

The Impact of Simulation on Pre-Graduated Medical Education of Gynecology and Obstetrics

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INTRODUCTION



✓ It is universally accepted that clinical skills constitutes an essential learning outcome

✓ Students sometimes complete their educational programs armed with theoretical knowledge but lack vital clinical skills for their work



INTRODUCTION



Increased number of students entering in medical schools



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Opportunities for medical students to learn and gain experience performing technical skills on direct physical examinations on patients has decreased.



To develop alternative strategies to overcome the deficit in training and decreased exposure to clinical cases

INTRODUCTION





Simulation-based training: a controlled and supervised environment and be able to repeat the same clinical gestures multiple times without risks for the patient

Simulation-based training in Gynecology and Obstetrics



Critical: due to the sensitive nature of examinations on this specialty, medical students may find these examinations particularly challenging and awkward, without prior training

AIMS



MAJOR AIM: To evaluate the impact of the G&O simulation in student's confidence, self-comfort and performance in

undergraduate medical education

MINOR AIM: To evaluate the influence of the G&O simulation in their interest in women's health and interest in choosing this specialty as a future medical career.

✓ A prospective, observational, descriptive and analytical study



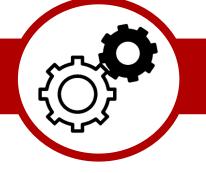
To evaluate the influence of the G&O simulation in student's confidence, self-comfort, performance, their interest in women's health and interest in choosing this specialty as a future medical



All the 4th year medical students from the School of Medicine – University of Minho (SM-UM) of two academic years To compare students exposed to the simulation with the unexposed



6th **year** medical students from SM-UM from an academic year not exposed and other from an academic year exposed



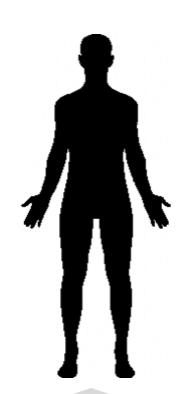
Gynecology

Breast exam

Speculum examination

Pap smear test

Bimanual pelvic exam



Obstetrics

Leopold's maneuvers

Uterine size measuring

Evaluation of Bishop's score

Collection of genital swab for GBS

Models and Simulators





Study material about each clinical



4 Students groups, 4 clinical gestures



Each group has a facilitator



Final Discussion

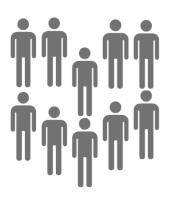


To evaluate the influence of the G&O simulation in student's confidence, self-comfort, performance:



10-point scale (1 is lowest, 10 is highest





4th year medical students (2015-2016 and 2016-2017)

Pre- and post- surveys:

- ✓ Gender of the student
- ✓ Confidence
- ✓ Self-comfort
- ✓ Performance
- ✓ Interest for women's health Iinterest in choosing G&O as future medical career

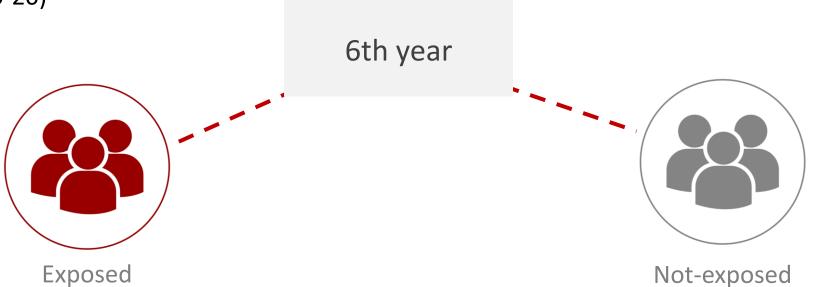
After the clinical clerkship, students were asked to complete a final survey to evaluate the impact of the simulation curriculum on the clinical rotation



To compare the performance of students exposed vs. not exposed

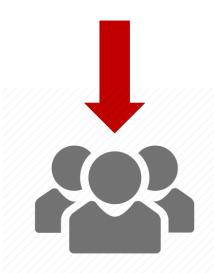
6th year: final OSCE's (objective structured clinical examination)

A station for evaluation of 2 gynecology gestures (speculum examination and pap smear test) and others for 2 obstetric gestures (Bishop's score and collection of a genital swab for GBS detection) were included (0-20)



Post-Simulation^b

Gynecology



207 Students

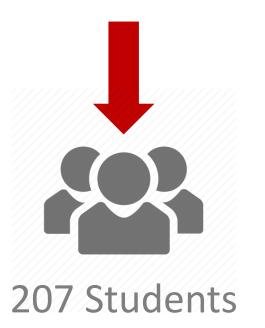
| | Pre-Sillidiation | Post-Sillulation | p Value ^c |
|----------------------|-----------------------------------|------------------|----------------------|
| | (mean \pm SD) | (mean \pm SD) | p value |
| Confidence | | | |
| Breast Exam | 5.77 ± 2.02 | 8.64 ± 1.07 | <0.001* |
| Speculum Examination | 5.40 ± 2.01 | 8.25 ± 1.09 | <0.001* |
| Pap Smear Test | 5.63 ± 2.02 | 8.60 ± 1.07 | <0.001* |
| Bimanual Pelvic Exam | 5.02 ± 1.99 | 8.12 ± 1.15 | <0.001* |
| Self-comfort | | | |
| Breast Exam | 6.21 ± 2.38 | 8.62 ± 1.26 | <0.001* |
| Speculum Examination | 5.79 ± 2.28 | 8.51 ± 1.21 | <0.001* |
| Pap Smear Test | 5.88 ± 2.28 | 8.59 ± 1.18 | <0.001* |
| Bimanual Pelvic Exam | 5.61 ± 2.27 | 8.40 ± 1.27 | <0.001* |
| Performance | | | |
| Breast Exam | 5.37 ± 2.04 | 8.42 ± 1.01 | ≤0 .00 1* |
| Speculum Examination | $\textbf{5.18} \pm \textbf{1.95}$ | 8.16 ± 0.97 | <0.001* |
| Pap Smear Test | 5.32 ± 1.97 | 8.33 ± 0.98 | <0.001* |
| Bimanual Pelvic Exam | 4.80 ± 2.03 | 8.07 ± 1.04 | <0.001* |

Pre-Simulation^a

Note: Data are scores on a 10-point scale (1 is lowes 10 is highest)

SD: Standard Deviation; an=207; bn=207; Paired test; *Statistically significant

Gynecology



| | Pre-Simulation ^a (mean ± SD) | Post-Simulation ^b (mean ± SD) | <i>p</i> Value ^c |
|---|--|--|-----------------------------|
| Interest in women's health | 7.75 ± 1.92 | 8.08 ± 1.67 | 0.001* |
| Interest in G&O ^d as a future medical career | 5.86 ± 2.60 | 5.96 ± 2.48 | 0.066 |

Note: Data are scores on a 10-point scale (1 is lowest, 10 is highest)

SD: Standard Deviation; an=207; pn=207; Paired t-test; Gynecology and Obstetrics
*Statistically significant

Obstetrics



| | Pre-Simulation ^a | Post-Simulation ^b | n Valuac |
|------------------------|-----------------------------|------------------------------|-----------------------------|
| | (mean \pm SD) | $(mean \pm SD)$ | <i>p</i> Value ^c |
| Confidence | | | |
| Leopold's Maneuvers | 3.23 ± 2.03 | 8.31 ± 1.28 | <0.001* |
| Uterine Size Measuring | 4.16 ± 2.33 | 8.85 ± 1.17 | <0.001* |
| GBS detection | 4.53 ± 2.34 | 8.97 ± 0.99 | <0.001* |
| Bishop's score | 3.24 ± 1.98 | 7.55 ± 1.41 | <0.001* |
| Self-comfort | | | |
| GBS detection | 5.41 ± 2.72 | 8.45 ± 1.36 | *100.0 |
| Bishop's score | 4.82 ± 2.71 | 8.32 ± 1.63 | <0.001* |
| Performance | | | |
| Leopold's Maneuvers | 3.31 ± 2.06 | 8.57 ± 1.41 | ≤0 .001 * |
| Uterine Size Measuring | 3.78 ± 2.30 | 8.17 ± 1.45 | <0.001* |
| GBS detection | 4.13 ± 2.27 | 8.30 ± 1.29 | <0.001* |
| Bishop's score | 3.33 ± 2.00 | 7.70 ± 1.48 | <0.001* |
| | | | |

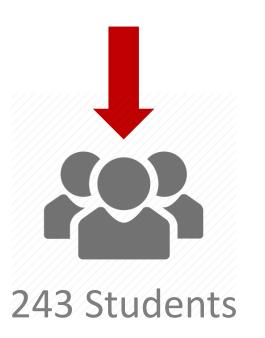
Note: Data are scores on a 10-point scale (1 is lowest, 10 is highest)

SD: Standard Deviation; an=243; bn=243; c Paired t-

test; *Statistically significant



Obstetrics



| Interest in women's health | Pre-Simulation ^a (mean ± SD) 7.86 ± 1.91 | Post-Simulation ^b (mean ± SD) 9,07 ± 1,27 | p Value ^c |
|---|--|---|----------------------|
| Interest in G&O ^d as a future medical career | 5.74 ± 2.66 | 5.77 ± 2.67 | 0,341 |

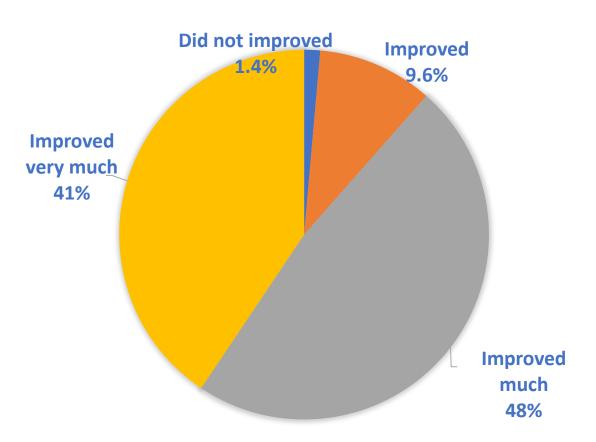
Note: Data are scores on a 10-point scale (1 is lowest, 10 is highest)

SD: Standard Deviation; an=207; pn=207; Paired t-test; Gynecology and Obstetrics
*Statistically significant

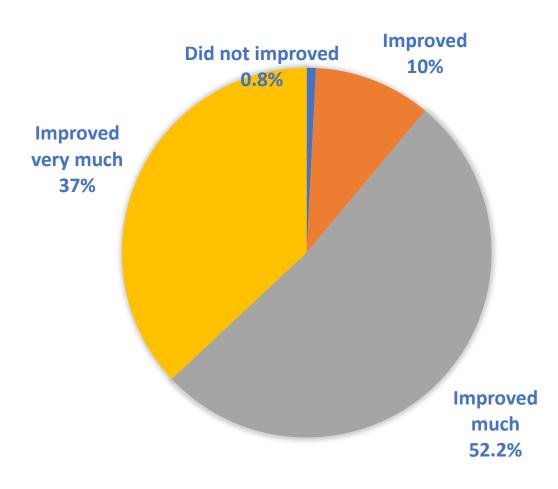
RESULTS: Final Survey



Gynecology



Obstetrics

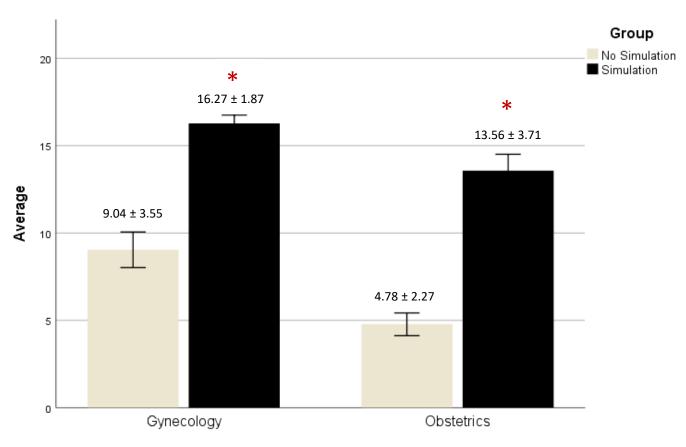




Effect of Simulation on performance after 2 years



- √ 49 not exposed (Control)
- √ 62 exposed (Simulation)



Limitations



✓ Self-reported data (may not correspond to reality)

✓ Did not assess student clinical performance of these gestures in real-life patients (ultimate goal of the simulation exercise)

✓ There was a lack of individual feedback for the students after the simulation

CONCLUSIONS



✓ Simulation in G&O seems to improve students' confidence, self-comfort, performance and interest in women's health.



Improved confidence and student's self-comfort may result in greater participation in clinical clerkships, which can result in more experience in performing clinical skills in real patients

✓ Simulation seems also to provide higher qualified performance.



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