

## Danish Trainee program in obstetrics and gynecology

*Summary:*

*Duration of trainee program in OB/GYN*

- *in total 4 years (though 1 year in Ob/Gyn is required before applying for a traineeship; i.e. 1+4 years in total to become a specialist)*
- *6 months in surgery (gastroenterological, incl a focussed stay in an urological dept.)*
- *at least 12 months in an Ob/Gyn department in a university hospital*
- *the remaining months in Ob/Gyn in a larger, peripheral hospital*
- *10 mandatory courses (210 hours) in gynecology, oncology, fetal medicine, obstetrics, urogynecology, infertility, communication and surgical training operating on pigs.*
- *4 mandatory administrative courses, each of 2-4 days of duration.*
- *a mandatory research training program for trainees without a ph.d. consisting of mandatory courses (5 days), 2 weeks of for research and a written article or report plus an oral presentation*
- *operations and procedures listed in the Check-list and log-book (see below). The check-list is mainly competence driven rather than giving an exact minimum number of procedures to perform, some of the operations do however have a minimum number.*
- *every trainee has more personal tutors, but every senior doctor has a teaching role.*
- *there is no exam at the end of the trainee period.*

Each year in Denmark, approximately 30 doctors commence their ob/gyn trainee program. The trainee program lasts 48 months but to apply for this program a 12 month employment in an introductory position in ob/gyn is required. (and before applying for the introductory position a 12 months basic training is mandatory for every young doctor no matter what specialty they chose afterwards)

Trainees spend their time in ob/gyn departments in both a university hospital and in a larger peripheral hospital as well as in a surgical ward (6 months). The timing of the surgical rotation in the 48 months program depends on which region in Denmark the traineeship is placed in.

In Denmark, working hours are 37 hrs per week, though most doctors, incl. trainees, spend more hours in the department. As a trainee it is often necessary to spend a fair amount of ones spare time to do research, read scientific articles etc.

All trainees have a check-list and a log-book. The **check-list** explicitly defines practical procedures, for which competences must be acquired during the trainee period (e.g.: Cesarean sections, curettages, abdominal hysterectomies, twin deliveries, vacuum extractions etc.). A certain competence level has to be achieved, depending on the character of the procedure. For the procedures in the check-list, no predefined number to perform has been given. Thus, the check-list is competence driven rather than

merely a quantitative list of procedures performed during employment. However, some of the operations have a minimum number, but this is mainly to make sure that the trainees will be offered at least that many hysterectomies, laparoscopies etc. The **log-book** lists topics, issues and procedures that the trainee should have been dealing with as a trainee.

Most practical procedures are referred to in the check-list. Additional competences are then listed in the log-book, e.g. course attendance and performance in various clinical diagnostic and therapeutic situations in a daily setting. A predefined number of e.g. various ultrasound procedures have been defined, and print-outs must be shown to senior colleagues to ascertain adequate competences in such procedures. Also, a predefined number of obstetrical and gynecological “cases” and “audits” must be collected and patient records from these must be discussed with a senior doctor.

A very large amount of signatures (more than 400) from senior doctors are needed in the check-list and log-book. Once all signatures have been obtained, the lists can be forwarded to the central health authorities and specialist assignment is given without any further examination.

Every trainee has a personal tutor in each of the Ob/Gyn departments and in the surgical department. Regular meetings are encouraged and a minimum number of meetings are required. Schemes have to be filled in at each meeting to document meeting activity.

All senior doctors are able to certify that the trainee is capable of performing a given procedure.

A 360 degree evaluation is performed once or several times during the traineeship. In this, cooperative skills are evaluated by other doctors, by midwives, nurses and secretaries.