



Training in Obstetrics and Gynaecology

LOG BOOK

Approved by
The European Board and College of Obstetrics and Gynaecology

TO BE COMPLETED AFTER EACH YEAR OF TRAINING AND SENT
WITH THE SURGICAL REPORTS ATTACHED WITHIN THREE
MONTHS THEREAFTER TO THE ASSESSMENT COMMITTEE
(CERTIFICATION BOARD)

Surname (in capitals) , first name of trainee :

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Dates of beginning and end of year of training :

...../...../..... (day/mo/yr) -/...../..... (day/mo/yr).

Denomination and address of department :

Year 1 :

.....

Year 2 :

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Year3 :

.....

Year 4:

.....

Year 5 :

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GYNAECOLOGY DURING AT LEAST 1 1/2 YEAR

of which at least 6 months during the last 3 years of training.

OBSTETRICS DURING AT LEAST 1 1/2 YEAR

of which at least 6 months during the last 3 years of training.

It is recommended to gain experience also in **OTHER FIELDS OF THE SPECIALTY**, such as reproductive medicine, breast diseases, gynaecological oncology, prenatal medicine, uro-gynaecology, gynaecological and obstetric ultrasound.

NOT MORE THAN 1 YEAR OF THE TRAINING SHOULD BE SPENT IN RELEVANT RESEARCH OR IN ANOTHER SPECIALTY.

Specialties that are eligible in this regard are :
abdominal surgery, endocrinology, urology, neonatology, medical genetics, pathology.

Other specialties : only after prior agreement of the Certification Board.

IT IS HIGHLY RECOMMENDED TO HAVE PART OF THE TRAINING (MAXIMUM : 1 YEAR) IN A DIFFERENT COUNTRY.

TYPE AND MINIMAL NUMBER OF TECHNICAL ACTS :

It is difficult and completely arbitrary to define the ideal number of technical acts carried out during training; it is preferable to define the minimal number of these acts. The numbers of procedures recommended should not be regarded as mandatory but simply as guide lines .

The EBCOG Working Party on Postgraduate Training and Assessment considers the following experience to be the minimum for competence as a specialist :

OBSTETRICS :

- Antenatal ultrasound examination	200
- Normal labour and delivery	100
- Assisted vaginal delivery (forceps, vacuum extr., breech)	40
- Caesarean section	40

DIAGNOSTIC PROCEDURES :

- Colposcopy	50
- Hysteroscopy	25
- Gynaecological ultrasound examination	100

GYNAECOLOGICAL SURGERY :

- Diagnostic laparoscopy or sterilisation	40
- Minor laparoscopic surgery (ectopic preg., ov. cyst)	20
- Hysterectomy (abdominal : 25 minimum, vaginal : 15 minimum)	45
- Breast surgery including that for cancer ¹	20

It is even more important to define the spectrum of acts for which the trainee has developed sufficient skills. This spectrum encompasses "minor" acts (e.g. colposcopy) as well as "major" acts (e.g. hysterectomy, caesarean section). The person in charge of the training is best placed to assess the skill developed by the trainee for a given act. The capability of the trainer to assess trainees will be evaluated by a visiting subcommittee.

¹ Only in those countries where this is part of gynaecological practice .



description by trainer and tutor of what is expected in terms of knowledge, technical skills
and fulfillment of tasks AT THE END of this year of training

To be completed at the beginning of the year of training.

YEAR n° 1:

KNOWLEDGE :

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TECHNICAL SKILLS :

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TASKS :

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DATE : NAME OF THE TUTOR :

SIGNATURE S : TUTOR :-----TRAINEE : -----

YEAR N° 2 :

KNOWLEDGE :

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TECHNICAL SKILLS :

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TASKS :

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DATE : NAME OF THE TUTOR :

SIGNATURE S : TUTOR :-----TRAINEE : -----

Year n°3 :

KNOWLEDGE :

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TECHNICAL SKILLS :

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TASKS :

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DATE : NAME OF THE TUTOR :

SIGNATURE S : TUTOR :-----TRAINEE : -----

YEAR N°4 :

KNOWLEDGE :

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TECHNICAL SKILLS :

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TASKS :

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DATE : NAME OF THE TUTOR :

SIGNATURE S : TUTOR :-----RAINEE : -----

YEAR N°5:

KNOWLEDGE :

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TECHNICAL SKILLS :

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TASKS :

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DATE :

NAME OF THE TUTOR :

SIGNATURE S : TUTOR :-----TRAINEE : -----

EVALUATION OF CLINICAL AND TECHNICAL SKILLS

Every target define in the EBCOG recommendation on training and assessment has an " expected competence level that you must achieved.

The level of competence ranges from observation (level 1) to independence practice (Level 5) Many of the targets do not require an assessment of every competence level and shaded boxes indicate these. Trainees can choose whether or not to tick the shaded boxes as they progress . Certain targets do not require the trainee to be level 5 (Independent) . These are identified by a black box.

The open targets require your tutor or trainer to check your competence and sign you off . When you fill ready for this it is your responsibility to organise with your trainer , for these targets to be observed . When an entire module is completed (excluding black boxes) request the educational supervisor to sign the completed module .

SCORING SYSTEM : 1 : Observe the activity performed by a colleague

- 2 : Assit a colleague to perform activity
- 3 : Perform the entire activity under direct supervision of a senior .
- 4 : Perform the activity with indirect supervision of a senior
- 5 : Perform the entire activity without need of supervision

On call duties

FREQUENCY OF ON CALL DUTIES : (e.g. : 1/4)

Year	1	2	3	4	5
Frequency					

BRIEF DESCRIPTION OF ACTIVITIES WHEN ON CALL :

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SURGICAL PROCEDURES

Target	Expected competence level Trainee ticks when achieved					Trainer sign when competence level achieved	
	1	2	3	4	5	Sign	Date
Diagnostic laparoscopy and sterilisation							
Minor laparoscopic surgery (EUP, Ovarain cyst)							
Diagnostic hysteroscopy and target biopsy							
Colposcopy with biopsy							
Simple hysteroscopic procedure (eg polypectomy)							
Endometrial ablation or résection							

Conisation of the cervix or similar treatment (eg LEEP)							
Transvaginal ovarian puncture							
Curettag							
Laparotomy (including capability of performing tubal ligation , salpingectomy, oophorectomy , ovarian cystectomy and adhesiolysis)							
Total abdominal hysterectomy							
Myomectomy							
Vaginal hysterectomy							
Vaginal repair							
Suprapubic suspension Procedure							
Bartholin cyst							
Vasectomy							
Tumorectomy , quadrantectomy , mastectomy of the breast + Axillary lymphadenectomy							
Radical hysterectomy							
Repair of abdominal incision hernia							

Signature to confirm completion of the module :

Name of the trainer :

Date :

Hospital

Obstetrical procedures approved by protocols

Target	Expected competence level Trainee ticks when achieved					Trainer sign when competence level achieved	
	1	2	3	4	5	Sign	Date
Spontaneous delivery , including episiotomy and its repair							
Vaccum extraction							
Forceps delivery							
Vaginal breech delivery							
Immediate resucitation of neonate							
Caesarean section							

² Only in those countries where this is a part of gynaecological practice

Repair of 3 rd and 4 th degree perineal tears and cervical laceration							
Manage appropriately retained placenta							
Manage post partum haemorrhage							
Perform iliac vessel ligation and obstetric hysterectomy							
Manage appropriately shoulder dystocia							
Vaginal delivery in multiple pregnancy							
External cephalic version							
Interpret the assessment of a fetus by cardiotocograph and ultrasound							
Perform fetal blood sampling							
Cervical Cerclage							
Amniocentesis							
Chorionic villus sampling /Placental biopsy							
Cordocentesis							
Perform first trimester termination of pregnancy							
Perform late termination of pregnancy							

Signature to confirm completion of the module : Name of the trainer : _____ Date : _____ Hospital : _____

Ultrasound

Target	Expected competence level					Trainer sign when competence level achieved	
	1	2	3	4	5	Sign	Date
Perform ultrasound scan to assess:							
Obstetrics <input type="checkbox"/> early pregnancy for viability <input type="checkbox"/> Pregnancy datation							

<input type="checkbox"/> Fetal morphology							
<input type="checkbox"/> Fetal growth							
<input type="checkbox"/> Fetal presentation							
<input type="checkbox"/> Placental site							
<input type="checkbox"/> Liquor volume							
<input type="checkbox"/> Fetal well being							
Gynaecology							
<input type="checkbox"/> Uterine cavity							
<input type="checkbox"/> Uterine myometrium							
<input type="checkbox"/> Ovaries							
<input type="checkbox"/> Tubes							
<input type="checkbox"/> Pelvis							

Signature to confirm completion of the module : Name of the trainer : Hospital	Date :
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NUMBER OF PROCEDURES AND TECHNICAL ACTS PERFORMED DURING THE TRAINING

1	Gynaecological ultrasound (transabdominal and transvaginal routes)	AS FIRST ASSISTANT	AS SURGEON
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2	Obstetric ultrasound (1st and 3rd trimesters : biometry)		
3	Ultrasonographic assessment of fetal morphology (2nd trimester)		
4	Colposcopy		
5	Diagnostic hysteroscopy		
6	Curettage		
7	Conisation of cervix or similar treatment (e.g. LEEP)		
8	Diagnostic laparoscopy and laparoscopic tubal sterilisation		
9	Minor laparoscopic surgery (ovarian cysts, extrauterine pregnancy)		
10	Abdominal hysterectomy		
11	Vaginal hysterectomy, including plastic repair of vagina		
12	Radical hysterectomy with pelvic lymphadenectomy (e.g. Wertheim-Meigs)		
13	Surgical procedures for urinary incontinence (e.g. M.M.K., Burch, Pereyra)		
14	Tumorectomy, quadrantectomy of breast		
15	Mastectomy (Patey) + axillary lymphadenectomy		
16	Vasectomy		
17	Transvaginal ovum pick-up		
18	Spontaneous delivery, including episiotomy and its repair		
19	Vacuum extraction		
20	Forceps delivery, without rotation		
21	Vaginal breech delivery		
22	Caesarean section		

Other procedures and technical acts :

AS FIRST
ASSISTANT

AS SURGEON

Date

...../...../..... (day/mo/yr)

Name and signature of trainee

.....

ASSESSMENT OF KNOWLEDGE, ATTITUDES AND FULFILLMENT OF TASKS

Scoring system : A = excellent
 B=Sufficient
 C=Weak
 D=Unacceptable

Year	1	2	3	4	5
INTEGRATED KNOWLEDGE					
REACHING OF APPROPRIATE DECISIONS; COLLECTION AND INTERPRETATION OF DATA					
MOTIVATION, SENSE OF DUTY DISCIPLINE, PUNCTUALITY					
TECHNICAL SKILLS					
ORGANISATORY SKILLS					
ADMINISTRATIVE TASKS (MEDICAL FILES, CORRESPONDENCE, ETC.)					
ETHICS					
RELATIONS WITH PATIENTS					
RELATIONS WITH MEDICAL AND OTHER STAFF					
ATTENDANCE AND ACTIVE PARTICIPATION IN STAFF MEETINGS					
SCIENTIFIC INTEREST					
SCIENTIFIC ACTIVITY					

Signature of Trainee

Signature of Trainer Date :

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...../...../.....
(day/ mo / yr)

CUMULATIVE LIST OF SCIENTIFIC MEETINGS
AND COURSES ATTENDED BY THE TRAINEE
(entire duration of training; to be up-dated yearly)

e.g. :

1. **Joint Meeting of the South-East Gynaecological Society and the Flemish Society of Obstetrics and Gynaecology, Bruges, Belgium, 10.10.1996. Theme : "Endometriosis".**
2. **Meeting of the European Menopause Society, Liège, Belgium, 16-17.04.1997. Theme : "Menopause and the cardio-vascular system".**
3. **Advanced Course in Gynaecological Endocrinology, University of Nijmegen, the Netherlands, 14 – 16.10.1997.**

CUMULATIVE LIST OF PAPERS READ AT SCIENTIFIC MEETINGS

(entire duration of training; to be up-dated yearly)
(A MINIMUM OF 1 AS 1ST AUTHOR IS REQUIRED)

e.g. :

1. R. LEGAS and L. DUPONT : "Phospholipids in the amniotic fluid." Free communication. National Congress of the Belgian Society of Obstetrics, Brussels, Belgium, 04-05.02.1996.
2. R. LEGAS : "Severe auto-immune dermatologic complications during pregnancy." Poster. Symposium "Pregnancy and the immune system", Besançon, France, 17-18.06.1997.

CUMULATIVE LIST OF SCIENTIFIC PUBLICATIONS

(entire duration of training; to be up-dated yearly)

(AT LEAST 1 AS 1ST AUTHOR IS REQUIRED)

e.g. :

1. L. DUPONT and R. LEGAS : Lipid profile of the amniotic fluid. Acta Clinica Belgica 1996, 50 : 327 - 335.
2. R. LEGAS, A.C. VERNY, I. VENDON and P. CASSY : Isolation of a fraction of phosphatidyl-glycerol active in fetal pulmonary maturation. European Journal of Obstetrics and Gynecology and Reproductive Biology 1997, 31 : 627 - 629.

Surgical reports

Please attached here all surgical reports as assistant or surgeon performed during the year .