

Programa formativo en Ginecología Oncológica Hospital Universitario 12 de Octubre

Autoría: Unidad Ginecología Oncológica

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1. Definition

The European Society of Gynaecological Oncology (ESGO) accredited Gynaecology-Oncology training program is a subspecialist training program for a recognized specialist in Obstetrics and Gynaecology. The gynaecological oncologist is a specialist in Obstetrics and Gynaecology who, in addition, is able to:

- Provide consultation on and comprehensive management of patients with or at risk for gynaecological cancer.
- Manage the medical and /or surgical treatment of malignant diseases of the female genital tract that may involve relevant surgery of abdominal organs.
- Practice gynaecological oncology in an institutional setting where all effective forms of cancer therapy are available. This includes comprehensive management of gynaecological cancer, including screening, diagnostic, psycho-oncological care, therapeutic procedures, and follow up.

2. Aim of the program

The Gynaecological Oncology training program is done to educate gynaecologists so that they can fully provide and improve the care of patients with gynaecological malignancies in collaboration with others care providers.

3. Objectives of training

To train a subspecialist following the European standard to be capable of:

- Consultation, practice, and comprehensive care of women with gynaecological cancer.
- Interpretation of scientific data to improve knowledge and to apply these in clinical care, research, and audit.
- Co-ordinating and promote collaboration in organising the service.
- Providing leadership in development and research within the subspecialty.

4. Organisation of training

The programme is designed for a single trainee per training period and has been organized by an accredited subspecialist. It is based on the guidelines of the ESGO Training in Gynaecological Oncology curriculum, published in October 2020 (<u>https://www.esgo.org/individual-accreditation</u>).

The guidelines and protocols followed at the training centre are designed by the Spanish Gynaecologic Oncology National Section (SEGO) guidelines, which are reviewed regularly and define cases for which it is necessary to refer a patient to a subspecialist.

Departments and Staff

Training Programme Director: **A. Tejerizo Garcia, MD, PhD.** Educational Supervisor: **B. Gil-Ibañez, MD, PhD.**

Head of the Departments:

- Gynaecology: A. Galindo MD, PhD.
- Oncological Radiotherapy: JF. Perez-Regadera MD, PhD.
- Medical Oncology: L. Paz-Ares MD, PhD.

The **Gynaecology Oncology Unit** of our hospital is integrated by:

- Gynaecology Oncology: Dr. A. Tejerizo (Head of the Unit), Dr. B. Gil-Ibañez, Dr. G. Lopez, Dr. C. Alvarez, Dr. JM. Seoane, Dra. MR. Oliver Pérez.
- Preinvasive pathology (hysteroscopy and colposcopy): Dra. V. Bravo, Dra. C. Perez Sagaseta, Dra. C. Guillen, Dra. C. Gonzalez Macho.
- Oncological Radiotherapy: Dr. JF Pérez-Regadera, Dra. V. Rodriguez, Dr. D'Ambrosi
- Medical Oncology: Dr. L. Paz-Ares, Dr. L. Manso, Dr. R. Sánchez-Bayona, Dra. Madariaga
- General Surgery; Dr. O. Caso
- Urology: Dr. Jose Duarte
- Cytological diagnosis, pathology and tumor biology: Dr. M. Martinez, Dra. C. Bárcena, Dra. L. Parrilla.
- Imaging: Dr. E. Zabia.
- Nuclear medicine: Dra. P. Sarandeses, Dr. MD Marin, Dr. MJ. Tabuenca.
- Data manager: Laura Hernandez, Isabel Ayala.
- Gynecology Oncology nurse: Yolanda Serrano, Mª Paz Fernández-Rodrigo
- Psycho-oncology: Anhara García Valverde, Almudena Narvaez Arrospide.
- Palliative Care: Dr. L. Caurcel, Dr. B. Azcoitia, Dra. H. Mora, Dr. C. Nuñez.
- Nutrition Care: Marta Ruiz Aguado.
- Anestesia y Reanimación: Dra. MB Tebar Cuesta, Dra. ML Salcedo

5. Means of training

The trainee will have an appointed educational Supervisor as a tutor for guidance and advice (B. Gil-Ibañez, MD, PhD).

The trainee is fully integrated in the Gynaecologic Oncology Unit and participates in all relevant activities:

- The care of outpatients
- The care of inpatients
- On-Call duties (day and night; 2-3/month)
- Gynaecological Oncology Surgeries
- Educational activities, including teaching medicine students, residents of Gynaecology and Obstetrics, and specialists.
- Active participation in audit, research and committees

The Arrangements for postgraduate training are supported by our Institution with a contract compatible with national employment legislation.

Surgical training will be systematic, stepwise, and modular, progressively exposing the trainee to the performance of complex procedures. The centre will facilitate the simulation training by pelvic trainer simulator, access to the cadaver laboratory of the Complutense University of Madrid (UCM).

6. Duration of training

The training program is structured in **two years** of full-time equivalent training.

The portfolio must be completed within four years after the formal start of training. ESGO exam must be passed within six years after the formal start of training.

7. Program structure.

The trainee develops his/her work in three different fields:

- Clinical training.
- Educational training.
- Research training.

7.1. Weekly Schedule

The weekly schedule is shown in table 1.

	Monday	Tuesday	Wednesday	Thursday	Friday
8:00- 9:00	,	In- patients at the hospi	tal ward	,	Family hereditary cancer Committee
9:00- 14:00	Rotation	Rotation	Gynecology oncology	Gynecology oncology	Educational training/Research/
14:00- 15:00h	Multidisciplinary Tumor Board	Gynecology-oncology Unit meeting	Operating theater	operating theater	Portfolio
15:00- 17:00h	Research/Portfolio	Research/Portfolio			
Rest		On	call duties	1	1

Table 1. Weekly schedule

7.2. Clinical training

Clinical training covers the modules outlines in the ESGO Training in Gynaecological Oncology curriculum, published in October 2020 (<u>https://www.esgo.org/individual-accreditation</u>):

- Organ-specific modules (OEM): Gestational trophoblastic disease (GTD), ovarian and tubal cancer, uterine cancer, cervical cancer, vaginal cancer, vulvar cancer.
- Generic modules (GM): peri-operative care, gynaecology oncological surgery (general and colorectal surgery), systemic therapy (including pharmacology), urologic surgery, palliative care and supportive care, clinical cancer genetics, pathology, radiotherapy, radiology (including nuclear medicine)
- General competency modules (GCM): communication, collaboration, leadership and management, good medical practice, clinical governance and management.

Clinical rotation programme is summarized in table1.

Department	Days/week	Duration (months)
Gynaecology Oncology	2	
Preinvasive Disease. Colposcopy and	1	1
Hysteroscopy		
Gynaecology Oncology: Out-patient care	2	12
Gynaecology Oncology Surgery	2	21

Table 1. Clinical Training Programme

Gynaecology Surgery	2	21
Gynaecology Oncology: In-patient's care	5	21
General and Colorectal Surgery	5	1
Urology	2	1
Medical Oncology	2	2
Oncological Radiotherapy	2	1
Cytopathology	2	1
Radiology	2	1
Nuclear Medicine	2	1
Psycho-oncologist and palliative care	2	1
External Rotation	5	2

7.2.1. At the Gynaecology Oncology Department

Modules: OEM, Clinical Cancer Genetics and GMC.

Supervisor:

- Preinvasive Disease-Hysteroscopy: C.Perez-Sagaseta, MD; C. Guillen, MD; C. Gonzalez-Macho, MD.
- Preinvasive Disease-Colposcopy: V. Bravo Violeta, MD, PhD; JM. Seoane, MD.
- Gynaecology Oncology (outpatient care): A. Tejerizo Garcia, MD, PhD; B. Gil Ibañez, MD, PhD; C. Álvarez Conejo, MD, PhD; G. López González, MD, PhD; JM Seoane, MD.
- Gynaecology Oncology (in patient care): M. García Vega, MD, PhD

Duration: 13 Months (2 days per week):

- Preinvasive Disease-Hysteroscopy: 1 month (1 days per 2 weeks)
- Preinvasive Disease-Colposcopy: 1 month (1 days per2 weeks)
- Gynaecology Oncology (outpatient care): 12 months (2 days per week)
- Gynaecology oncology (in patient care): 21 months (5 days per week)

- Understand and demonstrate appropriate knowledge, skills, and attitude in relation to managing patients with de diagnosis of gynaecological cancer (ovarian, tubal, uterine, cervical, vulvar and vaginal) or GTD.
- Perform initial assessment and interpretation of investigational results of suspected gynaecological cancer.
- Plan subsequent management of gynaecological cancer.
- Perform appropriate gynaecological diagnostic procedures (hysteroscopy, colposcopy and ultrasound) and excision biopsy.
- Appropriately interpret investigation results.
- Communicate with the MDT and organise appropriate treatment.
- Plan a execute the appropriate monitoring and follow up.
- Diagnose, investigate, and manage patients with a genetic predisposition to gynaecological cancer and their families (hereditary breast and ovarian cancer, hereditary

ovarian cancer, Lynch Syndrome, Cowden Syndrome), alongside clinical genetics and other relevant specialty services. Be able to discuss advantages and disadvantages or the interventions.

 Ability to empathetically explain the suspicion of diagnosis of cancer and to discuss the diagnosis, prognosis and treatment options, including genetic counselling and fertility preservation, and to discuss the possibility, symptoms and location of recurrences clearly and openly.

Training tools:

- Participation in Gynecology Oncology out-patients care. Observation and assistance of and discussion with senior staff.
- Participation in Gynecology Oncology Hospitalization (in-patients care) (every day)
- Attendance and participation in Colposcopy procedures (histologic biopsy, cytologic biopsy and LLETZ/LEEP of cervix). Observation and assistance of and discussion with senior staff.
- Attendance and participation in Hysteroscopic procedures. Observation and assistance of and discussion with senior staff.
- Attendance once a year to the theoretical-practical course of diagnostic and surgical hysteroscopy, carried out by the members of the unit.
- Attendance and participation in Gynecology Oncology Ultrasound (once per week). Observation and assistance of and discussion with senior staff.
- Attendance and participation in the Multidisciplinary tumor board once a week.
- Attendance and participation in the Family Hereditary cancer committee twice a month.
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.2. <u>Gynaecology Oncology Surgery</u>

Modules: OEM, Perioperative care, gynaecology oncological surgery (general and colorectal surgery), urologic surgery and GMC.

Supervisor:

- Gynaecology Oncology Surgery: A. Tejerizo Garcia, MD, PhD; B. Gil Ibañez, MD, PhD; C. Álvarez Conejo, MD, PhD; G. López González, MD, PhD; JM Seoane, MD.
- Perioperative care (in patient care): M. García Vega, MD, PhD; M. Ruiz Aguado

Duration: 21 Months.

- 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 pre-, intra and postoperative complications, advise on nutrition and total parenteral nutrition)
- Knowledge and application of ERAS principles
- Comprehensive knowledge of the regional anatomy of the pelvis and upper abdomen.
- Detailed knowledge of the surgical anatomy of relevant bones, joints, muscles, blood vessels, lymphatics, and nerve supply of the abdomen. Ureter. Avascular spaces.
- Acquire the surgical skills in laparoscopic and open surgery.

- Surgical treatment of advanced cancer and recurrence, initiation in reconstructive techniques.
- Knowledge of the indication of reconstructive or plastic surgery appropriate for the surgical defect due to previous debulking surgery.
- Knowledge of the indication of different surgeries adequately to the tumour prognostic and general status of the patient (including frailty and psycho-emotional consequences).

Training tools:

- Attendance in Gynecology Oncology Hospitalization (in-patients care) (every day).
- Attendance in intensive care unit ward rounds
- Participation in gynecologic cancer surgeries (2 days per week). Direct and indirect surgical supervision of surgical skills to appropriate competency by surgical staff. Specific task training and supervision.
- Participation in simulation training.
- Attendance to postgraduate courses (e.g. ESGO Courses).
- Personal study

Minimal surgical procedures to be performed by the trainee:

- Minimally invasive procedures (excluding simple laparoscopies): Min. 30 cases
- Radical Hysterectomy (laparoscopy/laparotomy) or parametrectomies: Min. 15 cases
- Pelvic lymph node dissections (including. Sentinel lymph node procedures): Min. 30 cases.
- Para-aortic lymph node dissection: Min. 10 cases.
- Local radical vulvar excision: Min. 5 cases.
- Inguino-femoral lymph node evaluations and dissections: Min. 5 cases.
- Cytoreductive surgeries, including either bowel resection or upper abdominal procedures or bulky lymph node resection: Min. 30 (20 as the first surgeon).

7.2.3. At the General and Colorectal Surgery

Modules: General, Colorectal surgery and GMC.

Supervisor: O. Caso Maestro, MD, PhD

Duration: 1 Month (5 days per week)

- Detailed knowledge of anatomy and physiology of gastrointestinal tract and pathophysiology of intestinal function.
- Knowledge of indications to perform bowel surgery in a gynaecological oncology setting.
- Knowledge of principles of surgery of gastrointestinal tract. Acquire surgical training in all surgical procedures performed under gynaecological oncology surgery as infrasonic and supracolic omentectomy, bowel resection and anastomose, ileostomy/colostomy, mobilisation of the liver, splenectomy, peritoneal stripping.
- Comprehensive Knowledge of the complications and normal evolution of the postoperative care.

Training tools:

- Attendance to Colorectal Oncology Hospitalization (in-patients care) (every day).
- Attendance to intensive care unit ward rounds.
- Attendance to colorectal outpatient clinic, including stoma therapist.
- Participation in General and Colorectal surgery. Direct and indirect surgical supervision of surgical skills to appropriate competency by surgical staff. Specific task training and supervision.
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.4. At the Urology Department

Modules: Urologic Surgery and GMC. Supervisor: J. Duarte, MD, PhD

Duration: 1 Month (2 days per week)

Objectives:

- Understand the impact of gynaecological cancer and its treatment in renal tract.
- Comprehensive knowledge of the anatomy and physiology of kidney, ureter, bladder and urethra (blood vessels, lymphatics and nerve supply)
- Acquire surgical training in all surgical procedures performed under gynaecological oncology surgery that involve urinary tract. Perform cystoscopy, repair to bladder, dissection of ureter and urinary deviation.
- Have an awareness of possible urological complications. Recognition and management of injury to urinary tract.
- Comprehensive Knowledge of the complications and normal evolution of the postoperative care. Identify and manage of urological complications.
- Knowledge of investigation and diagnosis disorders of urinary tract.

Training tools:

- Participation in Urology out-patients care
- Participation in Urology Hospitalization (in-patients care)
- Attendance and participation in the Urology Multidisciplinary tumor board (once a week).
- Participation in Urologic surgery. Direct and indirect surgical supervision of surgical skills to appropriate competency by surgical staff. Specific task training and supervision.
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.5. At the Medical Oncology Department.

Modules: Systemic Therapy, Clinical Cancer Genetics and GMC. Supervisor: L. Manso, MD, PHD; R. Sánchez Bayona, MD, PhD, Dra. Madariaga, MD, PhD

Duration: 2 Month (2 days per week)

Objetives:

- Comprehensive knowledge of tumour biology and immunology (kinetics of cell cycle and cancer cell growth)
- Detailed Knowledge of the pharmacological properties of drugs used in gynaecological oncology: chemotherapy, hormonotherapy, immunotherapy and genetherapy.
- Knowledge of different intents, lines, and routes of chemotherapy, immunotherapy, and targeted therapy and its combination with other treatment modalities (surgery, radiotherapy).
- Knowledge of indications and adverse effects of chemotherapy and selected targeted treatments in the management of gynecological cancers.
- Comprehensive evaluation of the oncology patient and its implications for the treatment decision
- Have updated knowledge and an appropriate interpretation of clinical trials in gynecological oncology.
- Participate in the planning and execution of updated algorithms for the systemic treatment of gynecological cancers.
- Acquire the attitude to counsel patients, plan systemic treatments, and assess response in gynecological cancers.
- Diagnose, investigate, and manage patients with a genetic predisposition to gynecological cancer and their families (hereditary breast and ovarian cancer, hereditary ovarian cancer, Lynch Syndrome, Cowden Syndrome), alongside clinical genetics and other relevant specialty services. Be able to discuss advantages and disadvantages or the interventions.
- Communicate with the MDT and select the appropriate systemic treatment for gynecological cancers.

Training tools:

- Participation in Medical Oncology out-patients care
- Participation in Medical Oncology Hospitalization (in-patients care)
- Attendance and participation in the Multidisciplinary tumor board once a week.
- Attendance and participation in the Family Hereditary cancer committee twice a month.
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.6. At the Oncological Radiotherapy Department

Modules: Radiotherapy and GMC.

Supervisor: JF. Pérez Regadera, MD, PhD; V. Rodriguez, MD.

Duration: 1 Month (2 days per week)

Objectives:

- Kknowledge of radiation physics, radiation biology, and the different radiotherapy modalities (external beam radiotherapy, brachytherapy).
- Have a detailed knowledge of indications, acute and late toxicities of radiotherapy in the management of gynecological cancers.
- Have a detailed knowledge of the use of chemotherapy or other drugs in combination with radiotherapy.
- Demonstrate adequate skills and attitude to counsel patients and plan radiotherapy treatment for gynecological cancers.
- Investigate, recognize, and manage early and long-term complications of radiotherapy.
- Plan and execute the appropriate monitoring after radiotherapy with the management of recurrences.
- Communicate with the MDT ad select the appropriate radiotherapy for gynecological cancers.

Training tools:

- Participation in Oncological radiotherapy out-patients care
- Attendance to radiotherapy procedures. Minimal procedures for trainee: cervical cancer (5 cases), endometrial cancer (6 cases), vulvar cancer (3 cases).
- Attendance and participation in the Multidisciplinary tumor board once a week.
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.7. At the Pathology Department

Modules: Pathology and GMC.

Supervisor: M.Martínez, MD; C. Barcena, MD; L. Parrilla Rubio, MD. Duration: 1 Month (2 days per week)

Objectives:

- Acquire detailed knowledge of cytology and surgical pathology of gynecological cancer and precancerous lesions, focusing on the standard routine histology workflow.
- Macroscopic and microscopic management of the gynecological oncologic specimens and its clinicopathologic correlation.
- Learn the basics and the appropriate application of immunohistochemistry and molecular diagnosis of gynecologic tumors.
- Attend to intraoperative consultations and interpreting the results.
- Be able to interpret pathology reports, including genetic mutation analyses.

Training tools:

- Laboratory visits
- Presentation and discussion of pathology cases at Multidisciplinary tumor boards (once a week)

Attendance to postgraduate courses (e.g. ESGO Courses)

7.2.8. At the Radiology Department.

Modules: Radiology and GMC.

Supervisor: E. Zabia, MD

Duration: 1 Month (2 days per week) divided in two weeks abdominal CT and two weeks MRI.

Objetives:

- Indications and interpretation of all imaging techniques used in gynaecological oncology
- Systematic interpretation of CT body following radiologic criteria
- Diagnostic algorithm. Staging and follow up
- RECIST criteria

Training tools:

- Observation and assistance of abdominal CT and MRI and discussion with senior staff.
- Attendance and participation in the Multidisciplinary tumor board (once a week).
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study.

7.2.9. Nuclear medicine

Modules: Nuclear medicine and GMC. Supervisor: P. Sarandeses, MD, PhD; MD Marin, MD, PhD; MJ. Tabuenca, MD, PhD Duration: 1 Month (2 days per week)

Objetives:

- Interpretation and indications of PET/CT
- To learn the procedure of the sentinel node biopsy in cervical, vulvar and endometrial cancer. Injection, lymphoscintigraphy and surgical biopsy.

Training tools:

- Observation and assistance of PET /CT and discussion with senior staff. •
- Observation and assistance of gynecologic sentinel node.
- Attendance and participation in the Multidisciplinary tumor board (once a week).
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study.

7.2.10. Palliative care and supportive care

Modules: Palliative Care, Supportive Care and GMC.

Supervisor: L. Caurcel, MD, PHD; B. Azcoitia, MD, PhD; H. Mora, MD, PhD; C. Nuñez, MD, PhD; M. Ruiz Aguado; A. Garcia Valverde; A. Narvaez Arrospide.

Duration: 1 Month (2 days per week)

Objectives:

- Understand and demonstrate appropriate knowledge, skills, and attitude in relation to managing patients with terminal disease because of gynecological cancer.
- Be able to clinically assess and evaluate the condition of the patient.
- Plan subsequent appropriate supportive care.
- Perform appropriate exams to decide whether the patient is a candidate for subsequent chemotherapy or not.
- Appropriately interpret the patient's pain and have knowledge of the means to decrease it.
- Be able to take decisions whether the patient should have a stoma/gastrostomy.
- Plan and execute the appropriate monitoring and be able to decide when to stop administering chemotherapy.
- Be able to empathetically explain the options available to a patient and relatives with terminal disease.
- Acquire skills to give basic emotional support
- Train communication skills

Training tools:

- Participation in Palliative care Hospitalization (in-patients care)
- Attendance to postgraduate courses (e.g. ESGO Courses)
- Personal study

7.2.11. External Rotation

The trainee could perform at least one external rotation. ESGO-accredited centres are recommended. Duration: 2 Months.

7.3. Educational training

Educational training covers the general competency modules outlines in the ESGO Training in Gynaecological Oncology curriculum, published in October 2020 (https://www.esgo.org/individual-accreditation):

- Communication, collaboration, leadership, and management.
- Good medical practice, clinical governance, and management.

Objectives:

- Demonstrate effective communication with patients and colleagues. Structure a patient interview, including breaking bad news.
- Demonstrate good working relationships with colleagues.
- Demonstrate the ability to work in clinical teams and gain the necessary leadership skills.
- Understand and demonstrate appropriate knowledge and skills in relation to good medical practice, clinical governance, and risk management.
- Inculcate the habit of lifelong learning and continued professional development.
- Acquire the knowledge, attitude, and skills to act in a professional manner at all times.

Training tools:

- Observation and assistance of and discussion with senior staff.
- Preparation, presentation, and discussion of cases in the Gynecologic oncologist meets (once a week). The trainee prepares the cases to be exposed and take care of the work up.
- Preparation, presentation, and discussion of cases in Multidisciplinary Tumor Board (once a week). All the cases in the Unit are reviewed by our multidisciplinary team.
- As University Hospital, the trainee participates also in educational from the whole Service of Obstetrics and Gynecology and is responsible for the continued training of medical students and residents.

Minimum educational activity required for the trainee during the training period:

- At least 20 consultations for breaking bad news.
- Al least two clinical audit projects as the responsible person
- Al least development of a one protocol/guideline/patient information sheet.
- Completion of a course in leadership and management.
- The trainee will be the director of, at least, one End-of -degree medical student project per year.

7.4. Research training

Supervisor: G. Lopez González, MD, PhD; B. Gil-Ibañez, MD, PhD. Duration: At least 1 day per week.

- Understand and demonstrate appropriate Knowledge, skills, and attitudes in relation to undertaking research relevant to gynecological oncology.
- Understand principles of sampling, sample size and power calculations
- Knowledge of epidemiological methods in medical research and understanding of trial design methodology
- Knowledge and correct interpretation of medical statistics for clinical research.
- Knowledge of ethical committee regulations and requirements, research legislation, research governance procedures and requirements.

- Knowledge of the principles of and how to take informed consent and the roles and responsibilities of those involved it.
- Understanding of the roles and responsibilities of the different individual and organizations in the research environment.
- Writing research protocols and peer-reviewed papers.

Training tools:

- Participation as a researcher in the clinical trials carried out at the Gynecologic Oncology Unit.
- The trainee will be included in a research line.
- Design, update, and analysis of existing databases related to Gynecological cancers treated in our Centre.
- Access to scientific journals by the virtual library of the Centre.
- Discussion with senior staff (clinicians, scientists, statisticians).
- Mentoring and supervision by senior staff.
- Personal study

Minimum research activity required for the trainee during the training period:

- Publish at least two peer-reviewed publication or successfully complete (the equivalent of) an Advanced Professional Module of Clinical Research
- Presentation poster or oral communications at conferences (e.g. ESGO meeting). At least 4 presentations.
- The group will help and provide support the trainee to start a higher research degree as PhD. Trainees who have already the Doctor title should continue their participation in clinical or basic research.
- Acquire a Good Clinical Practice Research Certification
- At least one literature review of an interesting topic every 6 months.

8. Assessment. Quality control and Logbook.

The training is structured with defined targets to be met after specified intervals. At the beginning of each new training setting an educational plan will be drawn up with the trainee and the supervisor. All the activities of the training will be updated in real-time in the eLogbook available online.

8.1. Summative assessment:

The Trainee and the educational supervisor will have a **formal biannual assessment** reviewing the progress towards the required competencies (detailed in the ESGO logbook). Previously the trainee should have **completed the self-assessment**. Evaluation of the skills and knowledge of the trainee and their compliance with the curriculum will be evaluated, considering:

- Competency-based assessment following the ACGME outcomes checklist.
- An assessment of level of proficiency
- An evaluation of educational activities
- An evaluation of research activities

• Identification of specific training objectives for the next phase

Once a year a Multi-Source feedback of the training team will take place.

8.2. Formative Assessment:

Per module and procedure, the required number of structured assessments will be performed and approved by both the fellow and the Educational Supervisor.

For the evaluation, the recommendations and tools provided by ESGO and available online (portfolio) will be applied:

- Evaluating knowledge using the ACGME competency assessment
- Evaluating surgical skills using OSATS.

8.3. Documentation

The trainee will document in the eLogbook:

- All surgical procedures in which he/she participate.
- Professional postgraduate education (course/symposium/congress/Lecture)
- All publications with authorship

9. Annex 1.

ogin name:	
ogin code:	
RAINEE DETAILS	
Personal Details	
Last name:	
Given name:	
Date of birth:	DD/MM/YY
Gender:	M/F/other
Contact details	
Home address:	
 street, house number: 	
- town:	
 postal code: 	
- country:	
Mobile phone number:	
Email:	
Training history	
Curriculum vitae:	to be uploaded here
National medical registr	ation number:
General Ob/Gyn training	a de la construcción de la constru
Institution(s)	
Hospital Name:	
Town:	
Country:	
Period (DD/MM/YY): from	m till
(add more if necessary)	
Specialist registration da	ate (DD/MM/YY): (upload certificate here)
Calmanana any any says	mandatory), date of certification (DD/MM/YY): (upload certificate here)

SUBSPECIALTY TRAINING FOR GYNAECOLOGICAL ONCOLOGY DETAILS

Department: Town:			
Training Program Name: Email address:	me Director		
Educational Supe Name: Email address: (add more superv			
Training Program Training period (I (add more institu	DD/MM/YY): From:	to be uploa To	
ESGO Exam date	(DD/MM/YY):		. (upload certificate here)

Self-Assessment

	SELF ASSESSMENT	
	Competence-based assessment	
Date (DD/ MM/ YY)	Learning target	Competence level: 1.None 2. Some 3. Full competence
Practice-based		
learning and	Identify personal limits	
improvement		
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
	Participation in education	
Patient care and procedural skills	Adequate gathering of information	
	Adequate synthesis of findings	
	Partnership with patients and family	
Systems-based practice	Work effectively in health care system	
	Consider cost-effectiveness	
	Consider quality of care	
	Consider and identify patient safety issues, including identifying	
	system errors	
Medical knowledge	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines. Patient info sheets (being	
	responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
	Attendance of international meetings Membership of ENYGO/ESGO	
Interpersonal and	Communication with other care providers and health-related	yes/ no
communicative skills	agencies	
	Communication with patients and family	
	Discussing bad news/resuscitation	
	Work effectively as a member or leader of a team	
	Act in a consultative role	
	Maintain comprehensive, timely and legible medical record	
Professionalism	Handling oncological patients	
	Handling grief and emotions	
	Recognition of pathological grief	
	Handling religious and other convictions	
	Monitoring and comparing results of clinical care, up to being	
	responsible for clinical audit (latter end target)	
	Knowledge and use of the complication and mortality register	
	Self-reflection	
Points for		
improvement		

Multi-Source Feedback

		ľ	//ULTI-SO	URCE FEEDB	ACK (MSF)				
Name of member									
Role in team									
Date (DD/MM/YY)									
		NOT AT ALL	-	CI				HIGHLY	
	CH/	ARACTERIS	TIC	Cr	HARACTERIST	IC	CHAI	RACTERIS	STIC
			Р	rofessionalis	m				
Responsibility	Accepts r	esponsibilit	ies willingl [,]	y; follows thro	ough on tasks	carefully and	thorough	ly; is dep	pendable
	and industrious; responds to requests in a helpful and prompt manner								
	1	2	3	4	5	6	7	8	9
Scope of practice	Recognise	es limits of	his/her abi	lities; asks for	help when n	eeded; refers	patients w	/hen appr	ropriate;
	exercises	authority a	ccorded by	position and	/or experienc	e			
	1	2	3	4	5	6	7	8	9
-									
	Responds	to each pa	tient's uni	que needs and	d characteristi	cs by being se	ensitive to	issues re	elated to
Patient needs	patient cu	ilture, age,	gender an	d disabilities;	provides equi	table care rega	ardless of	patient c	ulture or
	patient culture, age, gender and disabilities; provides equitable care regardless of patient cultur socioeconomic status								
	1	2	3	4	5	6	7	8	9
-									
Integrity and	Takes re	sponsibility	for actio	ns; admits r	nistakes; put	s patient nee	eds above	e own ir	nterests;
ethical behaviour	recognise	s and addre	esses ethica	al dilemmas aı	nd conflicts of	interest; main	itains patie	ent confid	lentiality
	1	2	3	4	5	6	7	8	9
		Int	erpersona	al & Commur	ication Skill	s			
Relationship-	Establishe	es rapport v	with patien	its and their f	amilies; demo	onstrates care	and conc	ern; is re	espectful
building					,	patient/family		,	
	1	2	3	4	5	6	7	8	9
	Demonstr	ates courte	esy to and	consideratio	n of consultar	nts, therapists	, physicis	ts, & oth	er team
Team interaction						their knowled			
			, ,	nents occur			5 Fr	,	5
	1	2	3	4	5	6	7	8	9
	l	l	-	l	-	-	ł.	-	-

Remarks

	UNSATISFACTORY			SATISFACTORY			SUPERIOR		
Overall rating	1	2	3	4	5	6	7	8	9
Please explain "not at all characteristic" ratings:									
The fellow and Super-	visor will di	scuss this e	evaluation	and the fellow	's overall perf	ormance in th	e progran	nme, and	ways to

Evaluation by educational supervisor

	EVALUATION BY EDUCATIONAL SUPERVISOR	
	Competency-based assessment	
Name of Supervisor		
Date (DD/MM/YY)	Learning target	Competence level 1.None 2.Some 3. Full competence
Practice-based		
learning and improvement	Identify personal limits	
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
	Participation in education	
Patient care and procedural skills	Adequate gathering of information	
	Adequate synthesis of findings	
	Partnership with patients and family	
Systems-based practice	Work effectively in the health care system	
	Consider cost-effectiveness	
	Consider quality of care	
	Consider and identify patient safety issues, including identifying	
	system errors	
Medical knowledge	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines/patient info sheets (being	
	responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
	Attendance of international meetings	
	Membership of ENYGO/ESGO	yes/ no
Interpersonal and communicative skills	Communication with other care providers and health-related agencies	
	Communication with patients and family	
	Discussing bad news/resuscitation	
	Work effectively as a member or leader of a team	
	Act in a consultative role	
	Maintain comprehensive, timely, and legible medical records	
Professionalism	Handling oncological patients	
	Handling grief and emotions	
	Recognition of pathological grief	
	Handling religious and other convictions	
	Monitoring and comparing results of clinical care, up to being	
	responsible for a clinical audit (latter end target)	
	Knowledge and use of the complication and mortality register	
	Self-reflection	

		EVALUATION BY EDUCATIONAL	SUPERVI SOR	
		assessment of level of profi	iciency	
Name of supervisor				
Date (DD/MM/YY)				
	Medica		Competency level 1. Passive 2. Direct supervision 3. Some supervision 4. Without supervision 5. Supervises/ teaches	Cumulative Number At levels 4–5
Module	Learning t	target		
ORGAN-SPECIFIC				
Uterine cancer	Diagnosti	and therapeutic plan		
	Surgery for	or low-risk cancer		
	Radical su	Irgery for high-risk		
		treatment options and morbidity		
		paring treatment		
	· or energy of			
Ovarian & tubal cancer	Diagnosti	c and therapeutic plan		
		ic use of US and tumour markers		
	-			
		adical treatment		
	Organisin			
	Follow-up			
Cervical cancer		e of prevention		
		c and therapeutic plan		
	Surgical (radical) treatment		
Vaginal cancer	Diagnostic	and therapeutic plan		
	Radical su	Irgical treatment		
Vulvar cancer	Diagnostio	and therapeutic plan		
		n and drawing of vulvar situation		
	Excision b	=		
	Local exci			
	Radical su	Irgery for vulvar cancer		
	rtuarear se			
GTD	Recognitio	on and diagnosis of GTD/GTN		
610		nd medical treatment of GTD		
	_	t plan for GTN		
	meatmen			
GENERIC				
	Current			
Gyn.onc. surgery	-	natomical knowledge		
	-	on and treatment of surgical		
	complicati			
		urgical skills:		
		tomies for uterine cancer		
		ysterectomies		
		rachelectomy		
	- pelvic In			
		d (laparoscopically)		
		ortic Ind (open)		
		ortic Ind (laparoscopically)		
		le excision vulva		
	- inguino-	femoral Inn evaluation		
		colpectomy		
		neovagina		
		pracolic omentectomy		
		· · ·	<u>.</u>	

	Medical skills	Competency level 1. Passive 2. Direct supervision 3. Some supervision 4. Without supervision 5. Supervises/ teaches	Cumulative Number At levels 4–5
Gyn.onc. surgery	- cytoreductive surgeries		
	 laparoscopic assessment ov.ca. 		
	- laparoscopic insertion IP catheter		
	- exenterations		
	- LLETZ/LEEP of cervix		
	- enterostomy		
	- cytologic biopsy (FNA)		
	- histologic biopsy (Tru-cut)		
Urologic surgery	- urinary deviation		
	- recognition and dissection ureter		
Reconstr. surgery	Recognising need for plastic surgery		
Reconstribution	Treatment of wound complications		
Systemic therapy	Pharmacological knowledge of cytostatic agents		
	Knowledge of indications		
	Acquaintance with clinical trials		
Radiotherapy	Knowledge of radiation and nuclear medical principles		
Palliative & supportive care	Indications for palliative care		
	Prescribing pain medication		
	Holistic approach to the symptoms and worries of the cancer patient and family		
Genetics	Knowledge of familial cancer syndromes		
	Counselling mutation carriers		
	Knowledge of preventive measures and their consequences		
	Knowledge of genes involved in oncogenesis		
	Knowledge of molecular targets for treatment		
Pathology	Knowledge of pathophysiology		
	Knowledge of gynaecological tumour classification and staging		
Peri-op. care	Knowledge and application of ERAS principles		

EVAL	EVALUATION BY EDUCATIONAL SUPERVISOR Assessment of educational activities				
Name of supervisor					
Date (DD/ MM/ YY)					
Verdict	Issues				
What went well?					
What could be improved?					

EVALUATI ON BY EDUCATI ONAL SUPERVI SOR Assessment of research activities			
Name of supervisor			
Date (DD/ MM/ YY)			
Verdict	Issues		
What went well?			
What could be improved?			

EVALUATION BY EDUCATIONAL SUPERVISOR				
	Summary and training plan			
Name of supervisor				
Date (DD/ MM/ YY)				
	Verdict/ Issues			
Summary				
1. Below expected level				
2. At expected level				
3. Above expected level				
Specific training objectives for the next				
phase				
Final remark(s) by fellow				
	Agreement with summary of evaluation			
(both the fellow and the Educational Supervisor sign to witness that this summary is correct)				
Electronic signature fellow	Log in here			
Electronic signature Supervisor	Log in here			

(more assessments to be repeated as required)

Formative Assessments. Competency.

	COMPETENCY ASSESSMENT	
	ACGME outcomes checklist	
Name assessor		
Date (DD/MM/YY)		
Module/		
tumour type		
ACGME Outcome	Learning target	Competence level 1. None 2. Some 3. Full competence
Practice-based		
learning and	Identify personal limits	
improvement		
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
	Participation in education	
Patient care and procedural skills	Adequate gathering of information	
	Adequate synthesis of findings	
	Partnership with patients and family	
Systems-based practice	Work effectively in the health care system	
	Consider cost-effectiveness	
	Consider quality of care	
	Consider and identify patient safety issues, including identifying	
	system errors	
Medical knowledge	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines/patient info sheets (being	
	responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
	Attendance of international meetings	
	Membership of ENYGO/ESGO	no/yes

Interpersonal and communicative skills	Communication with other care providers and health-related agencies		
	Communication with patients and family		
	Discussing bad news/resuscitation		
	Work effectively as a member or leader of a team		
	Act in a consultative role		
	Maintain comprehensive, timely, and legible medical records		
Professionalism	Handling oncological patients		
	Handling grief and emotions		
	Recognition of pathological grief		
	Handling religious and other convictions		
	Monitoring and comparing results of clinical care, up to being		
	responsible for a clinical audit (latter end target)		
	Knowledge and use of the complication and mortality register		
	Self-reflection		
	Agreement with assessment		
(both the fellow and th	e Educational Supervisor sign to witness that the assessment has correctly been documented)		
Signature fellow	Log in here		
Signature assessor	Log in here		

Formative Assessment. Surgical Skills.

SKILLS ASSESSMENT						
(using principles of OSATS, Mini CEX, or	(CBD)					
Supervisor's name	(GDD)					
Supervisor's role	-					
Date (DD/MM/YY)						
Clinical setting	Outpationt/	innationt/acut	e admission/th	oatro/othor		
Procedure/ case	Outpatienty	inpatient/acut				
Relevant clinical details						
Focus	Tachnical al	vill/record loss	ping/clinical as	coccmont/mo	nagement/	
Focus	professiona		ping/clinical as	sessment/ma	inagement/	
Complexity		nediate/advar	cod			
Overall performance	Dasic/Intern	neulate/ auvai	iceu			
If another specific type of assessment	Here					
tool has been used upload	TIELE					
(and discard following items)						
ASSESSMENT			SCORE (tick ap	opropriato bo	~)	
ASSESSMENT	On a sc		adequate) to 5			nnlicable
	1	2	3	4	5	n.a.
Safety considerations	1	2	5		5	n.a.
Documentation						
Tissue handling						
Dealing with problems/difficulties						
Economy of movement						
Forward planning						
Selection of instruments/equipment	-					
Communication with staff						
Technical ability						
Use of assistants						
Peri-operative planning (e.g.						
positioning)						
Communication with patients/relatives						
Checking equipment/environment						
Verdict			Iss	lies		
What went well			133			
What could have gone better						
Fellow's reflection						
Learning plan	1					
Overall performance	Competent/	working towa	rds competenc	V		
		ent with ass		/		
(both the fellow and the Educational Sup				nt has correc	tly been docu	mented)
Signature fellow	Log in here				,	
Signature supervisor	Log in here					
Signature Supervisor	Log III here					

Surgical Procedures

Procedure:	Access: - open - minimally invasive	Date of surgery:	Tumour type: - vulva - cervix - endometrium - ovary/tube - trophoblast - metastatic - other	Surgical role: - surgeon - assistant - observer	Supervisor:	Structured assessment: (e.g., OSATS) - yes - no

Professional postgraduate education

Starting date: (DD/MM/YY)	Title: Course/ Symposium/Congress/Lecture	Venue:	Role: - participant - oral presenter - poster presenter - organiser - other	CME: No. of points	Certificate: Upload
					here

Publications

Position in authorship: - first author - co-author - senior (last) author	Journal:	Day of first pub. (DD/MM/YY)	Title: + DOI