

# SITM: Colposcopy (C)

## SECTION 1: CAPABILITIES IN PRACTICE

<b>C CiP 1: The doctor is competent to make an appropriate clinical assessment of a patient with a suspected or known female lower genital tract pre-malignant disease.</b>	
<b>Key Skills</b>	<b>Descriptors</b>
Is able to take history, perform clinical examination and use appropriate investigations to establish diagnosis	<ul style="list-style-type: none"> <li>Assesses symptoms and takes a focused personal and family history, including comorbidity, other pre-disposing factors and cervical screening history.</li> <li>Conducts an appropriate examination of the whole of the lower genital tract.</li> </ul>
Communicates management effectively to patients and other healthcare professionals	<ul style="list-style-type: none"> <li>Counsels appropriately about HPV vaccination, cytology cervical screening, primary HPV screening, test of cure for cervix.</li> <li>Interprets screening results and communicates results to patients.</li> <li>Recognises colposcopy requirements for pregnant, immune-compromised, postmenopausal and post hysterectomy patients.</li> <li>Communicates the results of investigations and treatment, including outcomes and follow-up plans for both cervical squamous and glandular pre-invasive disease.</li> <li>Counsels on examination techniques, management and treatment plans and potential referrals to specialised services for vulva/vagina/perineum/anal disease.</li> <li>Communicates clinical plan to patients, relatives and primary care.</li> </ul>
Initiates appropriate management plans	<ul style="list-style-type: none"> <li>Initiates appropriate multidisciplinary team discussion or specialist referral.</li> <li>Communicates management plan to primary care.</li> </ul>
<b>Evidence to inform decision</b>	
<ul style="list-style-type: none"> <li>Mini-CEX</li> <li>CbD</li> <li>Reflective practice</li> <li>NOTSS</li> <li>Local and Deanery Teaching</li> <li>TO2 (includes SO)</li> <li>OSATS               <ul style="list-style-type: none"> <li>Diagnostic colposcopy</li> <li>Treatment: cold coagulation or cryotherapy</li> <li>Treatment: large loop excision of transformation zone</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>UK NHS guidance</li> <li>RCOG eLearning</li> <li>Communications courses</li> <li>British Society for Colposcopy and Cervical Pathology/RCOG Accreditation</li> <li>Attendance at recommended British Society of Vulval Disorder Courses</li> </ul>

### Knowledge criteria

- Epidemiology, aetiology, diagnosis, prevention, management prognosis including HPV screening and triage and HPV vaccination
- Indications and limitations in relation to screening and investigative techniques
- Cytology
- The recognised national and international colposcopy classifications and terminologies
- Methods and limitations for colposcopy
- The colposcopy requirements for pregnant, immune-compromised, postmenopausal or transplant patients
- Complications and anatomical considerations of pre-malignant conditions of the lower genital tract
- Indications, techniques, complications and outcomes of treatment of benign and pre-malignant conditions of the lower genital tract
- The psycho-sexual sequelae of disease and clinical management

### C CiP 2: The doctor demonstrates appropriate knowledge and administration of a colposcopy service.

Key Skills	Descriptors
Understands the role of the lead colposcopist	<ul style="list-style-type: none"> <li>• Defines local guidelines in tandem with national guidance and structures.</li> <li>• Defines regular audit program.</li> <li>• Demonstrates an awareness of the minimum data set required for Quality Assurance</li> <li>• Ensures all colposcopists are BSCCP accredited.</li> <li>• Organises compliant regular multidisciplinary team meetings and chairs the meeting.</li> <li>• Attends regularly at local business meetings.</li> <li>• Refers when appropriate to gynaecological oncology multidisciplinary team meetings</li> </ul>
Understands Quality Assurance structures and processes	<ul style="list-style-type: none"> <li>• Is involved in writing Hospital Based Program Co-ordinator Report, understanding the principles of critical incident reporting.</li> <li>• Demonstrates understanding of the practical interaction between primary and secondary care within quality assurance.</li> <li>• Is involved in invasive cancer audit.</li> </ul>
Evidence to inform decision	
<ul style="list-style-type: none"> <li>• Mini-CEX</li> <li>• Reflective practice</li> <li>• NOTSS</li> <li>• Audits</li> <li>• TO2 (includes SO)</li> </ul>	<ul style="list-style-type: none"> <li>• Attendance at relevant meetings</li> <li>• Participation at QA visits</li> <li>• RCOG eLearning</li> <li>• NHS Colposcopy lead and QA publications etc.</li> <li>• CbD</li> </ul>

### Knowledge criteria

- The structure of the NHS cervical screening program, including the roles and responsibilities of all involved
- How colposcopy integrates with the screening program, including the roles and responsibilities of all involved
- Quality Assurance structures and standards, implementation, documentation and process of QA inspection, as locally appropriate

## SECTION 2: PROCEDURES

Procedures marked with \* require three summative competent OSATS

<b>Procedures</b>	<b>Level by end of training</b>	<b>CIP</b>
Colposcopy of the lower genital tract *	5	1
Treatment: Cold Coagulation or cryotherapy *	5	1
Treatment: Large loop excision of transformation zone *	5	1

## SECTION 3: GMC GENERIC PROFESSIONAL CAPABILITIES

### Mapping to GPCs

Domain 1: Professional values and behaviours

Domain 2: Professional skills

- Practical skills
- Communication and interpersonal skills
- Dealing with complexity and uncertainty
- Clinical skills (*history taking, diagnosis and management, consent; humane interventions; prescribing medicines safely; using medical devices safely; infection control and communicable diseases*)

Domain 3: Professional knowledge

- Professional requirements
- National legislative requirements
- The health service and healthcare systems in the four countries

Domain 4: Capabilities in health promotion and illness prevention

Domain 5: Capabilities in leadership and teamworking

Domain 6: Capabilities in patient safety and quality improvement

- Patient safety
- Quality improvement

Domain 7: Capabilities in safeguarding vulnerable groups

## SECTION 4: MAPPING OF ASSESSMENTS TO C CiPs

C CIP	OSATS	Mini-CEX	CbD	NOTSS	TO1/ TO2	Reflective practice
1: The doctor is competent to make an appropriate clinical assessment of a patient with a suspected or known female lower genital tract pre-malignant disease.	X	X	X	X	X	X
2: The doctor demonstrates appropriate knowledge and administration of a colposcopy service.		X	X	X	X	X