

# SITM Complex Early Pregnancy and Non-Elective Gynaecology (CEPNG)

## SECTION 1: CAPABILITIES IN PRACTICE (CiP)

CEPNG CiP 1: The doctor uses ultrasound to appropriately diagnose and guide treatment of complications in early pregnancy.	
Key skills	Descriptors
Able to safely perform transabdominal and transvaginal scanning of the female genital tract	<ul style="list-style-type: none"> <li>• Is able to identify all key pelvic structures, recognises and describes normality and deviations from normal.</li> <li>• Is able to construct a differential diagnosis using information obtained from ultrasound scanning.</li> <li>• Is able to optimise image quality.</li> <li>• Can store images securely and constructs a clinically useful ultrasound examination report.</li> <li>• Recognises and adheres to infection control and chaperoning policies.</li> </ul>
Diagnoses and manages people experiencing miscarriage	<ul style="list-style-type: none"> <li>• Applies the diagnostic criteria to diagnose miscarriage.</li> <li>• Assesses when an interval scan is required.</li> <li>• Counsels people on the choice between expectant, medical and surgical management of miscarriage.</li> <li>• Manages complications following initial treatment for a miscarriage, including complex cases.</li> <li>• Manages and investigates women diagnosed with a second trimester miscarriage.</li> </ul>
Diagnoses and manages people experiencing ectopic pregnancy	<ul style="list-style-type: none"> <li>• Is able to diagnose an ectopic pregnancy on an ultrasound scan.</li> <li>• Is able to diagnose non-tubal ectopic pregnancies.</li> <li>• Counsels people on the choice between expectant, medical and surgical management of ectopic pregnancy.</li> <li>• Manages non-tubal ectopic pregnancies, including liaising with other colleagues and speciality departments.</li> </ul>
Diagnoses and manages people with inconclusive scans	<ul style="list-style-type: none"> <li>• Arranges appropriate follow up for people with early pregnancies of uncertain viability (PUV).</li> <li>• Demonstrates that they understand management protocols for women classified with a pregnancy of unknown location (PUL).</li> <li>• Demonstrates understanding of diagnostic uncertainty.</li> </ul>

Diagnoses and manages people with other causes of pelvic pain in early pregnancy	<ul style="list-style-type: none"> <li>• Organises appropriate imaging in early pregnancy.</li> <li>• Organises appropriate management plans for people with other pelvic pathology in early pregnancy.</li> <li>• Collaborates with consultants and other specialities and works as part of a multidisciplinary team (MDT).</li> </ul>
Diagnoses and manages women with recurrent pregnancy loss	<ul style="list-style-type: none"> <li>• Is able to fully evaluate the endometrial cavity and assess for the presence of any uterine pathology or congenital anomaly in people presenting with recurrent pregnancy loss.</li> <li>• Arranges required investigations and follow up for people with recurrent pregnancy loss.</li> <li>• Supports care in future pregnancies.</li> </ul>
Diagnoses and manages women with gestational trophoblastic disease (GTD)	<ul style="list-style-type: none"> <li>• Recognises and instigates initial management of suspected trophoblastic disease.</li> <li>• Arranges appropriate follow up for women confirmed to have trophoblastic disease.</li> </ul>
Manages women with hyperemesis gravidarum	<ul style="list-style-type: none"> <li>• Recognises and instigates inpatient, outpatient or domiciliary treatment of hyperemesis, as appropriate.</li> <li>• Ensures continuity of care, effective handover and appropriate discharge planning for women with hyperemesis gravidarum.</li> </ul>

#### Evidence to inform decision

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• OSATS:           <ul style="list-style-type: none"> <li>○ Ultrasound examination of early pregnancy complications</li> </ul> </li> <li>• Mini-CEX</li> <li>• CbD</li> <li>• Reflective practice</li> </ul> | <ul style="list-style-type: none"> <li>• TO2 (including SO)</li> <li>• NOTSS</li> <li>• RCOG SITM Theoretical Course</li> <li>• Local and deanery teaching</li> <li>• RCOG Learning</li> </ul> |
|---|--|

#### Knowledge criteria

- The aetiology and differential diagnosis of acute abdominal pain:
  - gynaecological causes – ovarian cyst accidents (rupture and torsion), acute pelvic inflammatory disease, degenerating/prolapsing uterine fibroid and ectopic pregnancy.
  - non-gynaecological causes – acute appendicitis, acute bowel obstruction, diverticular disease, inflammatory bowel disease, perforated ulcer, incarcerated hernias (inguinal, femoral, umbilical and incisional, mesenteric infarction, pelvic vein thrombosis, ruptured aortic aneurysm, acute urinary tract infection (UTI), acute urinary retention and urolithiasis
- Haematological, biochemical, microbiological and radiological investigations:
  - haematological changes in acute haemorrhage, sepsis and thrombosis
  - biochemical findings in acute sepsis and urinary tract obstruction
  - dynamics of serum human chorionic gonadotropin (hCG) and progesterone in normal and abnormal early pregnancy
  - relevant infection screens

- indications for plain abdominal film, chest x-ray, abdominal ultrasound scan, computed tomography (CT) scan and magnetic resonance imaging (MRI) in the investigation of acute pelvic pain
- The safety of ultrasound including safety indices and scanning modes
- Image orientation and optimisation
- The need to store images
- Developmental milestones of the normal intrauterine pregnancy and associated biochemistry
- Diagnostic criteria for miscarriage and non-tubal ectopic pregnancy
- Sonographic features of GTD
- The epidemiology, aetiology, clinical features and diagnostic tests in early pregnancy complications:
  - epidemiology of miscarriage
  - causes and risk factors of miscarriage – chromosomal defects, structural uterine anomalies, cervical incompetence and autoimmune causes
  - other factors affecting the development of early pregnancy: drugs (prescription and recreational), viral infections, radiation and chemotherapy, and immunisation
  - transvaginal ultrasound – morphological features of normal early pregnancy development, and differential diagnosis between complete, incomplete and missed miscarriage
  - the use of serum biochemistry for the diagnosis of miscarriage
  - causes and risk factors for ectopic pregnancy
  - variations in clinical presentation of ectopic pregnancies
  - clinical, ultrasound, laparoscopic and histological diagnosis of ectopic pregnancy
  - risk factors, clinical presentation, ultrasound and laparoscopic diagnosis of non-tubal ectopic pregnancy
- The options for managing early pregnancy problems:
  - expectant management of miscarriage – selection criteria, follow up and success rates
  - medical treatment with misoprostol and mifepristone – selection criteria, route of administration and dosage, effectiveness, side effects and follow up
  - surgical management of miscarriage – selection criteria, outpatient, local anaesthetic and in-patient under general anaesthesia, antibiotic prophylaxis, complications, effectiveness and follow up
  - expectant management of tubal ectopic pregnancy – selection criteria, success rates and follow up
  - medical treatment with methotrexate – selection criteria, dosage, side effects, effectiveness and follow up
  - laparoscopy and laparotomy for ectopic pregnancy – choice of appropriate route for surgery
  - salpingectomy and salpingotomy surgeries for ectopic pregnancy – selection criteria, complications and follow up
  - fertility after ectopic pregnancy and future follow up
  - management of non-tubal ectopic pregnancy – conservative or surgical treatment, risks, complications, follow up and future fertility
  - the treatment protocols for women diagnosed with persistent GDT

- The investigations and current management strategies for people with recurrent pregnancy loss
- The investigations and current management strategies for people with nausea and vomiting in pregnancy and hyperemesis gravidarum

**CEPNG CiP 2: The doctor has the knowledge and clinical skills to manage the care of people presenting with acute gynaecological problems.**

Key skills	Descriptors
Diagnoses people with acute gynaecological problems	<ul style="list-style-type: none"> <li>• Manages rapid access clinic for gynaecological emergencies.</li> <li>• Acts as clinical expert for complex cases.</li> <li>• Uses ultrasound to form differential diagnosis of acute gynaecological symptoms.</li> <li>• Carries out ultrasound diagnosis of uterine pathology:</li> <li>• Carries out ultrasound diagnosis of adnexal pathology:</li> <li>• Able to detect hemoperitoneum and assess its severity.</li> </ul>
Manages the care of women with acute pelvic pain	<ul style="list-style-type: none"> <li>• Diagnoses and assesses people with acute pelvic pain.</li> <li>• Able to perform emergency surgery such as open and laparoscopic ovarian cystectomy, laparoscopic adhesiolysis and surgical management of ectopic pregnancy.</li> <li>• Collaborates with consultants and other specialties and works as part of a MDT.</li> <li>• Acts as a clinical expert for complex cases</li> <li>• Arranges appropriate follow up</li> </ul>
Manages the care of women with haemorrhagic and septic shock	<ul style="list-style-type: none"> <li>• Makes appropriate decisions rapidly in daily clinical practice.</li> <li>• Works with the MDT to manage women who are presenting acutely unwell.</li> <li>• Arranges appropriate follow up.</li> </ul>
Manages the care of women with acute pelvic infection	<ul style="list-style-type: none"> <li>• Organises the correct investigations and instigates treatment.</li> <li>• Coordinates with the MDT to arrange appropriate treatment in complex cases.</li> <li>• Arranges appropriate follow up for women with acute pelvic infection.</li> </ul>
Manages the care of people with other acute gynaecological problems	<ul style="list-style-type: none"> <li>• Arranges appropriate follow up for women with acute pelvic infection.</li> <li>• Able to diagnose and manage:               <ul style="list-style-type: none"> <li>○ perineal abscesses</li> <li>○ non-obstetric genital tract trauma</li> <li>○ emergency presentations of gynaecological malignancies</li> </ul> </li> </ul>

- ovarian hyperstimulation syndrome
- Coordinates with the MDT to arrange appropriate treatment in complex cases.

### Evidence to inform decision

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>● RCOG SITM Theoretical Course</li> <li>● OSATS:               <ul style="list-style-type: none"> <li>○ ultrasound examination in early pregnancy (non-pregnant patient)</li> </ul> </li> <li>● Mini-CEX</li> <li>● CbD</li> </ul> | <ul style="list-style-type: none"> <li>● Reflective practice</li> <li>● TO2 (including SO)</li> <li>● Local and deanery teaching</li> <li>● RCOG Learning NOTSS</li> </ul> |
|---|--|

### Knowledge criteria

- Causes and differential diagnosis of acute pelvic and lower abdominal pain
- Interventional options for pelvic and perineal abscesses
- Haematological, biochemical, microbiological and radiological investigations (as for CiP 1)
- The options available to treat acutely ill women:
  - resuscitation measures
  - management of massive blood loss
  - effective pain relief
  - antimicrobial therapy
  - management of acute thromboembolic events
  - conservative and surgical management of acute pain
  - management of hyperemesis gravidarum
- The epidemiology, aetiology, clinical features and diagnostic tests in early pregnancy complications (as for CiP 1)
- The options for managing early pregnancy problems (as for CiP 1)
- The management issues in the provision of acute gynaecological care:
  - environment
  - staffing
  - facilities and equipment
  - referral patterns and triage
  - external support
  - training
  - clinical protocols
  - risk management
  - audit and research

### CEPEG CiP 3: The doctor has the communication and governance skills to set up, run and develop an early pregnancy and acute gynaecology unit.

Key skills	Descriptors
Demonstrates service development	<ul style="list-style-type: none"> <li>• Liaises with management teams and Integrated Care Boards.</li> <li>• Has an understanding of the financial considerations that are needed to run a service.</li> <li>• Participates in clinical governance experience.</li> <li>• Demonstrated involvement in quality improvement (including collecting data and analysing outcomes).</li> <li>• Is able to undertake data analysis and collection related to outcomes.</li> </ul>
Is able to be part of a multidisciplinary team (MDT)	<ul style="list-style-type: none"> <li>• Liaises effectively with colleagues in other disciplines aligned to early pregnancy and emergency care (e.g. emergency medicine, surgery, urology, paediatrics).</li> </ul>
Develops clinical guidelines and patient information	<ul style="list-style-type: none"> <li>• Is familiar with sources of both written and web-based information.</li> <li>• Designs or adapts patient information for local use and understands local process.</li> <li>• Participates in writing protocols, clinical pathways, developing service or evidence-based guidelines.</li> <li>• Establishes and/or enhances local clinical pathways.</li> <li>• Supports the alignment of the service to the national standards on early pregnancy and acute gynaecology care.</li> </ul>
Evidence to inform decision	
<ul style="list-style-type: none"> <li>• Reflective practice</li> <li>• Attending a meeting of the British Association of Early pregnancy units</li> <li>• TO2 (including SO)</li> <li>• Mini-CEX</li> <li>• Cbd</li> <li>• NOTSS</li> </ul>	<ul style="list-style-type: none"> <li>• RCOG Learning</li> <li>• Leadership questionnaire</li> <li>• Quality improvement project</li> <li>• Develops, enhances local clinical pathways</li> <li>• Attendance and presentation at early pregnancy MDTs</li> </ul>
Knowledge criteria	
<ul style="list-style-type: none"> <li>• NHS service requirements and local procedures for developing or improving services</li> <li>• Clinical governance issues in early pregnancy and acute gynaecology</li> <li>• National guidance on early pregnancy and acute gynaecology</li> <li>• The role of a guidelines audit (including the analysis of workload) and how this influences practice</li> <li>• The principles how they relate to outcomes for patients in early pregnancy or acute gynaecology</li> </ul>	

## SECTION 2: PROCEDURES

Procedures marked with \* require three summative competent OSATS

<i>Procedures</i>	<i>Level by end of training</i>	<i>CIP 1</i>	<i>CIP 2</i>
Manual vacuum aspiration*	5	X	
Complex surgical management of miscarriage and scar ectopic*	5	X	
Ultrasound examination in gynaecology (non-pregnant patient)*	5		X
Ultrasound examination of early pregnancy complications*	5	X	

## SECTION 3: GMC GENERIC PROFESSIONAL CAPABILITIES (GPCs)

<i>Mapping to GPCs</i>
Domain 1: Professional values and behaviours Domain 2: Professional skills <ul style="list-style-type: none"> <li>• Practical skills</li> <li>• Communication and interpersonal skills</li> <li>• Dealing with complexity and uncertainty</li> </ul> Domain 3: Professional knowledge <ul style="list-style-type: none"> <li>• Professional requirements</li> <li>• National legislative structure</li> <li>• The health service and healthcare system in the four countries</li> </ul> Domain 5: Capabilities in leadership and team working Domain 6: Capabilities in patient safety and quality improvement Domain 8: Capabilities in education and training Domain 9: Capabilities in research and scholarship

## SECTION 4: MAPPING OF ASSESSMENTS TO CEPNG CiPs

<b>CEPNG CIP</b>	<b>OSATS</b>	<b>Mini-CEX</b>	<b>CbD</b>	<b>NOTSS</b>	<b>TO1/TO2</b>	<b>Reflective practice</b>
1: The doctor uses ultrasound to appropriately diagnose and guide treatment of complications in early pregnancy	X	X	X	X	X	X



CEPNG CIP	OSATS	Mini-CEX	CbD	NOTSS	TO1/ TO2	Reflective practice
2: The doctor has the knowledge and clinical skills to manage the care of people presenting with acute gynaecological problems	X	X	X	X	X	X
3: The doctor has the communication and governance skills to set up, run and develop an early pregnancy and acute gynaecology unit.		X	X	X	X	