

BMUS))

Interdisciplinary Learning in Gynaecology

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Content

- NHS Scotland Academy and the National Ultrasound Training Programme
- Challenges in clinical training
- Diversification of learners
- Differences in approach to learning
- Lessons learned and benefits
- Immersive masterclasses

**National
Perioperative Training
Programmes**

**Foundations of
Perioperative Practice**

**Anaesthetic
Practitioners**

**Surgical First
Assistants**

**Assistant
Practitioners
(Perioperative
Practice)**

**Decontamination
Science Workforce
Training**

**National Endoscopy
Training Programmes
(NETP)**

**Train the Trainer (Upper
GI & Colonoscopy)**

NETP National Faculty

**Upskilling (Upper GI &
Colonoscopy)**

Immersion Training

**Foundations of
Endoscopy Practice (RNs)
& Assistant Practitioners
(Endoscopy)**

**Endoscopy Non-Technical
Skills**

**National Ultrasound
Training Programme
(NUTP)**

Sonographers

Specialist Registrars

Nurses

Podiatrists

Physiotherapists

Immersion

Upskilling

Masterclasses

**National Workforce
Programme**

**eNMC OSCE Preparation:
Adult Nursing; Midwifery;
Mental Health Nursing;**

Cultural Humility

**Preparing for Work in
Health and Social Care in
Scotland**

**High-Volume Cataract
Surgery**

**Developing Clinical Skills
for Pharmacists**

Biomedical Science

Challenges in Clinical Education

- Resources
- Workload
- “Training burden”
- Burnout



Challenges in Clinical Education

- Variation in follow-up (reporting)
- Staff frustration
- Governance

Inception of National US Training Programme

- To assist in training 12 general medical sonographers from across Scotland
- In partnership with a named mentor at home board
- Each offered five, separate, one-week blocks training on patients at Scotland's national waiting times centre, Golden Jubilee National Hospital

Diversification of Learners

Nov 2022

Gen med
sonographers

July 2023

Sexual &
Reproductive
Health STs

Aug 2023

Radiology STs

Diversification of Learners

July 2024

ObGyn STs

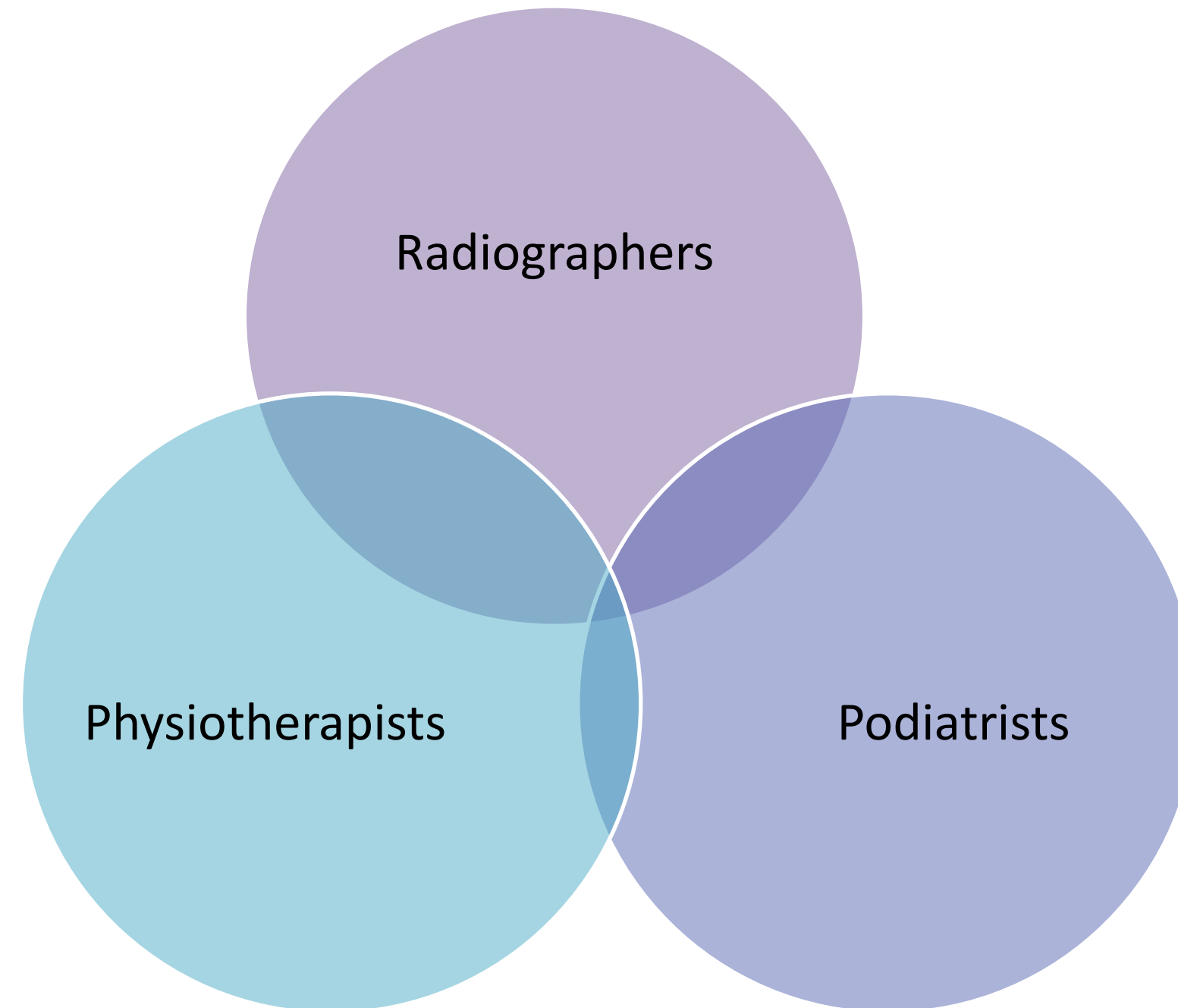
Oct 23

Sexual &
Reproductive
Health nurses
& speciality
doctors

Nov 2024

Gyn nurses
ObGyn
sonographers

New AHP Learners





Differences in approach to learning

Gen Med Sonographers

- Quickly adept at scanning (more exposure)
- Poor knowledge of aetiology, clinical presentation, clinical significance, management and treatment
- Lack confidence in reporting

Non - Radiology Medics

- SRH- lots of exposure to scanning for IUD position, less of common pathologies
- Gyn - highly variable exposure to US – often dependent on training site and on-call

Non - Radiology Medics

- Adept at scanning TV but lacked experience in TA
- Little training in “knobology”
- Exemplary clinical knowledge

Radiologists

- Differing interest (Gyn)
- Limited exposure to scanning
- Clinical knowledge
- Alternative imaging

Obs & Gyn sonographers

- Quickly adept at scanning
- Limited clinical knowledge
- Obstetrics a priority
- Lack of managerial support for regular gyn lists

Gyn Nurses

- Variable exposure to scanning
- Poor knobology
- Also learning hysteroscopy



Training Programme Director and Specialist Trainee Feedback

We are very grateful for the training offered to our registrar group by the Academy team. The feedback was universally glowing and the clear rapid improvement in learners' skills was tantamount to the excellent teaching they received.

Genuinely one of the best training opportunities I have been given as an O&G trainee. Thank you!

Case study

Experienced SRH clinical academic attended NUTP for training in scanning

- Learned TA technique, image optimisation and had more exposure to pathology

We learned:

1. Nomenclature confusion: WHO (2021) advocate use of the acronym IUD for **all** devices (non-hormonal or hormonal with specific forms).
2. The distance of an IUD from the top of the uterus is irrelevant.

IUD Position

- Correct position is within 2 cm from the top of the endometrium
- State position of IUD in relation to top of endometrium and the measurement and reference FSRH advice
- If > 2cm from top of endometrium, device should be removed

<https://fsrh.org/Public/Documents/ceu-guidance-intrauterine-contraception.aspx>

FSRH Guideline Development Group

The following findings would usually be an indication to suggest that the IUD is to be removed and replaced:

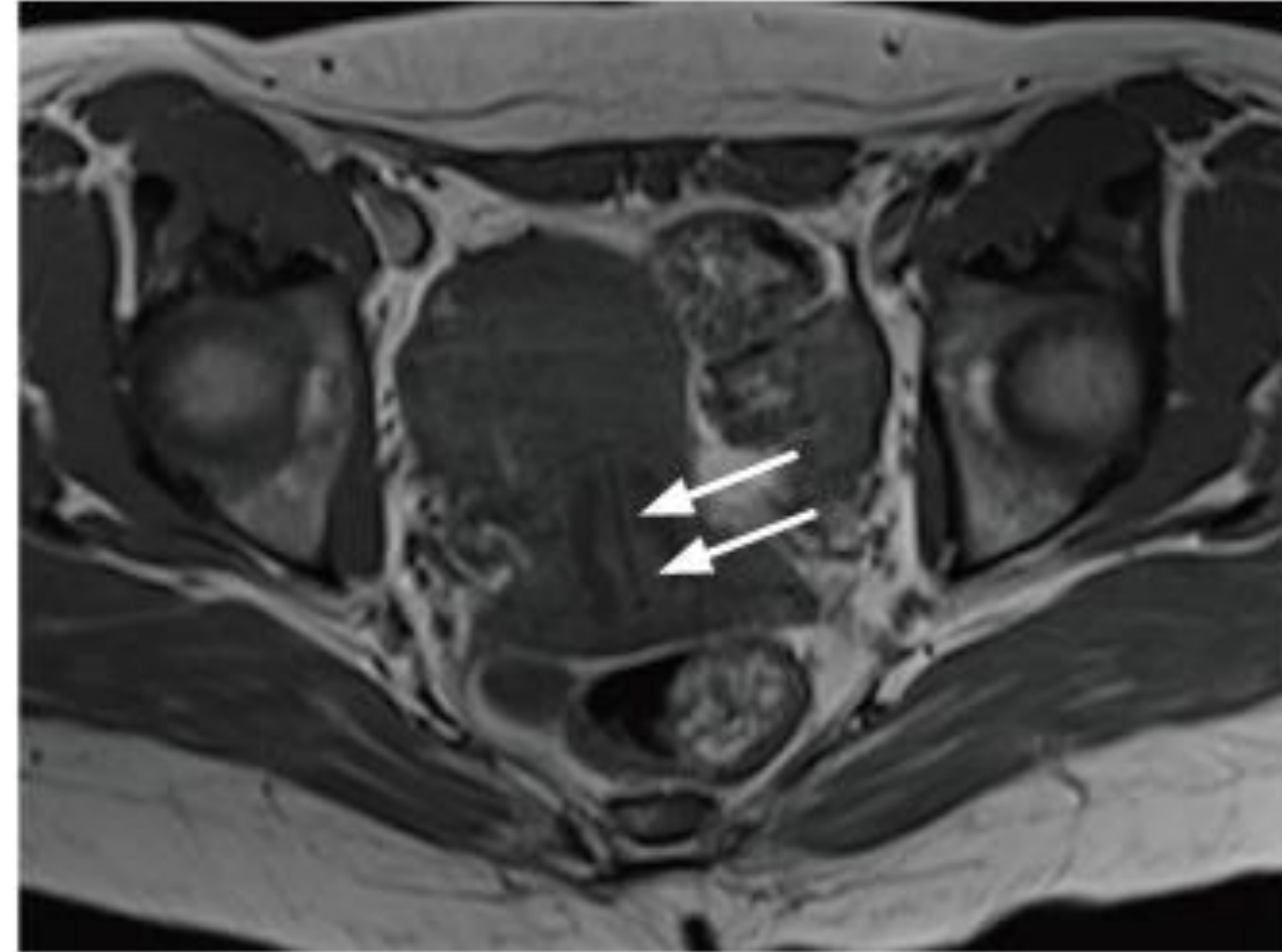
1. IUD >2 cm from the endometrium at fundus
2. IUD within the cervical canal (fully or partially)
3. IUD user experiencing symptoms that may be related to malpositioned IUD (e.g. pain or bleeding).

Consider the need for emergency contraception and follow-up pregnancy testing when an IUD is found to be malpositioned

Malpositioned IUD



A



B

Benefits

- Access to networks
- Opportunity for collaboration
- Standardisation and parity
- National Gyn Reference Group
- Realistic Medicine



Lessons Learned

- Sonographers need enhanced training on aetiology, clinical presentation, significance of findings and management
- Actionable reporting requires training and infrastructure
- Medics need a focus on systematic scanning, knobology and producing diagnostic images
- O & G sonographers and nurses need more exposure to scanning

Lessons Learned

- All learners lack confidence to start
- Training delivered needs adapted from learner to learner
- We can learn from each other



Outcomes

- Improved scanning technique for medics
- Improved clinical knowledge for sonographers
- Joined up thinking = improved patient pathways and experience
- Parity



Outcomes

- Learner presented at masterclasses
- Learner feedback influences prospective masterclass content
- Opportunity for research collaboration
- Reduced national waits

This report page provides detail of the specific US Examinations performed. Use the drop down filters below to select specific examinations.

Room

All

PPS Status

All

US Examination

All

US Examinations

17616

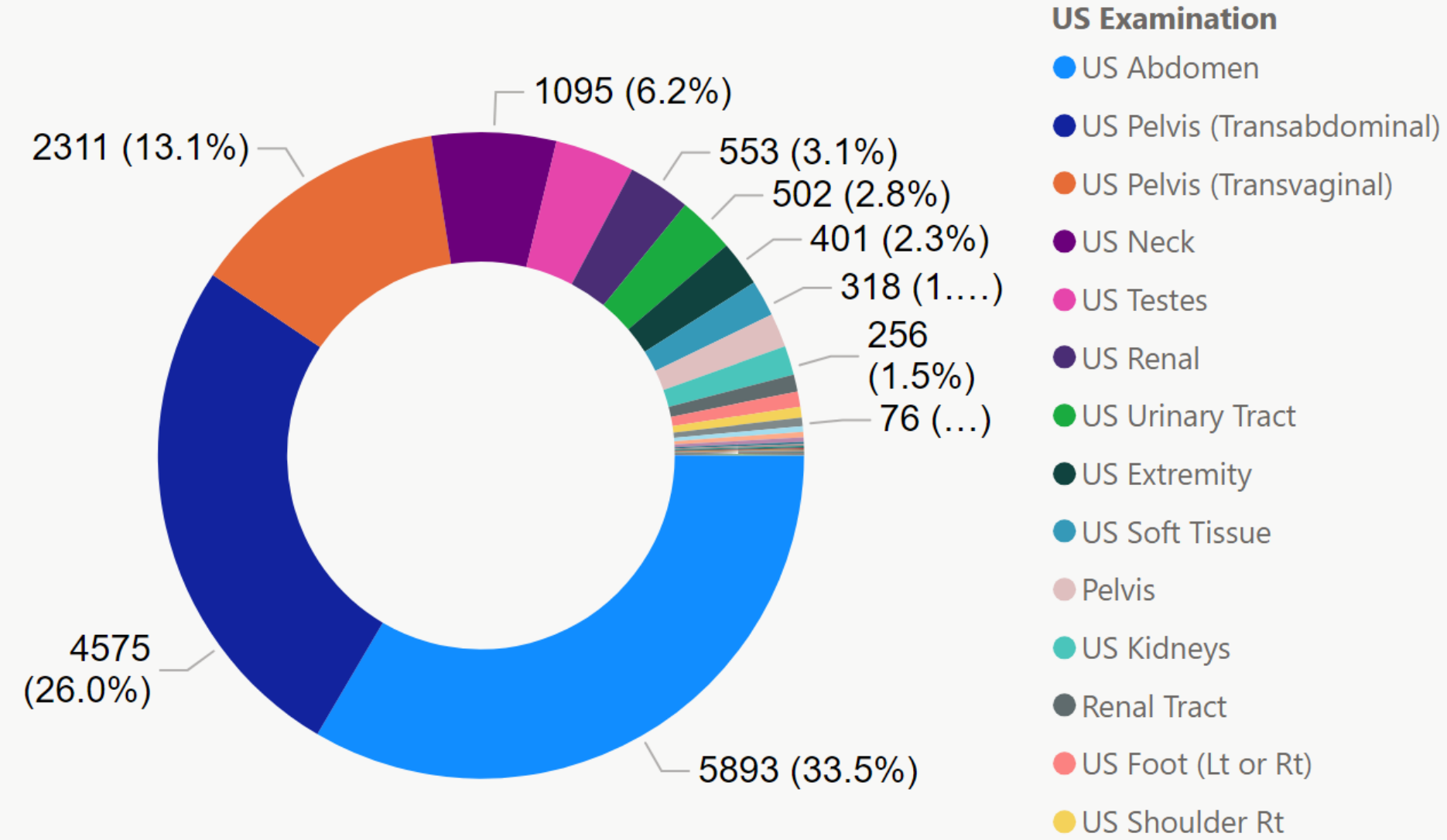
Exam. time (hr): 6,138.7
Exam. DNA: 785 4.27%
Exam. DNA (hr): 269.2

Patients

14487

DNA Patients: 651 4.30%

Total US Examination by US Examination



Date control

24/10/2022 23/05/2025



Examination parameters

US Examination

Immersive masterclasses

- One day, in-person events
- Multiple subspecialties
- Multidisciplinary speakers
- Interesting case studies
- Practical scanning session
- Q & A session with a Gyn consultant



Summary

There are similarities and differences with all learners

All doubt themselves and have differing strengths and weaknesses

Learn together – help each other provide a better service

WE MAY HAVE ALL COME ON
DIFFERENT SHIPS, BUT WE'RE
IN THE SAME BOAT NOW.

MARTIN LUTHER KING, JR.

ABOUTMARTINLUTHERKING.COM

Advice



Get to know your wider team



Discuss ways in which you can help each other with training



Sonographers ask for feedback on cases; MDT meetings



Seize every opportunity to collaborate – consider organising a local masterclass

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Disclaimer

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