

UBC Pain Medicine Residency Program: CanMEDS Goals and Objectives of the 4 week UBC Pelvic Pain Elective Rotation

Overview

Supervisor: Dr. Catherine Allaire MDCM, FRCSC

Faculty gynecologists:

Dr. Christina Williams MD, FRCSC (OG/Gyn)

Dr. Paul Yong MD, FRCSC (Ob/Gyn)

The BC Women's centre for Pelvic pain and Endometriosis clinic is located at the BC Women's Health Centre (Entrance #77), 4500 Oak Street, Unit F2 (Main Level). The team consists of:

Gynaecologists with special expertise in pelvic pain, endometriosis, gynaecological surgery including laparoscopic excision of endometriosis, and other reproductive health-related issues such as infertility. Our physicians are members of the Department of Obstetrics & Gynaecology in UBC's Faculty of Medicine. They are actively involved in the education and mentorship of gynaecologists and other community health care providers, and participate in research activities.

Registered Nurse (Catherine Mauer) with extensive experience in obstetrics, gynaecology, and reproductive health

Physiotherapist (Susannah Brittnell) with extensive experience in pelvic floor dysfunction and chronic pelvic pain

Clinical Counsellor (Holly Yager) with extensive experience in reproductive health, chronic pelvic pain, and fertility

Clinical Fellow (i.e., a Gynaecologist undergoing a Clinical Fellowship training in chronic pelvic pain) with extensive experience in obstetrics and gynaecology

Proposed schedule

- 2 days/week patient assessments with Ob/Gyn
- 1 day/week with physiotherapist
- 1 day/week with counsellor
- Clinical team meeting 1 hour/week
- Rounds 1 hour/rotation
- 2 half days/rotation pelvic pain workshops
- Observation of OR procedures

Educational Objectives

1. To gain an understanding of the evaluation of the CPP patients
2. To understand the multiple contributors to chronic pelvic pain
3. To participate in an interdisciplinary team approach to management of chronic pelvic pain.

Upon completion of the **UBC Pelvic Pain** rotation, the pain resident will fulfil the following goals under CANMEDS roles:

1. Medical Expert:

Competencies:

The pain resident will demonstrate compassionate, appropriate, and effective care, based on the existing evidence base in pelvic pain management, aimed at maximizing well being and quality of life for patients, incorporating their families in education and the plan of care. The pain resident will provide this care in collaboration with an interdisciplinary team.

- 1.1 Develop history and physical examination skills specific to the assessment of endometriosis and chronic pelvic pain patients.
- 1.2 Describe the role of ancillary tests and imaging in the diagnosis and management of chronic pelvic pain and endometriosis.
- 1.3 Describe the modalities of interdisciplinary pelvic pain management; including the role of surgery, narcotic and non-narcotic medications, pelvic physiotherapy, educational interventions and mindfulness based therapy.
- 1.4 Demonstrate office-based interventions such as trigger point injections, pudendal nerve blocks and botox injections

The pain resident will demonstrate knowledge about established and evolving biomedical, clinical, population science and social-behavioural sciences relevant to the care of patients with pelvic pain and to their families, and relate this knowledge to pelvic pain practice.

- 1.5 Describe the physiologic, anatomical and psychological processes involved in the development of chronic pelvic pain.
- 1.6 Describe the physiologic, developmental, biochemical and genetic influences on the development of endometriosis.
- 1.7 List the current approaches to diagnosis and management of irritable bowel syndrome, interstitial cystitis, vulvodynia, and myofascial pain as they relate to pelvic pain.

2. Communicator

Competencies:

The pain resident will be able to demonstrate interpersonal and communication skills that result in effective relationship-building, information exchange, emotional support, shared decision-making and teaming with patients, their patients' families, and professional associates.

2.1 Be able to write effective chart notes for patients with pelvic pain, and write or dictate complete and succinct consultations for patients with pelvic pain.

2.2 Be able to verbally present medical information succinctly and accurately to attending staff

2.3 Be able to communicate effectively with other members of the health care team.

2.4 Be aware of the advantages, disadvantages, limitations of written communication, verbal (both telephone and in person) communication, and non-verbal communication when communicating with patients, family members, or other members of the health care team. To be able to address challenging communication issues effectively, such as obtaining informed consent, delivering bad news, and addressing anger, confusion and misunderstandings.

3. Collaborator Role

Competencies:

The pain resident will be able to function effectively with the pelvic pain team including other physicians, nurses and pharmacists and understand the roles of other healthcare providers such as family physician, neurologist, neurosurgeon, physiatrist, anaesthesiologist psychiatrist, addiction medicine physician, psychologist, and physiotherapist, and how they integrate into the patients pelvic pain management.

3.1 Demonstrate effective, appropriate, and timely consultation of another health professional as needed for optimal patient care and specifically in situations where:

- An emergency referral to another specialist is required.
- Consultation with another medical specialist would be beneficial (including for diagnostic or treatment- related interventional procedures)
- Consultation with an allied health practitioner (i.e. Occupational or Physical Therapist) would be beneficial.
- Offer patients the services of patient support groups when indicated

4. Manager Role

Competencies:

4.1 The pain resident will be able to prioritize treatments and complete tasks efficiently

4.2 The pain resident will be able to effectively triage patients and allocates resources appropriately

5. Health Advocate Role

Competencies: The pain resident must understand the potential benefits of the individual and to society of organized pelvic pain management services and be able to provide realistic and scientifically supportable argument in favour of such services. He/she must also be aware of the deficiencies in the system which impede the ideal delivery of these services, and able to contribute to the attempt to eliminate these deficiencies.

5.1 The pain resident will be able to advocate for patients with pelvic pain to assess appropriate treatment and facilitate access to community resources when needed.

5.2 The pain resident will be able to educate patients and help managing risk factors.

6. Scholar Role

Competencies: The pain resident must be able to assess the ongoing developments in the literature regarding pain management and be able to appropriately incorporate them into practice. He/she must also be able to utilize a variety of sources in order to answer questions as they arise. She/he must show an appreciation of the conduct of pain research.

6.1 The pain resident will develop critical thinking skills.

6.2 The pain resident will be able to search the literature around patient pelvic pain problems and be able to appropriately incorporate the information into practice.

7. Professional Role

Competencies: The pain resident will be able to demonstrate a commitment to carrying out professional responsibilities, awareness of their role in reducing suffering and enhancing quality of

life, adherence to ethical principles, sensitivity to a diverse patient population, and appropriate self-reflection.

7.1 Demonstrates understanding of accountability to patients, society, and the profession.

7.2 Arrives on time and prepared for work, dressed appropriately and clean, seeing all patients willingly, and advocating for them upon disposition.

7.3 Fulfills professional commitments:

- Responds to requests from patients and families for medical information
- Helps colleagues
- Shows accountability for personal actions and plans
- Works effectively as a team member.
- Addresses concerns about quality of care and impaired performance among colleagues
- Show respect, dignity, and compassion

7.4 Demonstrates knowledge of ethics and law that should guide care of patients

7.5 Shows respect and compassion towards all patients and their families

7.6 Recognizes own role and the role of the system in disclosure and prevention of medical error.