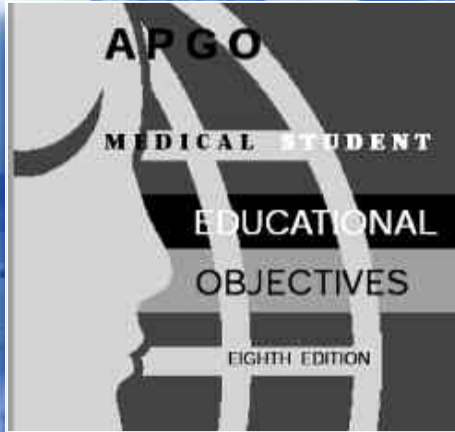
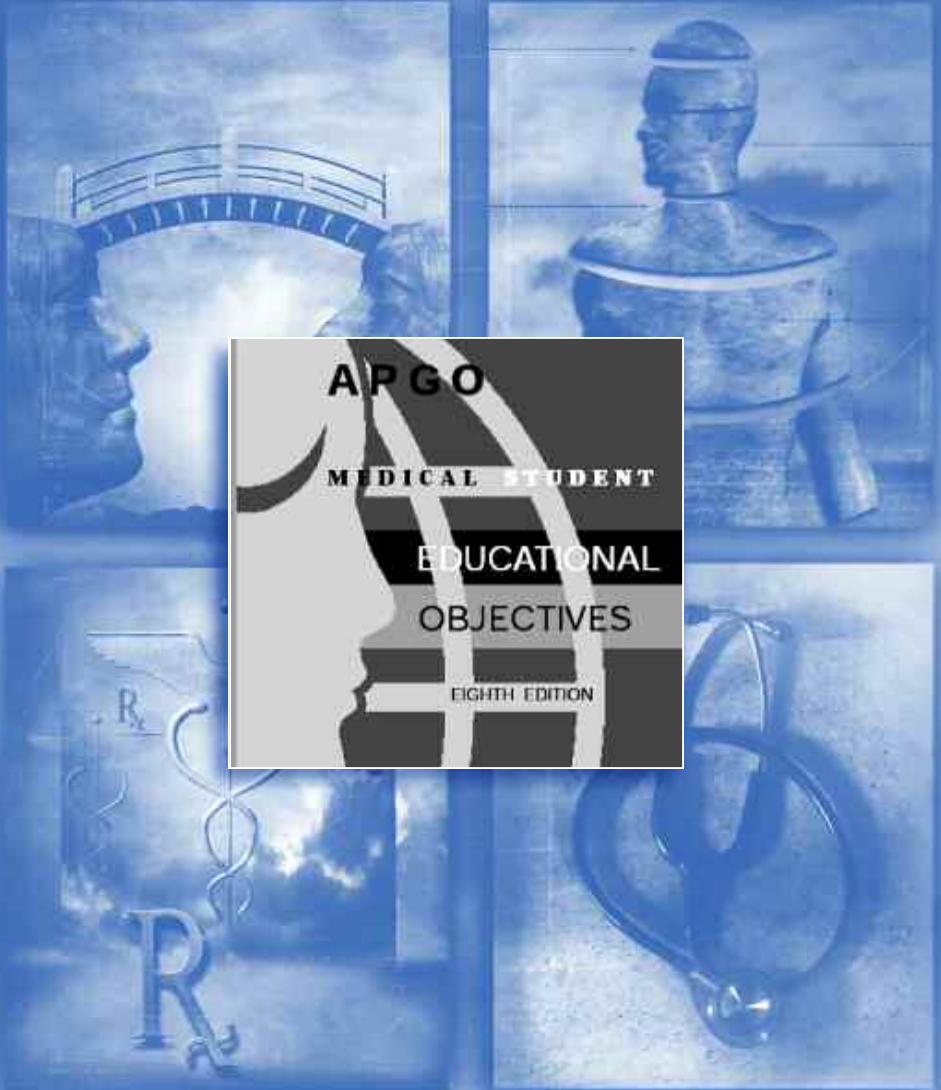


THE EFFECTIVE PRECEPTOR SERIES

The Association of Professors of Gynecology and Obstetrics (APGO)

The Preceptor and the Curriculum



The Curriculum Includes:

- Outcomes
- Objectives
- Evaluation or assessment techniques
- Content or topic areas
- Learning strategies (teaching techniques)
- Resources

What do you mean by outcomes?

Outcomes are the final results of the educational process – targets reflecting the desired impact of teaching and learning. The ship's captain uses navigation devices (similar to a curriculum) to get to the destination (similar to the educational outcome).

Then, what are objectives?

Objectives clarify and delineate each outcome. Objectives must be written in behavioral, measurable terms. An example objective for preventive care is “The student will be able to *counsel* the patient on contraceptive use. Another more specific objective is “the student *conducts* a patient history and physical exam *in the clinic* with 95% accuracy.” Note that objectives have measurable action verbs. Each objective must be linked with an evaluation technique.

What about evaluation techniques?

An evaluation technique must be linked with each specific learning objective. If objectives are well-written, designing evaluation is usually fairly straightforward. Evaluation technique examples include asking students to actually demonstrate skills, such as the components of the physical exam or counseling a patient.

Acceptable evidence of student performance should:

1. Involve multiple valid and reliable assessment methods;
2. Occur over time;
3. Derive from multiple settings or contexts;
4. Be specific; and
5. Be user-friendly.

How do I select the content to teach?

Given that there is so much information to cover and so many different objectives, you will need to prioritize the content you will teach. The Association of Professors of Gynecology and Obstetrics (APGO) has prioritized basic ob-gyn content into three categories – what the medical student **must** know, **should** know and **can** be expected to learn. As a practicing physician-preceptor, you can discern among all three categories and place emphasis on the first one or two categories, depending on the amount of time you have with the student.

What is the best teaching-learning strategy?

There is no single best teaching technique. How you teach should be based on your comfort level and experience, the nature of the

objective (you may lecture versus demonstrate) and how you plan to evaluate the student. Of course, you might find that some students learn better when you explain things verbally, while others need a more visual approach, such as reading or demonstration.

Where can I go for resources?

The APGO Web site (www.apgo.org) is an excellent place for resources. Specifically, it has the 8th edition of the *APGO Medical Student Educational Objectives*. The Objectives are password-protected and accessible through payment of APGO's annual membership dues. Your clerkship director will be able to provide the user name and password for access or provide you a printed copy of the resource. You will also find additional information concerning each objective, such as:

- The level of knowledge expected of a medical student;
- How best to evaluate whether the student has mastered the objective; and
- How this objective fits in with the objectives for ob-gyn residents.

A condensed version of these Objectives follows and can be used as a guide to what you should emphasize with the student.

Essential Elements of Ob-Gyn Undergraduate Medical Education¹

- A. Clinical skills in the medical interview and physical exam
- B. Collect and interpret a cervical cytology – first-line disposition, limitations of cervical cytology
- C. Thorough grounding in modern contraceptive technology
- D. Differential diagnosis of the “acute abdomen” – pelvic infection, ectopic pregnancy, adnexal torsion, appendicitis, diverticulitis, renal calculi
- E. Physiologic adjustment that accompany normal gestation, especially lab test results
- F. Embryonic and fetal development – what does and does not affect it: what is and is not teratogenic
- G. Health and well-being of populations – social and health policy aspect of women's health, ethical issues, sterilization, abortion, domestic violence, adolescent pregnancy, access to health care, etc.
- H. Menstrual cycle, including menopause
- I. Infertility
- J. Intrapartum care
- K. Breast health, including breast feeding
- L. Vaginal and vulvar disorders
- M. Sexuality – patient and physician
- N. Common problems in obstetrics
- O. Screening for reproductive cancers

Source: ¹APGO *Medical Student Educational Objectives*, 8th Edition, page iv-v. The Association of Professors of Gynecology and Obstetrics (APGO), 2004.

Hopefully, you now have a better understanding of the curriculum. You are now ready to spend a few minutes with your student at the beginning of each new preceptorship reviewing:

- What outcomes would you set for the student for this rotation?
- What specific objectives would you and the student like to achieve?
- How will you attempt to achieve these objectives?
- How will you evaluate which goals and objectives have been achieved and which need further work?
- How does the student best learn and what teaching strategies will you use during the preceptorship?

A mid-rotation review of these questions will help both preceptor and student understand what has been achieved and which objectives need emphasis in your remaining time together.

An end-of-clerkship review of what has been accomplished will help the student, and prepare for the likely needs of the next.

If you both agree on the curriculum for your time together and periodically map your progress, you will be rewarded with smooth sailing, and a satisfying and successful experience!



The Preceptor and the Curriculum

What Does the Curriculum Have to do With Precepting?

Do you remember when you were a medical student, meeting your first preceptor? Do you recall wondering what was expected of you? Were the expectations clear or did you have to guess what the preceptor wanted, how you would be evaluated and what the goals were? Many of today's students, and even some preceptors, have these questions and there is an easy way to answer them. The answers are found in the educational curriculum.

What Do We Mean By Curriculum?

The curriculum is a means to an end. Just as a ship captain would not take a vessel out to sea without a destination and a map, students need direction and guidance in order to become competent physicians – ones we would feel confident referring to our own family members.

The curriculum addresses three essential questions about teaching and learning:

1. What knowledge and skills do we want students to have when they finish medical school?
2. What would we accept as evidence that students have attained the desired understanding and proficiencies?
3. What are the best learning strategies or teaching techniques to help students achieve outcome objectives?





Author: Edward (Ted) Peskin, MD, University of Massachusetts

The Effective Preceptor Series is a project of the Association of Professors of Gynecology and Obstetrics (APGO) Undergraduate Medical Education Committee (UMEC):

Maya M. Hammoud, MD, Weill Cornell Medical College, Qatar, Chair; Petra Casey, MD, Mayo Clinic College of Medicine; Sandra L. Emmons, MD, Oregon Health & Science University; Eve L. Espey, MD, MPH, University of New Mexico; Alice R. Goepfert, MD, University of Alabama at Birmingham; James J. Neutens, PhD, University of Tennessee, Knoxville; Francis S. Nuthalapaty, MD, University of South Carolina–Greenville; Nadine T. Katz, MD, Albert Einstein College of Medicine; Edward (Ted) Peskin, MD, University of Massachusetts; and Joseph M. Kaczmarczyk, DO, MPH, Uniformed Services University.

This series is made possible through an educational grant to the APGO Medical Education Foundation from Solvay Pharmaceuticals, Inc.

The Preceptor and the Curriculum, #4 in a series
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The Association of Professors of Gynecology and Obstetrics (APGO) promotes excellence in women's health care by providing optimal resources and support to educators who inspire, instruct, develop and empower women's health care providers of tomorrow.

This publication is part of the APGO Effective Preceptor Series — a group of pamphlets intended to educate practitioners and learners about the apprentice system or preceptorship. The quality of learning that occurs in an established relationship between the teacher and the student often meets the challenge of educating physicians in today's chaotic health care environment. It allows doctors in training to practice as much like doctors as good medical practice will allow...and it provides a setting in which some of the best medical education in our nation takes place.

To learn more about APGO and The Preceptorship Series publications, contact:

Association of Professors of Gynecology and Obstetrics (APGO)
2130 Priest Bridge Drive, Suite #7 • Crofton, MD 21114
Phone (410) 451-9560 • Fax (410) 451-9568
www.apgo.org