



# Special Delivery

Issue 8

July 1, 2011

## The New ACGME Program Requirements

The Accreditation Council for Graduate Medical Education (ACGME) has approved new program requirements effective July 1, 2011. Faculty, fellows and residents need to be aware of the changes and be prepared to comply with the guidelines. Although new duty hour restrictions have received the most publicity, the changes also include greater emphasis on the core concepts of patient safety, resident supervision and professional behavior.

All are encouraged to review the new program requirements under “duty hours” on the ACGME website at [www.acgme.org](http://www.acgme.org) (also see links at the end of this article). During the next year, we will be highlighting different aspects of the new program requirements. In this issue, we will address the new duty hour restrictions. The basic requirements are as follows:

**Maximum Hours of Work per Week** - Duty hours must be limited to 80 hours per week, averaged over a 4 week period, inclusive of all in-house call activities and all moonlighting.

**Moonlighting** - Time spent by residents in internal and external moonlighting must be counted towards the 80-hour Maximum Weekly Hour Limit. PGY-1 residents are not permitted to moonlight.

**Mandatory Time Free of Duty** - Residents must be scheduled for a minimum of 1 day free of duty every week (when averaged over 4 weeks). At-home call cannot be assigned on these free days.

**Maximum Duty Period Length** - Duty periods of PGY-1 residents must not exceed 16 hours in duration. Duty periods of PGY-2 residents and above may be scheduled to a maximum of 24 hours of continuous duty in the hospital. It is essential for patient safety and resident education that effective transitions in care occur. Residents may be allowed to remain on-site in order to accomplish these tasks; however, this period of time must be no longer than an additional 4 hours. Residents must not be assigned additional clinical responsibilities after 24 hours of continuous in-house duty. [Note: this is a change from the previous 30 hours—so, 24 hours on then 4 hours to “clean up”—no clinics, new patients, etc. during the additional 4 hours]

**Minimum Time Off between Scheduled Duty Periods** - PGY-1 residents should have 10 hours, and must have 8 hours, free of duty between scheduled duty periods. *Intermediate-level residents (PGY-2)* should have 10 hours free of duty, and

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## . . . The New Duty Hour Restrictions

must have 8 hours between scheduled duty periods. They must have at least 14 hours free of duty after 24 hours of in-house duty. *Residents in the final years of education (PGY-3 and PGY-4)* must be prepared to enter the unsupervised practice of medicine and care for patients over irregular or extended periods. These residents should have 8 hours free of duty between scheduled duty periods. Circumstances of return-to-hospital activities with fewer than 8 hours away from the hospital by PGY-3 and PGY-4 residents must be monitored by the program director. [Note: this is a change from previous—now there is more flexibility as residents gain more experience—our goal remains 10 hours off between shifts but upper level residents may choose to remain on duty longer for some circumstances as needed to manage their service or a specific patient. Attention still must be paid to the 80 hour limit per week.]

**Maximum In-House On-Call Frequency** - PGY-2 residents and above must be scheduled for in-house call no more frequently than every 3<sup>rd</sup> night (when averaged over a 4-week period).

Key terms: **Must** - A term used to identify a requirement which is mandatory or done without fail. This term indicates an absolute requirement. **Should** - A term used to designate requirements so important that their absence must be justified.

### *Additional Information:*

- [Duty Hours: ACGME Approved Standards Website](#)
- [Approved 2010 Standards](#)
- [Resident Duty Hours in the Learning and Working Environment: Comparison of 2003 and 2011 Standards](#)

### Message from the Program Director



June and July are months of fun celebration and exciting transitions for the residency! On June 3<sup>rd</sup> we listened to an amazing line-up of resident presentations at our Annual Resident Research Day with guest speaker Dr. George Saade, Professor and Division Director of Maternal-Fetal Medicine at UTMB and current President of SMFM. Thank you to Dr. Chip Landen, Director of our Resident Research Program, and the individual mentors for their guidance and support of resident scholarship at UAB. One strength of our program is the opportunity for residents to be involved in quality research and other scholarly activity during their four years here—we have highlighted a glimpse of this with the list of resident manuscripts and presentations from AY 2010-2011 on pages 8 - 9. We also celebrated our chiefs' graduation in June at the Pre-Chief's party June 4<sup>th</sup> at the home of Dr. and Mrs. Alvarez and at the Chief's party June 11<sup>th</sup> at the VCC. Please see page 6 where we highlight the awards presented to residents and faculty/fellows. The graduating chiefs are off to the next exciting phase of their careers (see page 3) and as I write this, the new interns are starting their first week of residency. We have another fabulous class of incoming interns (see page 7) and we all look forward to getting to know them and working with them over the next four years.

As always, a huge 'thank you' to our Education Office faculty and staff for their hard work and support of our residents, students, and the educational program in our department: Dr. Julie Walsh-Covarrubias, Associate Professor and Associate Director of Education; Nancy Atkins, Residency Program Coordinator; Christy Willis, Clerkship Coordinator; and Candace Goudy and Nicholas Foster, office assistants. We could not keep this wonderful program going strong without you!

# Farewell To The Chiefs

## Important Dates

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### July

- 18: MS OB Orientation for Switchover Students
- 20: SEC Mtg
- 28-29: CREOG Ed Retreat
- 29: CREOG Review Resident Mtg

### August

- 5: PGY2 Research Mtg with Dr. Landen Intern Party @ Dr. Straughn's
- 12: Resident Mtg
- 15-17: MS Blk 1 Oral Exams
- 19: MS Blk 1 Final Exams
- 21: End of Blk 1
- 22: MS Blk 2 Orientation
- 23: Med Student Reception
- 27: Resident Mtg

### September

- 1: ERAS Opens  
ABOG App Process Begins  
USMLE Step 3 Exam DL
- 13-17: SLS Ntnl Mtg
- 14: SEC Mtg
- 16: Resident Mtg
- 19: MS OB Orientation for Switchover Students
- 30: PGY2 RRD Rough Draft Due



*"We wish you much success and happiness in all your future endeavors!"*

— The Department of ObGyn

**Shannon Bryant Ellis, MD**, who has been in Birmingham since attending UAB Undergraduate Medical School, has decided to make Birmingham her home. She has joined an ObGyn practice at St. Vincent's Hospital. **Amy Doss, MD** is headed northwest to begin her MFM fellowship at Oregon Health & Sciences University in Portland. She said that she will miss . . . the close friendships with co-residents, fellows, and faculty and . . . being pushed to be the best that she can be! **David Ellington, MD**, the newly-wed, is joining our own Pelvic Medicine & Reconstructive Surgery. He tells us that he will miss OB the most because it is great to be a part of some of the residents first OB experiences. **Janelle Fauci, MD** isn't going far either . . . in distance, that is. She begins her fellowship in the Division of Gynecologic Oncology. **Hope McLean, MD**, is staying in-state, but just going to the far south of it. She is going into private practice in Mobile, AL. Hope says that she will most miss the lifelong friends that she has made here, but I bet she'll get to see many of them every year at Progress!! **Emily Evans-Hoeker, MD** is North Carolina bound. She is the newest member of the REI fellowship at UNC. The annual Resident Retreat is what Emily will miss the most. **Amelia Sutton, MD, PhD** seems to like to doing things in pairs . . . First, dual degrees and now, a combined fellowships in MFM and Genetics here in our department. Amelia tells us that she will miss operating on Onc as well as one-on-one with the interns and lower-level residents because it is, in her words . . . "super fun!"

This is a diverse and talented group of young physicians who will unquestionably excel in this new stage of their lives.

*"The mediocre teacher tells, the good teacher explains, the superior teacher demonstrates, the great teacher inspires."*

*- William Arthur Ward*

# Education Corner

## Teaching Tip: 5-Clinical Microskills for Teaching

Attendings, fellows, and residents can have a difficult time finding ways to integrate their teaching responsibilities into the clinic. This can be attributed to the busy clinic schedules, but also because teaching can add time to an already full day and, those who are in an instructor position may not know of any time-efficient instructional strategies.

By using the teaching method known as the *One-minute Preceptor*, integrating teaching into the busy clinic can be a more beneficial approach than simply trying to teach on the fly. The *One-minute Preceptor* provides a framework for instructor-student interactions. It is brief and easy to learn.

The *One-minute Preceptor* involves using 5-microskills when discussing a patient. It can not only improve integration of teaching into the clinic, but these microskills also help instructors to better diagnose the learner's knowledge and understanding as well as guiding their feedback to the learners.

### The Five-Clinical Microskills:

#### 1. **Obtain a commitment**

- Ask the learner what he/she thinks is going on regarding a patient

#### 2. **Probe for supporting evidence**

- After learner has committed to what he/she thinks, ask "why" before you ever offer your opinion

#### 3. **Teach general rules**

- Now you likely know what the learner needs or wants to know so provide a general rule that targets this case but that can also be generalized to similar cases

#### 4. **Reinforce what was right**

- If the learner did something correctly, inform them, as they may not realize it (*be specific*)

#### 5. **Correct mistakes**

- If the learner made a mistake, find an appropriate time/place to discuss what took place and how to correct it in the future

Click here for the [5-Clinical Microskills Quick Reference](#). For more on this subject and teaching topics, visit the [CERT Website](#).

## Experience Is the Best Teacher

Taken from the APGO Website: *Teaching Tips* (<http://www.apgo.org/getinfo/teaching-tips.cfm>)

You are listening to a physician and you hear these words: "Let me tell you about a case that happened to me." Suddenly your ears perk up and you are fully engaged. Chances are you will remember this case better than the content of the talk, particularly if the physician uses an example that is personal and has an emotional element, such as an unexpected outcome ("She nearly bled out and we had to transfuse her repeatedly to keep her alive.").

The often overlooked, but obvious, truth is that physicians, like everyone else, enjoy hearing real-life stories. Physicians want to hear about other physicians' experiences, particularly the near misses. They use their clinical reasoning skills to see if the patient's patterns fit with what they know (scripts) or if they need to adjust their thinking.

When you ask medical learners to problem-solve on your case, you can learn a lot about their clinical reasoning skills. A study of distinguished clinical teachers found that they use scripts on teaching rounds to quickly diagnose the patient's problems and, simultaneously, to diagnose the learner's level of understanding.<sup>1</sup>

Use your real-life case experiences to help others develop their clinical reasoning skills and to potentially prevent a mishap. Real experiences are inherently attention-getting and can be used in any number of ways to teach learners how to problem solve.<sup>2</sup>

### Sources

<sup>1</sup> Irby D. How attending physicians make instructional decisions when conducting teaching rounds. *Acad Med* 1992; 67(10):630-638.

<sup>2</sup> Edwards J, Marier R. Clinical teaching for medical residents. New York: Springer. 1988; 70-71.

# Residency Program Curriculum

## NEW Ambulatory GYN Rotation

There has been a need and desire by the residency to enhance outpatient education and exposure to patients with common gynecologic diagnoses. Allowing a resident to serve alongside a faculty attending, seeing work-in patients or those needing and/or wanting earlier care can facilitate both the needs of the patient as well as educational objective of the residency.

*Rotation Objective:* To provide a setting where upper level residents can experience ambulatory OBGYN in a private practice setting with direct supervision of attending faculty from Division of Women’s Reproductive Health.

*Setting:* Supported by the Division of Women’s Reproductive Healthcare (WRH), the resident would have his/her own daily schedule of patients. Patients when calling for an appointment with a certain provider would be offered a sooner appointment with Dr. “X’s” senior resident physician if the patient desired. These patients would then be placed on a schedule to be seen by the resident, with the faculty attending to observe/offer advice/or aid with disposition. If surgical intervention is warranted that resident would be allowed to be present for her case even if off service at the time of scheduling for continuity of care. Allowing the resident to experience and see unique office situations such as in office procedures and specific counseling would be emphasized throughout their rotation. Additionally residents would be responsible for learning proper coding, documentation, and lab follow up. On days where seeing patients at the WIC, they would additionally be responsible for aiding faculty with postpartum rounding. If needed, they may also be utilized to first assist cesarean sections and collaborate with labor care of select patients while with the individual faculty for the day.

### Thanks to the WRH Faculty!!

- Brian Gleason, MD
- Heather Greer, MD
- Kim Hoover, MD
- Todd Jenkins, MD, *Division Director*
- LauraLee Joiner, MD
- Chere’ L. Stewart, MD

## Schedule

| Mon  | Tue  | Wed  | Thu  | Fri                                 |
|--|--|--|--|-------------------------------------|
| <b>AM:</b> Continuity Clinic<br><b>PM:</b> Gyn Ultrasound Reading, TKC | <b>AM:</b> Resident clinic, WIC<br><b>PM:</b> Resident clinic, TKC | <b>AM:</b> Resident clinic, WIC<br><b>PM:</b> Resident clinic, TKC | <b>AM:</b> Resident clinic, WIC<br><b>PM:</b> Resident clinic, TKC | <b>AM:</b> OR<br><b>PM:</b> Lecture |

# Awards & Accolades

## Resident Selected Award Recipients . . .

**Best Teaching Chief Resident**  
Shannon Bryant, MD

**Best Teaching Fellow**  
Stacy H. Shomento, MD

**Charles E. Flowers Award**  
Jared Roberts, MD

**Chairman's Award of Excellence**  
David Rich Ellington, MD  
Amelia Louise Maple Sutton, MD, PhD

**Award of Excellence in Surgical Education**  
J. Michael Straughn, MD

**Resident Research Day Award**  
Britt Erickson, MD

**CREOG Faculty Recognition Award**  
J. Michael Straughn, MD

(Mentor: Michael Straughn, MD)  
Title: *Screening Behaviors and Cultural Barriers in Women with Newly Diagnosed Cervical Cancer*

**Society for Laparoendoscopic Surgeons Award**  
Britt Erickson, MD

**The American Assc of Gyn Laparoscopists**  
David Ellington, MD

**Faculty Awards for Excellence Recognition**  
Richard Davis, MD  
Todd Jenkins, MD  
J. Michael Straughn, MD  
Janet McLaren, MD

**APGO Excellence In Teaching Award**  
Ronald Alvarez, MD

## Medical Student Selected Award Recipients . . .

### Resident Teaching Awards

#### PGY1

Deidre Gunn, MD  
Caroline Juneau, MD  
Laura Divine, MD

#### PGY2

Jennifer Brown, MD  
Ali Parden, MD  
Christy Walters, MD

#### PGY3

Britt Erickson, MD  
Akila Subramaniam, MD  
Lindsay Frederick, MD

#### PGY4

David Ellington, MD  
Amy Doss, MD  
Hope McLean, MD

### Faculty & Fellow Teaching Awards

#### GynOnc

Jacob Estes, MD

#### REI

Janet McLaren, MD  
Meaghan Bowling, MD  
Stacy Shomento, MD

#### WRH

Todd Jenkins, MD

#### MFM

Alice Goepfert, MD  
Luisa Wetta, MD  
Abi Abramovici, MD

#### UroGyn

Ed Varner, MD  
Jonathan Gleason, MD  
Alicia Ballard, MD

## Other Special Recognition . . .

- **APGO Surgical Scholars Program:** The program's purpose is to refine the teaching skills of Ob/Gyn physician faculty to enable them to effectively teach and evaluate learners in hysteroscopic surgery.  
*Class of 2010 Graduate: Janet McLaren, MD*
- **PGY2 Resident Research Award: Michael Polin, MD** (Mentor: Holly E. Richter, MD, PhD)  
Title: *Symptomatic Rectocele Repair: Long-term Effects on Symptom Specific Distress and Impact on Quality of Life*

# Welcome ObGyn Interns



**Vieng Bounkeua, MD, PhD**  
University of California, San Diego, School of Medicine



**Lauren Sanders, MD**  
Louisiana State University Health Sciences Center - Shreveport



**Neil Chappell, MD**  
University of Texas Medical School at Houston



**Amy Goss, MD**  
Medical College of Georgia



**Joe Malek, MD**  
University of Tennessee Health Science Center



**Taylor McPherson, MD**  
University of Mississippi School of Medicine



**Nicki Nguyen, MD**  
University of Alabama School of Medicine



**Natasha Spencer, MD**  
Florida State University College of Medicine

## A Word from the Administrative Chiefs

The 2011-2012 academic year is off to a great start! Our new interns are a diverse, diligent, and intelligent group. We are looking forward to seeing them develop into fantastic physicians and leaders in our field. We are excited about this year and many upcoming events. In the next few months, we look forward to our annual Intern Party and our Resident Retreat. We are grateful to the faculty and fellows who cover the services for this event, which is truly a unique privilege for our program. We look forward to revisiting the Cystoscopy Curriculum and Colposcopy Course this year.

We have an exciting agenda in the coming months! Pretty soon it will be time to start recruiting for another fantastic group of interns.

***Thanks again and keep up the good work!***



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# Resident Scholarship: Academic Year 2010-11

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We are very proud of the scholarly accomplishments of our residents. They have published in prestigious peer-reviewed medical journals as well as presented their work at regional, national, and international conferences. The following is a list of accepted manuscripts, presentations, and posters by the ObGyn residents for the Academic Year 2010-11.

## Manuscripts

- Bowling CB, Greer WJ, **Bryant SA**, Gleason JL, Szychowski JM, Varner RE, Holley RL, Richter HE. Testing and Validation of a Low-Cost Cystoscopy Teaching Model: A Randomized Controlled Trial. *Obstetrics & Gynecology*. July 2010. Vol.116 (1): 85-91.
- **Fauci JM**, Schneider KS, Whitworth JM, **Erickson BK**, **Subramaniam A**, Kim K, Huh WK. Referral patterns and incidence of CIN in adolescent and pregnant patients: the impact of the 2006 guidelines. In press: *Journal of Lower Genital Tract Disease*.
- **Fauci JM**, Sutton AL, Schneider KE, Frederick PJ, Kilgore LC, Barnes MN. Assessment of risk factors for 30 day hospital readmission following surgical cytoreduction in epithelial ovarian carcinoma. *Int J Gynecol Cancer*. 2011 Mar 15. [Epub ahead of print].
- Morgan DE, **Ragheb CM**, Lockhart ME, Cary B, Fineberg NS, Berland LL. "Acute pancreatitis: computed tomography utilization and radiation exposure are related to severity but not patient age." *Clinical Gastroenterology and Hepatology*. 2010; 8:303-308.
- **Subramaniam A**, **Fauci JM**, Schneider KE, Whitworth JM, **Erickson BK**, Kim K, Huh WK. Cervical cancer screening and its relationship to invasive cervical cancer in the modern era. *J Low Genit Tract Dis*. 2011 Apr;15(2):110-3.
- Tita AT, Wetta LA, Bates E, **Doss A**, **Erwin JL**. Discussion: 'Infant death among Ohio residents' by Donovan et al. *Am J Obstet Gynecol*. 2010 Jul; 203(1):e8-9.
- Whitworth JM, Schneider KE, **Fauci JM**, **Sutton AL**, Bevis KS, Straughn JM, and Alvarez RD. The clinical impact of computed tomography following primary chemotherapy in patients with epithelial ovarian cancer. *Clinical ovarian cancer*. 2010; 3 (1):52-55.

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## Presentations / Posters

- **Doss AE**, Mancuso MS, Cliver S, Chapman V, Jenkins SM. Gestational age at delivery and perinatal outcomes in twin gestations. Society of Maternal Fetal Medicine Annual Meeting, February 2011, San Francisco, CA (*Poster*).
- **Elder JW**, Goepfert AR, Wood A. Chapman, V Pelvic Exam Skills Training for Third Year Medical Students: A Randomized Study of Gynecologic Teaching Associates versus a Computerized Simulator. CREOG / APGO Annual Meeting, March 2011, San Antonio, TX (*Oral presentation*).
- **Ellington DR**, Mann M, Bowling CB, Relichman ER, Greer WJ, Szychowski JM, Richter HE. Abdominal and Perineal Rectopexy: A Prospective Analysis of Quality of Life and Objective Cure in Women Undergoing Surgery for Rectal Prolapse. 37th Annual Scientific Meeting of the Society of Gynecological Surgeons, April 2011, San Antonio, TX (*Poster*).
- **Evans-Hoeker E**, Bates GW. Impact of Race, Patient Perceptions and Physician Counseling on Fertility Treatment Outcomes and Weight Loss. American Society for Reproductive Medicine, October 2010, Denver, CO (*Poster*).

Continued on next page . . .



## . . . Resident Scholarship: Academic Year 2010-11

- **Fauci JM**, Whitworth J, **Subramaniam A**, Zhang B, Frederick PJ, Schneider K, Straughn JM, Kilgore LC. Prognostic significance of the relative dose intensity of chemotherapy in primary treatment of epithelial ovarian cancer. International Gynecologic Cancer Society Biennial Meeting, October 2010, Prague, Czech Republic (*Poster*).
- **Fauci JM**, Schneider KE, Whitworth JM, Straughn JM. Utilization of palliative care at the end of life: are we using too much anticancer therapy? American Society of Clinical Oncology Annual Meeting, June 2011, Chicago, IL (*Poster*).
- McKnight KK, **Nodler JL**, Cooper JJ, Chapman VC, Cliver SP, Bates GW. Body mass index associated differences in response to ovulation induction with letrozole. Society for Gynecologic Investigation 58<sup>th</sup> Annual Meeting. March 2011, Miami Beach, FL (*Poster*).
- **Nodler JL**, Shomento SH, Cooper JJ, Bates GW. Pregnancy Outcomes Following Repeat Myomectomy. American Society for Reproductive Medicine 67<sup>th</sup> Annual Meeting, October 2010, Orlando, FL (*Poster*).
- **Walters CL**, Whitworth JM, Schneider K, **Fauci JM**, Smith HJ, Straughn JM, Barnes M. Operative morbidity and mortality in octogenarians with ovarian cancer. American Society of Gynecologic Oncologists, June 2011, Chicago, IL (*Poster*).
- Wetta L, Mancuso M, **Sutton A**, Pekarek D, Cliver S, Biggio J. Association between Polycystic Ovarian Syndrome and First Trimester Pregnancy Associated Plasma Protein-A (PAPP-A), Society of Maternal Fetal Medicine Annual Meeting, February 2011, San Francisco, CA (*Poster*).
- **Zsebk G**, Kim K, Straughn JM, Landen CL. Management of Complex Pelvic Masses Using the OVA1 Test: A Decision Analysis. Society of Gynecologic Oncologists Annual Meeting on Women's Cancer, March 2011, Orlando, FL (*Oral Presentation and Poster*).

## UAB Department of OB/Gyn at the Races

### St. Jude Memphis Marathon and Half-Marathon

On December 4, 2010, Drs. Britt Erickson, Stacy Shomento and Akila Subramaniam finished in the St. Jude Memphis Marathon and Half-Marathon along with L&D nurses, Sandy Waddle and Kerra Perkins.

### Team Magic Buster Britton Memorial Triathlon

On June 11, 2011, several department members as well as spouses competed in the Team Magic Buster Britton Memorial Triathlon at Oak Mountain State Park. Winner of the female relay category was Team "Merkins" with Drs. Holly Richter, Alice Goepfert, and Alicia Ballard. Individual competitors were Drs. Chip and Donna Landen, Dr. Paul Goepfert (#4 in male age category), and Dr. Jay Wellons.

**We hope to see more of you out there next year so keep training.**

*Go Team UAB!!*



Clockwise (top left): Drs. Richter, C. Landen, Ballard, P. Goepfert, D. Landen, A. Goepfert, J. Wellons

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