THE ROYAL AUSTRALIAN AND NEW ZEALAND COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS



# SIMG TRAINING LOGBOOK 2016 Daily Training Record for FRANZCOG Training

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists

# FRANZCOG TRAINING PROGRAM LOGBOOK 2016 Daily Training Record for SIMG Training

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# PERSONAL DETAILS

Name:							
Address:							 
	<del></del>				<del></del>	<del></del> _	 
Telephone:							
TRAINING DE	ΓAILS						
Training Site:							
Training Year:							
Calendar Year:							
Period of training covered by this Logbook:	/	/20	to	/	/20		

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#### **FUNCTION**

The SIMG Logbook (Daily Training Record) has been designed to enable SIMG trainees to record the necessary aspects of their training experience during SIMG Training.

The Logbook has been designed with this training situation in mind and should enable all trainees to record daily the experience relevant to the training undertaken during the year.

The record of experience has the following functions:

- 1. It provides SIMG trainees with a personal record of all procedural and other training experiences, which are requirements for satisfactory completion of the relevant training program.
- 2. It provides trainees with the basis for completing the Six-monthly Clinical Training Summaries of training experience which are an essential requirement for assessment and subsequent credit of training. The Six-monthly Clinical Training Summary is part of the Six- monthly Summative Assessment Report.
- 3. The Six-monthly Clinical Training Summary will be used by the Training Supervisor and the SIMG Assessment Committee to monitor the trainee's experience to ensure that it is appropriate. These summaries are also used to plan further training with the Training Supervisor.
- 4. The information will also be used by the College to monitor the experience provided for trainees by the hospital.

#### ESSENTIAL INFORMATION ON USING THIS LOGBOOK

- The College does not issue a hard copy version of this Logbook. Trainees should download from the College website the relevant pages as required. THE TRAINEE IS RESPONSIBLE FOR MAINTAINING UP TO DATE LOGBOOK PAGES AT ALL TIMES.
- Each completed page of the logbook should be checked and signed off by the relevant Training Supervisor using the signature box on each page. NOTE: The College no longer requires Training Supervisors to check the entire Logbook every 3 months.
- A copy of the completed Communication Skills training page must be sent to College House.
- Following approval of their Fellowship applications by the RANZCOG Board, SIMG trainees will be required to submit hard copy versions of all Logbook pages for each relevant year of training. These hard copy versions should only be submitted when requested by the College.

#### **INSTRUCTIONS**

- 1. Record training experience on a daily basis
- 2. Record clinical training experience
  All SIMG trainees undertaking clinical training are required to record the procedural
  experiences relevant to their training program. A list of abbreviations of procedures
  used and accepted in the MRANZCOG examinations has been included in the
  Logbook. SIMG trainees should use this list as a guide to the appropriate
  abbreviations to be used in this Logbook.
- 3. IMPORTANT: The trainees's role as primary operator vs assist

The logbook pages relating to surgical procedures ask the trainee to indicate if they are primary operator (whether supervised or unsupervised) or assisting. The College recognises that in theatre the trainee may oscillate between the role of primary operator and assist. If the trainee is actively participating in the procedure and doing the bulk of the work, then they can be regarded as the primary operator.

4. At the end of each six-monthly period:
Transfer the data from the relevant training period from your logbook to the
Clinical Training Summary (CTS), which forms part of the six-monthly Summative
Assessment report.

The clinical training must be tallied and the number of procedures in specific categories recorded against the relevant headings for the type of training being completed.

#### **IMPORTANT NOTE**

The minimum requirements specified relate to FRANZCOG trainees and are intended as a guide only for SIMG trainees.

Please contact the SIMG Co-ordinator at College House if you have any questions about completing the Logbook. Contact details are on the title page of this book.

# ABBREVIATIONS USED/ACCEPTED IN MRANZCOG EXAMINATIONS

AFP	Alphafetoprotein
APH	Antepartum haemorrhage
ARM	Artificial rupture of membranes
BP	Blood pressure
FHR	Fetal heart rate
CIN	Cervical intraepithelial neoplasia
CTG	Cardiotocograph
CSU	Catheter specimen of urine
DandC	Dilation and curettage
ECG	Electrocardiograph(y)
ECV	External cephalic version
EUA	Examination under anaesthesia
FBC	Full blood count
FBE	Full blood examination
FSH	Follicle stimulating hormone
GTT	Glucose tolerance test
Hb	Haemoglobin
hCG	Human Chorionic Gonadotrophin
IUCD	Intrauterine contraceptive device
LFTs	Liver function tests
LH	Lutenising hormone
LMP	Last menstrual period
LNMP	Last normal menstrual period
LUSCS	Lower uterine segment Caesarean section
LSCS	Lower segment caesarean section
MSU	Midstream specimen of urine
NAD	Nothing abnormal detected
PPH	Post-partum haemorrhage
PR	Per rectum
PV	Per vaginam
RBC	Red blood cells
TAH	Total abdominal hysterectomy
VDRL	Venereal disease reference laboratory test
UandEs	Urea and electrolyte
WBC	White blood cells

# CERTIFICATE OF ACCURACY (TO BE SIGNED BY SIMG TRAINEE)

Logbook (Daily Training Record)

I certify that the information contained in the Logbook (Daily Training Record) is a true and accurate record of my training experiences.

# CERTIFICATE OF SATISFACTORY COMPLETION OF THIS LOGBOOK (MRANZCOG/FRANZCOG)

	(TO BE SIGNED BY SIMG ASSESSMENT COMMITTEE CHAIR)
Ιd	certify that:
Na	ame:
ha	as satisfactorily completed this Logbook as required under the RANZCOG regulations.
Si	gnature:Date:
Cł	nair, SIMG Assessment Committee
	hen this and all other relevant Logbooks are presented for assessment, if assessed satisfactory, the Chair will sign the 'Certificate of Satisfactory Completion of

Training' in the Training Assessment Record (TAR).

## NEONATAL RESUSCITATION TRAINING (OPTIONAL FOR SIMG TRAINEES)

### **IMPORTANT NOTE**

While completion of this training is not an SIMG requirement, those SIMG trainees who do complete it should also record the details below to inform the SIMG Training Supervisor of their status.

- 1. There is no formal neonatal resuscitation (NR) training module or workshop. Trainees are expected to receive NR training in the course of their in-hospital training in their first year of Core time in training. This page must be signed off by your Training Supervisor or other RANZCOG Fellow.
- 2. This page is documentary evidence that you have completed the NR requirement. Keep it in your Training Assessment Record (TAR).

Name:	
Hospital:	
State/Region:	
Date/s of training:	

The following section is to be signed by the Training Supervisor.

I certify that the above trainee has satisfactorily completed the Neonatal Resuscitation training requirement.
Training facilitator (signature):
Training facilitator (print name):
Date:

# **Endometrial inspection, sampling and hysteroscopic surgery**

	<u> </u>	, ,						
Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments
Training Supervi	isor:							Date:
Trailing Supervi	Date.							

Endometrial inspection, sampling and hysteroscopic surgery, including:

- Diagnostic hysteroscopy, dilatation and curettage (D&C)
- Suction D&C for retained products of conception
- Endometrial ablation
- Endometrial sampling, outpatient
- IUCD insertion/removal
- Hysteroscopic resection of polyps or small submucous fibroids
- Hysteroscopic management of uterine abnormalities (eg, septa)

**Laparoscopic Surgery** 

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments
Training Supervi	Date:							

#### **Laparoscopic Surgery - AGES Skill Levels:**

- Level 1 Diagnostic Laparoscopy
- Level 2 Simple Operative Laparoscopy
- o Tubal ligation
- o Simple cyst aspiration
- o Simple adhesiolysis
- o Ablation of APS I-II endometriosis
- o Ovarian cystectomy (normal anatomy)
- Level 3 Operative Laparoscopy suggested minimum 20
- o Oophorectomy (normal anatomy)
- o Salpingotomy/salpingectomy for treatment of ectopic pregnancy

#### • Level 4

- o Laparoscopically-assisted vaginal hysterectomy (LAVH)
- o Excision of AFS III endometriosis

#### • Level 5 - Advanced Laparoscopy

- o Total Laparoscopic Hysterectomy (TLH)
- o Laparoscopic Burch
- o Laparoscopic Myomectomy

#### • Level 6

- o Laparoscopic Pelvic Floor Repair
- o Excisional of APS IV endometriosis
- o Oophorectomy of Residual Ovary (distorted anatomy)
- o Laparoscopic lymph node dissection (pelvic and para-aortic)
- o Radical hysterectomy

Open abdominal gynaecological surgery

- P	open abadilina gynaecological sargery										
Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments			
Training Supervi	Training Supervisor:										

#### Open abdominal gynaecological surgery, includes:

- Basic Laparotomy (eg, oophorectomy, salpingo-oophorectomy, ovarian cystectomy)
- Intermediate Laparotomy (e, hysterectomy, myomectomy, hysterotomy)
- Advanced Laparotomy (eg, pelvic sidewall dissection)

# Vaginal surgery, uterovaginal prolapse & urinary incontinence

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments		
Training Supervi	Training Supervisor:									

# Vaginal surgery, uterovaginal prolapse & urinary incontinence, includes:

- Simple Vaginal Surgery (eg, vaginal repair anterior, posterior & perineum)
- Advanced Vaginal Surgery (eg, vaginal hysterectomy & repair)
- Tensionless vaginal tape procedures, including cystoscopy
- Colposuspension
- Sacrospinous colpopexy
- Mesh-based prolapse procedures

# **Cervix & dysplasia**

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments		
Training Supervi	Training Supervisor:									

## Cervix & dysplasia, includes:

- Colposcopy, cervix and CIN management
- Cone biopsy
- Minor perineal surgery (eg, Bartholins cyst or abscess, marsupiaisation, excision vulval cyst, diagnostic vulval biopsy)

# **Miscellaneous general gynaecology**

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments		
Training Supervi	Training Supervisor:									

# Oncology, includes:

- Omental Biopsy
- Vulval Biopsy (diagnostic)

#### **OBSTETRICS**

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complications Comments
Training Supervisor:							Date:	

#### **Obstetrics, includes:**

- Normal Vaginal Delivery (NVD)
- Complex manipulative vaginal delivery (eg, multiple pregnancy, shoulder dystocia, breech, podalic version)
- Operative Vaginal Delivery, low-outlet vacuum delivery
- Operative Vaginal Delivery, low-outlet forceps delivery
- Operative Vaginal Delivery, mid-cavity or rotational instrumental delivery
- Caesarean Section: Basic (eg, LSCS, repeat LSCS)
- Caesarean Section: Advanced (eg fully dilated, placenta praevia or accreta, classical, visceral/vascular trauma, failed instrumental delivery)

- Repair of episiotomy or second degree perineal tear
- Repair of third or fourth degree tear
- Manual removal of placenta (MROP)
- Examination under anaesthetic (EUA) management of PPH  $\geq 1000$ mL
- Intrapartum procedures (including fetal scalp blood sampling)
- Administration of local anaesthesia, including pudendal block
- Chorionic Villous Sampling/Amniocentesis
- External Cephalic Version

# **OBSTRETRICS**

# Neonatology

Date	MRN /NHI	Procedure	Indication	Assist	Supervised	Unsupervised	Teaching by trainee	Outcome Complication s Comments
Training Supervisor:							Date:	

# Neonatology, includes:

• Neonatal Resuscitation (NR)

# GYNAECOLOGY CLINIC (SESSIONS) MINIMUM 100 CLINICS REQUIRED (GUIDE ONLY FOR SIMG)

Month	Type of Clinic			
	General	Subspecialty	Other	Total Clinic Sessions
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
Total				
Training Super	visor:	Date:		

# ANTENATAL CLINIC (SESSIONS) -MINIMUM 100 CLINICS REQUIRED (GUIDE ONLY FOR SIMG)

# **SUPERVISED ULTRASOUND SCANNING (HOURS)**

Month	Sessions	Month	Sessions
January		January	
February		February	
March		March	
April		April	
Мау		May	
June		June	
July		July	
August		August	
September		September	
October		October	
November		November	
December		December	
Total		Total	
Training Superviso			Date:

#### **ULTRASOUND (PROCEDURES)**

TIME REQUIRED: The procedures (and minimum numbers) listed below are what the College considers necessary to attain basic competency in ultrasound by the end of the first 2 years of training. These procedures will require a minimum of 18 x 8-hour days ie approximately 150 hours or 4 weeks of clinical training and experience. **These hours and** minimum requirements relate to FRANZCOG trainees and are intended as a guide only for SIMG trainees.

IMPORTANT NOTE: Trainees who complete College approved external ultrasound courses can count the indicated number of hours from **each** course. The currently approved courses are: Ultrasound Workshop: Introduction to Ultrasound (RANZCOG, various locations-8 hours); Introduction to Ultrasound in Obstetrics (Australian Institute of Ultrasound QLD-30 hours); Fast Track O&G Workshop (Australian Institute of Ultrasound, QLD-30 hours); Introductory Ultrasound for Pregnancy (Ultrasound Training Solutions, Melbourne-30 hours); Basic Skills in O&G Ultrasound (RPA Hospital, Sydney-10 hours); Basic or Intermediate Ultrasound Workshop (O&G Dept, Auckland City Hospital, NZ-16 hours per course).

Name of Procedure	Procedures Observed	Min. Required (FRANZCOG trainees)
Trans-vaginal first trimester early pregnancy		5
Trans-abdominal first trimester dating		5
Second/third trimester biometry		5
Determine presentation		5
Determine placental site		5
Measure AFI		5

Procedures Performed (under supervision	Min. Required (FRANZCOG trainees)	
	25	
	25	
	25	
	25	
	25	
	25	

#### **IMPORTANT NOTES:**

The procedures listed in the Procedures Performed column can be done in the labour ward. in an early pregnancy clinic or in the ultrasound department, as long as the procedures are appropriately supervised.

Supervision of ultrasound training should be provided by a trained sonographer or other suitably qualified practitioner.

Training Supervisor:	Date:

# **MEETINGS / PRESENTATIONS**

Date	Venue	Topic
Training Supervisor:	1	Date:

# **RESEARCH ACTIVITIES**

Date	Hours	Research wo	rk
Training Supervisor:			Date:

