

Advanced Training Pathway: SRH

Mandatory Module 2: Medical and Surgical Abortion

Curriculum Objective

To provide a framework on which to build expert training in the knowledge, clinical skills and professional attitudes required to provide comprehensive high level medical and surgical abortion services.

Learning Outcomes

At completion of the Medical and Surgical Abortion module the trainee should have demonstrable academic, clinical, and professional skills relevant to first and second trimester medical and surgical abortion consultation and service delivery* to evidence-based standards, in the context of broader sexual and reproductive healthcare.

** Relative to the service configuration of the training sites.*

Learning & Assessment Requirements

Assessment	Detail	Requirement
Logbook	Surgical Abortion Electric Vacuum Aspiration (EVA)	50
Logbook	Surgical Abortion Manual Vacuum Aspiration (MVA)	10
Logbook	Early Medical Abortion	30
Logbook	Dilatation and Evacuation (14+ weeks) or medical* 2nd trimester	30
Logbook	Dilatation and Evacuation (16+ weeks) or medical* 2nd trimester	30
Logbook	Ultrasound – Point of care for procedures	30
Logbook	Feticide participation**	20

** Those with no access to D&E must observe 10 procedures in another setting*

*** Participation = pre-procedural counselling, procedural observation and provision*

Learning Competencies

Area of Learning	Domains	TLS	Assessment
Clinical Knowledge and Reasoning			
<p><i>Pre and post medical and surgical abortion care</i></p> <p><i>Demonstrate knowledge and understanding of:</i></p> <ul style="list-style-type: none"> • Australia and New Zealand legislative landscape as it applies to abortion care • Legal and ethical aspects of abortion care as specified in local guidelines, including capacity to consent, confidentiality documentation of adverse outcomes • The impact of social and cultural issues on the delivery of abortion care and outcomes • Culturally-safe abortion care • Issues relating to abortion-related stigma (providers and patients) • The impact of reproductive coercion and gender- based violence on abortion care • Development of the embryo and fetus, including ultrasound appearance • Assessment of ectopic pregnancy and pregnancy of unknown location • Organisation of clinical and support services, including local care pathways • Appropriate communication with women and their accompanying persons • Pre-abortion assessment • Abortion procedures, including effectiveness, indications, contraindications and complications • Aftercare • Indications for abortion 	CM HA SC LD	Attachment to an established provider of contraceptive services	3MA
<p><i>Surgical abortion: < 14 weeks, 14-16 weeks, > 16 weeks</i></p> <p><i>Demonstrate knowledge and understanding of:</i></p> <ul style="list-style-type: none"> • < 14 weeks: MVA and EVA procedures • 14-16 weeks: D&E procedure, or medical 2nd trimester • > 16 weeks: D&E procedure, or medical 2nd trimester • Cervical priming methods and management of complications • Antibiotic prophylaxis regimes • Anaesthesia methods, including local anaesthesia • Analgesia • Appearance of Products of conception? Not sure what this acronym is, at different gestations • Sedation in the context of surgical abortion, with reference to ANZCA document <i>PS09 Guideline on sedation and/or analgesia for diagnostic and interventional medical, dental or surgical procedures</i> 	HA SC CL LD	Attachment to an established provider of abortion services	3MA Teaching requirement
<p><i>Early medical abortion</i></p> <p><i>Demonstrate knowledge and understanding of:</i></p> <ul style="list-style-type: none"> • Knowledge of medications and regimen • Contraindications, precautions and warnings • Expected effects and side effects 	ME PF SC LD	Attachment to an established provider of abortion services	LB 3MA

Area of Learning	Domains	TLS	Assessment
<ul style="list-style-type: none"> Knowledge of antibiotic prophylaxis regimes Analgesia Management of complications Aftercare 			
<p>First trimester ultrasound</p> <p><i>Demonstrate knowledge and understanding of:</i></p> <p>Principles of ultrasound examination</p> <ul style="list-style-type: none"> Choice of transducer Physics of ultrasound Machine set-up and operation Infection control Patient care Principles of report writing Consent <p>Normal ultrasound findings</p> <ul style="list-style-type: none"> Understand morphological features of normal early pregnancy 5-14 weeks. Understand principles of gestational sac diameter, crown-rump length and bi-parietal diameter measurements Understand the principles of differences between normal intrauterine gestation sac and a pseudosac Understand ultrasound findings of Pregnancy of unknown location and ectopic pregnancy Understand diagnostic problems which may occur e.g. empty bladder, obese women and those with large uterine fibroids Understand the principles of conducting a safe and appropriate ultrasound examination 	SC ME HA PF	Attendance at an approved Ultrasound Workshop or On-site clinical training Revise Clinical Imaging module	6MA
Clinical Skills			
<p>Pre and post medical and surgical abortion care</p> <p><i>Be able to perform:</i></p> <p>Pre-procedure clinic:</p> <ul style="list-style-type: none"> Undertake history taking, with consideration of the following: <ul style="list-style-type: none"> Medical history Psychological assessment supporting informed decision making around medical vs surgical abortion Social history Child protection / vulnerable adult issues Contraception needs Sexually transmitted infection risk Risks of reproductive coercion and intimate partner violence Assessment of capacity to consent and awareness of local medicolegal environment 	ME PF SC LD CL	Attachment to an established provider of contraceptive services Minimum number procedures	LB 3MA

Area of Learning	Domains	TLS	Assessment
<ul style="list-style-type: none"> Perform appropriate clinical examination, including assessment of gestation Arrange routine laboratory and ultrasound investigations, and specific investigations as prompted by history and examination Arrange/ perform sexual health screen and arrange management and partner notification as appropriate Arrange procedures locally or through another agency, including cervical priming as necessary, via appropriate care pathways Obtain informed consent Prescribe drugs required for procedure/ antibiotic prophylaxis/ contraception, as per local care pathways <p>Post-procedure clinic:</p> <ul style="list-style-type: none"> Clinically assess women's: <ul style="list-style-type: none"> Physical state Emotional state, including feelings of regret, and review counselling and support needs Contraceptive and sexual health needs Child protection/ vulnerable adult issues Manage delayed complications: <ul style="list-style-type: none"> Bleeding Infection Retained products of conception Ongoing pregnancy Emotional distress Manage spontaneous fetal death before and after 20 weeks 			
<p><i>Surgical abortion: < 14 weeks, 14-16 weeks, > 16 weeks</i></p> <p><i>Be able to:</i></p> <ul style="list-style-type: none"> Check equipment/ analgesia Perform the following clinical procedures: <ul style="list-style-type: none"> Position patient Bimanual examination (empty bladder) Speculum examination Stabilisation of cervix Application of local anaesthetic Safe evacuation of uterine contents Identification of products of conception and disposal of same with due regard to respect and dignity, and according to patient's wishes with appreciation of relevant legislation re notification and disposal procedures" Manage if inadequate products seen Manage immediate complications: perforation, haemorrhage, anaphylaxis Manage recovery and discharge Confirm/ supply contraceptive provision/ condoms for sexual health and where to access further care/ supplies Give discharge instructions 	ME CL SC HA LD	Attachment to an established provider of abortion services	LB 3MA

Area of Learning	Domains	TLS	Assessment
Early medical abortion Be able to: On 1st visit; to initiate abortion: <ul style="list-style-type: none"> • Confirm gestation • Review suitability for procedure method. Double check no contraindication to medications • Seek/check consent, including off-label use of drugs • Check all medication required for procedure and sexual health, including contraceptive needs, are prescribed and available • Check medication administered according to prescription • Provide information about warning signs for complications • Discuss management of pain and ensure analgesia is prescribed? • Provide 24-hour contact numbers • Provide follow-up assessment information • Give discharge instructions • Explain what is normal and abnormal (signs and symptoms) in next few weeks On follow-up visit after taking prostaglandins: <ul style="list-style-type: none"> • Review events since 1st visit • Assess completion of abortion • Assess for infection and other complications • Manage incomplete abortion • Confirm/supply contraceptive provision/ condoms for sexual health and where to access further care/ supplies • Give discharge instructions 	ME HA SC LD	Attachment to an established provider of abortion services Minimum number procedures	LB 3MA
First trimester ultrasound Be able to: <ul style="list-style-type: none"> • Perform abdominal and transvaginal ultrasound post abortion • Identify the features of a normal gestational sac and confirm its intrauterine location • Measure gestational sac size, crown-rump length and BPD • Identify early cardiac activity using B-mode • Identify fetal number • Demonstrate appropriate care of the patient during examination 	CM PF HA CL	Attachment to an established provider of contraceptive services Minimum number procedures	LB 3MA
Professional Skills			
Be able to: <ul style="list-style-type: none"> • Demonstrate an understanding of abortion-related issues in relation to the development of standards and enhanced provision of high-quality services through a quality-based project. • Answer any questions from patient / accompanying person • Counsel sensitively about options available and associated health issues • Ascertain social support appropriate to the patient 	PF CL CM HA	Attachment to an established provider of abortion services	6MA Research / audit Teaching requirement MSF CBD

Area of Learning	Domains	TLS	Assessment
<ul style="list-style-type: none"> Explain clearly and openly treatment regimes, potential side effects of drugs and complications of procedures Demonstrate ability to formulate and implement plan of management and modify it, if necessary Respect religious beliefs and cultural diversity Demonstrate awareness of AMA/MBA/MCNZ guidance for doctors with conscientious objection to abortion, with reference to: <ul style="list-style-type: none"> MBA's <i>Good Medical Practice</i> AMA's <i>Position Statement: Conscientious Objection</i> MCNZ's <i>Statement on the Abortion Legislation Act 2020</i> Check patient/ carer aware of procedure/ support Ensure patient/ carer knows who/ how to contact in an emergency Demonstrate effectiveness in liaising with colleagues in other disciplines, clinical and non-clinical, through Care Pathways Discuss potential consequences of not completing treatment regime with patient 			
<p><i>Knowledge and understanding of Service Planning in Abortion Care</i></p> <p><u>Access</u></p> <p><i>Develop an awareness of the following:</i></p> <ul style="list-style-type: none"> Challenges facing underserved and vulnerable populations <p>--The need to provide documented information to consumers, external service providers and support agencies within the local area health services on the choices available within the service, and on routes of access to these services</p> <ul style="list-style-type: none"> The need to facilitate access to abortion services as early as possible in the pregnancy to reduce the likelihood of associated health risks awareness that delays to provision of abortion service impact on patients physical and mental health The need to, ideally, offer an assessment appointment within 5 days of referral The need to provide dedicated clinic time for the assessment appointment in an appropriate setting The need to, ideally, provide abortion as soon as possible and within 2 weeks of the decision to proceed being agreed 		Attachment to an established provider of abortion services	3MA
<p><u>Referral</u></p> <p><i>Develop an awareness of the following:</i></p> <ul style="list-style-type: none"> Document referral pathways within the area health service (e.g. between departments within a facility, between facilities and between a facility and external agencies and GPs) 		Attachment to an established provider of abortion services	3MA

Area of Learning	Domains	TLS	Assessment
<ul style="list-style-type: none"> Consider engagement with state-wide external service providers and agencies in the development of referral pathways and mechanisms Provide documented referral pathways to external service providers, agencies and GPs Inform health care professionals in contact with women seeking abortion (e.g. in emergency departments, GPs) about the referral pathways Where the woman considers but does not proceed to abortion, provide information and access to appropriate referral pathways (eg access to a social worker, referral for antenatal care) 			
<p><u>Care Setting</u></p> <p><i>Develop an understanding of the following:</i></p> <ul style="list-style-type: none"> Multidisciplinary and coordinated approach required to avoid unnecessary delay in care provision The most appropriate care setting for abortion is dependent on the: <ul style="list-style-type: none"> Method of abortion chosen Gestation of the pregnancy Preferences of the woman and her care provider Service capabilities of the facility Concurrent medical conditions Ensure there are local arrangements for the safe and sensitive handling, storage and disposal of products of conception 		Attachment to an established provider of abortion services	3MA
<p><u>Health Advocacy in Abortion Care</u></p> <p><i>Develop an awareness of the following:</i></p> <ul style="list-style-type: none"> An ability to advocate within acceptable health professional norms The impact of conscientious objection on equitable access to abortion, how to navigate the issue of conscientious objectors and other challenges Communicate with stakeholders Educate providers and referrers about the service, the pathways, any service limitations and their professional responsibilities For health professionals involved in the provision of abortion services: <ul style="list-style-type: none"> Provide ongoing training and education Offer counselling and debriefing support Ensure the workforce sensitivity to cultural diversity, disability, language 		Attachment to an established provider of abortion services Undertake RCOG module Attendance at conference/workshop Participation in an advocacy coalition	
<p><u>Safety and Audit</u></p> <p><i>Develop an awareness of the following:</i></p> <ul style="list-style-type: none"> Quality measures of abortion provision in the context of safe / reasonable care State/regional legislation 		Attachment to an established provider of abortion services	3MA

Glossary of terms

RANZCOG Roles	
ME	Medical Expert
CM	Communicator
CL	Collaborator
LD	Leader
HA	Health Advocate
SC	Scholar
PF	Professional

Teaching and Learning Strategies	
TLS	Teaching and Learning Support
eLM	eLearning module
ST	Supervised Training
HEP	Hospital Education Program (include here any hospital meetings, case reviews etc. that would be relevant)
RP	Research Project

Assessments	
LB	Logbook
3MA (Formative)	3 monthly assessments All ATMs are required to include a regular in-training appraisal, conducted 3 monthly, to be undertaken by the Training Supervisor. This should provide an opportunity to discuss aspects of the training and assessment that have been undertaken within the 12-week period of training
6MA (Summative)	6 monthly assessments All ATMs are required to include a regular in-training assessment, conducted 6 monthly, to be undertaken by the Training Supervisor. This should provide an opportunity to discuss aspects of the training and assessment that have been undertaken within the 6-month period of training
TSR	Training Supervisor Reports
DOPS	Directly Observed Procedural Skills
MSF	Multi Source Feedback
CBD	Case-based discussion
MSF	Multi Source Feedback
APSS	Assessment of Procedural Surgical Skills

Version Register

Version	Date of Version	Pages revised / Brief Explanation of Revision
1	Nov 2022	Creation