

# Educational Topic 37: Pelvic Floor Disorders

## Rationale:

Pelvic organ prolapse, urinary incontinence and anal incontinence (pelvic floor disorders) are increasingly common with the aging of the US population. These conditions have a major impact on a woman's quality of life and on population health.

## Student should be able to:

Intended Learning Outcomes	Level of Competence	Instructional Method	Assessment Method	ACGME Competency	HSS	Emerging Topics	APGO eResources	EPA
A. Describe normal pelvic anatomy and pelvic support	K	AL, CE, DT, IL	MCQ, OE	ICS, MK		BSR	BSV, ES, OTC, uW	1, 2
B. List risk factors for pelvic floor disorders, including social and environmental factors that influence health outcomes for patients with pelvic floor disorders	K	AL, CE, DT, IL	MCQ, OE	MK	PH, SD		ES, OTC, uW	1
C. Describe signs and symptoms of pelvic floor disorders	KH	AL, CE, DT, IL	MCQ, OE, OSCE	ICS, MK, PC			ES, OTC, uW	1, 2
D. Differentiate the types of urinary incontinence	KH	AL, CE, DT, IL	MCQ, OE, OSCE	MK, PC		BSR	BSV, ES, OTC, uW	1, 2
E. Discuss the steps in evaluation of pelvic floor disorders, with consideration of value-based care, as part of an interprofessional team	KH	AL, CE, DT, IL, S	MCQ, OE, OSCE	MK, PC, SBP	IP, PS, QI, VBC		ES, OTC, uW	1, 2, 3, 4, 9
F. Describe the anatomic changes associated with pelvic floor disorders	K	AL, CE, DT, IL	MCQ, OE	ICS, MK			ES, OTC, uW	1

Intended Learning Outcomes	Level of Competence	Instructional Method	Assessment Method	ACGME Competency	HSS	Emerging Topics	APGO eResources	EPA
G. Describe non-surgical and surgical management options for pelvic floor disorders, with consideration of value-based care	KH	AL, CE, DT, IL	CDR, CP, MCQ, OE, OSCE	ICS, MK, PC, SBP	PH, PS, VBC	RX, SS	ES, OTC, uW	3, 4, 11

