

## Original Study

# Does the North American Society for Pediatric and Adolescent Gynecology Short Curriculum Increase Resident Knowledge in Pediatric and Adolescent Gynecology?

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## ABSTRACT

**Study Objective:** To determine if the North American Society for Pediatric and Adolescent Gynecology (NASPAG) Short Curriculum improves self-reported knowledge in pediatric and adolescent gynecology (PAG) among obstetrics and gynecology (Ob/Gyn) residents, at programs without PAG-trained faculty.

**Design:** Prospective, cross-sectional exposure to the NASPAG short curriculum with a follow-up questionnaire.

**Setting:** Ob/Gyn residency training programs without PAG faculty.

**Participants:** Ob/Gyn residents in training from February 2015 to June 2015.

**Interventions:** Exposure to the NASPAG Short Curriculum.

**Main Outcome Measures:** Improvement in self-perceived knowledge after completion of curriculum.

**Results:** Two hundred twenty-seven residents met inclusion criteria; 34 completed the study (15% response). Less than 50% of residents reported adequate knowledge in the areas of prepubertal vaginal bleeding, vulvovaginitis, precocious and delayed puberty, Home environment, Education and Employment, Eating, peer-related Activities, Drugs, Sexuality, Suicide/depression, Safety from injury and violence (HEEADSSS) interview, pelvic pain, and bleeding management in teens with developmental delay. After completion of the curriculum, self-reported knowledge improved in 8 of 10 learning objectives, with no significant improvement in bleeding disorders or Müllerian anomalies. There was no association between pretest knowledge and level of residency training, type of residency program, previous exposure to PAG lectures, and previous exposure to patients with PAG complaints.

**Conclusion:** Significant deficiencies exist regarding self-reported knowledge of core PAG topics among Ob/Gyn residents at programs without PAG-trained faculty. Use of the NASPAG Short Curriculum by residents without access to PAG-trained faculty resulted in improved self-reported knowledge in PAG.

**Key Words:** Resident education, Pediatric and adolescent gynecology education, PAG curriculum

## Introduction

Pediatric and adolescent gynecology (PAG) is an important aspect of training for obstetrics and gynecology (Ob/Gyn), pediatrics, adolescent medicine, and family medicine training programs. Pediatric and adolescent gynecology encompasses patients from the neonate to young adult, covering a wide range of subject matter and skill sets. Consequently, physicians from all four disciplines are often called upon to perform a gynecologic evaluation of these patients. To ensure adequate

preparation for physicians to handle these health care issues, specific PAG learning objectives have been designed and required by the Accreditation Council for Graduate Medical Education and Royal College of Physicians and Surgeons of Canada (RCPSC), before residency graduation. Despite these requirements, the degree of exposure to PAG education is limited across residency programs in North America.<sup>1-3</sup>

The mission and goals of the North American Society for Pediatric and Adolescent Gynecology (NASPAG) have been revised and are to provide multidisciplinary leadership in education, research, and gynecologic care to improve the reproductive health of youth. Goals include: 1) serve and be recognized as the lead provider in PAG education, research, and clinical care, 2) conduct and encourage multidisciplinary and interprofessional programs of medical education and research in PAG, and 3) advocate for the

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reproductive well-being of children and adolescents and the provision of unrestricted, unbiased, and evidence-based practice of PAG.<sup>4</sup>

The NASPAG Resident Education Committee was created in 2012 for the purpose of developing an educational curriculum and educational materials for NASPAG membership to use for resident education in PAG. The target audience included physician trainees in Ob/Gyn, pediatrics, adolescent medicine, and family medicine residency programs, particularly from centers with limited exposure to PAG. The committee created the Short Curriculum in PAG to meet the needs of the medical community, and published it in June 2014.<sup>5</sup> The curriculum is designed as a 2-week reading curriculum with 10 content areas, with the timeline to be adapted to meet the needs of individual programs.<sup>5</sup> The specific learning objectives in the curriculum were derived from PAG learning objectives in the Council on Resident Education in Ob/Gyn in the United States, American Board of Pediatrics, and RCPSC.

One of the primary goals of the curriculum was to improve core knowledge, determined to be essential for the provider encountering the pediatric gynecology patient. Furthermore, the committee specifically aimed to develop a curriculum that could easily be incorporated into existing rotations and that highlighted the important aspects of PAG that learners might not otherwise encounter during residency training.

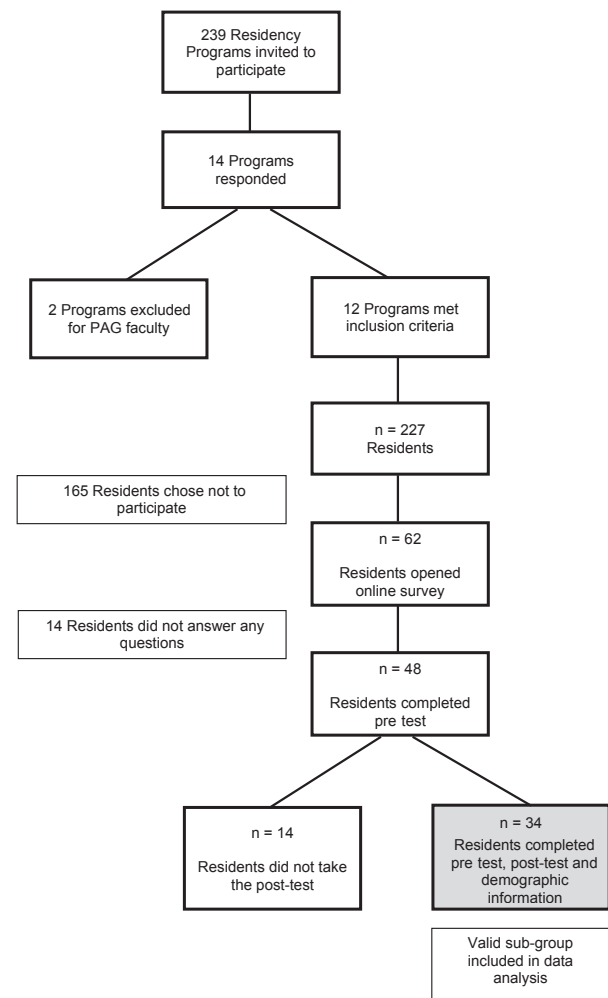
The purpose of this study was to determine whether the NASPAG Short Curriculum improves self-perceived knowledge among Ob/Gyn residents at programs without designated PAG faculty.

## Materials and Methods

### Research Design and Study Population

We invited 239 US Ob/Gyn Residency Programs to participate in an educational research study using an e-mail inquiry to all program directors. Program directors were advised that the study would provide all residents with online access to the Short Curriculum materials for a period of 4 months, followed by a short research questionnaire. They were informed that the study would be anonymous and optional for all participants. Participants were assured that their performance on the questionnaire would not have an effect on their residency performance evaluations. Fourteen programs responded to the e-mail, and 12 programs met inclusion criteria, comprising a total of 227 residents. Two programs were excluded for having faculty with specialized training in PAG (Figure 1). This was confirmed by the study Primary Investigator (PH) through direct communication with the program directors.

The study was conducted from February 2015 to June 2015. All participants were granted access to a secure server containing the required reading assignments for the Short Curriculum, for a total of 5 months. Although the Short Curriculum is designed to be administered over a 2-week time period, it is also designed to be adapted to the individual needs of each program. Recognizing that residents have busy schedules and the participating programs did not have a dedicated PAG



**Figure 1.** Flow diagram of study participants. PAG, pediatric and adolescent gynecology.

rotation, the 5-month study window was created to allow adequate reading time. Participants were sent an introductory e-mail at the beginning of the study, followed by reminder e-mails once a month. These e-mails included a direct link to the reading materials as well as a short questionnaire that could be accessed when all readings were completed.

The questionnaire was a retrospective pre- and post-test self-assessment (Figure 2). A retrospective pre-/post-test questionnaire is administered after an educational intervention and asks the respondent to consider their knowledge, skills, and/or attitudes before the intervention and compare them with their knowledge, skills, and/or attitudes after the intervention has been completed.<sup>6,7</sup> For our study, the 10-item questionnaire queried self-reported knowledge of each resident regarding the specific learning objectives addressed in the Short Curriculum.

After completing the curriculum, the residents were asked to complete the questionnaire. Each participant was then asked if they had previously observed or evaluated a patient with a PAG complaint correlating with each learning objective. Finally, each participant was surveyed regarding previous PAG experience, including didactic and PAG rotations. Basic demographic information, including year of

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