



Workshops are held on
Fridays: 8:30am–4:00pm

McMaster University Health Sciences Centre

2019 FALL DATES:

August 2	October 18
August 9	November 1
August 16	November 15
September 13	November 22
September 20	November 29
September 27	December 6
October 4	December 13

Planning Committee

Beth Murray-Davis, RM, PhD

Assistant Professor
HHS New Investigator
Midwifery Education Program
McMaster University

Donna M. Fedorkow, MD, FRCSC, MSc

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Undergraduate Coordinator
MF3 Subunit Planner
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McMaster University

Janice A. Harvey, BSc, MD, CCFP, FCFP, Dip. Sport Med.

Physician, McMaster University DBAC, SWC
Assistant Clinical Professor
Department of Family Medicine
Assistant Director
Standardized Patient Program, CSBL
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Leigh Norman

Program Administrator
Standardized Patient Program
McMaster University, HSC1M1-S2

Sheilah Laffan

CHSE Program Manager
Continuing Health Sciences Education
Faculty of Health Sciences
McMaster University

Registration Information

CONTINUING HEALTH SCIENCES EDUCATION

P: 905-525-9140 ext 22671

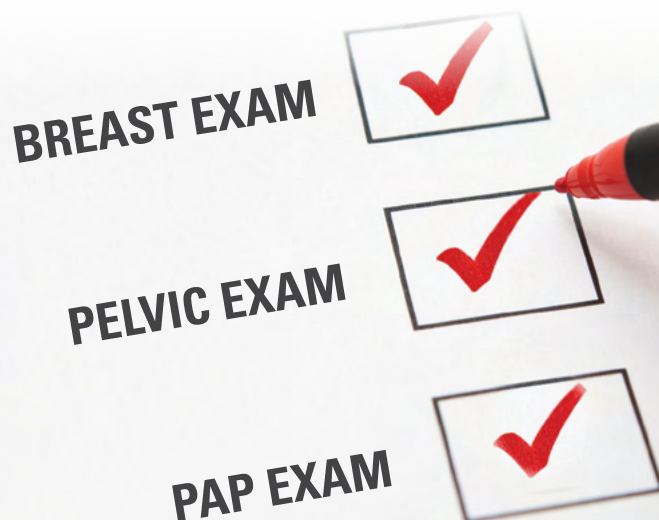
F: 905-572-7099

E: cmereg@mcmaster.ca

www.chse.mcmaster.ca

Clinical Skills in Gynecological Health

STANDARDIZED PATIENT PROGRAM



TARGET AUDIENCE

Registered Nurses, Registered Practical Nurses, Nurse Practitioners, Physician Assistants and Midwives.

OBJECTIVES

1. Provide the learner with an overview of the normal gynecological anatomy.
2. Review the current clinical guidelines for biologic and cytological screening for common gynecologic conditions.
3. Provide the learner with an overview of sexually transmitted infections.
4. Demonstrate the clinical approach to the assessment of the genital tract.
5. Provide an opportunity for the learner to practice the speculum exam in a supervised educational setting with a gynecological teaching associate who uses their own body as a teaching tool.
6. Demonstrate the clinical approach to the breast exam and teaching techniques for the breast self-examination (BSE) with a gynecological teaching associate who uses their own body as a teaching tool.

THE PROGRAM

The goal of this unique educational program is to provide a practical hands-on learning opportunity for health care professionals in the area of gynecological health.

The attendees will have the opportunity to begin to develop the clinical skill set necessary to perform breast and pelvic assessments.

As well, this introductory program will cover the current guidelines and sampling techniques used in screening, diagnosis, and follow-up of common gynecological conditions.

AGENDA

EACH DATE IS LIMITED TO A MAXIMUM OF 6 PARTICIPANTS

08:30–10:00	Introduction and Overview
10:00–12:30	Didactic <ul style="list-style-type: none">• Screening Guidelines• Sampling Techniques• Pearls + Pitfalls• Discussion
12:30–13:15	LUNCH (provided in meeting room)
13:15–15:45	Practical <ul style="list-style-type: none">• Gynecological Teaching Associate (GTA)* *GTAs use their own bodies as teaching tools• Breast Exam• Pelvic Exam
15:45–16:00	Wrap-up & Evaluation

PARKING

You can park in one of the parking lots on McMaster University's Central Campus or at McMaster Hospital underground parking.

Cost is approximately \$20.00

Visit the Parking & Transit Services website for more information:
<http://parking.mcmaster.ca>

FOR DIRECTIONS AND MAP, PLEASE GO TO:

www.mcmaster.ca/welcome/directions.cfm

After registering, you can expect to receive an email from spadmin@mcmaster.ca approximately one week prior to the workshop date, with details regarding meeting room location.

GENERAL INFORMATION

CANCELLATION POLICY

The University reserves the right to cancel a course due to insufficient registration or any circumstances that are beyond our control. Cancellations up to 2 weeks prior to the course (for the date registered) will be refunded minus a 20% administrative fee. One transfer is permitted with a \$100.00 fee at time of transfer. No refunds will be issued for cancellations received less than 2 weeks from the course date.

CONFIRMATION OF REGISTRATION

A written acknowledgement of your registration will be sent prior to the activity. Receipts are emailed at the time of registration and an additional email will be sent after the activity, confirming your certificate of attendance is ready to download or print. Your registration is not complete unless a confirmation is received. If you have not received a confirmation within 7 days of registration, please contact the CHSE office.

ACTIVITY PACKAGE

As the registrant, your activity package includes refreshments and lunch.

LIABILITY

Continuing Health Sciences Education (CHSE) hereby assumes no liability for any claims, personal injury, or damage:

- To any individual attending this activity.
- That may result from the use of technologies, program, products and/or services at this activity.
- That may arise out of, or during this activity.

ACCREDITATION STATEMENT

McMaster University, Continuing Health Sciences Education Program (CHSE) is fully accredited by the Committee on Accreditation of Continuing Medical Education (CACME) to provide CFPC Mainpro and RCPSC Maintenance of Certification (MOC) study credits for Continuing Medical Education.

Registration Form

Clinical Skills in Gynecological Health
FALL 2019

Registration FEE: \$450.00

Surname

Given

RN

RPN

Other

Profession:

Specify / License Number

Mailing Address

City

Province

Postal Code

Area Code

Phone

Area Code

Cell Fax

FOR OFFICE USE ONLY
Program Code: CLINSKILLSGYNFALL19

Email *Your registration cannot be processed without an email address.

Payment By: Visa M/C AMEX CHEQUE CASH

Pls make cheque payable
to "McMaster University"
** Registration by cheque
cannot be confirmed until
payment has been processed.

CVD Number:

Amount: \$ 4 5 0 . 0 0

Card Number

Month

Year

Signature

Expiry:

Please indicate which workshop date you are registering for by indicating your 1st & 2nd choice of date to attend:

- | | |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> August 2 | <input type="checkbox"/> October 18 |
| <input type="checkbox"/> August 9 | <input type="checkbox"/> November 1 |
| <input type="checkbox"/> August 16 | <input type="checkbox"/> November 15 |
| <input type="checkbox"/> September 13 | <input type="checkbox"/> November 22 |
| <input type="checkbox"/> September 20 | <input type="checkbox"/> November 29 |
| <input type="checkbox"/> September 27 | <input type="checkbox"/> December 6 |
| <input type="checkbox"/> October 4 | <input type="checkbox"/> December 13 |



There are 5 ways to register...
ONLINE @ www.chse.mcmaster.ca

BY PHONE

Call **905 525-9140 ext 22671**
(Visa, MasterCard or AMEX are accepted)

IN PERSON

Bring your completed registration form with Visa, MasterCard, AMEX, cheque or cash payment to the: *Continuing Health Sciences Education Program, 100 Main Street West, 5th Floor, Room 5004 Hamilton, ON L8P 1H6*
Mon. to Fri. between the hours of 09:30 – 16:00

BY FAX

Fax the completed registration form with a Visa, MasterCard or AMEX number to: **905-572-7099**

BY MAIL

Mail your completed registration form to:
*Continuing Health Sciences Education Program
1280 Main St. W., DBHSC, Room 5004
Hamilton, ON L8S 4K1*

SPECIAL DIETARY REQUIREMENTS/DIETARY RESTRICTIONS: For those with special dietary needs some accommodation may be available:

Vegetarian: _____ **Allergies:** _____ **Other:** _____

(Pls note: custom meal requirements will be ordered at an additional fee. Please contact our office for details)

PLEASE IDENTIFY ANY ACCESSIBILITY NEEDS: _____

GUESTS ARE NOT PERMITTED at the workshops.

VISIT OUR WEBSITE FOR MORE CHSE ACTIVITIES:

www.chse.mcmaster.ca/events

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The information on this form is collected under the authority of the McMaster University Act, 1976. The information will be used for administrative purposes, including: your registration in the course; preparation of course materials for your use and to notify you of other courses or pertinent information. Financial information will be used to process applicable fees and will be retained for future reference. This information is protected and is being collected pursuant to section 39(2) and section 42 of the Freedom of Information and Protection of Privacy Act of Ontario (RSO 1990). Questions regarding the collection or use of this personal information should be directed to the University Secretary, Gilmour Hall, Room 210 McMaster University.