



PORTFOLIO

for
Training in Gynaecological Oncology

Introduction

The ESGO accreditation and certification programme ('Curriculum') describes, prescribes, and accredits the training in gynaecologic oncology.

The Curriculum describes qualitative and quantitative criteria to be met for certification. After having signed up for the fellowship programme, it is the responsibility of the *subspecialty trainee for gynaecological oncology*, also called 'the fellow', to document all training details, make sure the appropriate documents are completed and signed off by the appropriate parties, and, finally, submit them to ESGO.

The Curriculum requires modular training with systematic and structured assessments, and these should be recorded prospectively, i.e., continuously updated throughout the training. At the same time, these assessments should be evaluated according to the principles of competence-based training in order to provide immediate feedback to both the fellow and the training supervisors for appropriate corrections if required.

The online portfolio allows adequate monitoring of progress in competence-based training. As such, it is not only an indispensable instrument to guide the fellow as objectively as possible through the training programme, it also ensures patient safety because deficits in training can immediately be detected and corrected.

The content of the portfolio or eLogbook is provided here for reference purpose only, as it is entirely and interactively available on-line through the ESGO Website.

Use of the portfolio

In order to evaluate training progress properly, it is essential that the portfolio will be systematically and continuously (prospectively) completed, starting from the very beginning of training. It is part of summative assessments to check and discuss adequate completion of the portfolio. Missing items should be noticed and added.

Descriptive data can be entered by the fellow and corrected at any time. Assessments, on the other hand, are to be signed off by an Educational Supervisor.

Access

Depending on national regulations, the portfolio contains information that will be available at any time for both the fellow as well as the Educational Supervisor(s) and the Educational Programme Director. To this end, all that require access will be able to log in to the portfolio using their personal login data. If the online portfolio is not available, the fellow needs to keep a paper version available at all times.

LOG IN DETAILS

Login name:

Login code:

TRAINEE DETAILS

Personal Details

Last name:

Given name:

Date of birth: DD/MM/YY

Gender: M/F/other

Contact details

Home address:

- street, house number:

- town:

- postal code:

- country:

Mobile phone number:

Email:

Training history

Curriculum vitae: (to be uploaded here)

National medical registration number:

General Ob/Gyn training

Institution(s)

Hospital Name:

Department:

Town:

Country:

Period (DD/MM/YY): from till.....

(add more if necessary)

Specialist registration date (DD/MM/YY): (upload certificate here)

Colposcopy course (not mandatory), date of certification (DD/MM/YY): (upload certificate here)

SUBSPECIALTY TRAINING FOR GYNAECOLOGICAL ONCOLOGY DETAILS

Hospital Name:
Department:
Town:
Country:

Training Programme Director

Name:
Email address:

Educational Supervisor(s)

Name:
Email address:

(add more supervisors if needed)

Training Programme: (to be uploaded here)

Training period (DD/MM/YY): From: To:

(add more institutions if needed)

ESGO Exam date (DD/MM/YY): (upload certificate here)

TRAINING ASSESSMENTS: Summative assessments

Summative assessments should be performed at least yearly and evaluated by the Educational Supervisor together with the fellow. However, it is strongly recommended that these assessments be held every half year.

Self-assessment:

This assessment should be completed PRIOR to the evaluation with the Educational Supervisor and should be completed by the fellow him/herself.

SELF ASSESSMENT <i>Competence-based assessment</i>		
Date (DD/MM/YY)		
ACGME Outcome	Learning target	Competence level: 1. None 2. Some 3. Full competence
Practice-based learning and improvement	Identify personal limits	
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
Patient care and procedural skills	Participation in education	
	Adequate gathering of information	
	Adequate synthesis of findings	
Systems-based practice	Partnership with patients and family	
	Work effectively in health care system	
	Consider cost-effectiveness	
	Consider quality of care	
Medical knowledge	Consider and identify patient safety issues, including identifying system errors	
	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines. Patient info sheets (being responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
	Attendance of international meetings	
Membership of ENYGO/ESGO	yes/ no	
Interpersonal and communicative skills	Communication with other care providers and health-related agencies	
	Communication with patients and family	
	Discussing bad news/resuscitation	
	Work effectively as a member or leader of a team	
	Act in a consultative role	
	Maintain comprehensive, timely and legible medical record	

ACGME Outcome	Learning target	Competence level: 1. None 2. Some 3. Full competence
Professionalism	Handling oncological patients	
	Handling grief and emotions	
	Recognition of pathological grief	
	Handling religious and other convictions	
	Monitoring and comparing results of clinical care, up to being responsible for clinical audit (latter end target)	
	Knowledge and use of the complication and mortality register	
	Self-reflection	
Points for improvement		

(add up to at least three assessments during the training)

Multi-source feedback by the training team:

Evaluation by at least two (2) wider multidisciplinary team members other than the Educational Supervisor (nurses, surgeons, anaesthetists, medical or radiation oncologists, etc.) to be completed either directly by the team member or by the fellow or copying a printed version. In order for the team member to complete it directly, the fellow must log in to the online system first for them.

Circle the number that indicates how characteristic each behaviour below is of the resident.

MULTI-SOURCE FEEDBACK (MSF)									
Name of member									
Role in team									
Date (DD/MM/YY)									
	NOT AT ALL CHARACTERISTIC			CHARACTERISTIC				HIGHLY CHARACTERISTIC	
Professionalism									
Responsibility	Accepts responsibilities willingly; follows through on tasks carefully and thoroughly; is dependable and industrious; responds to requests in a helpful and prompt manner								
	1	2	3	4	5	6	7	8	9
Scope of practice	Recognises limits of his/her abilities; asks for help when needed; refers patients when appropriate; exercises authority accorded by position and /or experience								
	1	2	3	4	5	6	7	8	9
Patient needs	Responds to each patient's unique needs and characteristics by being sensitive to issues related to patient culture, age, gender and disabilities; provides equitable care regardless of patient culture or socioeconomic status								
	1	2	3	4	5	6	7	8	9
Integrity and ethical behaviour	Takes responsibility for actions; admits mistakes; puts patient needs above own interests; recognises and addresses ethical dilemmas and conflicts of interest; maintains patient confidentiality								
	1	2	3	4	5	6	7	8	9
Interpersonal & Communication Skills									
Relationship-building	Establishes rapport with patients and their families; demonstrates care and concern; is respectful and considerate; provides reassurance; manages difficult patient/family situations								
	1	2	3	4	5	6	7	8	9
Team interaction	Demonstrates courtesy to and consideration of consultants, therapists, physicists, & other team members; provides timely updates; invites others to share their knowledge and opinions; negotiates & compromises when disagreements occur								
	1	2	3	4	5	6	7	8	9

Remarks									
	UNSATISFACTORY			SATISFACTORY				SUPERIOR	
Overall rating	1	2	3	4	5	6	7	8	9
Please explain "not at all characteristic" ratings:									
The fellow and Supervisor will discuss this evaluation and the fellow's overall performance in the programme, and ways to improve performance if and as needed.									

(More evaluations to be added according to the number of assessors; completed paper versions to be uploaded here)

Evaluation by the Educational Supervisor

The summative evaluation should be performed at least yearly, but preferably half yearly or more often if necessary, and should at least entail:

- A competency-based assessment
- An assessment of level of proficiency
- An evaluation of educational activities
- An evaluation of research activities
- Identification of specific training objectives for the next phase

EVALUATION BY EDUCATIONAL SUPERVISOR <i>Competency-based assessment</i>		
Name of Supervisor		
Date (DD/MM/YY)		
ACGME Outcome	Learning target	Competence level 1. None 2. Some 3. Full competence
Practice-based learning and improvement	Identify personal limits	
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
	Participation in education	
Patient care and procedural skills	Adequate gathering of information	
	Adequate synthesis of findings	
	Partnership with patients and family	
Systems-based practice	Work effectively in the health care system	
	Consider cost-effectiveness	
	Consider quality of care	
	Consider and identify patient safety issues, including identifying system errors	
Medical knowledge	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines/patient info sheets (being responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
	Attendance of international meetings	
Membership of ENYGO/ESGO	yes/ no	

ACGME Outcome	Learning target	Competence level 1. None 2. Some 3. Full competence
Interpersonal and communicative skills	Communication with other care providers and health-related agencies	
	Communication with patients and family	
	Discussing bad news/resuscitation	
	Work effectively as a member or leader of a team	
	Act in a consultative role	
	Maintain comprehensive, timely, and legible medical records	
Professionalism	Handling oncological patients	
	Handling grief and emotions	
	Recognition of pathological grief	
	Handling religious and other convictions	
	Monitoring and comparing results of clinical care, up to being responsible for a clinical audit (latter end target)	
	Knowledge and use of the complication and mortality register	
	Self-reflection	

(add at least up to three assessments)

EVALUATION BY EDUCATIONAL SUPERVISOR

assessment of level of proficiency

Name of supervisor			
Date (DD/MM/YY)			
Medical skills		Competency level	Cumulative Number
		1. Passive 2. Direct supervision 3. Some supervision 4. Without supervision 5. Supervises/ teaches	As first responsible
<i>Module</i>	<i>Learning target</i>		
ORGAN-SPECIFIC			
Uterine cancer	Diagnostic and therapeutic plan		
	Surgery for low-risk cancer		
	Radical surgery for high-risk		
	Weighing treatment options and morbidity		
	Fertility-sparing treatment		
Ovarian & tubal cancer	Diagnostic and therapeutic plan		
	Systematic use of US and tumour markers		
	Surgical radical treatment		
	Organising MDT		
	Follow-up		
Cervical cancer	Knowledge of prevention		
	Diagnostic and therapeutic plan		
	Surgical (radical) treatment		
Vaginal cancer	Diagnostic and therapeutic plan		
	Radical surgical treatment		
Vulvar cancer	Diagnostic and therapeutic plan		
	Description and drawing of vulvar situation		
	Excision biopsy		
	Local excision		
	Radical surgery for vulvar cancer		
GTD	Recognition and diagnosis of GTD/GTN		
	Surgical and medical treatment of GTD		
	Treatment plan for GTN		
GENERIC			
Gyn.onc. surgery	Gyn.onc anatomical knowledge		
	Recognition and treatment of surgical complications		
	Specific surgical skills:		
	- hysterectomy for uterine cancer		
	- radical hysterectomy		
	- radical trachelectomy		
	- (radical) parametrectomy		
	- pelvic lnd (open)		
	- pelvic lnd (laparoscopically)		
	- pelvic SN (open)		
	- pelvic SN (laparoscopically)		
	- lumbo-aortic lnd (open)		
	- lumbo-aortic lnd (laparoscopically)		
	- local wide/radical excision vulva		
	- inguino-femoral lnn evaluation		
	- (radical) colpectomy		

	- creation neovagina		
	- infra+supracolic omentectomy		
Medical skills		Competency level 1. Passive 2. Direct supervision 3. Some supervision 4. Without supervision 5. Supervises/ teaches	Cumulative Number As first responsible
Gyn.onc. surgery	- cytoreductive surgery		
	- laparoscopic assessment ov.ca.		
	- laparoscopic insertion IP catheter		
	- exenteration		
	- LLETZ/LEEP of cervix		
	- enterostomy		
	- cytologic biopsy (FNA)		
	- histologic biopsy (Tru-cut)		
Urologic surgery	- urinary deviation		
	- recognition and dissection ureter		
Reconstr. surgery	Recognising need for plastic surgery		
	Treatment of wound complications		
Systemic therapy	Pharmacological knowledge of cytostatic agents		
	Knowledge of indications		
	Acquaintance with clinical trials		
	Knowledge of mechanisms of targeted therapy		
Radiotherapy	Knowledge of radiation and nuclear medical principles		
Palliative & supportive care	Indications for palliative care		
	Prescribing pain medication		
	Holistic approach to the symptoms and worries of the cancer patient and family		
Genetics	Knowledge of familial cancer syndromes		
	Counselling mutation carriers		
	Knowledge of preventive measures and their consequences		
	Knowledge of genes involved in oncogenesis		
	Knowledge of molecular targets for treatment		
Pathology	Knowledge of pathophysiology		
	Knowledge of gynaecological tumour classification and staging		
Peri-op. care	Knowledge and application of ERAS principles		

EVALUATION BY EDUCATIONAL SUPERVISOR <i>Assessment of educational activities</i>	
Name of supervisor	
Date (DD/MM/YY)	
Verdict	Issues
What went well?	
What could be improved?	

EVALUATION BY EDUCATIONAL SUPERVISOR <i>Assessment of research activities</i>	
Name of supervisor	
Date (DD/MM/YY)	
Verdict	Issues
What went well?	
What could be improved?	

EVALUATION BY EDUCATIONAL SUPERVISOR <i>Summary and training plan</i>	
Name of supervisor	
Date (DD/MM/YY)	
	Verdict/Issues
Summary 1. Below expected level 2. At expected level 3. Above expected level	
Specific training objectives for the next phase	
Final remark(s) by fellow	
Agreement with summary of evaluation (both the fellow and the Educational Supervisor sign to witness that this summary is correct)	
Electronic signature fellow	Log in here
Electronic signature Supervisor	Log in here

(more assessments to be repeated as required)

TRAINING ASSESSMENTS: Formative assessments

Per module and procedure, the required number of structured assessments need to be performed and approved by both the fellow and the Educational Supervisor/assessor.

ESGO recommends:

- Evaluating *knowledge* using the ACGME competency assessment
- Evaluating *surgical skills* using OSATS

These recommended and validated assessment tools are available online within this portfolio and these are supported by real-time evaluation algorithms allowing progress to be followed. Other validated assessment tools may also be used, but they need to be uploaded or recorded in an open field and the assessment forms (either in print or digital) need to be uploaded.

COMPETENCY ASSESSMENT <i>ACGME outcomes checklist</i>		
Name assessor		
Date (DD/MM/YY)		
Module/ tumour type		
ACGME Outcome	Learning target	Competence level 1. None 2. Some 3. Full competence
Practice-based learning and improvement	Identify personal limits	
	Set learning goals	
	Identify and perform appropriate learning activities	
	Incorporate formative evaluation feedback into daily practice	
	Adequate use of scientific evidence	
	Adequate use of information technology	
	Participation in education	
Patient care and procedural skills	Adequate gathering of information	
	Adequate synthesis of findings	
	Partnership with patients and family	
Systems-based practice	Work effectively in the health care system	
	Consider cost-effectiveness	
	Consider quality of care	
	Consider and identify patient safety issues, including identifying system errors	
Medical knowledge	Knowledge and application of EBM	
	Knowledge about the principles of clinical trials	
	Knowledge of protocols/guidelines/patient info sheets (being responsible for one of these as end target)	
	Papers and/or presentations	
	Successfully attended courses:	
	- teach-the-teacher course	
	- course for leadership/management	
	Attendance of national conference/meetings	
Attendance of international meetings		
Membership of ENYGO/ESGO		no/yes
ACGME Outcome	Learning target	Competence level

		1. None 2. Some 3. Full competence
Interpersonal and communicative skills	Communication with other care providers and health-related agencies	
	Communication with patients and family	
	Discussing bad news/resuscitation	
	Work effectively as a member or leader of a team	
	Act in a consultative role	
	Maintain comprehensive, timely, and legible medical records	
Professionalism	Handling oncological patients	
	Handling grief and emotions	
	Recognition of pathological grief	
	Handling religious and other convictions	
	Monitoring and comparing results of clinical care, up to being responsible for a clinical audit (latter end target)	
	Knowledge and use of the complication and mortality register	
	Self-reflection	
Agreement with assessment		
(both the fellow and the Educational Supervisor sign to witness that the assessment has correctly been documented)		
Signature fellow	Log in here	
Signature assessor	Log in here	

(more assessments to be repeated as required)

SKILLS ASSESSMENT						
<i>(using principles of OSATS, Mini CEX, or CBD)</i>						
Supervisor's name						
Supervisor's role						
Date (DD/MM/YY)						
Clinical setting	Outpatient/inpatient/acute admission/theatre/other					
Procedure/case						
Relevant clinical details						
Focus	Technical skill/record keeping/clinical assessment/management/professionalism					
Complexity	Basic/intermediate/advanced					
Overall performance						
If another specific type of assessment tool has been used upload (and discard following items)	Here					
ASSESSMENT	SCORE (tick appropriate box)					
	On a scale from 1 (inadequate) to 5 (up to standards), or not applicable					
	1	2	3	4	5	n.a.
Safety considerations						
Documentation						
Tissue handling						
Dealing with problems/difficulties						
Economy of movement						
Forward planning						
Selection of instruments/equipment						
Communication with staff						
Technical ability						
Use of assistants						
Peri-operative planning (e.g. positioning)						
Communication with patients/relatives						
Checking equipment/environment						
Verdict	Issues					
What went well						
What could have gone better						
Fellow's reflection						
Learning plan						
Overall performance	Competent/working towards competency					
Agreement with assessment						
<i>(both the fellow and the Educational Supervisor sign to witness that the assessment has correctly been documented)</i>						
Signature fellow	Log in here					
Signature supervisor	Log in here					

(Add more lines as needed)

DOCUMENTATION OF SURGICAL PROCEDURES

Procedure:	Access: - open - minimally invasive	Date of surgery:	Tumour type: - vulva - cervix - endometrium - ovary/tube - trophoblast - metastatic - other	Surgical role: - surgeon - assistant - observer	Supervisor:	Structured assessment: (e.g., OSATS) - yes - no

(Add more lines as needed)

DOCUMENTATION OF PROFESSIONAL POSTGRADUATE EDUCATION

Starting date: (DD/MM/YY)	Title: Course/ Symposium/Congress/Lecture	Venue:	Role: - participant - oral presenter - poster presenter - organiser - other	CME: No. of points	Certificate: Upload
					here
					here
					here
					here
					here
					here
					here
					here

(Add more lines as needed)

DOCUMENTATION OF PUBLICATIONS

Position in authorship: - first author - co-author - senior (last) author	Journal:	Day of first pub. (DD/MM/YY)	Title: + DOI

(Add more lines as needed)

Assessment tools

OSATS

Structured assessments:			
Objective Structured Assessment of Technical Skills (OSATS)			
Fellow's name:	Supervisor's name:	Date:	Procedure:
Year of training: 1/2/3	Supervisor's function:		Clinical details and complexity: Degree of difficulty: <i>Basic/intermediate/advanced</i>

This assessment is tool designed to:

1. Enable judgement of surgical competency in **this** procedure and
2. To provide specific, constructive **feedback** to the trainee about their performance.

There is a judgement to be made in this assessment relating to the overall performance observed:
competent or working towards competence.

The following anchor statements are for general guidance about the overall observed level of performance. Suggestions for areas to consider during the assessment are listed at the end of this section.

For the trainee to be considered **competent** in the observed procedure, it would generally be expected that:

- The trainee was able to perform all aspects of the procedure safely and competently with no or minimal need for help, or in the context of an unexpectedly difficult case, may have needed more assistance for the more difficult aspects of the procedure.

For the trainee considered to be **working towards competence** it would generally be expected that:

- The trainee required significant help throughout or with the majority of steps.
- The trainee was unable to perform any of the necessary procedures to be safe and competent at this stage.

This trainee performed this observed procedure competently*

This trainee is working towards competence in this procedure*

*Delete as appropriate

Please provide written feedback for the trainee regarding their performance in the box provided at the end of this section in addition to your direct verbal feedback.

The following areas are suggestions to consider about the overall observed performance. This includes both the technical and non-technical skills necessary for the procedure and is not an exhaustive list.

Checking equipment/environment	Communication with patients and/or relatives
Peri-operative planning, e.g., positioning	Use of assistants
Technical ability	Communication with staff
Selection of instruments and equipment	Forward planning
Economy of movement	Dealing with problems and/or difficulties
Tissue handling	Documentation
Completion of task as appropriate	Safety considerations

Feedback:

What went well?
What could have gone better?
Learning plan:

Fellow's signature:

Supervisor's signature:

Case-based discussion

Structured assessments:			
Case-based discussion (CBD) supervised learning event			
Fellow's name:	Supervisor's name:	Date:	Brief case description:
Year of training: 1/2/3	Supervisor's function:		Clinical setting: <i>Outpatient / acute admission / inpatient / other</i>
			Focus of clinical encounter: <i>Record keeping / clinical assessment / management / professionalism</i>
			Complexity: <i>Basic/intermediate/advanced</i>

This is a **formative** tool to provide feedback to the fellow about their clinical knowledge in some or all aspects of this case. Please provide **specific, constructive feedback** to the trainee in verbal and written forms (in the box below) that you feel will enhance training and future learning. There is **NO** overall judgement relating to competence for this event.

Areas to consider:

1. Clinical record keeping (completeness, legibility, information sharing)
2. Clinical assessment (interpretation of clinical findings, "putting it all together")
3. Investigation and referrals (appropriate tests and referrals for case, rationale demonstrated)
4. Management (use of clinical knowledge, correct interpretation, use of evidence, safe and logical approach, dealing with uncertainty, appropriate advice sought)
5. Follow-up and future planning (linking current problem to future needs, rationale for follow-up)
6. Professionalism (respectful, logical approach to problem-solving, diligent and self-directed approach to patient and learning needs)

Feedback

What went well?

What could have gone better?

Learning Plan

Fellow's signature:

Supervisor's signature:

--

Fellow's Reflection:

Mini clinical evaluation exercise

Structured assessments:			
Mini Clinical Evaluation Exercise (CEX) Supervised Learning Event – Gynaecology			
Fellow's name:	Supervisor's name:	Date:	Brief case description:
Year of training: 1/2/3	Supervisor's function:		Clinical setting: <i>Outpatient / acute admission / inpatient / other</i>
			Focus of clinical encounter: <i>Record keeping / clinical assessment / management / professionalism</i>
			Complexity: <i>Basic/intermediate/advanced</i>

Areas to consider (there may be others as well):

1. History-taking (completeness, logic, focus)
2. Physical examination skills (approach to patient, technical skill, interpretation of findings)
3. Communication skills (patient-friendly, questioning style, empathy, clear explanation)
4. Clinical judgement (use of clinical knowledge, correct interpretation, logical approach, safe and confident, recognising limits and appropriate advice sought)
5. Professionalism (respectful, courteous, confident, use of team members)
6. Organisation and efficiency (efficient, logical and ordered approach)
7. Overall clinical care (global judgement of performance)

Feedback

What would have gone better?

Learning Plan:

Fellow's signature:

Trainer's signature:

Fellow's Reflection: