Welcome to the Urogynecology Rotation!

Below we have highlighted the expectations, educational goals and responsibilities for the rotation.
In an effort to prepare you for our service, we recommend that you read the ACOG Practice Bulletins on Pelvic Organ Prolapse (Bulletin #85 from September 2007) and Urinary Incontinence in Women (Bulletin #63 from June 2005) before your first day on Urogynecology. If you have trouble finding these practice bulletins, please ask any of the fellows or residents on service.

Our attendings are:
Dr. Linda Brubaker
Dr. Mary Pat FitzGerald
Dr. Kimberly Kenton
Dr. Elizabeth Mueller

The fellows are:
Dr. Shameem Abbasy (3rd year)
Dr. Megan Tarr (2nd year)
Dr. Jackie Cunkelman (1st year)
Dr. Olga Ramm (1st year)

There are two residents on service, one from urology and one from OB/GYN. We work as a team and all of the above faculty, fellows, and residents will be involved in your education and evaluation.

On your Urogynecology rotation, you will be exposed to both clinical and surgical, outpatient and inpatient patient care issues pertaining to pelvic floor disorders in women. Monday, Tuesday, and Thursday are the usual OR days with Tuesday being the busiest. Additionally, there are clinics on Monday, Wednesday, Thursday, and Friday.

On the first day of your rotation, you should report to the Urogynecology Outpatient Clinic in LOC on the 3rd floor at 7:30am. Pat Brey, RN, the nurse manager, will orient you to patient flow in the Urogynecology clinic. In addition, she will teach you to perform postvoid residual urine volumes using straight catheterization and the bladder scanner. Each student should be competent with both procedures prior to completing their Urogynecology rotation.

You will be assigned one day to participate in the OR and will participate in clinic on the other days. Most students will be assigned to the OR on Tuesdays, then participate in Urogynecology clinic on Monday, Wednesday, Thursday, and Friday.

Wednesday afternoon is generally reserved for teaching conferences. Unless other lectures are scheduled, you will be expected to attend the Wednesday afternoon conferences, held in the 4th floor conference room of the SSOM building.
2:30-3:00p – NIH conference (we go over the progress on NIH-funded studies)
3:00-4:00p – Case conference (we review and prepare for next week’s OR cases)
4:00-5:00p – Lecture
EXPECTATIONS WHILE ON UROGyneCOLOGY ROTATION:

OR:

• Introduce yourself to the patient when they are in the preoperative holding area.
• You should be familiar with the patient’s history, preoperative labs, and the operative plan (this will be reviewed in case conference the week prior—pay attention so that you can give a proper sign-out to the group of students coming on after you).
• Check and see if your patient has any allergies—you want to know this because you will go to pharmacy to get pre-op antibiotics for your patient. Verify antibiotic choice with resident/fellow before going to get it.
• Write up the patient’s name, age, procedure, PMHx, PSHx, Allergies, Hgb, POP-Q scores, and the name of the attending, fellow, resident, student and observers. When you go into write on the board, introduce yourself to the scrub RN and the circ RN, ask them if they want you to grab your gloves, or tell them your size--this way they know you will need a gown too.
• After you’ve scrubbed in, insert the foley (PUT THE SYRINGE FOR THE BALLOON in the PLASTIC DRAPE right under the patient—it will be used again during the procedure).
• Check on your patient after she has left the PACU (postop check) to make sure she’s recovering appropriately.

Morning Rounds:

• Prior to leaving each day, check with the senior fellow, Dr Abbasy to find out the time for the next morning’s work rounds.
• The fellows, residents, and medical students will meet between 6 and 7 am for work rounds on postoperative patients. Learning postoperative care is an important learning objective for your Urogynecology rotation. To maximize this opportunity, we expect that medical students will arrive prior to the team and …
  o Obtain patient vitals, including urine output
  o Find out how patient did overnight
  o Be prepared to present the patient to the team

We round together as a team (students, residents, fellows). On Wednesdays we will also round with the attendings. In the morning, help the residents prepare the patient list, talk to each patient’s nurse about any overnight events, find out the urine output, the postop hemoglobin, and whether the patient has started the voiding trial and its results.
-Postop oral presentations are brief!

Clinic:

- On your first day, introduce yourself to the nurses and attach yourself to a specific nurse. Go with that nurse when she rooms patients. You will be able to do practice catheterization under the direction of the nurse. Then, follow that patient throughout the course of their office visit (resident/fellow/attending).

If you have any questions about patient care, surgery, or any other issues pertaining to the service, you can always ask any of the fellows!

We look forward to working with you!