



# The Council on Resident Education in Obstetrics and Gynecology (CREOG)

ACOG DIVISION OF EDUCATION

Dedicated to the promotion and maintenance of excellence in residency

## Frequently Asked Questions about Global Health Electives

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### 1) Which PGY year is appropriate for a global health elective?

Consider the level of supervision and education goals in order to determine the appropriate year for a particular Global Health Elective. Often, it is more appropriate for a PGY 3 or 4 who has a skill set and confidence with the clinical scenarios that will be encountered.

### 2) How should the resident prepare for work in a low resource setting?

Pre-departure training is essential prior to a global health elective. The APGO online course is a great resource (Resources #1) unless your department or hospital has a similar resource or in person training. The resident should also have an identified person to debrief with during and following the rotation given the significant emotional impact of this type of clinical work.

### 3) How should I help ensure the safety of the resident?

The UN online safety course is a good resource (Resources #2). Hospital or local university safety courses are also options. The resident should register with the US embassy when they arrive in case of a natural disaster or major political upheaval. Many institutions have their global health travelers registered through "ijet" (Resources #3) who then issues travel alerts when necessary. The state department also issues travel alerts and travelers should check their website prior to departure (Resources #4). Additionally, the local political, cultural and legal environment of the location of the elective should be evaluated in relation to the individual resident. Issues such as religious and political beliefs, gender identity, and sexual preference can pose a safety concern for the resident in certain countries.

### 4) What are the educational goals of the elective?

Well described written educational goals are important to delineate for each Global Health Elective. Using the six ACGME core competencies to provide a framework for the educational goals and objectives is a great place to start. APGO has developed global health objectives for women's health that can be used or modified (Resources #5).

**5) Who will supervise the resident?**

It is important to have a home faculty or an identified onsite faculty to supervise the resident during their entire rotation. It is critical that residents only participate in clinical activities that they would do in the U.S. and not practice outside of their scope although they may feel pressured to do so.

**6) What is a minimum time for meaningful clinical work?**

Less than four weeks might be burdensome to the host institution unless there is an established team that is an ethically responsible surgical organization with an identified supervising faculty.

**7) What are the burdens for the receiving institution?**

Language barriers and resources needed such as an interpreter, housing, supervision, and teaching can fall to the host institution to provide. Resident inexperience with clinical care in a low resource setting can also be a burden.

**8) What are reasonable expectations for research?**

It is unlikely that a resident will be able to accomplish an extensive research project unless there is ongoing research and an IRB. A smaller project like a survey may be more reasonable if there is an established affiliation with the host institution, a secured approval by their ethics board and IRB, and a supervising mentor on site or from the home institution.

**9) Can cases from a Global Health Elective be counted and logged for ACGME?**

Currently these cases can be counted if there is appropriate supervision. This policy is under review by the RRC and may change or be further clarified.

**10) What if I do not have a Global Health Division in my Department?**

Check other departments in the hospital or local medical school for structured opportunities. U.S. clinical experiences in low resource settings may also be a less expensive and viable option that will allow the resident to gain a meaningful clinical experience.

**11) How is a Global Health rotation funded?**

Global Health rotations are mostly funded by the department or philanthropy. Medical Centers often cannot fund electives for residents due to government money they receive for training.

**12) What type of insurance is needed?**

Malpractice and Health Insurance needs to be secured for the resident. This is often done through the hospital or parent organization of the hospital. Emergency or evacuation coverage is necessary as well in case somebody has a serious medical condition while abroad.

**13) Does the resident need a medical license to practice during their elective?**

Some countries do require a license and it can be a lengthy process to acquire one. Visitors must comply with each country's licensing regulations.

#### 14) What types of vaccinations and medications are necessary to consider prior to departure?

Each country will be different so it is important for the resident to visit a travel clinic at least two months prior to departure. The CDC website also has a travel section that addresses country specific recommendations (Resources #6). Consider bringing PEP for possible occupational exposure to HIV.

#### Resources:

- 1) APGO Online Course – “Clinical Care in Low-Resource Settings: Preparing Providers and Fostering Leaders”  
<https://www.apgo.org/grants/grant/863-clinical-care-in-low-resource-settings.html>
- 2) UN Online Safety Course  
[Training.dss.un.org: Log in to the site](http://Training.dss.un.org)
- 3) <https://www.ijet.com/solutions/health-intelligence>
- 4) <https://travel.state.gov/content/passports/en/alertswarnings.html>
- 5) APGO Global Health Learning Objectives for Women’s Health  
<https://www.apgo.org/component/content/article/989.html>
- 6) CDC Traveler’s Health  
<http://wwwnc.cdc.gov/travel>
- 7) ACOG Committee Opinion #446 – “Ethical Considerations for Performing Gynecologic Surgery in Low Resource Settings”  
<http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Ethics/Ethical-Considerations-for-Performing-Gynecologic-Surgery-in-Low-Resource-Settings-Abroad>
- 8) Review Article – “Preparing for Global Women’s Health Work”  
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3861948/>
- 9) Resources from other specialties:
  - a) Berger JS, Jeon D, Chiang EP, Asay D, Ayas HM (2014) International Clinical Rotations during U.S. Residency Training: Creating an Accreditation Council for Graduate Medical Education-Approved Rotation. J Anesth Clin Res 5: 417. doi:10.4172/2155-6148.1000417
  - b) [http://www.aafp.org/dam/AAFP/documents/medical\\_education\\_residency/program\\_directors/Reprint287\\_Global.pdf](http://www.aafp.org/dam/AAFP/documents/medical_education_residency/program_directors/Reprint287_Global.pdf)
  - c) [http://media.go2itech.org/gchemp/preparation/presentation\\_content/external\\_files/resources.pdf](http://media.go2itech.org/gchemp/preparation/presentation_content/external_files/resources.pdf)