

University of Toronto, Toronto
Department of Obstetrics and Gynaecology

Residency Program Director: Dr. Michele Farrugia
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Toronto ON, M5G 1E2

What are you looking for specifically in an impressive candidate?

The OB/GYN UofT applicant selection is based on:

- Knowledge of and a commitment to a career in Obstetrics and Gynaecology
- Evidence of communications and interpersonal skills, collaborative team behavior, resilience/flexibility, leadership/responsibility roles, and professionalism.
- Indications that the individual is well-rounded and has interests outside of medicine.
- Interest and/or experience in research.

What can a potential candidate do now in order to be an appealing applicant to your program?

See #1 above.

How is your residency program organized? (i.e. year by year breakdown and schedule of rotations)

- PGY-1** Transition to Discipline 1 block
Obstetrics and Gynaecology (major teaching hospital) 1 block
Obstetrics and Gynaecology (community hospital) 2 blocks
Emergency Medicine 1 block
General Internal Medicine 1 block
Ambulatory Internal Medicine 1 block
General Surgery 1 block
Gynaecologic Oncology 1 block
Intensive Care Unit 1 block
Ambulatory Ultrasound 1 block
Family Planning 1 block (opt-out system)
Longitudinal Ambulatory Rotation (LAR) 9 months Sept-June¹
- PGY-2** Core Obstetrics and Gynaecology (teaching hospitals)²
- PGY-3-5** Core Obstetrics and Gynaecology (teaching hospitals and community sites)
Chief Resident
Gynaecologic Oncology
Maternal-Fetal Medicine
Reproductive Endocrinology & Infertility/Pediatric and Adolescent
Gynaecology
Urogynaecology
Research, Electives, and Selectives

¹The Longitudinal Ambulatory Rotation consists of the PGY1 trainee working in an ambulatory clinic twice a month from September to June, directly with a faculty member who acts as a preceptor and mentor. Although PGY1s benefit from a wide experience in many specialties during their first year of training, some residents might feel detached from their core interest — obstetrics and gynaecology — and colleagues. The LAR was developed in 2004 to address this, and help residents stay in touch with their specialty.

²Some PGY-1 residents may do 3 blocks of core Obstetrics & Gynaecology (typically part of PGY-2) at the end of the PGY-1 year and complete some of their off-service or ambulatory rotations in their PGY-2 year. This is randomized and dependent on service requirements across all teaching sites both within the OB/GYN program as well as requirements in other programs.

As with all Royal College OB/GYN programs and other surgical programs in Canada, residents are simultaneously enrolled in the Surgical Foundations program in the PGY-1 and -2 years. At the University of Toronto, Surgical Foundations involves two “boot camps” throughout the PGY-1 year in addition to lectures throughout the year that are protected time. Residents write the Principles of Surgery exam in the fall of PGY-2 year.

What is your residency program’s orientation and focus?

The UofT OBGYN Residency Program Objectives are as follows:

- To provide broad-based clinical and academic training in Obstetrics and Gynaecology with the goal of creating the foundation for practice of general and subspecialty Obstetrics and Gynaecology;
- To fulfill all the objectives required for specialty training in Obstetrics and Gynaecology as set out by the [Royal College of Physicians and Surgeons of Canada](#), and the Royal College Surgical Foundations Program.
- To focus on clinical experiences of a secondary and tertiary nature in general and subspecialty Obstetrics and Gynaecology as provided in both major teaching-hospital sites and in community hospital sites.
- To provide opportunities for development of programs and leadership in Global Health
- To provide graded responsibility in the acquisition of leadership skills and to emphasize development of teaching and research skills;
- To provide the environment, mentorship and experience that will allow each resident to achieve these objectives.

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

One of the strengths of the University of Toronto Program is the volume and diversity of subspecialty training. All subspecialties are represented, including Urogynaecology, Gynaecologic Oncology, Pediatric Gynaecology, Reproductive Endocrinology and Infertility, Minimally Invasive and Advanced Laparoscopic Surgery, and Maternal Fetal Medicine/High Risk Obstetrics. These subspecialties are all part of core training. Exposure to additional interests (ex. family planning, obstetrical medicine) may be pursued during electives and selectives.

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

One of the exciting aspects of Obstetrics and Gynaecology is that there is no ONE typical day! As a resident on Core Obstetrics and Gynaecology, your time will be split evenly between covering the obstetrical labour floor, and inpatient gynaecology (i.e. participating in the operating room, consults, and managing the inpatient ward). You would typically round on either the postpartum ward or the admitted gynaecology patients at around 7:00 am, and the day finishes with handover to the resident on-call around 6:00 pm. Subspecialty rotations are structured in various ways but typically involve combinations of clinics, operating room time, and inpatient service depending on the rotation.

What is the resident satisfaction?

Academic half-days, our wellness curriculum, and the resident retreat are particularly well received. Residents feel that they are heard and that their feedback is valued and important. The program is constantly changing due to resident feedback, and satisfaction is excellent!

Are there sufficient elective opportunities during training to explore your special interests?

There are 3 months of Electives and 9 months of Selectives, which provide ample opportunity to explore special interests. If there is an area a resident wishes to pursue that is not listed as a traditional selective option, approval may be granted at the discretion of the Residency Program Director.

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

The UofT program is engaged in an alternative model of call: the Night Float System, with an overall graduated call system. Adopting this system continues to be an iterative process with active resident participation, based on resident feedback. In PGY-2, the night float system involves 7 nights in a 4-week block, with a pre-call and post-call day. In the PGY-1 year, residents on their core rotations do 24-hr call. This provides excellent continuity and greater exposure during the limited times on-service. PGY-1 residents also participate in the call pool for their respective off-service rotations (i.e. Internal Medicine, General Surgery, ICU).

What distinguishes the UofT program from other programs?

- Large patient volume – This translates into diverse learning opportunities, with high volumes of common cases as well as rare and subspecialized problems. The volume is more than enough to accommodate multiple learners
- Advanced laparoscopic and hysteroscopic training
- Exposure to, and research opportunities within all subspecialties of OB-GYN
- Opportunity for electives abroad
- Research opportunities in both clinical and basic science fields with the back of University of Toronto's significant endowments and funding
- A surgical skills and simulation centre, which is part of a weekly educational curriculum in PGY-1.

Highlights of our UofT program in PGY-1 include:

- The Surgical Skills Curriculum is designed to provide opportunity for acquisition of basic- to advanced skills important for Obstetrics and Gynaecology by using bench models, trainers, and computer simulation for laparoscopic skills.
- The Longitudinal Ambulatory Rotation (LAR) is a highlight of our PGY-1 year. The longitudinal program introduces residents to senior faculty, allows for immersion in the faculty's special interests (examples include mature women's health, pelvic pain, gender affirming surgery and care, premature ovarian insufficiency, etc), and facilitates mentorship and research opportunities.
- Early exposure to obstetrical ultrasound through a full ambulatory ultrasound block.
- The Competence-By-Design (CBD) model was implemented in 2018 and multiple cohorts of residents have progressed through this curriculum since. Faculty are well-versed in providing evaluations and feedback in the form of Entrustable Professional Activities (EPAs) as per the Royal College guidelines.
- The first block of PGY-1 is Transition to Discipline. This includes a two-week Surgical Foundations Prep Camp which provides a fantastic, multi-disciplinary, immersive learning opportunity for acquisition of basic surgical skills. This is followed by a two-week period where PGY-1s work with OBGYN staff and residents to facilitate transition to residency.
- Journal Club meets four times a year.
- Research Proposal Sessions provide an opportunity for Residents to present their research idea at an early stage, receive feedback, and ensure the project is doable.
- Weekly academic half-day (AHD) sessions include reviews of critical topics led by faculty and residents over a two-year cycle; topics alternate between obstetrics and gynaecology content areas.

What distinguishes your city from others?

Toronto is the largest city in Canada, and one of the most multicultural. There is something out there for everyone, including restaurants, nightlife, festivals, parks/outdoor recreation, theatres and shows, art galleries, and the list goes on.

How competitive is it to get in, and then to succeed in your field?

All residency programs in Canada are highly competitive. The CMG and IMG applicant numbers vary from year to year; but typically admit 12 PGY-1s, of which 2 are IMG.

Is there active and/or required research in your residency program?

The Royal College requires all OB/GYN residents in all programs to complete a research project over the course of the residency program. Our program takes pride in residents' engagement in many fields of research, from basic science, clinical evaluation, healthy policy, and medical education among many others. Three blocks of dedicated research time are offered in the PGY-2 to -5 years that allows residents exposure to research under the guidance of Department faculty. All residents are required to present their research at the Department's Annual Research Day. Satisfactory completion of residency training at the University of Toronto requires completion of a scholarly project.

The Clinician Investigator Program (CIP) is a fully funded two-year MSc degree program, usually undertaken between PGY-3 and -4. Other MSc and PhD training is also available.

The program provides a \$5,000 stipend (competitive with other Canadian programs) that may be used towards conferences and other educational endeavors.

What local, national or international conferences would be of benefit to candidates interested in your residency program?

Most conferences are beneficial. There is no one specific level, location, or type of conference that would be of a particular advantage.

Who can we contact for more information or to set up electives?

Program administrative office: obgyn.educ@utoronto.ca

Website: <http://www.obgyn.utoronto.ca/>

Specifically, is there a list of residents whom we can call or email?

Tal Milman (PGY2): tal.milman@mail.utoronto.ca

Hanna Goldberg (PGY2): hanna.goldberg@mail.utoronto.ca

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