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P. Jordan

Elective Report – Polly Jordan

I undertook my elective placement in the Department of Obstetrics and Gynaecology at The Royal London Hospital. The elective placement comprised both clinical and academic components and enabled me to spend more time in a speciality which I love and hope to pursue as a career.

Clinical

Obstetrics

I was keen for this placement to be quite practical and spent a large proportion of my time on labour ward. I love going to theatre and took this opportunity to really focus on developing my basic surgical skills. I achieved the following:

Theatre

I worked to develop my assisting skills and assisted in many obstetric operations, largely caesarean sections (elective and emergency) but also other procedures such as perineal repair and removal of retained placenta (see attached surgical log). I was able to first assist and worked to develop my skills in this area. In particular, I enjoyed having the opportunity to receive some training in suturing and was able to perform a number of skin closures. I am learning how to prep a patient at the start of the operation and on a number of occasions I performed the steps at the end of the operation checking the uterine tone, performing vaginal toilet, administering PR analgesia and assisting with wound cleaning, dressing and positioning of the patient. I also worked to really observe the different steps of the caesarean section operation and understand the rationale behind each. I am working to develop my knowledge of intra-operative haemostasis and during my placement observed post-partum haemorrhage due to uterine atony, retained placenta and perineal damage and studied the management of these conditions. I took an interest in the documentation – the pre-operative assessment, consent, the WHO surgical safety checklist for maternity cases, the operative notes and on-going surgical audit. I reflected on the differences between high and low risk surgical cases and where possible followed patients up post-operatively.

Labour ward

I spent time shadowing the on-call obstetric team. I was able to observe the management of antenatal conditions such as pre-eclampsia, gestational diabetes and placenta praevia. I observed the management of intrapartum complications such as failure to progress, suspicious or pathological CTG, meconium and maternal pyrexia. I had some experience of premature labour and second trimester miscarriage. I attended the Barkantine birth centre and was able to perform some antenatal booking assessments for women at 36 weeks gestation under supervision. I was able to reflect on the options available to women in terms of place of birth and the risks and benefits associated with home birth vs. birthing centre vs. hospital. I am reading the Birthplace study as I am interested in the evidence supporting the delivery of different modes of intrapartum care. I undertook general ward tasks such as

female catheterisation, shadow prescribing, cannulation and taking bloods and have started learning to perform vaginal examinations under supervision.

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Gynaecology

I participated in the following:

- Shadowing junior doctors on the wards and assisting with ward jobs
- Gynaecology on-call including seeing patients in A & E
- Speculum and bimanual examinations performed both in theatre and on the ward
- Spent time on the Emergency Gynaecology Unit (EGU)
- Attendance at Gynaecology theatres – general gynaecology and urogynaecology
- Teaching sessions including practical Minimal Access Surgery (MAS) teaching

Research

I have had the opportunity to get involved in research with the Women's Health Research Unit and am undertaking a systematic review. The outline for the review is as follows:

Systematic review: Variations in outcomes used for intervention effectiveness research in postpartum weight loss: a systematic review

Justification for research: Lack of consistency in outcome reporting of postpartum weight loss interventions leads to difficulty with comparison of effects between trials. There are currently only a small number of rigorous trials and a recent Cochrane review has recommended that further work be done in this area. Clarification of the quality of outcome measures could allow for better trial design in the future

Aim: To systematically evaluate variations in outcomes used to assess weight loss interventions in postpartum women

Methodology:

1. *Search strategy* Applied to: Medline, Embase, Cochrane, CINAHL and MIDIRS
2. *Study selection*

Screening – assessed by PJ

Eligibility – assessed by 2 authors (PJ and AB)

Inclusion criteria: SR, RCT's and Observational studies assessing maternal outcomes related to weight loss interventions

Exclusion criteria: Studies in which postnatal women are not the primary population; other study design

3. *Data extraction + quality assessment* (PJ and AB)
4. *Grouping of outcomes*
5. *Data analysis*

Progress: Protocol written, searches complete. Over 3000 papers identified, of which 427 immediately excluded as duplicates. I have undertaken further training in Endnote and am using this as the citation manager. Currently I am undertaking the initial screening and will then proceed to gain the full text articles for all potential papers. These will then be assessed by PJ and AB to decide inclusions. Data extraction will then commence. The data extraction forms for both RCT's and observational studies have already been adapted for this study.

Timeline: This project is to be completed by September 2014.

Reflection

I thoroughly enjoyed this placement and it confirmed for me that obstetrics and gynaecology is very much the career I wish to pursue. The highlight of this placement has been the theatre experience although I have enjoyed all the activities I have undertaken. The only thing I wasn't able to achieve in this placement was doing a normal vaginal delivery due to the number of midwifery students also needing to do deliveries but I'm sure I will have plenty of opportunity to do this in the future.

I feel ready for my FY1 post. Whilst I know it will be a huge learning curve, I feel ready to make this step now and have worked hard to achieve as much as I can whilst still a student. I have arranged to undertake my pre-employment shadowing in Obstetrics and Gynaecology and am very much looking forward to this time.

In terms of my academic activity, I have thoroughly enjoyed the start of this systematic review. This was the next area of research in which I wished to gain some experience and so I feel very grateful to have the opportunity to undertake this work in such a good department where I think I will learn very good research technique and be well supported.

Future plans

- 3 weeks shadowing FY1's in O & G at Croydon University Hospital
- Study day – NE Thames Academic O & G trainees day 13th June
- Study day – Fetal monitoring in labour (CTG) course, St. Georges Hospital 16th June
- Study day - Surgical training for austere environments O & G speciality day at the RCOG 13th August
- Overseas work – I am hoping to join a team travelling to Uganda to perform fistula surgery in March 2015. I am also hoping to visit the Hamlin Fistula Hospital in Ethiopia
- Complete systematic review by September 2014
- Complete pelvic floor manuscript (Chaliha and Knowles) and get published
- O & G FY1 job
- Research (O & G) FY2 post
- Apply for ST training number

Date	Procedure	Role	Consultant	Comments
1 28/04/2014	LSCS (elective)	2nd assistant	Khan	
2 28/04/2014	Instrumental delivery (labour ward)	Observed	Khan	Forceps
3 28/04/2014	LSCS (elective)	1st assistant	Khan	skin closure
4 29/04/2014	LSCS (elective)	2nd assistant	Hogg	
5 29/04/2014	LSCS (elective)	2nd assistant	Okaro	
6 29/04/2014	Instrumental delivery (theatre)	Observed	Hogg	Ventouse then forceps
7 02/05/2014	Instrumental delivery + repair episiotomy and 2° perineal tear (theatre)	1st assistant	Khan	Ventouse
8 02/05/2014	Evacuation retained placenta	Performed supervised	Khan/ Duffy	performed under supervision
9 02/05/2014	LSCS (emergency)	Observed	Khan	
10 02/05/2014	Instrumental delivery + repair episiotomy and 2° perineal tear (theatre)	1st assistant	Khan	
11 06/05/2014	PPH, EUA, removal retained placenta + repair 2° tear	1st assistant	Ram	
12 06/05/2014	LSCS (elective)	2nd assist	Ram	skin closure
13 06/05/2014	LSCS (elective)	observed	Hogg	done under GA (mat preference)
14 06/05/2014	LSCS (emergency)	1st assistant	Ram	skin closure
15 07/05/2014	LSCS (elective) + tubal ligation	1st assistant	Khan	skin closure
16 07/05/2014	Hysterectomy + open myomectomy	2nd assistant	Khan	removal 2 large fibroids (12cm a
17 14/05/2014	LSCS (elective)	2nd assistant	Khan	skin closure
18 14/05/2014	TAH + BSO	2nd assistant	Chailha	
19 20/05/2014	LSCS (elective)	2nd assistant	Ram	skin closure
20 20/05/2014	repair 2° tear, extensive lacerations to labia, vagina and perineal body	observed	Hogg	
21 20/05/2014	LSCS (elective)	1st assistant	Ram	skin closure
22 20/05/2014	trial instrumentation + LSCS	scrubbed, performed VE	Sanghi	performed VE
23 21/05/2014	LSCS (elective)	2nd assistant	Khan	skin closure
24 21/05/2014	LSCS (elective)	1st assistant	Khan	skin closure
25 27/05/2014	LSCS (elective)	2nd assistant	Khan	skin closure
26 27/05/2014	LSCS (elective)	1st/ 2nd assistant	Khan	
27 28/05/2014	LSCS (elective)	2nd assistant	Khan	
28 28/05/2014	LSCS (elective) + tubal ligation	2nd assistant	Khan	skin closure
29 28/05/2014	LSCS (elective)	2nd assistant	Khan	skin closure
30 28/05/2014	TURBT	scrubbed	Patnik	inserted 3 way male catheter