

## NUHS OBSTETRICS & GYNAECOLOGY RESIDENCY PROGRAMME

The National University Health System (NUHS)'s mission is Advancing Women's Health by Integrating Excellent Clinical Care, Research, Quality Improvement and Education.

The aim of our six-year Obstetrics & Gynaecology (OBGYN) Residency Programme is to educate the residents in the breadth and depth of the discipline of Obstetrics and Gynaecology and to foster a lifelong commitment to the promotion of women's health care. The residents will acquire cognitive knowledge, technical skills and interpersonal skills through didactic lectures, small group seminars, audiovisual media, individual instruction, independent reading, and direct patient care. Upon successful completion of the four-year core programme, residents will progress to two years advanced training, culminating in accreditation by the Specialist Accreditation Board of Singapore. The Programme is firmly committed to providing holistic medical training in a vibrant clinical environment with a culture of research, education and quality & innovation.

## **Outstanding Features**

Well-funded programme opportunities with e-learning, medical simulation and distinction track (leadership) educating research, quality and innovation etc.

Extensive research curriculum to train residents in both basic science and clinical research.

Research mentorship by world renowned visiting experts.

High faculty to resident ratio (2:1 for faculty). Faculty comprises national and international experts within subspecialty areas.

Morning teaching didactics protected from service commitments.

Well-rounded outpatient experiences of both general clinics and specialty clinics. Continuity clinics ensure involvement throughout the patient journey.

With 4,494 deliveries, 5,793 operations, 7,652 inpatient volume and 96,299 outpatient volume annually, we have ample clinical resources to provide exposure to a broad range of OBGYN conditions and cutting-edge treatment.

Opportunity to take an elective month in Year 3/4 to develop an area of personal interest.

Opportunities to develop special skills in leadership, education, research & quality & innovation tracks at hospital and national level.

Trainees are consistently above national average for CREOG scores and pass rate for intermediate and exit examinations.



A/Prof Citra Mattar Programme Director





## **Programme Structure**

The overall aim of the Department of Obstetrics and Gynaecology, NUHS is to provide an academic environment that promotes a structured educational experience. We are dedicated towards effective and efficient patient care, with a graduated experience of resident responsibility. We aim to provide holistic medical training to develop evidence-based and compassionate clinicians, in a vibrant academic environment with a culture of continual improvement.

	Training Objectives					
	5 core postings - Obs ward, DS, Gyn ward, Gyn OT and Primary care, Each core posting - 2months and rotate twice.					
	POSTING	Stations to cover	Learning objectives			
F O U N D A T I O N	Obs ward	Obs ward (pre/postnatal), Jade OBS, FCC, GDM + continuity clinic (Obs)+FCC	Antenatal and postnatal care, low and high risk pregnancies, Priming Suite, MTPT, discharge summaries and audits; complete Tier 1 USS (within 6m of R1)			
	DS	DS, Em LSCS, EL LSCS list, EMD (obs) + continuity clinic	Intrapartum care, operative deliveries, Em + EL CS, acute complications			
	Gyn ward	BG/UG/REI ward (pre/post surgery) + EMD (gyn) + FCC + Jade GYN + continuity clinic (Gyn)	Gyn pre-/post-op care, complex conditions (OHSS, TOA, AUB), EMD gyn admissions, discharge summaries and audits, complete Tier 1 USS (within 6m of R1)			
	Gyn OT	MCOT (minors) + Jade GYN + NTF GYN + MBOT (majors)	Elective minor operations (independent operation), assist major operations			
	Primary Care	Jade OBS/GYN + FCC + Meno/Adol/HRC + NTF GYN	Ambulatory clinics, FCC, subspecialty clinic			
	Clinical elective	MFM/BG/Onco+ Clinics (#COVER)	Ambulatory clinics, clinical elective, <b>first-line COVER</b>			
	Research elective	Dry lab (epidemiology/clinical trials) + Wet lab (benchwork) + Audit / QIP + Clincs (#COVER)	Ambulatory clinics, research/audit, second-line COVER			

R3 & R4

R1 & R2

	Training Objectives				
	5 rotations - MFM, Benign Gyn, Urogyn, REI, Onco - 3m each				
S P	MFM	Obs ward, DS, EL LSCS, Em LSCS, HRC, GDM, FCC			
E C	BG	Gyn MBOT, Jade Gyn, Hysteroscopy / Endometriosis clinics, BG inpatients			
I A L T Y	REI	Subfertility clinic, CHR, MCOT, Menopause/Adolescent, REI inpatients			
	UroGyn	UG clinics, UG MBOT, UG inpatients			
	Gyn-Onco	GO wards, MBOT, Cancer / Colposcopy clinic			
	Ambulatory Care	Jade OBS/GYN, Subspecialty clinics (eg Menopause/Adolescent), NTF			
	Elective	Internal or External postings			

## **R5 & R6**

Technical Objections										
Training Objectives  Medical Communication Systems-based										
DOCTING	Chatiana ha assau	i	D-414 C			Systems-based				
POSTING	Stations to cover	Learning objectives	Patient Care	Knowledge	Skills	Practice				
		Antenatal and postnatal care, low and high risk			• Counsels	• Compassion,				
		pregnancies, Priming Suite, MTPT, discharge		Demonstrates	patients/families	integrity, respect for				
	Obs ward (pre/postnatal), Jade OBS, FCC,	summaries and audits. Intrapartum care, operative		advanced	about	others. Punctuality,				
	GDM + HRC, FCC + fetal anomalies/genetic	deliveries, Em + EL CS, acute complications. Senior		knowledge	complications/bad	responsiveness;				
MFM	counselling, supervise EL LSCS, EM LSCS	Resident OSATS.	Comprehensive	necessary for	outcomes.	Reliability. Coaches				
	-	- /		management of		others to do the same.				
	Gyn-Onc ward, pre-/post-surgery care,		varying presentations		management in	Self-awareness of				
	Cancer clinics. Colposcopy, MBOT Gyn Onc		and treatment options	,	process.	fatigue and stress,				
GYN-ONC	+ Robotics	abdominal surgery. Senior Resident OSATS.	for OBGYN conditions.	supervises and	<ul> <li>Participates in</li> </ul>	management of				
	REI ward (pre/post surgery) + Jade GYN +	Gyll pie-/ post-op care, colliplex collultions (O1133,	<ul> <li>Recognizes atypical</li> </ul>	educates lower	patient/family	stressors.				
	Menopause/Adol outpt + Subfertility clinic		ľ	level residents	education	Reports errors / near				
REI	+ CHR + MCOT/IVF + MBOT/MIS	summaries and audits. Senior Resident OSATS.		regarding OBGYN	• Leads	misses to the				
		Innatiant and Anast support and profision as in	0	conditions.	interdisciplinary	institutional				
	MCOT (minors) + Jade GYN + NTF GYN +			<ul> <li>Collaborates and</li> </ul>		surveillance systems.				
	MBOT (majors) + BG/UG wards + Outpt			provides	<ul> <li>Leads effective</li> </ul>	Able to conduct root				
	hysteroscopy / UG + MIS Accreditation (To			consultation to		cause analysis.				
BG	reach Level 2) + Robotics SR training	procedures. To complete Senior Resident OSATS.	'		and team	<ul> <li>Actively participates</li> </ul>				
				the OBGYN team	debriefing.	in quality improvement				
	2 months (minimum of 1 month) in	Subspecialty training mirroring the R5's assigned posting	1 '	regarding care of	<ul> <li>Responds to</li> </ul>	/patient safety				
	whichever posting they are assigned by	+ general OG; R5 will fulfill existing list of requirements.	educates R1-4.	patient.	requests for	projects. Organises and				
	their PD. The R5 will continue with the	The content/skill to achieve during the cross-cluster	<ul> <li>Arranges for</li> </ul>	<ul> <li>Manages or co-</li> </ul>	consultation in a	leads institutional QI				
			' '	manages critically il	timely manner and	/patient safety				
	subspecialty training programme in the	needs are not compromised in any way and will not	collaborative care.	patients.	communicates	projects.				
	host institute, and this will be accredited	result in the need to make up for them in other	<ul> <li>Delivers bad news</li> </ul>	<ul> <li>Implements</li> </ul>	recommendations	<ul> <li>Contributes to peer</li> </ul>				
	towards their 6 month posting at their	rotations. The appropriate handover of supervision will	on complications or	evidence-based	to the requesting	reviewed medical				
CCR	parent institute.	be handled between the PDs.	death.	treatment.	team.	literature.				