

The Hong Kong College of Obstetricians and Gynaecologists

香港婦產科學院

Knowledge Requirement for Modules

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Module 1: Clinical skills

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional
1	values for the provision of high-quality and safe patient-centred care
2	The doctor is able to successfully work within health organisations
6	The doctor takes an active role in helping self and others to develop
13	The doctor is able to champion the healthcare needs of people from all groups
13	within society
	The doctor takes an active role in implementing public health priorities for women
14	and works within local, national and international structures to promote health and
	prevent disease

- Define the patterns of symptoms and identify risks factors in women presenting with obstetric and gynaecological problems
- Comprehend the different elements of history taking
- Recognise that patients do not present their history in a structured fashion
- Recognise that the woman's wishes and beliefs and their history should inform examination, investigation and management
- Understand the importance and conventions of accurate clinical note keeping
- Know the relevance of data protection
- Understand clinical priorities according to urgency and importance
- Understand that effective organisation, prioritisation and delegation is key to time management
- Understand the importance of prompt investigation, diagnosis and treatment in disease and illness management
- Understand the roles, competencies and capabilities of other professionals and support workers
- Understand that some factors adversely affect team performance. Have knowledge of methods to rectify issues.
- Understand the components of effective collaboration and team working
- Understand the roles and responsibilities of members of the healthcare team
- Understand the components of effective verbal and non-verbal communication
- Structure a consultation appropriately
- Importance of the woman's background, culture, education and preconceptions (beliefs, ideas, concerns, expectations) to the process

- Outline the impact of healthcare beliefs, culture and ethnicity in presentations of physical and psychological conditions.
- Outline health needs of particular populations; e.g. the elderly, ethnic minorities
- Breaking bad news
 - Be aware that the way in which bad news is delivered to a patient can affect them for the
 rest of their life in terms of emotions, perception of the condition and their ability to cope.
 It also irretrievably affects the subsequent relationship with the patient.
 - Aware that every patient may require different levels of explanation and have different responses and way of coping with bad news
 - o Aware that bad news is confidential but the patient may wish to be accompanied
 - Aware that once the news is given, patients are unlikely to take anything subsequent in,
 so a further appointment should be made for soon afterwards
 - o Aware that 'breaking' bad news can be extremely stressful for the professional involved
 - Aware that, as with all clinical encounters, the interview at which bad news is given will be an educational opportunity
 - o Know that bad news may be expected or unexpected and it cannot always be predicted
 - Know that sensitive communication of bad news is an essential part of professional practice
 - Know that bad news has different connotations depending on the context, individual, employment, social and cultural circumstances
- Understand the need for a targeted and relevant clinical examination
- Understand the pathophysiological basis of physical signs, both positive and negative
- Understand the importance of constant review of vital signs and the concept of Modified Early Warning Score (MEWS) or equivalent
- Understand the indications, risks, benefits and effectiveness of investigations
- Comprehend constraints to performing physical examination and strategies that may be used to overcome them
- Comprehend the limitations of physical examination and the need for adjunctive forms of assessment to confirm diagnosis
- Recognise that use of a chaperone in obstetrics and gynaecology is always recommended
- Define the steps of diagnostic reasoning
- Conceptualise the clinical problem in a clinical and social context
- Recognise how to use expert advice, clinical guidelines and algorithms
- Be aware of and maintain an up to date knowledge of research evidence regarding the most important determinants of health
- Know how to access and use local health data

- Know how to access resources for community action and advocacy (e.g. resources, legislation, policy documents)
- Action plans and post procedural rehabilitation and re-integration guidance
- Recognise and appropriately respond to sources of information accessed by patients
- Define the concepts of the natural history of disease and assessment of risk
- Awareness of evidence-based guidance on return to work times
- Able to define the role of rehabilitation and the role of support services and the multidisciplinary team to facilitate long-term care
- Outline the concept of quality of life and how this can be measured whilst understanding the limitations of such measures for individual patients
- Outline the concept of patient self-care and the role of the expert patient
- Understand and be able to compare and contrast the medical and social models of disability
- Know about the key provisions of disability discrimination legislation
- Understand the relationship between local health, educational and social service provision, including the voluntary sector
- Understand different methods of ethical reasoning to come to a balanced decision where complex and conflicting issues are involved
- Drugs
 - Be aware of the indications, contra-indications, adverse effects, drug interactions and dosage of commonly used drugs in obstetrics and gynaecology practice
 - Have a familiarity of the range of adverse drug reactions to commonly used drugs, including complementary medicines
 - Be aware of the potentially adverse effects of medication on performance and safety at work
 - o Know the range of drugs requiring therapeutic drug monitoring and interpret results
 - Define the effects of age, body size, organ dysfunction and concurrent illness on drug distribution and metabolism relevant to the trainee's clinical practice
 - Understand the roles of regulatory agencies involved in drug use, monitoring and licensing e.g. The Pharmacy and Poisons Board of Hong Kong, and Drug office (Department of Health, HKSAR), Hospital Authority drug formulary management and hospital formulary committees
- Understand the importance of non-medication based therapeutic interventions including the legitimate role of placebos
- Understand specific legal issues about consent in under 16-yr olds, and vulnerable adults
- Understand the implications of the Sexual and related offences under the Crimes Ordinance (Cap 200) Sexual offences Act 2003

- Be aware of diversity
- Be aware of the implications of the legal status of the unborn child
- Understand appropriateness of consent to post mortem examination
- Outline the procedures for seeking a patient's consent for disclosure of identifiable information
- Understand the ethical and legal issues of organ donation
- Confidentiality
 - o Be aware of relevant strategies to ensure confidentiality
 - Outline and follow the guidance given by the Medical Council of Hong Kong on confidentiality
 - o Be aware when confidentiality might be broken
 - Understand the principles of data protection including electronic and administrative systems
 - o Understand that interpreters and patient advocates must be aware of confidentiality issues
 - o Recall the obligations for confidentiality following a patient's death
- Know that all decisions and actions must be in the best interests of the patient
- Understand the legislative framework within which healthcare is provided in Hong Kong, in particular:
 - o Death certification and the role of the Coroner;
 - o Child protection legislation;
 - Mental health legislation (including powers to detain a patient and giving emergency treatment against a patient's will under common law);
 - o Withdrawing and withholding treatment;
 - o Decisions regarding resuscitation of patients;
 - o Surrogate decision making;
 - o Organ donation and retention;
 - o Communicable disease notification;
 - o Medical risk and driving;
 - o The Personal Data (Privacy) Ordinance and the Code on Access to;
 - o Provision of continuing care and community nursing care by local authorities
- Understand sources of medical legal information
- Understand disciplinary processes in relation to medical malpractice

Module 2: Clinical governance, Teaching and research

CiP	CiP Description
2	The doctor is able to successfully work within health organisations
6	The doctor takes an active role in helping self and others to develop
8	The doctor is effective as a teacher and supervisor of healthcare professionals

- Understand the principles of adult learning, evaluation and giving feedback
- Identify teaching strategies appropriate to adult learning
- Identification learning theories, principles, needs and styles relevant to medical education
- Demonstrate knowledge of literature relevant to current developments in medical education and other sectors
- Outline the appropriate local course of action to assist a trainee experiencing difficulty in making progress within their training programme
- Understand the difference between appraisal, assessment and performance review
- Know the advantages and disadvantages of different study methodologies (quantitative and qualitative) for different types of questions at appraisal
- Know the principles of appraisal and the structure of the appraisal interview
- Understand the principles of mentoring
- Understand levels of evidence and quality of evidence
- Know different assessment methods and when to use them appropriately
- Outline the role of workplace-based assessments, the assessment tools in use, their relationship to course learning outcomes, the factors that influence their selection and the need for monitoring evaluation
- Understand the importance of team work, communication using SBAR (Situation, Background, Assessment, Recommendation)
- Understand the audit cycle, different methods of obtaining data for audit, and the role of audit
- Understand clinical effectiveness: Principles of evidence-based practice, Types of clinical trial / evidence classification, Grades of recommendation
- Describe the working uses of regional and local databases used for audit such as specialty data collection systems, cancer registries etc, and for reporting and learning from clinical incidents and near misses

- Understand the development and implementation of clinical guidelines, integrated care pathways and protocols, and be aware of the advantages and disadvantages
- Understand the organisational framework for clinical governance at local and territory-wide levels
- Understand standards e.g. HKCOG, NICE, RCOG guidelines
- Know the principles of risk management and their relationship to clinical governance
- Understand best practice, transparency and consistency
- Recall side effects and contraindications of prescribed medications
- Recall the components of safe working practice in the personal, clinical and organisational settings
- Outline human factors theory and understand its impact on safety
- Understand root cause analysis and significant event analysis
- Understand processes for dealing with and learning from clinical errors, including the management of complaints procedures, risk management incidents / near miss reporting, complaints management, litigation and claims management
- Outline methods and associated problems of quantifying risk e.g. cohort studies
- Outline the concepts and drawbacks of quantitative assessment of risk or benefit e.g. numbers needed to treat
- Understand the difference between audit and research
- Know how to apply statistics in scientific and medical practice
- Understand how to plan and analyse a research project
- Understand statistical methods
- Know the principles of research ethics and conflicts of interest
- Know the principles of research governance. Know about local research guidelines.
- Have knowledge of research methods and how to evaluate scientific publications including the limitations of different methodologies for collecting data

Module 3: Core surgical skills

CiP	CiP description
	The doctor is able to apply medical knowledge, clinical skills and professional
1	values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
0	The doctor is competent in recognising, assessing and managing emergencies in
9	gynaecology and early pregnancy

- Preoperative preparation
 - Select patients for appropriate surgical treatment
 - Construct patient-centred surgery planning
 - Demonstrate understanding of the issues surrounding informed consent, including its legal implication, share information, situation of mentally incapable, and understand patient and family background health, preference and expectation
 - o Counsel patients on the benefits, risks, limitations and alternatives in the surgical approach
 - o Understand diagnostic method and conducts appropriate preoperative investigations
 - Counsel patients on postoperative pathway including role of HRT after oophorectomy, cervical screening after hysterectomy and implication of ovarian or tubal surgery on future fertility
 - Demonstrate knowledge and awareness of anaesthesia: general anaesthesia, conscious sedation, regional and local anaesthesia
 - Knowledge of the local enhanced recovery principles to enhance patient safety and optimize pre-, intra- and post-operative care
 - Relevant basic sciences
- Intraoperative management and surgical skills
 - Manage ergonomic risks to patient and surgeon including positioning of patient, operating table and instruments
 - Demonstrate knowledge on principles of safe surgery, theatre set-up, sutures, common surgical instrument including different energy sources
 - Understand principles of infection control
 - Demonstrate knowledge on regional anatomy and histology
 - Demonstrate detailed knowledge of basic surgical procedure in O&G including diagnostic laparoscopy, hysteroscopy, laparotomy for ovarian cyst, ectopic pregnancy, hysterectomy and vaginal surgery for prolapse, incontinence and vaginal hysterectomy

- o Know the principles and procedures involved in complex gynaecological surgery for cancer and endometriosis
- o Is able to make intraoperative decision and manage intraoperative problem
- o Recognize visceral injury and its management, and seek help from other specialties
- o Demonstrate appropriate use of blood products
- Prevent complications including venous thromboembolism, infection and primary haemorrhage
- o Be aware of the principles of surgical team working, risk management and risk reduction

• Post-operative management

- o Optimize and enhance recovery
- Recognize delayed-onset complications, ability to arrange suitable diagnostic tools and liaise with other specialties as required
- Demonstrate knowledge on principles of nutrition, fluid, electrolytes and acid base balance and cell biology
- o Demonstrate appropriate use of blood products
- Demonstrate knowledge on general pathological principles including general, tissue and cellular responses to trauma, infection, inflammation, therapeutic intervention (especially by the use of irradiation, cytotoxic drugs and hormones), disturbances in blood flow, loss of body fluids, hyperplasia and neoplasia
- Prevent surgical complications including venous thromboembolism, infection and secondary haemorrhage
- o Able to use a variety of approaches for pain relief
- o Liaise with pain team for complex pain issue
- Discuss all aspects of surgery, complications and follow-up plans with patient and relatives

Module 4: Postoperative care

CiP	CiP description
1	The doctor is able to apply medical knowledge, clinical skills and professional
	values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
9	The doctor is competent in recognising, assessing and managing emergencies in
	gynaecology and early pregnancy

- Principles to enhance patient safety and recovery: optimise patient's condition preoperatively, individualised perioperative care and intraoperative management, postoperative recovery
- General pathological principles of postoperative care
- Review of fluid balance, wound healing, catheter management
- Early and late postoperative complications related to obstetric, gynaecological and nongynaecological procedures
- Demonstrate knowledge on general pathological principles including general, tissue and cellular responses to trauma, infection, inflammation, therapeutic intervention (especially by the use of irradiation, cytotoxic drugs and hormones), disturbances in blood flow, loss of body fluids, hyperplasia and neoplasia.
- Prevent surgical complication including venous thromboembolism, infection and secondary haemorrhage
- Able to use a variety of approaches for pain relief
- Liaise with pain team for complex pain issue
- Communication with patient, family, colleagues on all aspects of surgery and post-operative plans

Module 5: Surgical Procedures

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional
1	values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
0	The doctor is competent in recognising, assessing and managing emergencies in
9	gynaecology and early pregnancy

- Relevant basic sciences
- Pelvic anatomy
- Knowledge of instruments, sutures, drains and catheters
- Knowledge of safe and efficient use of diathermy, endoscopic and other equipment

Module 6: Antenatal care

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
12	The doctor is competent in recognising, assessing non-emergency obstetrics care

- Management of normal pregnancy, birth and puerperium
- Physiology and management of normal: Pregnancy, childbirth, including delivery outside specialist unit, puerperium including lactation
- Epidemiology, aetiology, pathogenesis, diagnosis, prevention, management, delivery, complications of: Pregnancy-induced hypertension, haemorrhage, preterm premature rupture of membranes, multiple pregnancy, malpresentation, fetal growth restriction, fetal haemolysis, prolonged pregnancy, congenital malformations
- Problems of teenage pregnancy
- Awareness of drug and alcohol misuse
- Social and cultural factors
- Preconception care: Sources of detailed information accessed by patients, effect of pregnancy upon disease, effect of disease upon pregnancy, principles of inheritance of disease, teratogenesis, drugs and pregnancy
- Purposes and practice of antenatal care: Arrangements for and conduct of booking visit, arrangements for and conduct of follow-up visits, use of imaging techniques, screening for abnormality, health education, liaison between health professionals, recognition of domestic violence
- Immunology: Immunological pregnancy tests, Rhesus and other isoimmunisation, Auto-immune diseases
- Preterm premature rupture of membranes: Fetal pulmonary maturity, therapy (steroids, antibiotics, tocolytics), infection (risks, management), delivery (induction of labour, timing, mode)
- Haemorrhage: Placental abruption, placenta praevia, vasa praevia, placenta accrete spectrum
- Placental: Abnormalities (shape, size, implantation), chorioamnionitis, infarction, chorioangioma, multiple pregnancy, intrauterine growth restriction, cord abnormalities,

- trophoblastic disease, trauma, the definition of low lying placenta and how to make the diagnosis using ultrasound
- Multiple pregnancy: Zygosity, impact of assisted reproduction techniques, placentation, diagnosis, management (antenatal, intrapartum, postnatal), special procedures (prenatal diagnosis, monitoring), higher order multiple pregnancies (counselling, community care)
- Malpresentation: Types (breech, brow, face, shoulder, variable lie), diagnosis, management (antenatal, intrapartum), mode of delivery
- Fetal growth restriction (FGR): Aetiology (maternal, placental, fetal), diagnosis (clinical, imaging, biochemical, genetic), the difference between small for gestational age (SGA) and FGR, monitoring (ultrasound, cardiotocography), delivery (timing, method), Prognosis (fetal, neonatal), the differential diagnosis for FGR (e.g. date problem)
- Hypotensive disorders: Hypovolaemia, sepsis, neurogenic shock, cardiogenic shock, anaphylaxis, trauma, amniotic fluid embolism, thromboembolism, uterine inversion
- Genetic: Modes of inheritance (Mendelian, multifactorial), cytogenetics, phenotypes of common aneuploidies (Down syndrome, Edward syndrome, Patau syndrome, Turner syndrome, Klinefelter syndrome, triple X, multiple Y), translocation, miscarriage, molecular genetics (DNA transcription, DNA translation, DNA blotting techniques, gene amplification techniques, principles of gene tracking), Counselling (history taking, pedigree analysis), population screening (genetic disease, congenital malformations), antenatal diagnosis (chromosomal defects, inborn errors of metabolism, neural tube defects, other major structural abnormalities), the role of cell-free fetal DNA analysis from maternal plasma in prenatal diagnosis. management [referral to specialist team, antenatal intervention, delivery, neonatal investigation, neonatal care (medical, surgical)]
- Hypertensive disorder of pregnancy: Epidemiology, aetiological theories, pathogenesis, definitions, diagnosis, management, delivery, complications, prognosis, prevention, prophylaxis, assessment of severity, consultation, therapy, delivery (timing, method), complications (eclampsia, renal, haemorrhagic, hepatic, fetal)
- Fetal haemolysis: Epidemiology, aetiology, pathogenesis, diagnosis, prevention, management, delivery, complications, prognosis, relevant antigen-antibody systems, prevention, fetal pathology, diagnosis, assessment of severity, intrauterine transfusion (indications, techniques, referral), delivery (timing, method), counselling
- Prolonged pregnancy: Epidemiology, aetiology, pathogenesis, diagnosis, prevention, management, delivery, complications, prognosis, risks, fetal monitoring, delivery (indications, methods)

- Normal embryology: normal embryology of all body systems, and how errors in these processes
 result in fetal anomalies, normal fetal behaviour and activities and its abnormalities, fetal
 circulation and how it adapts at birth
- The utilisation of ultrasound scan: the risks associated with the different ultrasound modalities and how to limit them mechanical index (MI) and thermal index (TI), how to use machine controls to optimise the image, including, power, gain, focal length, magnification, sector width, frame rate, pulse repetition frequency, colour and power Doppler modes
- Fetal anomaly scan: The normal appearances on ultrasound scan in all trimesters of the fetal CNS, face, neck, thorax, cardiovascular system, abdominal wall and gastrointestinal tract, urogenital system and the fetal skeleton and extremities; the local protocols for follow up, if any, after an incomplete anomaly scan; The limitations of ultrasound in detecting and diagnosing congenital abnormalities or predicting prognosis
- Congenital malformation: Epidemiology, aetiology, pathogenesis, diagnosis, prevention, management, delivery, complications, prognosis, screening, amniotic fluid volume (definition of polyhydramnios, oligohydramnios, the differential diagnosis, investigation and management), management: diagnosis, consultation, viability, delivery (time, place, method), counselling.
- Specific abnormalities: Head (anencephaly, microcephaly, encephalocele, hydrocephalus, hydranencephaly, holoprosencephaly), Skeleton (spina bifida, phocomelia, chondrodysplasia, intrauterine amputation), Heart (major defects, other defects), Lungs (pulmonary hypoplasia), Urinary (renal agenesis, polycystic kidneys, urinary tract obstruction), Genital (genital tract abnormalities, ovarian cyst), Gastro-intestinal (abdominal wall defects, oesophageal atresia, duodenal atresia, diaphragmatic hernia, bowel obstruction), Other fetal disorders (cystic hygroma, non-haemolytic hydrops fetalis, tumours, pleural effusion, fetal bleeding)
- Social and cultural factors: epidemiology, aetiology, pathogenesis, diagnosis, prevention, management, delivery, complications, prognosis of single parenthood, teenage motherhood, parent-baby relationships (factors promoting, factors interfering), bereavement counselling
- Invasive procedures: Amniocentesis, Chorionic villus sampling, Cordocentesis

Module 7: Maternal medicine

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
12	The doctor is competent in recognising, assessing non-emergency obstetrics care

- Able to describe the natural history of diseases and illnesses that run a chronic course
- Have knowledge of long term management plans for chronic conditions
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Hypertension: Definitions, Aetiological theories, Organ involvement (mother, fetus), Diagnosis, Drug therapy
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Kidney disease: Urinary tract infection, Pyelonephritis, Chronic renal disease, Renal stones, Transplantation, Acute renal failure
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Heart disease: Congenital, Rheumatic, Ischaemic, Cardiomyopathy, Heart failure
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Liver disease: Cholestasis, Hepatitis, Acute fatty liver of pregnancy, Gall stones
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Circulatory disorders: Coagulation defects, Thrombocytopenias, Thromboembolism, Transfusion, Replacement of blood constituents, Varicose veins (legs, vulva, haemorrhoids)
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Pulmonary diseases: Asthma, Infection, Embolism, Aspiration syndrome
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Neurological disorders: Epilepsy, Cerebrovascular disease, Multiple sclerosis, Migraine, Neuropathies, Myasthenia gravis, Paraplegia

- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Bone and joint disorders: Back pain, Pelvic girdle dysfunction, Chronic arthritis
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic
 features and management of Psychiatric disorders: Manic depressive disorders, Psychoneurosis,
 Puerperal disorders (blues, depression), Mood disorders, Schizophrenia, Reaction to pregnancy
 loss
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Haemoglobinopathies: Anaemia, Sickle cell disease, Thalassaemias
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Connective tissue diseases: Systemic lupus erythematosus, Rheumatoid arthritis, Immunosuppressant drugs
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Disorders of carbohydrate metabolism: Diagnosis, Gestational diabetes, Type 1 and Type 2 diabetes, Hazards (maternal, fetal, neonatal), Ketoacidosis, Drugs (insulins, oral hypoglycaemic agents and pregnancy)
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Gastrointestinal disorders: Nausea, Vomiting, Hyperemesis, Gastric reflux, Abdominal pain, Appendicitis, Inflammatory bowel disease, Intestinal obstruction
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic
 features and management of Neoplasia: Principles of pregnancy management following
 malignancy including breast cancer, Principles of pregnancy management with new diagnosis of
 malignancy including breast cancer
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Endocrinopathies: Thyroid (diagnosis, assessment, antibodies, therapy, fetal hazards), Adrenal (Addison's disease, acute adrenal failure, congenital adrenal hyperplasia, phaeochromacytoma), Pituitary (prolactinoma, hypopituitarism, diabetes insipidus)
- Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Infectious diseases: Investigation of pyrexia, Serological tests, Principles (prevention, detection, isolation), Therapy (prophylaxis, immunization, antibiotics, antiviral agents), Maternal (preterm premature rupture of membranes, preterm labour, chorioamnionitis, puerperal sepsis, mastitis, urinary tract infection, wound infections, septic shock, malaria, other tropical infections and infestations), Fetus and neonate (streptococcus, gonococcus, syphilis, toxoplasma, listeria, haemophilus, chlamydia, mycoplasma, ureaplasma, herpes hominis, rubella, cytomegalovirus, varicella, hepatitis A, hepatitis B, hepatitis C, parvovirus, influenza, human immunodeficiency virus, neonatal sepsis)

•	Understand the epidemiology, aetiology, pathophysiology, clinical characteristics, prognostic features and management of Maternal complications due to pregnancy: Antepartum haemorrhage, Amniotic fluid embolism, Sheehan's syndrome

Module 8: Management of labour

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
10	The doctor is competent in recognising, assessing and managing emergencies in
	obstetrics

- Mechanisms of normal labour, spontaneous vaginal delivery and abnormal labour
- Induction and augmentation of labour: the methods, indications, contraindications and complications
- Structure and use of partograms
- Fluid balance in labour
- Blood products and transfusion
- Regional anaesthesia, analgesia and sedation
- Fetal wellbeing and causes of fetal compromise
- Emergency policies / maternal collapse / haemorrhage
- Pre-term labour / premature rupture of membranes
- Multiple pregnancy in labour
- Severe pre-eclampsia and eclampsia
- Acute abdominal pain
- Drugs acting upon the myometrium and cervix
- Types and methods of action of regional anaesthesia including epidural (lumbar, caudal), spinal, pudendal nerve block; indications and contra-indications
- Types and methods of action of analgesia and sedation including narcotics, hypnotics, psychotropics, non-steroidal anti-inflammatory drugs; indications, contra-indications
- Complications of anaesthesia and analgesia including cardiac arrest, respiratory arrest, aspiration, drug reactions
- Assessment of fetal wellbeing using fetal heart rate monitoring, acid-base balance, and fetal scalp blood sampling
- Causes and management of fetal compromise including cord prolapse and intra-uterine fetal death (IUFD)
- IUFD legalities regarding registration and disposal of fetal tissue

- Causes and management of prolonged labour
- Causes and management of maternal collapse including massive haemorrhage, cardiac problems, pulmonary and amniotic embolism, drug reactions, trauma
- Emergency guidelines and procedures
- Ante and intra partum haemorrhage including placenta praevia, placental abruption, vasa praevia, ruptured uterus, coagulation defects, iatrogenic causes
- Causes, mechanisms of action and complications of pre-term labour / premature rupture of membranes including fetal pulmonary maturity, infection risks
- Preterm labour including therapy (antibiotics, steroids, tocolysis), consultation with neonatologists, in-utero transfer, methods of delivery (induction of labour, timing, mode), outcomes, risks
- Role and types of cervical cerclage

Module 9: Management of delivery

CiP	CiP description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
10	The doctor is competent in recognising, assessing and managing emergencies in
	obstetrics

- Normal vaginal delivery
- Operative vaginal delivery
- Complex vaginal delivery
- Retained placenta
- Malpresentation (brow, face, shoulder, variable lie)
- Malposition
- Outlet forceps / ventouse
- Mid-cavity forceps / ventouse
- Pelvic floor anatomy
- Episiotomy
- Perineal trauma and repair
- Assisted breech delivery
- Twin delivery
- High order multiple births
- Breech extraction
- Shoulder dystocia
- Caesarean section: Indications for and complications of caesarean section, routine, repeat, acute emergency, sterilisation procedures
- Vaginal birth after caesarean (VBAC)
- Anaesthesia: General anaesthesia, regional anaesthesia, induction agents, inhalation agents, prophylactic measures, complications
- The unconscious patient
- Resuscitation
- Intensive care

Module 10: Postpartum problems

CiP	CiP description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
10	The doctor is competent in recognising, assessing and managing emergencies in
	obstetrics

- Normal and abnormal postpartum period
- Techniques for the control of postpartum haemorrhage
- Appropriate use of blood and blood products
- Manual removal of placenta
- Bimanual compression of uterus
- Exploration of genital tract
- Cervical laceration (identification and repair)
- Drug management of haemorrhage
- Balloon tamponade of uterus
- Laparotomy including compressive sutures
- Radiological embolisation
- Ligation of internal iliac arteries
- Caesarean hysterectomy
- Perineal surgery
- Repair of episiotomy, second-third-fourth-degree laceration
- Retained placenta
- Postpartum and postoperative complications
- Epidemiology, aetiology, pathogenesis, recognition, diagnosis, prevention, management, complication, prognosis regarding: uterine involution, bleeding including placenta accreta, atonic uterus, retained placenta, retained products of conception, pyrexia, infections, maternal collapse including massive haemorrhage, cardiac problems, pulmonary and amniotic embolism, drug reactions, trauma, thromboembolism, lactation (inadequate, suppression), medical disorders (diabetes mellitus, renal disease, cardiac disease)
- Postnatal review
- Contraception

- Postpartum and postoperative complications, including pathophysiology, diagnosis, management and prognosis in puerperal psychological disorders (blues, depression), mood disorders, reactions to pregnancy loss
- Puerperal sepsis, mastitis, urinary tract infection
- Breast cancer
- Sequelae of obstetric events: antenatal, intrapartum
- Recognition of normality: postnatal management, clinical evaluation
- Resuscitation of newborn
- Problems of the neonate: respiratory distress, hyperbilirubinaemia, infection, seizures, hypoglycaemia, hypothermia, heart disease, intracranial haemorrhage, necrotizing enterocolitis, the preterm infant, the growth restricted infant, congenital anomalies
- Feeding: breast (advantages, promotion, techniques), artificial (formulae, techniques)

Module 11: Gynaecological problems

CiP	CiP description
1	The doctor is able to apply medical knowledge, clinical skills and professional
	values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
11	The doctor is competent in recognising, assessing and managing non-emergency
	gynaecology and early pregnancy care

- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of paediatric gynaecology
- Able to describe the natural history of diseases and illnesses that run a chronic course
- Have knowledge of long-term management plans for chronic conditions
- Able to describe the anatomy and physiology of the vulva, and its variation between prepubertal, reproductive and post-menopausal state
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of menstrual disorders: menstrual irregularity, excessive menstrual loss, investigation of menstrual disorders, medical and surgical management of menstrual disorders
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of fibroids and non-menstrual bleeding (intermenstrual, postcoital)
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of problems of the climacteric: abnormal bleeding, postmenopausal bleeding, hormone replacement therapy, non-hormonal therapy, osteopenia and osteoporosis, breast cancer, cognitive function in relation to the climacteric
- Understand the use of hormone replacement therapy: the place of estrogen, progestogen, and testosterone
 and their side effects; the routes of delivery for medication and circumstances when these are indicated;
 types of hormone replacement therapy available and different combinations, contraindications, risks and
 adverse effects of different preparations
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of amenorrhoea and endocrine disorders: Investigation and interpretation, hypothalamic/pituitary disorders, hyperprolactinaemia, premature ovarian insufficiency, polycystic ovaries and polycystic ovary syndrome, other causes of hyperandrogenism, thyroid / adrenal disorders, autoimmune endocrine disease, premenstrual syndrome

- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of vulval disorders: pruritus vulvae, non-neoplastic cysts, vulvodynia, vulval pain, lichens (sclerosus, simplex, chronicus and planus), contact dermatitis, psoriasis
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of vaginal discharge (non sexually transmitted causes)
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of pelvic pain: dysmenorrhoea, dyspareunia, endometriosis (staging, treatment), pelvic inflammatory disease, non-gynaecological disorders
- Understand the role of alternative treatments in patients with endometriosis, including non-surgical treatments such as hormonal and non-hormonal medications
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of benign ovarian neoplasms and functional ovarian cysts
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of emergency gynaecology: pelvic inflammatory disease, bartholin's and vulval abscess, ovarian cyst accidents, acute vaginal bleeding of pregnancy, miscarriage and ectopic pregnancy
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of congenital abnormalities of genital tract: ambiguous genitalia, imperforate hymen, vaginal septae, uterine anomalies, mullerian duct development, gonadal dysgenesis
- Understand the epidemiology, aetiology, biological behaviour, patho-physiology, clinical characteristics, prognostic features and management of puberty: physiology and chronology, precocious puberty, delayed puberty, excessive menstrual loss

Module 12: Infertility

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
11	The doctor is competent in recognising, assessing and managing non-emergency
	gynaecology and early pregnancy care

- Epidemiology, aetiology, pathogenesis, clinical features, treatment and prognosis of male and female infertility
- Indications, limitations and interpretation of investigations: endocrine measurements (male and female), semen analysis, ultrasound, other imaging techniques, genetic analysis, operative procedures
- Indications, techniques, limitations and complications of surgery in relation to: male and female infertility, endometriosis, developmental disorders
- Indications, limitations and complications of assisted reproductive techniques: ovulation induction and intrauterine insemination, in vitro fertilisation and intracytoplasmic sperm injection, gamete donation
- Legal and ethical issues
- Epidemiology, aetiology, pathogenesis, clinical features, treatment and prognosis of male and female infertility: female (ovulatory disorders, tubal disorders, endometriosis, cervical & uterine factors, genetic & developmental disorders), male (structural, endocrine, pharmacological, infectious, lifestyle, genetic), unexplained infertility, long term sequelae of cancer treatment, sterilisation regret
- Indications, limitations and interpretation of investigation: semen analysis, endocrine assessment, assessment of ovulation, assessment of the infertile male, amenorrhoea & oligomenorrhoea, polycystic ovary syndrome, hyperprolactinaemia, thyroid/adrenal function, gonadal failure, genetic analysis, chromosome analysis e.g. sex chromosome abnormalities, genetic abnormalities e.g. cystic fibrosis
- Indications, limitations, techniques and complications of: ovulation induction (clomiphene, letrozole, gonadotropins, gonadotrophin releasing hormone), other medical interventions (e.g. metformin, dopaminergic drugs), intrauterine insemination, in vitro fertilisation, intracytoplasmic sperm injection, surgical sperm recovery

- Legal and ethical issues: code of practice on reproductive technology and embryo research, welfare of the child, embryo storage, gamete donation, surrogacy
- Indications, limitations and complications of surgery in relation to male and female infertility: reversal of sterilisation and vasectomy, adhesiolysis, salpingostomy, surgical management of endometriosis, ovarian diathermy, myomectomy, hysteroscopic surgery, varicocoele

Module 13: Sexual and reproductive health

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
11	The doctor is competent in recognising, assessing and managing non-emergency
	gynaecology and early pregnancy care

- Reversible, irreversible and emergency contraception and termination of pregnancy: mode of action and efficacy, methods, indications, contraindications and complications
- The local laws relating to termination of pregnancy, sexually transmitted infections (STIs), consent, child protection and the Crimes Ordinance (Cap. 200) part XII: Sexual and Related Offences
- Recognise and manage the sexual healthcare needs of vulnerable groups, e.g. young people, asylum seekers, commercial sex workers, drug users, and prisoners.
- Recall the effect of addictive and self-harming behaviours, especially substance misuse and gambling, on personal and community health and poverty
- Sexually transmitted infections including HIV / AIDS: transmission, clinical features, detection, prevention, treatments, test of cure, contact tracing, social hygiene clinic services, screening programmes, understand local care pathways for multi-agency working and cross referrals for individuals with sexual health needs
- Chlamydia, parasitic infections, fungal infections, bacterial infections, protozoal infections, viral infections
- Hong Kong Cervical Screening Programme and local implementation
- Sexual problems: anatomy and physiology of the human sexual response, epidemiology, aetiology, pathogenesis, clinical features and prognosis of psychosexual / sexual problems
- Fertility control methods: natural family planning (coitus interruptus, rhythm method), barrier (condom: male and female), diaphragm, caps], chemical, hormonal methods (including pharmacodynamics and metabolic effects) oral, transdermal, subdermal, intranuscular, intrauterine, male and female sterilisation, intrauterine contraception (copper-containing, progesterone-containing), reversal of sterilisation, postcoital methods (progestogen, intrauterine contraceptive devices), advances in contraception (including male reversible)
- Contraceptive failure: method, iatrogenic, user

- Non-use of contraception due to e.g. social factors, cultural factors, sexual / domestic abuse, poor service access / delivery
- Termination of pregnancy
 - Pre-procedure consultation/assessment, estimation of maturity, method options / choice, sti screen and prophylaxis, counselling and support, methods (manual vacuum aspiration, suction evacuation of uterus, dilatation and evacuation, medical termination), complications of procedures, contraceptive supplies on discharge
 - o Aftercare: contraception, sexual health, counselling and support
 - Other issues: age, consent, confidentiality, ethics and legality, special needs and vulnerable groups, service organisation, high risk groups for sexual poor health, 'hard to reach' groups (asylum seekers, homeless and rootless, commercial sex worker, substance abusers, mental illness), adolescents, vulnerable adults, learning disability, socioeconomic deprivation, negative psychosocial impact of STIs, in particular HIV/AIDS, importance of networks and multi-agency working
 - o Gender dysphoria
 - o Socio-economic consequences: cycle of deprivation, population trends
 - o Management options: abortion, adoption, keep baby
- Sexual problems: The anatomy and physiology of human sexual response, the psychogenic aetiology and presentation of common sexual problems such as loss of sexual interest and arousal, vaginismus, anorgasmia, the effect of age, cultural influences, illness and drugs on sexual behaviour and performance, the principles of psychosexual counselling, sexual problems in special needs groups such as physical and learning disability, covert presentations of psychosexual problems and childhood sexual abuse
- Referral pathways to local expertise in the field of psychosexual medicine and sexual dysfunction

Module 14: Early pregnancy care

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional
	values for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
9	The doctor is competent in recognising, assessing and managing emergencies in
	gynaecology and early pregnancy

- Epidemiology, aetiology, pathogenesis, clinical features, investigations, diagnosis and management of miscarriage
- Epidemiology, aetiology, pathogenesis, clinical features, investigations, diagnosis and management of ectopic pregnancy
- Epidemiology, aetiology, pathogenesis, clinical features, investigations, diagnosis and management (including appropriate referral and continuity of care) of trophoblastic disease
- Indications and limitations of investigations of recurrent miscarriage: endocrine, anatomical, immunological, genetic, radiological, bacteriological; and appropriate referral and continuity of care
- Prognosis after miscarriage(s) and ectopic pregnancy

Module 15: Gynaecological oncology

CiP	CiP Description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
11	The doctor is competent in recognising, assessing and managing non-emergency
	gynaecology and early pregnancy care

- Epidemiology, aetiology, diagnosis, prevention, management prognosis including human papillomavirus (HPV) screening and triage, and HPV vaccination
- Indications and limitations in relation to screening and investigative techniques
- The recognised local and international colposcopy classifications and terminologies
- Methods and limitations for colposcopy
- The colposcopy requirements for pregnant, immune-compromised, postmenopausal or post-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 sequalae of disease and clinical management
- Epidemiology, aetiology, genetic associations, prevention and screening involved in gynaecological oncology: premalignant and malignant conditions of vulva, vagina, uterus, cervix, fallopian tube, ovary
- Diagnosis, management, prognosis, complications, and anatomical considerations of premalignant and malignant conditions of: vulva, vagina, uterus, cervix, fallopian tube, ovary
- FIGO classifications for gynaecological tumours
- Palliative and terminal care
- Relief of symptoms
- Community support roles
- Indications and limitations in relation to screening and investigative techniques: cytology and HPV testing, colposcopy, minor procedures
- Diagnostic Imaging

- Indications, techniques, complications, and outcomes of: oncological surgery, radiotherapy, chemotherapy
- Knowledge of gynaecological oncology multidisciplinary team meeting
- Be able to demonstrate ability to provide counselling for patients with gynaecological cancer

Module 16: Urogynaecology and pelvic floor problems

CiP	CiP description
1	The doctor is able to apply medical knowledge, clinical skills and professional values
	for the provision of high-quality and safe patient-centred care
6	The doctor takes an active role in helping self and others to develop
11	The doctor is competent in recognising, assessing and managing non-emergency
	gynaecology and early pregnancy care

- Anatomy, physiology and pathophysiology of pelvic floor and urinary tract
- Epidemiology, aetiology, characteristics and prognosis of: urinary and faecal incontinence, urogenital prolapse, urinary infection, lower urinary tract disorders, urinary disorders associated with other conditions
- Indications and limitations of investigations: microbiological examination of urine, quantification of urine loss, urodynamic investigations, video cystourethrography, urethrocystoscopy, imaging
- Indications, techniques, limitations and complications of non-surgical treatment: pads and garments, bladder retraining, pelvic floor exercises, self-catheterisation, long-term indwelling catheterisation, community care
- Indications, techniques, limitations and complications of drug treatment: anticholinergics, antimuscarinic, alpha blockers, antidepressants, oestrogens
- Indications, techniques, limitations and complications of surgical treatment: urethral dilatation, urethrocystoscopy, suprapubic catheterisation, peri-urethral injectables, anterior repair, vaginal hysterectomy, vaginal repair of genital tract prolapse, sling procedures, colposuspension, repair of recurrent prolapse, fistula repair, urinary diversion, injectables
- Epidemiology, aetiology, characteristics and prognosis of urinary and faecal incontinence: urodynamic stress incontinence, detrusor over activity, voiding disorders and urinary retention, urinary frequency and urgency
- Epidemiology, aetiology, characteristics and prognosis of lower urinary tract disorders: urethral disorders, pain, fistulae, effects of radical pelvic surgery, effects of irradiation
- Epidemiology, aetiology, characteristics and prognosis of urinary disorders associated with other conditions: pregnancy, gynaecological pathology, elderly patients, neurological conditions

- Indications and limitations of urodynamic investigations: voiding charts, ambulatory monitoring, urodynamic equipment, uroflowmetry, standard subtracted cystometry
- Indications and limitations of imaging: upper urinary tract, lower urinary tract, pelvic floor