



WESTERN UNIVERSITY

Obstetrics and Gynecology



www.schulich.uwo.ca/obsgyn/



(519) 646-6380

PROGRAM DIRECTOR:

Dr. Yvonne Leong

RESIDENTS: 6 per year

QUESTIONS?

Please reach out to our program administrator:

Brittany Philipson brittany.philipson@lhsc.on.ca

Or reach out to some of our wonderful residents:

Kristen McFadyen
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Erica Sacoransky
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Emily Li
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What are you looking for specifically in an impressive candidate?

All individuals who are interested in Women's Health are encouraged to apply. We value candidates who are collegial, motivated and diverse in their interests, and those with strong communication skills.

How is your residency program organized?

First year:	Transition to Discipline (2 blocks)
First year.	Labour & Delivery (2 blocks)
	- First block is buddied with a PGY3
	General Gynecology (2 blocks)
	Pregnancy Options Program (1 block)
	Ultrasound (1 block)
	General Surgery (2 blocks)
	Medicine (2 blocks)
	Emergency Medicine (1 block)
Second Year:	Labour & Delivery (5 blocks)
	General Gynecology (2-3 blocks)
	Maternal Fetal Medicine (1-2 blocks)
	Gyne Oncology (1-2 blocks)
	ICU (2 blocks)
	Research (1 block)
Third Year:	Labour & Delivery (4 blocks)
	General Gynecology (2-3 blocks)
	Community (2 blocks)
	Maternal Fetal Medicine (1-2 blocks)
	Urogynecology (1 block)
	Gyne Oncology (1-2 blocks)
	Research (1 block)
Fourth/Fifth	Obstetrics Chief (2 blocks)
Year:	General Gynecology Chief (4 blocks)
	Gyne Oncology Chief (3 blocks)
	REI (3 blocks)
	Maternal Fetal Medicine (3 blocks)
	Urogynecology (1 block)
	Colposcopy (1 block)
	Senior Clinic Rotation (2 blocks)
	- With chief gyne clinic
	Selectives (3 blocks)
	Electives (3 blocks)

What is your residency program's orientation and focus?

The focus of our program is to enable residents to gain the necessary skills and experience to become competent, confident, and caring OBGYNs. Residents will acquire a strong foundation in core obstetrical and gynecologic skills. Obstetrically, residents are exposed to and gain experience in forceps-assisted vaginal deliveries, breech vaginal deliveries, and high-risk obstetrics. We have a strong surgical gynecology program, through which residents become competent in vaginal, laparoscopic, and open hysterectomies, along with many other classic and minimally invasive gynecologic procedures.

What is the availability of experiences in subspecialty areas during training?

We are fortunate to have subspecialists in all areas: MFM, REI, oncology, urogynecology, laparoscopic surgery, colposcopy, pediatric gynecology. We also have training available in family planning (Pregnancy Options Program) which includes contraception, and hands on training performing both medical and surgical abortions.

What is the typical day in the life of a resident?

The typical day will depend on whether you are on a gynecologic service or on obstetrics. If you are on labour & delivery (LD) or general gynecology, the day will start at 6:30AM when residents receive/give handover from the night team. Evening handover occurs at 5PM. As the gynecology resident, you will attend ORs and carry the consult pager during the day. The ORs typically run from 8AM to 3PM or 6PM. Clinics run from 9AM to 4PM. As a LD resident, you will be managing labouring patients and seeing patients that come to the obstetrical triage. You will also be the primary operator for caesarean sections.

What is the on-call schedule during each year of residency?

We have a combined night float and 24-hour call system. Night float runs from Sunday to Thursday (5PM-7:30AM). Friday and Saturday follow a 24-hour call system. On call, there are 2 junior residents on (each managing their own team — both a mix of high and low risk). 1 junior resident also carries the gynecology pager and takes consults. There is also a senior resident that is in-house acting as the chief resident for both teams. We also have a graduated call system, where on average you will do less call as you progress through each year of residency.

What distinguishes the Western OBGYN program from other programs?

- 1. Favourable staff to resident ratio (30 residents and ~35 consultants)
 - o Organic mentorship as the staff and residents know each other well
- 2. Clinicians who are proficient in forceps assisted vaginal deliveries and breech vaginal deliveries
- 3. Well-rounded surgical training
 - All types of hysterectomy (vaginal, laparoscopic and abdominal)
- 4. Training out of a single centre
 - Work closely with staff and co-residents
- 5. Resident team room stocked with snacks
- 6. New facilities
- 7. Obstetrical simulation centre with active simulation training
- 8. Buddy call system for the PGY-1 residents
- 9. Minimal fellows (fellows in MFM and Urogyne)
 - More surgical training for the junior and senior residents

What distinguishes your city from others?

London is a mid-sized city in Southwestern Ontario that is suitable for a young family or single resident. The cost of living here is quite reasonable with attractive real estate opportunities. It is a short drive to Toronto and Detroit (International Airports!). We have well-maintained scenic bicycle trails along the Thames River and there are two beaches close by. In the winter, there are opportunities for winter sports including cross-country and downhill skiing, outdoor/indoor skating, etc.