

Common competency framework competences Medical leadership framework competences Health inequality framework competences

Royal College of Obstetricians and Gynaecologists

RCOG Gynaecological Oncology Curriculum 2013

Approved as of 12 August 2013



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Module 1: General Assessment of a Gynaecological Oncology Patient

Learning outcomes:

- To understand and demonstrate appropriate knowledge, skills and attitudes required to make an appropriate clinical assessment of a patient with a suspected or known gynaecological cancer:
- Obtain an appropriate history
- Perform an appropriate examination
- Communicate results of prior investigations
- Initiate further investigations
- Communicate clinical plan to patient and relatives

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
A broad knowledge of the pattern of presentation of gynaecological malignancies Knowledge of investigations required to confirm the diagnosis of gynaecological malignancy Assessment of patient referred by 2-week wait (rapid referral). Knowledge of care pathways for suspected gynaecological cancer Preoperative investigation of patients, including radiology, assessment of fitness for surgery Understanding of the indications and limitations of screening for gynaecological cancer: - Cervix - Ovary (general and high-risk populations) - Endometrium (hereditary nonpolyposis colorectal cancer)	1, 2	Take an appropriate history: - Symptoms and comorbidity - Family history and genetic susceptibility Perform a clinical examination Counsel patients about the diagnosis, investigations and appropriate treatments for gynaecological cancer including adverse effects and complications of treatment Communicate to patients the results of investigations and treatment, including prognosis Anticipate results of radiological investigations Counsel appropriately about screening and interpret screening results	1, 3, 4	Ability to take a history and perform an appropriate examination Ability to counsel patients regarding a diagnosis of gynaecological malignancy and the subsequent management Ability to initiate preoperative work-up and staging investigations Ability to identify the high-risk surgical patient and liaise with anaesthetists Ability to liaise with clinical oncology, medical oncology and palliative care colleagues when appropriate Counselling skills and knowledge of screening process	1, 3, 4	Observation of Assisting and discussion with senior staff Communication skills course Specific task training and supervision Appropriate postgraduate course	Logbook. Mini-CEX Case-based discussions. Attendance at an advanced communication skills course British Society for Colposcopy and Cervical Pathology/RCOG Accreditation



	Competence	e level		Not required		
Module 1 General Assessment of a Gynaecological Oncology Patient		Level 1		Level 2		Level 3
	Date	Date Signature		Date Signature		Signature
General Assessment of a gynaecological oncology patient						
Initiate appropriate investigations to assess fitness for surgery						
Identify and manage surgical patients with complex needs (e.g.						
multiple comorbitities)						
Liaise with anaesthetic colleagues about surgical patients with						
complex needs						
Attendance at an advanced communications skills course						



Authorisation of signatures (to be completed by the clinical trainers)								
Name of clinical trainer (please print)	Signature of clinical trainer							



COMPLETION OF MODULE 1 I confirm that all components of the module have been successfully completed:										
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor								



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Module 2: Pre-, Peri- and Postoperative Care Objectives

Learning outcomes:

- To understand and demonstrate appropriate knowledge, skills and attitudes in relation to patients undergoing surgery for gynaecological malignancies:
 - plan appropriate surgery
 - identify surgical and anaesthetic risks
 - prepare patients for surgery
 - manage per-, intra- and postoperative complications
 - nutrition and total parenteral nutrition (TPN)

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Type of surgery appropriate for each gynaecological cancer (see separate modules) Fluid and electrolyte balance Elemental feeding and TPN	1	Counsel patients regarding diagnosis, management and risks of treatment Recognise and manage intraoperative complications Postoperative care and complications arising Manage the following clinical problems: Intraoperative:	1, 2, 3, 4	Ability to interpret preoperative investigations and liaise with the anaesthetic department Ability to counsel patients regarding treatment options Ability to select and perform appropriate surgical management of gynaecological cancer according to patient's needs Ability to manage postoperative care and complications thereof Ability to counsel patients and relatives regarding diagnosis, investigations and to discuss treatment options, advantages and disadvantages of each Ability to convey decisions of multidisciplinary team meeting to patients and relatives, including prognosis and palliative care Ability to liaise with colleagues and other health professionals regarding coordinating investigations and management strategies pertinent to individual patients	1, 3, 4	Direct supervision from senior colleagues Attendance at Multidisciplinary Team meetings Ward attendance Supervision in operating theatre Intensive care and high-dependency unit ward rounds Royal College of Surgeons' Care of the Critically III Surgical Patient course	Logbook Multidisciplinary team attendance Course assessment OSATS Mini-CEX Case-based discussions Audit of complications



Knowledge criteria GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
	Decide when TPN or enteral feeding is appropriate		Ability to order and interpret: • Fluid balance • Blood investigations: U&E, FBC, LFT Ability to prescribe thromboprophylaxis. Ability to assess patient and establish when enteral feeding or TPN is required All Gynaecological Oncologists should be competent to deal with vascular, bowel and urinary tract injury. Limits of practice will depend upon support available and experience. The ability to use discretion, recognise their limitations and summon help from other specialties when needed is essential			



Module 2: Pre-, Peri- and Postoperative Care			ce Level		Not required				
			Level 1		Level 2		Level 3		
		Date	Signature	Date	Signature	Date	Signature		
Preparation for operat	ing theatre								
Selection of procedure	2								
Consent									
Bowel preparation									
Thromboprophylaxis									
Incision and exposure									
Management of comp	lications:								
Haemorrhage		T				<u> </u>			
Haemornage	Intrapoerative								
	Postoperative								
Bowel Small bowel injury									
	Mesenteric injury								
	Large bowel injury								



Urinary	Bladder injury			
	Ureteric injury			
	Urinary retention			
Appropriate postoperat	ive care			
Nutrition				
Infection				
Wound complications				
Lymphoedema				
Communication				
Communication with pa	tient			
Communication with re	latives			



Authorisation of signatures (to be completed by the clinical trainers)									
Name of clinical trainer (please print)	Signature of clinical trainer								



COMPLETION OF MODULE 2 I confirm that all components of the module have been successfully completed:										
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor								



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Module 3: Generic Surgical Skills in Gynaecological Oncology

Learning outcomes:

- To achieve surgical skills appropriate for a subspecialist gynaecological oncology surgeon:
 - anatomical knowledge
 - surgical skills
 - personal audit

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Anatomy of the female abdomen and pelvis, including blood supply, lymphatic drainage, nervous system and the course of the ureter	1	Surgical diagnosis and management of gynaecological cancers: - Ovary - Endometrium - Cervix - Vulva - Vagina - Fallopian tube Liaison with surgical colleagues for assistance in complicated cases	1, 2, 3	Ability to perform hysterectomy (open and laparoscopically) Ability to perform radical hysterectomy (open and laparoscopically) Ability to perform pelvic lymph node dissection (open and laparoscopically) Ability to perform para-aortic lymph node dissection (open) Ability to perform infracolic and supracolic omentectomy Ability to perform peritoneal stripping Ability to perform fine-needle aspiration or biopsy of superficial lymph node Ability to perform Trucut biopsy Ability to perform (with the assistance of surgical colleagues if necessary; see modules 13 and 14): - Exenterative surgery - Urinary diversion procedures - Splenectomy - Bowel resection - Ileostomy/colostomy	1,2,3	Observation of assisting and discussion with senior staff Direct and indirect surgical supervision of surgical skills to appropriate competency by surgical staff Specific task training and supervision Appropriate postgraduate course	Logbook of competences and experience OSATS Case-based discussions Surgical logbook Audit of complications



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
				 Diaphragmatic resection / mobilisation of the liver Panniculectomy 			
				Ability to perform partial vaginectomy (vaginal and abdominal approach) and radical excision of the vagina			
				Ability to organise anterior, posterior and total exenteration, including leading the surgical procedure			
				Ability to initiate discussion of management at multidisciplinary team meeting			



	Competence	e level	Not required					
Module 3: Generic Surgical Skills in Gynaecological Oncology		Level 1		Level 2		Level 3		
	Date	Signature	Date	Signature	Date	Signature		
Generic Surgical Procedures								
Groin node dissection								
Laparoscopic hysterectomy (LAVH or TLH)								
Lapraroscopic oophorectomy								
Abdominal Hysterectomy (open)								
Radical hysterectomy (open and laparoscopic)								
Panniculectomy								
Open pelvic lymph node dissection								
Para-aortic lymph node dissection								
Laparoscopic pelvic lymph node dissection								



Procedures (continued)			
Para-aortic node dissection (laparoscopic) ¹			
Biopsy of superficial lymph nodes			
Fine-needle aspiration			
Trucut biopsy			
Infracolic omentectomy			
Supracolic omentectomy			
Peritoneal stripping			
Adhesiolysis			
Appendicectomy			
Splenectomy			
Partial vaginectomy (vaginal approach)			
Partial vaginectomy (abdominal approach)			
Radical excision of the vagina			
			<u> </u>

¹ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



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Diaphragmatic resection / mobilisation of liver							

Procedures (continued)				
Exenteration	Gynaecological contribution (e.g. vaginectomy, radical hysterectomy, vulvectomy			
Exemeration	Urological contribution (e.g. cystectomy, ileal conduit			
	Other surgical contribution (e.g. AP resection, myocutaneous skin flaps)			



Authorisation of signatures (to be completed by the clinical trainers)								
Name of clinical trainer (please print)			Signat	Signature of clinical trainer				
OSATS	Fach OSATS	should be successfully completed for Ir	denendent D	ractice on 3 occasions before the modu	le can he sign	ed off		
USATS	Lacif OSATS	should be successfully completed for it	шерениент	ractice on 5 occasions before the modu	ic can be sign	cu on		
	Date		Date		Date			
Pelvic Lymph Node Dissection	Signature		Signature		Signature			
Major Gynaecological Oncology Procedure	Date		Date		Date			
	Signature		Signature		Signature			

Page 17 GMC Good Medical Practice (GMP) Domains: Domain 1: Knowledge, skills and Performance Domain 2: Safety and quality Domain 3: Communication, Partnership and Teamwork. Domain 4: Maintaining Trust



COMPLETION OF MODULE 3 I confirm that all components of the module have been successfully completed:							
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor					



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Module 4: Ovarian Cancer

Learning outcomes:

- To understand and demonstrate appropriate skills and attitudes in relation to managing a patient with a diagnosis of presumed ovarian cancer (risk of malignancy index greater than 250):
 - initial assessment and investigations of suspected ovarian cancer
 - plan subsequent management of suspected ovarian cancer
 - perform appropriate diagnostic or treatment surgery
 - communicate with multidisciplinary team and organise adjuvant treatment
 - plan follow-up

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Aetiology and clinical presentations of	1,2,3	Counsel patient and relatives about:	1,2,	Ability to counsel patients sensitively	1,3,4	Observation of,	Direct observation of
ovarian cancer	1,2,3	- Diagnosis and further therapy	3,4	about the options available and to respect	1,3,1	assisting and	clinical practice by trainers
ovarian cance.		- Surgical options and complications	3, .	patient confidentially		discussion with senior	cimical practice by trainers
Pathology of ovarian cancer		- Medical options		,		medical staff	logbook of competences
<i>5,</i>		- Prognosis		Ability to explain clearly and openly about			and experience
Indications, techniques, limitations and				treatments, complications and adverse		Theatre attendance	·
complications of surgical treatment of		Discuss results of the surgery with patient and relatives and		effects of surgical treatment			OSATS
ovarian cancer		carers				Clinical pathology	
				Ability to formulate and implement a plan		meetings and	Mini-CEX
Surgical pathway of suspected ovarian		Communicate with referral unit and primary care		of management and modify if necessary		multidisciplinary team	
cancer (imaging, tumour markers)						meetings	Case-based discussions
		Perform appropriate surgery for diagnosis and surgical		Ability to liaise effectively with colleagues			
Medical pathway of suspected ovarian		management of ovarian cancer, including optimal		in other disciplines, clinical and non-		Personal study	Chemotherapy module
cancer (histological and cytological		debulking surgery. (see module 3)		clinical			
diagnosis, neoadjuvant and adjuvant						Postgraduate	Colorectal module
treatment)		Management of recurrent disease		Ability to appropriately stage ovarian		education courses	
MA DESCRIPTION OF THE PROPERTY				cancer		NA - d'and ann adam.	
Multidisciplinary team meeting discussions		Discharge from hospital and produce appropriate follow-up		Ability to postore antique debuthing		Medical oncology	
and management planning		plan		Ability to perform optimal debulking		sessions	
Radiological assessment for				surgery for ovarian cancer			
preoperative diagnosis and guided biopsy		Detect and manage physical and psychosexual morbidity		Ability to decide appropriate surgery,		Intensive care and	
preoperative diagnosis and guided biopsy		(e.g. referral to lymphoedema specialist nurse,		including resection of bowel and		high-dependency unit	
Role of laparoscopy in assessment		psychotherapist or counsellor)		formation of stoma		ward rounds	
Surgery:				Torring to it storing			
- Case selection				Ability to select patients for			
- Primary surgery				conservative surgery, e.g. unfit,			
- Interval debulking surgery				stage-4 disease, very young (less			
- Fertility conserving				than 35 years)			



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Medical management of ascites, pleural effusions and bowel obstruction Consideration of all management options including best supportive and palliative care Knowledge of the physical and psychosexual morbidity of cancer diagnosis and treatment				Ability to perform a laparoscopic assessment and biopsy in suspected advanced ovarian cancer to obtain histology Ability to counsel patients regarding entry into clinical trials			



Key:

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Madula 4. Ovarian Cana		Competence level Not require						
Module 4: Ovarian Cand	cer		Level 1		Level 2		Level 3	
		Date	Signature	Date	Signature	Date	Signature	
	Understanding of pathology							
Epithelial ovarian, primary	Counsel patient about management							
peritoneal and fallopian tube cancer	Discuss medical and surgical options							
	Follow-up of treated patient							
	Management of recurrent disease							
	Understanding of pathology							
Gem cell and sex cord /	Counsel patient about management							
stromal ovarian cancer	Discuss medical and surgical options							
	Follow-up of treated patient							
	Management of recurrent disease							
	Understanding of pathology							
Borderline ovarian	Counsel patient about Management							
tumours	Discuss medical and surgical options							
	Follow-up of treated patient							

Page 21 GMC Good Medical Practice (GMP) Domains: Domain 1: Knowledge, skills and Performance Domain 2: Safety and quality Domain 3: Communication, Partnership and Teamwork. Domain 4: Maintaining Trust



² The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



authorisation of signatures (to be completed by the clinical trainers)					
Signature of clinical trainer					

OSATS	Each OSATS	ach OSATS should be successfully completed for Independent Practice on 3 occasions before the module can be signed off					
Major Gynaecological Oncology Procedure	Date		Date		Date		
major dynaccological oncology i roccaure	Signature	ignature Signature Signature					



COMPLETION OF MODULE 4 I confirm that all components of the module have been successfully completed:							
nme supervisor							



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Module 5 Cancer of the Uterus

Learning outcomes:

- To understand and demonstrate appropriate skills and attitudes in relation to managing a patient with a diagnosis of uterine cancer:
 - undertake primary surgical management
 - understand management options to address co-morbidity
 - manage recurrent disease

(nowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessmen
Aetiological factors leading to	1,3	Take a history and investigate patients with suspected	1,2,	Ability to take history and investigate	1,2, 3,4	Direct supervision from	Logbook
endometrial cancer, including obesity,	-	and proven endometrial cancer	3,4	appropriately	3,4	senior colleagues	· ·
estrogens, genetic predisposition		·					Mini CEX
		Histological diagnosis of endometrial cancer		Ability to recognise histological		Attendance at	
Histological types of endometrial cancer				patterns of disease		multidisciplinary team	OSATS
and prognostic implications		Order and interpret investigations of endometrial cancer				and pathology	
		(e.g. magnetic resonance imaging)		Ability to interpret preoperative		department	Multidisciplinary team
Preoperative investigation of patients,				investigations and liaise with anaesthetic			attendance
including radiology, assessment of		Formulate a management plan		department		Attendance at	
fitness for surgery						multidisciplinary team	Laparoscopic skills cours
		Ability to liaise with anaesthesia department		Ability to counsel patients regarding		with radiologist	
Risk of major surgery (surgical and				treatment options and histology			Audit of complications
anaesthetic)		To counsel patients regarding diagnosis, management				Ward attendance	
		and risks of treatment		Ability to select and perform			
Preoperative care of patient undergoing				appropriate surgical management of		Supervision in	
major surgery for gynaecological cancer		Perform appropriate surgery including:		endometrial cancer according to patient's		operating theatre	
		- Opening and closing midline laparotomy		needs			
Type of surgery appropriate for		- Laparoscopic assessment of abdominal cavity				Intensive care and	
endometrial cancer		- Defining ureters and gonadal vessels		Ability to undertake:		high-dependency unit	
		- Pelvic node dissection/sampling.		- Total abdominal hysterectomy and		ward rounds	
Role of radiotherapy in the treatment of		- Para-aortic node biopsy		bilateral salpingo-oophorectomy			
endometrial cancer		- Panniculectomy		 Pelvic node dissection/sampling 		Multidisciplinary team	
		- Salpingo-oophorectomy (bilateral)		- Para-aortic node biopsy		attendance	
Inpatient clinical trials		- Total hysterectomy		- Laparoscopy-assisted vaginal			
				hysterectomy		Clinical oncology	
Recruitment into clinical trials		Recognise and manage intraoperative complications				module	
				Ability to manage postoperative care and			
Risk factors for recurrent disease		Postoperative care and complications arising		complications thereof		Joint clinic attendance	
Patterns of recurrent disease		FIGO staging of tumour		Ability to define FIGO stage of tumour			
Management options for recurrent disease							
Rare uterine tumours, e.g. sarcomas							



Knowledge criteria GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
	Inform patient of results		Ability to decide need for adjuvant therapy			
	Understand need for postoperative radiotherapy		Ability to follow up patients appropriately			
	Liaise with clinical oncology					
	Follow-up care					
	Recognition of recurrence of disease					
	Investigation of suspected recurrent disease					
	Management of recurrent disease					



	Competence	e level		Not required			
Module 5: Cancer of the Uterus		Level 1		Level 2	Level 3		
	Date	Signature	Date	Signature	Date	Signature	
Understanding of pathology of endometrial cancer							
Understanding of pathology of uterine sarcoma							
Counsel patient about surgical management							
Discuss medical and surgical options							
Follow-up of treated patient							
Management of recurrent disease							



Authorisation of signatures (to be	completed l	by the clinical trainers)				
Name of clinical trainer (please print)			Sign	ature of clinical trainer		
OSATS	Each OSATS	should be successfully completed for In	dependent P	ractice on 3 occasions before the modu	le can be sigr	ned off
Major Gynaecological Oncology	Date		Date		Date	
Procedure	Signature		Signature		Signature	



COMPLETION OF MODULE 5 I confirm that all components of the module have been successfully completed:								
Date Name of subspecialty training programme supervisor Signature of subspecialty training programme supervisor								



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Module 6: Cancer of the Cervix

Learning outcomes:

- To understand and demonstrate appropriate knowledge, skills and attitudes in relation to managing a patient with a diagnosis of cancer of the cervix
 - Diagnose, investigate and manage a patient with cancer of the cervix
 - Perform an appropriate surgery for cervical cancer and manage treatment complications

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Detailed knowledge of the anatomy of the	1	Take an appropriate history	1,2,	Ability to take history and examination	1,2,	Observation of, assisting	Logbook
female pelvis, including blood supply,	1	Take an appropriate history	3,4	Ability to take history and examination	3	and discussion with	Logook
nervous system and lymphatic drainage of		Perform a clinical examination	٥, .	Ability to perform colposcopy		senior staff	OSATS
the region				, , , , , , , , , , , , , , , , , , , ,			
		Perform colposcopy		Ability to perform cervical biopsy and		British Society for	Mini-CEX
Knowledge of the course of the ureter				LLETZ		Colposcopy and	
throughout the pelvis		Perform cervical biopsy including punch biopsy, large-				Cervical Pathology	Case-based discussions
		loop excision of the transformation zone (LLETZ), ablation		Ability to perform clinical staging,		(BSCCP) certification	
Understanding of the epidemiology and		therapy in appropriate cases		including cystoscopy with biopsy		(including treatment	BSCCP
aetiology of cervical cancer				Aldre Control		module)	accreditation certificate
Hadanstonding of the mathematical and of		Perform clinical staging for invasive cervical cancer		Ability to perform fertility sparing		Direct and indirect	A dit
Understanding of the pathophysiology of cervical intraepithelial neoplasm (CIN)		Perform total hysterectomy (both abdominal and vaginal)		procedures (trachalectomy, cone biopsy)		surgical supervision of	Audit project
cervical intraepithenal neopiasin (City)		Perioriii totai nysterectomy (both abdominal and vaginal)		Ability to perform hysterectomy (open,		surgical skills to	Multidisciplinary
Understanding of the role of human		Perform radical hysterectomy		vaginally and laparoscopically)		appropriate competency	team attendance
papillomavirus (HVP) in the aetiology		Terrorm radical hysterestomy		vaginally and laparoscopically)		by surgical staff	team attendance
and development of CIN and cervical		Perform pelvic lymphadenectomy		Ability to perform radical hysterectomy		2, 50.8.50	Personal audit of
cancer				(open and laparoscopically)		Specific task training	complications
		Perform para-aortic lymph node biopsy				and supervision	
Knowledge of the presentation and				Ability to perform pelvic lymph node			Completion of
diagnosis of cervical cancer		Counsel patients about the diagnosis, investigations and		dissection (open and laparoscopically)		Appropriate	Radiotherapy
		appropriate treatments for cervical cancer, including				postgraduate course	module
Pathology of cervical cancer		adverse effects and complications of treatment		Ability to perform para-aortic lymph node			
the decoleration of standard for the language		Communicate to anticotal and the office of the state of		dissection (open)		Appropriate modules of	
Understanding of staging of cervical cancer		Communicate to patients' results of investigations and		Ability to insert breeky thereny applicators		training:	
Knowledge of the management of all		treatment, including prognosis and palliative care		Ability to insert brachytherapy applicators		- Radiology -Radiotherapy	
stages of cervical cancer including surgery		Interpret results of radiological investigations appropriate		Ability to assist with external beam		- Chemotherapy	
and chemoradiation		to cervical cancer		radiotherapy and chemotherapy		- Urology	
				, , , , , , , , , , , , , , , , , , , ,		- Palliative care	
In-depth knowledge of radiotherapy		Assist in delivery of brachytherapy		Ability to interpret:		- Tailored clinical	
principles of treatment and appropriate				- Chest X-ray		experience	
application to cervical cancer		Assist in delivery of chemoradiation therapy		- Intravenous urogram			
				- Pelvic MRI			
				 Computed tomography scan 			



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Knowledge of appropriate chemotherapy for cervical cancer Knowledge of complications and adverse effects of treatment of cervical cancer, both short- and long-term Knowledge of pattern of disease recurrence and appropriate management Knowledge of the physical and psychosexual morbidity of cancer diagnosis and treatment		Manage adverse effects and recognise complications of treatment Diagnose, investigate and manage recurrent cervical cancer Select patients for exenterative surgery Detect and manage physical and psychosexual morbidity (e.g. referral to lymphoedema specialist nurse, psychotherapist or counsellor)		Ability to perform (with the assistance of surgical colleagues where necessary): - Exenterative surgery - Urinary diversion procedures - Ileostomy and colostomy Ability to organise anterior, posterior and total exenteration, including leading the surgical procedure. Ability to initiate discussion of management at multidisciplinary team meeting. Ability to counsel patients and relatives regarding diagnosis, investigations and discuss treatment options and advantages and disadvantages of each. Ability to convey decisions of multidisciplinary team to patients and relatives, including prognosis and palliative care. Ability to liaise with colleagues and other health professionals regarding coordinating investigations and management strategies pertinent to individual patients.		Logbook of cases with competency level to which each procedure performed	



		Competence	e level	Not required 🔳				
Module 6: Cance	er of the Cervix		Level 1		Level 2	Level 3		
		Date	Signature	Date	Signature	Date	Signature	
Cervical cancer	Understanding of vaccination programme							
prevention	Principles of cervical screening							
Understanding of p	premalignant disease process							
Understanding of p	pathology of cancer of the cervix							
Counsel patients a	bout surgical management							
Discuss medical an	nd surgical options							
Follow-up of treate	ed patient							
Management of re	ecurrent disease							
Cervical cone biopsy								
Simple Tracelectomy								
Radical Tracelector	my ³							
Radical Tracelector	my ³							

³ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



Authorisation of signatures (to be completed by the clinical trainers)								
Name of clinical trainer (please print)			Sign	Signature of clinical trainer				
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OSATS	Each OSATS s	nould be successfully completed	tor independent P	Practice on 3 occasions before the	module can be sign	1еа от		
Major Gynaecological Oncology	Date		Date		Date			
Procedure	Signature		Signature		Signature			



Common competency frames	work competences Medical leadership framework competences Health inequality framework comp	etences								
COMPLETION OF MODULE 6 I confirm that all components of the module have been successfully completed:										
Date	Date Name of subspecialty training programme supervisor Signature of subspecialty training programme supervisor									



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Module 7: Cancer of the Vulva

Learning outcomes:

- To diagnose, investigate and manage a patient with cancer of the vulva:
 - Competently perform appropriate surgery in a patient with vulva cancer
 - Manage complications of treatment

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessmer
Anatomy of the vulva, femoral triangle,	1	Take an appropriate history	1,3	Ability to take history	1,3,4	Observation of	Logbook of
vaginal region and lower abdominal wall,						assisting and	competences and
including blood supply, nerve distribution		Perform a simple rotation flap to achieve primary closure		Ability to perform appropriate		discussion with senior	experience
and lymph drainage of the region		of vulval wound		examination		medical staff	
							OSATS
Epidemiology and aetiology of vulval cancer		Perform appropriate clinical investigations		Ability to investigate and counsel patients		Task-specific job	14: : 05V
		Desferos a historia of culto		regarding treatments		training	Mini-CEX
		Perform a biopsy of vulva		Ability to select and perform competently		Personal study	Case-based discussions
Histopathology of vulval cancer		Perform vulvoscopy		diagnostic and therapeutic surgery for		Personal Study	Case-pased discussions
Pattern of spread of vulval cancer		renomi valvoscopy		vulval cancer		Appropriate	Surgical logbook
		Perform a wide local excision of vulva		valval caricel		postgraduate course	Surgicul logbook
Staging of vulval cancer		Terrorma mae loodre excision or varia		Ability to perform sentinel node detection		postg. addate course	
		Perform a simple vulvectomy		, ,		Tailored clinical	
Diagnosis and investigations for vulval		·		Ability to perform simple skin flaps		experience	
cancer		Perform a radical vulvectomy					
				Ability to perform major skin flaps with		Supervised surgical	
Principles of treatment of all stages of		Perform a subfascial groin node dissection		plastic surgeon		training to appropriate	
vulval cancer						competency level by	
Constitution of the standard		Developments in the surgical treatment of vulval cancer,		Ability to manage patient's		senior staff	
Complications of treatment and appropriate management of all stages of		including sentinel node detection and biopsy		postoperative care		Attendance at plastic	
vulval cancer		Liaise with plastic surgeon regarding selected patients,		Ability to manage complications of		surgery lists (minimum	
vulvai caricei		such as those requiring major skin flaps to close vulval		treatment		5)	
Pattern of recurrence of vulval cancer		wounds and those with malignant melanoma		deathene		3)	
Tattern of resurrence of rainal cance.		g		Ability to perform (with the assistance		Multidisciplinary team	
Recognition and management of recurrent		Liase with clinical oncology re:adjuvant and neo-adjuvant		of surgical colleagues if necessary):		attendance	
cancer of the vulva		radiotherapy		- Exenterative surgery			
				- Urinary diversion procedures			
Long-term complications of treatment of		Perioperative management of vulval cancer patients		- Ileostomy/colostomy			
vulval cancer:							
- Lymphocysts		Manage recurrence of vulval cancer		Ability to organise anterior, posterior			
- Lymphoedema		Long torm management of vulval cancer patients		and total exenteration, including			
- Neuralgia		Long-term management of vulval cancer patients		leading the surgical procedure			



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Knowledge of the psychosexual morbidity of cancer diagnosis and treatment		Detect and manage physical and psychosexual morbidity (e.g. referral to lymphoedema specialist nurse, psychotherapist or counsellor)					



Competence	Not required					
	Level 1		Level 2	Level 3		
Date	Signature	Date	Signature	Date	Signature	
			Level 1	Level 1 Level 2	Level 1 Level 2	

⁴ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



Procedure

Authorisation of signatures (to be completed by the clinical trainers)							
Name of clinical trainer (please print)			Signa	Signature of clinical trainer			
OSATS	Each OSATS should be successfully completed for Indepe			ractice on 3 occasions before the modu	le can be sigr	ned off	
Major Gynaecological Oncology	Date Signature		Date Signature		Date Signature		



COMPLETION OF MODULE 7 I confirm that all components of the module have been successfully completed:						
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor				



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 8: Vaginal Cancer

Learning outcomes:

- To understand and demonstrate appropriate knowledge, skills and attitudes in relation to managing a patient with a diagnosis of vaginal cancer:
 - Undertake primary surgical management
 - Understand management options to address co-morbidity
 - Manage recurrent disease

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Aetiology of vaginal cancer, including sarcoma botryoides, melanoma and metastatic lesions Benign conditions Pathophysiology of vaginal intraepithelial neoplasia Multifocal lower genital tract malignancy Clinical presentation, investigation and FIGO staging Detailed management of vaginal cancer Physical and psychosexual morbidity of cancer diagnosis and treatment	1	Take a history and perform an appropriate examination Perform vaginoscopy and vaginal biopsy Arrange staging and imaging investigations Arrange and aid delivery of radio or chemotherapy Counsel and take consent from patient Perform partial vaginectomy Perform radical vaginectomy Detect and manage physical and psychosexual morbidity (e.g. referral to lymphoedema specialist nurse, psychotherapist or counselor)	1,3,4	Ability to perform vaginal biopsy Ability to perform partial vaginectomy: - Abdominal approach - Vaginal approach Ability to perform radical excision of vagina (exenterative surgery; see modules 3, 6 and 7)	1,2	Observation and discussion with senior staff Senior supervision British Society for Colposcopy and Cervical Pathology (BSCCP) training and course Multidisciplinary team meeting Radiotherapy/clinical oncology module Direct observation by senior staff	Logbook of competences and experience Mini-CEX Case-based discussions Accreditation with BSCCP Multidisciplinary team attendances Surgical logbook



Madula 0. Variual Canasa	Compete	nce level	Not required				
Module 8: Vaginal Cancer		Level 1		Level 2	Level 3		
	Date	Signature	Date	Signature	Date	Signature	
Understanding of pathology of vaginal cancer							
Investigation and staging of vaginal cancer							
Vaginoscopy and vaginal biopsy							



Authorisation of signatures (to be completed by the clinical trainers)								
Name of clinical trainer (please print)			Sigi	Signature of clinical trainer				
OSATS	Each OSATS should be successfully completed for Indepe			Practice on 3 occasions b		igned off		
Major Gynaecological Oncology	Date		Date		Date			
Procedure	Signature		Signature		Signature			



COMPLETION OF MODULE 8 I confirm that all components of the module have been successfully completed:						
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor				



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 9: Medical Oncology

Learning outcomes:

- To understand the role of chemotherapy in the management of gynaecological cancers.
- To understand the pharmacology of the major drugs used in chemotherapy
- To understand the role and latest trial results of chemotherapy in gynaecological tumours

owledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessm
Relevant cell biology including:	1	Take an appropriate history	1,3,4	Ability to discuss management at	1,3,4	Observation of	Logbook of
Cell-cycle kinetics				multidisciplinary team meeting,		assisting and	competences and
Log kill hypothesis		Perform a clinical examination		including most appropriate chemotherapy		discussion with senior	experience
Cycle and phase specificity				regimen, according to patient's disease		staff	
		Knowing the indications for chemotherapy		and medical status			Mini-CEX
Classes of chemotherapeutic agents						Specific task training	
and their mechanisms of action		Assessment of response to chemotherapy		Ability to counsel patients about the basics		and supervision	Case-based discussion
N 1 6:1 :				of chemotherapy, including adverse			
Pharmacology of the main agents used		Counsel patients about the basics of chemotherapy,		effects and complications of treatment		Postgraduate courses	
n gynaecological cancers		including adverse effects and complications of treatment		Ability to liaise with colleagues and		Good clinical practice	
Principles of dose calculation and		Knowing the limitations of chemotherapy and		other health professionals regarding		course	
cheduling		when to change or stop treatment		coordinating investigations and		Course	
chedding		when to change of stop treatment		management strategies pertinent to		Gestational	
Inderstand the benefits and limitations		Recognition, assessment and management of acute and		individual patients		trophoblastic disease	
of single-agent and combination		chronic toxicity				course	
hemotherapy		,		Ability to recognise, investigate and			
• •				management of toxicity			
Guidelines and definitions for evaluation of							
esponse				Ability to counsel patients about			
				clinical trials			
Principles of phase I, II, and III clinical trials							
Conversation with seminal							
hemotherapeutic trials in							
ynaecological cancers							
Inderstand the concept of adjuvant							
and neoadjuvant therapy							
Short- and long-term toxicity, both							
general and drug-specific							
eneral and arag specific							



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Chemotherapeutic management of gestational trophoplastic disease The role of hormonal and other agents Therapeutic options for recurrent disease							



Competence	Not required				
	Level 1		Level 2		Level 3
Date	Signature	Date	Signature	Date	Signature
			Level 1	Level 1 Level 2	Level 1 Level 2



	Attendance at medical on	cology ward rounds Module 9
Ward/Hospital	Date	Comments



	Attendance at medical	oncology clinics Module 9
Clinic	Date	Comments



Att	Attendance at chemotherapy administration sessions Module 9					
Clinic/hospital	Date	Comments				



Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 9 I confirm that all components of the module have been successfully completed:								
Date Name of subspecialty training programme supervisor Signature of subspecialty training programme supervisor								



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 10: Clinical Oncology

Learning outcomes:

• To have sufficient familiarity with principles and practice to inform patients appropriately and recognise complications

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Cell-cycle kinetics	1	Understand principles of radiotherapy	1,3,4	Ability to select patients for radiotherapy	1,3,4	Multidisciplinary team meeting attendance	Logbook of competences and experience
Radiation effects		Understand how radiotherapy affects organs and		Ability to counsel patients regarding			AA': CEV
Recovery and repair of tissues		radiosensitivity of different cancers		radiotherapy treatment		Combined oncology clinics	Mini-CEX
Potentiation of effects		Select patients for radiotherapy according to disease, tumour type and stage		Ability to plan radiotherapy treatment		Radiotherapy	Case-based discussions
Protection		Understand how to plan patients for radiotherapy		Ability to counsel patients regarding complications		planning clinics	Multidisciplinary team attendance
Sensitivity of different organs		Counsel patient on how radiotherapy works, how it will affect them and what complications may occur		Ability to recognise and manage adverse effects of radiotherapy:		Clinical oncology operating theatre	
Different types of radiation		Understand the difference between curative and		- Skin		sessions Attendance with	
Inverse square law		palliative treatment		- Urinary tract- Gastrointestinal tract- Vagina:		psychosexual counsellors and	
Time–dose relationships		Management of long-term effects of radiotherapy: - Vaginal stenosis		- vagilia dryness - hormone replacement therapy		clinical nurse specialists	
Half-life isotopes		- Ovarian failure - Oedema		- dilators - Psychosexual		Specialists	
Ionisation and modifying factors		- Osteopenia - Fistula		Ability to recognise and manage major			
Radiation units		Recognition, investigations and management of recurrent		complications of radiotherapy in liaison with other colleagues:			
Isodose curves		gynaecological cancer following primary radiotherapy and chemoradiation		- fistula - vaginal stenosis			
Principles of fractionation		Chemoradiation		- oedema			
Orthovoltage and supravoltage				- osteopenia			
CT planning and dosimetry				Ability to recognise and investigate tumour recurrence			
Types of fields							
Types of sources and methods							



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Use of chemotherapy as an adjuvant							
Complications in:							
- Gastrointestinal tract							
- Urinary tract							
- Skin							
- Bone marrow							
- Kidney							
- Ureter							
- Central nervous system							
- Genital tract							



	Competence	e level		Not required			
Module 10: Clinical Oncology		Level 1		Level 2	Level 3		
	Date	Signature	Date	Signature	Date	Signature	
Indications for radiotherapy							
Planning radiotherapy							
Counselling and consenting for radiotherapy							
Administration of radiotherapy							
Recognition of complications of radiotherapy							
Management of complications of radiotherapy in conjunction with other specialties when necessary							



	Attendance at radiothe	rapy theatre lists Module 10
Clinic	Date	Comments



	Attendance at radiothera	py planning clinics Module 10
Clinic	Date	Comments



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Authorisation of signatures (to be completed by the clinical trainers)							
Name of clinical trainer (please print) Signature of clinical trainer							



COMPLETION OF MODULE 10 I confirm that all components of the module have been successfully completed:							
Date Name of subspecialty training programme supervisor Signature of subspecialty training programme supervisor							



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 11: Radiology

Learning outcomes:

- To understand the role of imaging in gynaecological cancer
 - Principles of different imaging modalities

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Main imaging modalities in gynaecological oncology: - Physics - Indications - Limitations	1	Assessment and interpretation with relevance to clinical scenario: - Standard plain ultrasound - Cross-sectional imaging - Nuclear	1	Discussion of images with relevance to clinical scenario with radiologist/trainers	3	Attendance at multidisciplinary team meetings. Attendance at radiology department	Logbook of competences and experience Mini-CEX
Nuclear medicine		Ability to recognise the indications for interventional radiology				for relevant procedures	Case-based discussions
Intervention radiology:		g,					
- Guided biopsies - Stenting							
- Caval filters							
- Embolisation							
Sentinel node assessment							



Madula 44. Dadislam	Competenc		Not required			
Module 11: Radiology		Level 1	Level 2		Level 3	
	Date	Signature	Date	Signature	Date	Signature
Requesting and interpretation of images						
Chest X-rays						
Abdominal X-rays						
Spine and pelvic X-rays						
Computed tomography (CT) of chest, abdomen and pelvis ⁵						
Magnetic resonance imaging						
Doppler						
Ultrasound of abdomen						
Ultrasound of pelvis						
ndications and organisation						
Radioisotope scan (renal; bone; lung; heart)						
Positron emission tomography CT scan						

⁵ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



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Procedures (continued)			
Caval filter			
Blood vessel emoblisation			



	Attendance at imaging sessions Module 11					
Clinic	Date	Comments				



Authorisation of signatures (to be completed by the clinical trainers)				
Name of clinical trainer (please print)	Signature of clinical trainer			



COMPLETION OF MODULE 11 I confirm that all components of the module have been successfully completed:					
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor			



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 12: Palliative Care

Learning outcomes:

- To understand the concept and delivery of care to patients with terminal gynaecological malignant disease:
 - Decision for palliative care
 - Holistic approach (physical/psychological/social/spiritual) to the symptoms and anxieties of the patient and their relatives.

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Role of palliative care team in gynaecological malignancy: - How to break bad news to a patient - Symptoms associated with terminal malignancy - Causes of and patterns of pain - Therapies for pain relief and how they work - Choice of appropriate analgesic - Pain services available - Pathophysiology of nausea and vomiting - Anxiety and depression - Counselling for patient and family - Pathophysiology of oedema - Therapies for relief of oedma - Palliative care team in hospitals, hospice and community	1,3	Effective and sympathetic communication skills Recognise when a patient should have palliative care input into management Recognise and appropriately manage symptoms in a palliative care setting Recognise anxiety and depression and psychosexual problems and involve appropriate teams in management Work within a palliative care team in hospital, hospice and community	3,4	Ability to communicate with patients and give information about disease process, including bad news Ability to appropriately involve members of palliative care team in patient management Ability to manage patients' symptoms in liaison with palliative care team Ability to work as part of a palliative care team in hospital, hospice and community Ability to involve palliative care team in multidisciplinary team framework	3,4	Advanced communication skills course Working in supervised environment with senior team Communicating with patients and managing their care on a day-to-day basis Attend 3 palliative care clinics (at least 1 session pain-based) Palliative care module (3 weeks)	Logbook of competences and experience Mini-CEX Case-based discussions Multidisciplinary team attendance
Community support roles of: - General practitioner - District nurse - Cancer specialist nurse - Family - Religion - Cancer support groups/ Macmillan - Social services Role of palliative care in multidisciplinary team function						Working within multidisciplinary team Attendance with specialist oedema physiotherapist	



Module 12: Palliative Care	Competer	nce level	Not required			
		Level 1	Level 2			Level 3
	Date	Signature	Date	Signature	Date	Signature
Counselling						
of patients						
of relatives						
Management of:						
pain relief						
nausea/vomiting						
Nutrition						
Ascites						
bowel obstruction						
urinary obstruction						
depression						
psychosexual problems						
oedema						



	Attendance at palliative care sessions Module 12					
Clinic	Date	Comments				



Training Courses or sessions		
Title	Signature of subspecialty training programme supervisor	Date

Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 12 I confirm that all components of the module have been successfully completed:					
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor			



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 13: Urology

Learning outcomes:

- To have an understanding of the impact of gynaecological cancer and its treatment in the renal tract:
 - Aware of possible urological complications
 - Identify and manage urological complications

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Anatomy and physiology of kidney, ureter, bladder and urethra Effects of gynaecological malignancy upon urinary tract Effects of treatment for gynaecological malignancy on urinary tract; e.g. radical surgery, radiotherapy Communication with patients and family about the effects of gynaecological malignancy and treatments on urinary system; e.g. fistula, obstruction, bladder disorders Interpret investigations ordered Recognition and management of injury to urinary tract Principles of repair of injury to: - Ureter - Bladder - Urethra Selection of patients who would benefit from intervention surgery involving the urinary tract; e.g. Urethral stenting, fistula repair, exenterative surgery	1,3,4	Ability to appropriately investigate and diagnose disorders of the urinary tract in a gynaecological cancer setting Appropriate ordering of investigation and liaison with urology team Investigation of diseases of urinary tract: - Urine (microscopy, culture and sensitivity; biochemistry) - Haematology - Ultrasound - X-ray - Magnetic resonance imaging - Cystoscopy - Ureteroscopy Knowledge of damage to ureter and bladder due to disease process or surgery; e.g. fistula, obstruction, surgical injury Perform: - Cystoscopy - Repair to bladder - Dissection of ureter	1,2,3	Effectively manage patients with suspected disorders of urinary tract Order and interpret investigations of urinary tract Appropriate selection of patients for intervention surgery involving the urinary tract Surgical procedures gynaecological oncologists are expected to practice independently include: - Insertion of suprapubic catheter - cystoscopy - surgical repair of bladder injury - Straightforward repair of minor ureteric damage Gynaecological oncologists should have experience of the following but independent practice is not essential. Limits of practice will depend upon support available and experience - Ureteroscopy - Repair of ureter - Ureteric reimplantation - Primary anastomosis of ureter - Cystectomy - Ileal conduit - Continent urinary diversion - Insertion of ureteric stent	1,2,3	Working under senior supervision Joint clinics Radiotherapy module Attendance at urodynamic clinic Multidisciplinary team Attendance to radiology department Urology module (minimum 10 sessions) Gynaecological multidisciplinary team and urology multidisciplinary team	Logbook. Mini-CEX Case-based discussions



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Pre- and postoperative care of patients undergoing urology procedure							



	Competence		Not required				
Module 13: Urology		Level 1		Level 2	Level 3		
	Date	Signature	Date	Signature	Date	Signature	
Order and interpret investigations of urinary tract							
Manage obstructive uropathy ⁶							
Insert suprapubic catheter							
Cystoscopy							
Ureteroscopy							
Ureteric stenting							
Ureteric reimplantation							
Primary anastomosis of ureter							
Cystectomy							
Formation of Ileal conduit / continent diversion							

⁶ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



	Attendance at urology theatre lists Module 13							
Clinic	Date	Comments						



Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



ommon competency framework competences Medical leadership framework competences Health inequality framework competences							
COMPLETION OF MODULE 13 I confirm that all components of the module have been successfully completed:							
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor					



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 14: Colorectal Surgery

Learning outcomes:

- To understand the role of fluid balance and nutrition in the surgical patient
- To understand the indications an principles of bowel resection and repair in the context of gynaecological oncology:
 - Accidental bowel injury
 - Elective bowel resection

nowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessme
Anatomy and physiology of gastrointestinal tract	1	Perform rigid sigmoidoscopy	1,2	Ability to perform sigmoidoscopy	1,2, 3,4	Colorectal outpatient	Logbook
Pathophysiology of intestinal function		Counsel patients preoperatively and postoperatively regarding bowel surgery and stoma management, including		Ability to counsel patient regarding bowel surgery and stoma management, including		Attend intensive care	Mini-CEX
Care of critically ill patient		benefits, risks and complications		preoperatively		unit ward rounds	Case-based discussions
Principles of surgery of gastrointestinal		Perform laparotomy and identify abnormalities throughout abdominal cavity, including liver, spleen, omentum,		Ability to select and mark stoma site		Attend dietician ward rounds	
tract, including exposure handling and injury to tissues		appendix, peritoneum, pancreas and large and small bowel		Surgical procedures gynaecological oncologists are expected to practice		Observation and	
Principles of resection and repair of		Oversew serosal injury to bowel		independently include:		assisting senior staff	
intestinal tissues: - Primary repair		Repair mucosal injury to small bowel		- exploratory abdominal procedure bowel surgery including:		Senior staff supervision	
- Secondary repair - Ileostomy		Select area to be resected and perform primary		- Oversew serosa		Colorectal attachment	
- Colostomy		anastomosis of small bowel		- Repair small bowel injury - Resect and reanatomose small bowel		(4 weeks)	
Indications to perform bowel surgery in a		Select area and perform ileostomy		- Appendicectomy - Ileostomy		Surgical anastomosis course	
gynaecological oncology setting		Perform appendicectomy		- Colostomy - Resection of large bowel		Attendance with soma	
Use of radiology in investigation and management of gastrointestinal tract		Select appropriate tissue and resect large bowel with				therapist	
disorders		formation of colostomy		Gynaecological oncologists should have experience of the following but			
Appropriate selection of patients who		Mark stoma site appropriately		independent practice is not essential Limits of practice will depend upon			
will benefit from bowel surgery		Order and interpret appropriate investigations preoperatively		support available and experience: - Primary anastomosis of large bowel			
Preoperative preparation required for a patient who may or will have bowel surgery		Order appropriate bowel preparation preoperatively		- Abdominal perineal resection			
		Select patients preoperatively and intraoperatively who will benefit from bowel surgery					



Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
		Manage postoperative care of patients following bowel					
		surgery					



Madula 14: Calavastal Surgary		Competence	Not required					
Module 14: Colorectal	Surgery		Level 1		Level 2	Level 3		
		Date	Signature	Date	Signature	Date	Signature	
Oversew serosa								
Select and mark stoma si	ite							
Plan and prescribe total parenteral nutrition with assistance from TPN specialist pharmacist								
Management of enteric fistula	Conservative							
	Surgical							
Small bowel resection an	d reanastamosis							
Large bowel resection an	nd reanastamosis ⁷							
Colostomy formation								
Ileostomy formation								
Abdominal perineal resec	ction							

⁷ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



	Attendance at colorectal theatre lists Module 14							
Clinic	Date	Comments						



Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 14 I confirm that all components of the module have been successfully completed:							
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor					



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 15: Plastic Surgery and Wound Care

Learning outcomes:

- To understand the principles of plastic surgery and its indication in the management of gynaecological malignancy:
 - Surgical procedures
 - Management of wound complications

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Physiology of wound healing and factors influencing healing Surgical site infection Recognise and manage wound dehiscence Management of incisional hernia Anatomy of vulva, perineum and groin Techniques of vulval repair and reconstruction Vaginal reconstruction	1,2	Management of surgical site infections Management of recognised wound dehiscence Management and performance of appropriate repair Repair of incisional hernia, including use of mesh Selection of patients for appropriate surgical intention using: - Split-thickness skin graft - Rotational flaps - Advancement grafts - Myocutaneous flaps Vaginal reconstruction	1,2	Ability to close wound, including choice of suture material Ability to diagnose infection, select antibiotics and identify need for incision and drainage Ability to repair wound dehiscence Ability to repair incisional hernia: - Without mesh - With mesh	1,2	Direct observation by senior staff Attendance with tissue viability team Colorectal module Plastic surgery attachment	Logbook of competences and experience Mini-CEX Case-based discussions



Module 15: Plastic Surgery and Wound Care		Competence	e level		Not required 🔳		
			Level 1		Level 2	Level 3	
		Date	Signature	Date	Signature	Date	Signature
Repair							
Repair of wound dehiscence							
Repair of incisional hernia	without mesh						
	with mesh						
Selection of patients for appre	opriate surgical intervention	<u>, </u>					
Split thickness skin graft							
Rotational flaps							
Advancement flaps 8							
Vaginal reconstruction							
Myocutaneous flaps							
Full thickness skin graft							
0							

⁸ The competencies in this module where Level 3 is not required (blacked out) are desirable / aspirational and not mandatory



	Attendance at plastic sui	gery theatre lists Module 15
Clinic	Date	Comments



A	Attendance at plastic surgery clinics/ward rounds Module 15							
Clinic	Date	Comments						



Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 15 I confirm that all components of the module have been successfully completed:							
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor					



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 16: Gestational Trophoblastic Disease

Learning outcomes:

• To diagnose, investigate and manage a patient with gestational trophoblastic disease

Knowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Definition and classification of gestational trophoblastic disease Epidemiology and aetiology of gestational trophoblastic disease Histopathology of gestational trophoblastic disease Clinical features and behaviour of different entities of gestational trophoblastic diseases Principles of management of different	1 1	Clinical competency Diagnosis and staging of gestational trophoblastic neoplasia Recognise complications of treatment and management of gestational trophoblastic disease and neoplasia Management of chemoresistant and relapsed gestational trophoblastic neoplasia Role of surgery and radiotherapy in the management of gestational trophoblastic neoplasia	1 1	Ability to take history and perform appropriate physical examination Ability to counsel patients about a diagnosis of molar pregnancy and its subsequent management Ability to perform suction evacuation, including preoperative, intraoperative and postoperative management Ability to counsel patients on contraception and pregnancy outcome following molar pregnancy	1,3,4	Attend at the national one-day meeting Discussion with senior medical staff Personal study Attachment to medical oncology unit – part of the modular training Review histology	Evidence/assessment Mini-CEX Case-based discussion Logbook
Principles of management of different entities gestational trophoblastic diseases Principles and pitfalls in the measurement of human chorionic				contraception and pregnancy outcome			
gonadotrophin Histopathological features of gestational disease				Ability to carry out appropriate investigations for staging of gestational trophoblastic neoplasia and to classify patients into low- or high-risk groups		team	
Role of surgery and radiotherapy in the management of gestational trophoblastic neoplasia				Ability to counsel patients on the possible adverse effects of treatment Ability to manage complications of			
Genetic and molecular markers and their potential clinical applications				treatment Ability to register patients at supraregional centre for follow up			



Madela 46. Cartational Translablastic Biocasa	Competer	nce level	Not required 🔳			
Module 16: Gestational Trophoblastic Disease		Level 1		Level 2		Level 3
	Date	Signature	Date	Signature	Date	Signature
Aeitiology and pathology of			1			
Partial mole						
Complete mole						
Choriocarcinoma						
For all grades of disease						
Counselling of patients						
Principles of investigation, treatment and follow up						



Training Courses or sessions		
Title	Signature of subspecialty training programme supervisor	Date

Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 16 I confirm that all components of the module have been successfully completed:						
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor				



Common competency framework competences Medical leadership framework competences Health inequality framework competences

Module 17: Genetic Predisposition to Gynaecological Cancer

Learning outcomes:

- To diagnose, investigate and manage a patient with a genetic predisposition to gynaecological cancer:
 - Management of patients with a family history suggesting genetic predisposition to gynaecological cancer
 - Understanding of familial ovarian cancer syndromes, BRCA and hereditary nonpolyposis colorectal cancer
 - Concepts of cancer screening
 - Issues surrounding prophylactic surgery

inowledge criteria	GMP	Clinical competency	GMP	Professional skills and attitudes	GMP	Training support	Evidence/assessment
Background for a patient with a genetic	1	Take an appropriate history	1,2,	Ability to take history and perform	1,2,	Observation or	Mini-CEX
predisposition to gynaecological cancer			3,4	appropriate physical examination	3,4	assisting and	
		Determine a patient's pedigree				discussion with	Case-based discussion
Epidemiology and aetiology of a genetic				Ability to counsel well patients regarding a		senior medical staff	
predisposition to gynaecological cancer		Counsel a well patient with a known predisposition to		diagnosis and subsequent management of			Logbook of competences
		gynaecological cancer		patients with a genetic predisposition to		Personal study	and experience
Molecular biology and histopathology				gynaecological cancer			
of a genetic predisposition to		Perform appropriate clinical examination and				Attachment to cancer	
gynaecological cancer		investigations		Ability to perform preoperative,		genetics unit	
				intraoperative and postoperative			
Clinical features and behaviour of different		Perform prophylactic surgery involving laparoscopic		managements as required		Supervised surgical	
genetic predispositions		techniques as required				training to	
D :				Ability to counsel patients on hormonal		appropriate	
Principles of management of different		Work with other disciplines to ensure appropriate		and other medication in relation to		competency level by	
entities for these genetic predispositions		management		outcomes after screening or treatment		senior staff	
Principles and pitfalls in the assessment of		Liaise with medical genetics department to assess risk of		Ability to organise appropriate		Attendance at	
the molecular biology techniques presently		developing cancer		investigations for screening if conservative		cancer genetics	
available				approach taken		clinic	
Complexity of counselling and				Ability to recognise the requirement for			
complications of subsequent management				failsafe for conservative management			
of patients with a genetic predisposition to							
gynaecological cancer				Ability to counsel patients on the possible			
				adverse effects of treatment			
Role of prophylactic surgery in the							
management of patients with a genetic				Ability to manage complications of			
predisposition to gynaecological cancer				treatment			
and the specific problems for follow-up							
in relation to hormonal psychological				Ability to perform prophylactic surgery for			
and reproductive sequelae				gynaecological cancer			



	Competer	nce level				Not required 🔳
Module 17: Genetic Predisposition to Gynaecological Cancer	Level 1			Level 2	Level 3	
	Date	Signature	Date	Signature	Date	Signature
Investigations				l		
Take appropriate history and formulate family tree						
Identify high risk patients/families						
Counsel patients regarding						
Risk of cancer						
Cancer screening						
Prophylactic surgery						
Hormone replacement therapy						



Attendance at cancer genetics clinics Module 17						
Date	Comments					



Authorisation of signatures (to be completed by the clinical trainers)					
Name of clinical trainer (please print)	Signature of clinical trainer				



COMPLETION OF MODULE 17 I confirm that all components of the module have been successfully completed:		
Date	Name of subspecialty training programme supervisor	Signature of subspecialty training programme supervisor