

# **Development of a graduate medical education program in obstetrics and gynecology in a community-based hospital: Building blocks and rate of progress.**

## **Authors**

Parker Long, R. Postlethwait, K. Choi, M. Foda, K. Harris,  
HCA/UCF Consortium – Gainesville

## **Synopsis**

The need for trained obstetricians and gynecologists continues to increase. The ongoing advances in women's health care requires well trained physicians that can only be achieved by a well-structured residency program that provides a reliable training infrastructure while maintaining a patient centered care model according AGCME standards. This residency program started July 2018 with 4 PGY1 and one PGY2 residents.

## **Objective**

To prospectively look at the rate of growth needed to begin an OBGYN residency program in a community-based hospital.

## **Methods**

For this particular residency program, we started a new OBGYN medical practice and all residents were involved in building, maintaining and growing the practice under direct supervision of senior attending physicians. We collected data reflecting the growth of the practice, including number of office visits, imaging studies, minor operative procedures, major operative procedures and deliveries to reflect the training curriculum required by ACGME to complete OBGYN training.

## **Results**

Office visits, Ultrasound visits, surgeries, total and projected deliveries were tracked. We increased our office practice visits from 85 in July to 450 in February, with 519 in January due to an extra resident in the ambulatory setting. Scheduled US visits increased from 0 to 107 during the same time interval. Gyn surgeries of all types were 0 in July and rose to 18 per month by February. All deliveries in the residency practice increased from 3 in July to a high of 22 in January. Projections through August are for 30 deliveries per month, not including service patients delivered (approximately 4-6 per month). Overall we saw a substantial growth in all of our office visits (510% from Jul to Jan), ultrasound visits, surgical cases, and total deliveries (633% from Jul to Jan).

## **Conclusion**

The growth seen in the new residency practice is appropriate to date. But continued growth will be needed to meet the ACGME training requirements for an OB/Gyn Residency Program. With the addition of new residents each year until the full complement of 16 is reached will allow continued growth of the practice. The goal for deliveries is 80 per month to allow approximately 1000 residency practice birth per year. Projections show this will require about 1000 return OB visits per month which can be accomplished with adding the normal complement of 4 residents per year until the total of 16 is reached.