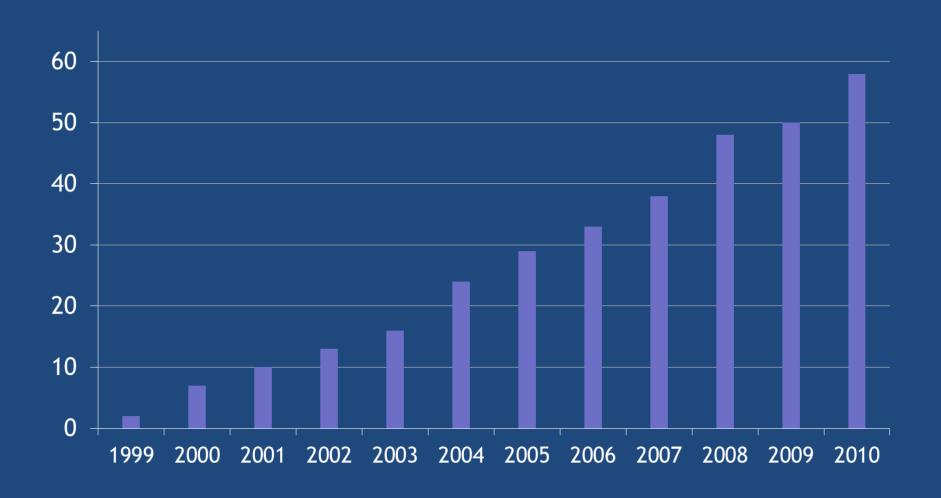
- Challenging to include dedicated outpatient surgery rotations
- Family planning rotation ideal for outpatient surgical training
- Other non-family planning-specific skills
 - Counseling
 - Ultrasound

Transferable Skills

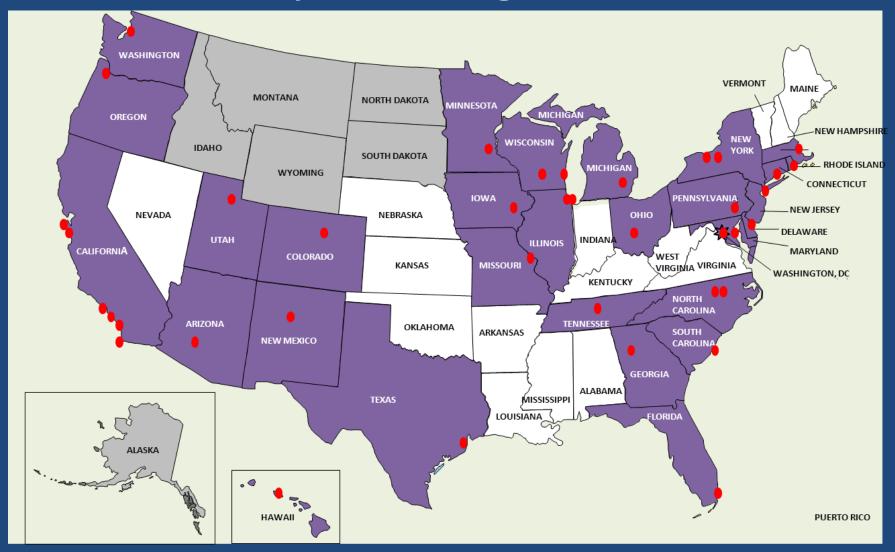
The Kenneth J. Ryan Residency Training Program

- Ryan Program
 - Mission: formally integrate family planning training into residency education
 - Provides technical and financial support to help programs meet ACGME mandate
 - Average rotation 3 days per week for 5 weeks

Growth of Ryan Program



Ryan Program



59 programs in 28 US States; 2 Canadian provinces and Puerto Rico

Ryan Program Outcomes

- >2,000 residents
 - 30% of current US residents
 - 24% of US residency programs
- Outcomes:
 - Increased competence in contraception, uterine aspiration, and medication abortion
 - Benefits for all residents
 - Departmental-level effects

Research Question

 Site visits: residents and program directors describe non-family planning benefits



- RQ: How does rotation impact non-family planning, obstetric and gynecologic skills?
 - Counseling
 - Ultrasound
 - Outpt. operative skills, analgesia management,
 - Early pregnancy failure

Methods and Response Rate

- Program evaluation since 1999
 - Pre- and post-rotation surveys of residents
 - Annual survey of **Ryan program directors**, residency program directors and chairs
- Response Rate
 - Residents: 803 (68%)
 - Ryan program directors: 88 (85%)

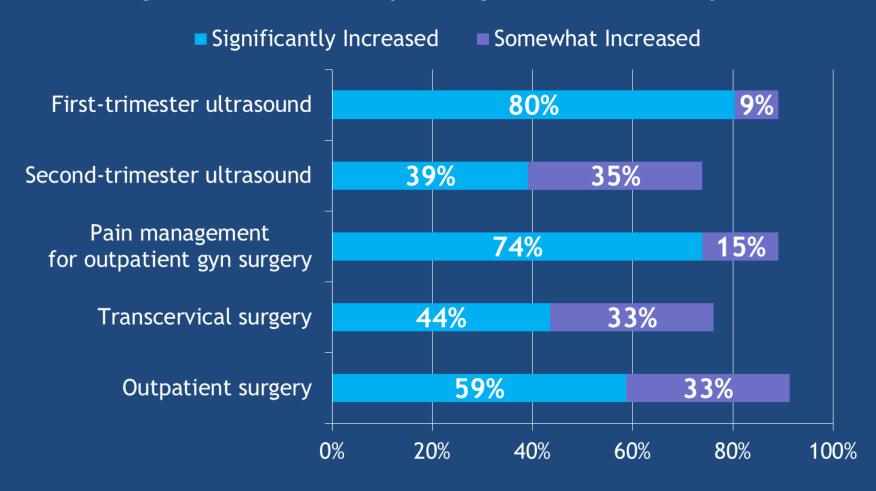
Results: Transferable Skills

Procedure	Median # done on rotation
Counseling Pregnancy option counseling	22.7
Ultrasound First-trimester ultrasound Second-trimester ultrasound	30 30
Outpatient surgery Conscious sedation management Paracervical block Cervical dilation	22.7 34.7 33.3

51% of programs do conscious sedation

Results: Transferable Skills

% Program Directors reporting increased competence



Results: Early Pregnancy Failure

Procedure	Median number done on rotation	% for EPF or abnormal pregnancies
AB counseling	15.0	20.0
MED AB	5.0	25.0
Manual UA	10.0	20.0
Electric UA	15.5	10.0
D&E	5.0	25.0
Induction termination	3.0	90.0

52% - emergency room 78% - outpatient setting

Residents' Reports of Most Useful Skills Learned in Rotation

What aspects of your training during the family planning rotation do you consider most useful for your future practice? (Check all that apply)	Proportion	
Counseling	85%	
Ultrasound skills	76 %	
Outpatient Surgical Skills		
Pain Management	53%	
Methods of Cervical Dilation	66%	
Methods of Uterine Evacuation	76%	

Residents' Experience

- It was an excellent experience and although I don't think I'll be offering abortions as a service when I graduate from residency, it was invaluable to learn how to counsel patients appropriately and be able to evaluate a pregnancy using ultrasound.
- I learned a lot during this rotation, and developed skills that can be carried throughout residency, regardless of whether or not I choose to perform abortions in the future
- [I most enjoyed] learning procedures I will use in real life after residency

Conclusions

- Family planning improves skills transferable to other ob-gyn settings
- Valued by residents and faculty
- Another reason to integrate family planning into residency training

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