Branch Campus

Obstetrics & Gynecology Clerkship Survival Guide: Des Moines

The Test

It is a shelf exam, with very few unexpected question types. The material on the test is fairly well defined (perhaps unlike the surgery or pediatric shelf exams). It's encouraged to begin studying a little bit each night every week, as it makes the rotation proceed more smoothly and takes a little stress off you as the clerkship nears its end. Do not forget to spend time studying **gynecologic material**, **especially gyn-onc**, because it is at least **50%** represented on the exam. The clerkship lends itself to perhaps a bit more obstetrics, so it's easy to get lured into forgetting about preparing for gyn-onc questions on the exam.

The "Must Use" Resource (If you could only pick one or two resources)

- APGO uWise questions (instructions for access on ICON site)
 - APGO questions are useful to get you familiar with the material; however the questions are not representative of the vignette-style questions you will see on the shelf.
- Many students also spoke highly of the efficacy of <u>First Aid USMLE Step 2 CK</u>, available for purchase.
- <u>U-world step 2 Q-Bank ob/gyn section</u> is the best resource to use to prepare for the shelf. The question style is very similar to the shelf and the explanations are quite thorough. Do some questions each day, read all the explanations, and take notes.

Other Resources

- Case Files (copy provided for you to use during the clerkship by the Consortium)
- U-World Step 2 Q-bank You need to purchase or get access to this resource.

If You Have Time... (Maybe not the most high yield)

Obstetrics & Gynecology- Beckman (a numbered copy is provided by Broadlawns).

*Read through <u>First Aid Step 1 reproductive section</u> while on this rotation. It is helpful knowledge for the clinic and in preparation for step 1.

Resources to Avoid

Anything beyond those listed above is unnecessary. <u>Use the Beckman book only if you have time</u> or want to read in-depth about a topic. As with studying for any exam, there are multiple resources in which you can quickly become inundated. Pick one or two and stick with them.

In the OR

If you need to be in the operating room for a cesarean section or some other gynecological procedure, be sure to **familiarize yourself beforehand with OR etiquette**. Know how to scrub, what (not) to wear (hand/wrist jewelry), when (not) to speak up, and when (not) to contribute or help out the surgeon or scrub staff. If you have questions, do not be afraid to ask the residents, scrub techs, or OR nurses about the particulars.



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Schedule

The first Monday morning is essentially orientation and badge distribution for both Broadlawns and Mercy. There is no real formal introduction to the Ob/Gyn clerkship or to their EMR, but you'll figure it out as you go. During your six-week rotation you and your two classmates will spend the majority of your time at Broadlawns Medical Center. You will spend two weeks, however, as the "outside block" student, during which you will spend part of certain days at various other locations. It will be important for you to recognize and clarify which two of the six weeks you will be on the "outside block" so you know where to show up and when.

While on "outside block," you will likely spend Mondays with a Gyn-Onc surgeon (Dr. Elg) in the OR at Methodist. You will likely spend Tuesday mornings with a perinatologist (Dr. Mandsager) either at his Perinatal Diagnostic Clinic, or on the Ob unit with him at Mercy. On Wednesday mornings you will spend time with fertility specialists Drs. Cooper and Young at their clinic. It is the only other fertility center in Iowa outside UIHC. It is important to communicate directly with these physicians or their office staff the day prior to make sure to let them know you are coming. There are instructions for who to call, when to call them and where to report in the binder they give you on the first day of the rotation. Most of this time is spent shadowing.

While at Broadlawns, Mondays and Fridays are usually OB clinic days, morning and afternoon. Tuesday mornings are the scheduled OR day for C-sections or GYN procedures. Tuesday afternoon is often spent studying if the procedures are all finished for the day. Thursday mornings are colposcopy clinics, and Thursday afternoons are scheduled lectures with Dr. Lindell, Dr. Hancock, Dr. Luckett, and occasionally Dr. Hauser. Of course, if you are on-call for that particular day, you will accompany the resident and attending physician to the Family Birthing Unit to deliver any babies or attend to other emergent problems. Each day, except Friday, you have a catered breakfast lecture at 7:30AM and a catered lunch lecture at 12:00PM in the conference room in the basement. Thursday morning's lecture is at the newer office building and includes the entire Family Medicine service.

Miscellaneous

<u>Don't forget to record your patient encounters on PxDx.</u> The easiest thing to do is add them online each day, so they are fresh in your mind, you know how many you have and still need, and you don't fall behind and scramble to fill them all in at the end of clerkship. Is it required that we submit all patient encounters? Make note here if so.

Clinic days can be really busy. Don't be surprised if there isn't much time for formal teaching. Just work hard to do your part and help out the team.

When at clinic at Broadlawn's, you are thrown into the mix immediately and are expected to see patients, take a history, perform parts of the exam, and present each patient to an attending physician. It would be wise to familiarize yourself with a few basics *before* you begin. It will feel disorienting and overwhelming at first, but eventually you'll figure out the flow of the clinic, the presentation style, and each attending's nuances. You will grow a lot in your history taking skills while on this rotation.



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They have hand-outs for how to enter Ob and Gyn notes into their EMR. Follow these closely and ask any of the attending physicians or the residents if you have questions. Students were still referring to the hand-outs at the end of the rotation, as the EMR is not very user-friendly.