



Global Reproductive Health Training Costa Rica/Michigan State University

Obstetrics and Gynecology Residency Exchange Program

1. Introduction

The Department of Obstetrics, Gynecology and Reproductive Biology at Michigan State University in collaboration with the University of Costa Rica sponsors an international exchange for residents in the Obstetrics and Gynecology program.

2. Purpose/goal:

To incorporate a global health perspective that will provide an important addition to the ObGyn resident training in both countries. This experience will give residents the opportunity to personally understand the practice challenges of global reproductive health. As a secondary goal, such experiences will engender long-term interest and leadership in Global Women's Reproductive Health, expanded future research projects and mutually beneficial collaborations. It will also provide an appreciation of core competency skills as they relate to women's.

In Costa Rica, the residents will be exposed to clinical and research activities in a developing country setting. The resident will be open to the elements of women's health care in a country with a "universal health system" and where the trend of health indicators has shown commendable standards despite the little funding. Important issues such as cultural sensitivity, health disparities and medical ethics will manifest during the experience as well.

In the United States, the residents will be exposed to advanced clinical and research activities that will promote knowledge exchange on specific areas of interest, sub-specialty training, and research collaborations. Special attention will be given to areas not well developed in Costa Rica such as prenatal diagnoses, pathology, breast diseases, critical care and the use of advanced technology for diagnoses and treatment.

3. Setting/Location:

In Costa Rica, the resident will be exposed to clinical setting across the four main hospitals in San José including the Hospital Mexico, Hospital de la Mujer, Carit, Hospital San Juan de Dios and Hospital Calderón Guardia. All hospitals served distinct population groups in the country.

San José is the capital of Costa Rica. Located in the Central Valley it has a population density of 1,100,000 habitants with a total population of 4.5 million habitants.

In Costa Rica, the Calderon Guardia Hospital has 340 beds, 22 for Gynecology, 22 for Obstetrics and 22 for neonates. The San Juan de Dios has 731 beds, of which 30 for Gynecology, 72 for Obstetrics and 27 for neonatal care. The Mexico Hospital has 531 beds, of which 24 for Gynecology, 54 for Obstetrics and 32 for neonatal care. And the Women's Hospital has 104 beds, of which 22 for Gynecology, 52 for Obstetrics and 30 for neonatal.

In the country, 77,697 deliveries (CCSS,2007) of which 6,926 are from Calderon Guardia, 6,732 from San Juan de Dios, 4,898 from Mexico and 7,464 from Women's Hospital-Carit. 21% cesarean rate for the country and a 11.9 mortality rate per 100,000 LB, and 10.14 rate for infant mortality per 1000 births.

Main causes of maternal mortality in CR are hypertension during pregnancy, third trimester and postpartum bleeding, infections diseases. In the US are tromboembolic disorders during pregnancy, hypertension and first trimester complications.

In the United States, four residency programs in four distinct communities will be hosting the exchange. The MSU-CHM Affiliated ObGyn Residency Network supports a community based partnership program in partnership with four community campuses across the state including Flint at Hurley Medical Education, Saginaw at Synergy Medical Education Alliance, Grand Rapids through the Grand Rapids Medical Education and Research Center, and Lansing through the ObGyn Residency Program at Sparrow Hospital and Michigan State University.

The resident in Costa Rica will have the opportunity to rotate across the four hospitals by going through the first level of primary care, through the second and the tertiary level (hospitals).

At Sparrow 4,500 births a year, at Grand Rapids 8,500 births a year. Cesarean rate of 31% each.

The resident will be at one of the four residency programs located across Michigan. The specific location will be determined based on the resident interest.

4. Specific goals and objectives:

Some unique goals to this international experience include but are not limited to the following:

4.1 Medical Knowledge and Patient Care

- Leading causes of maternal and infant morbidity and mortality and how are they impacted by the health care system: residents will learn about common causes of morbidity and mortality in low resource settings and will experience first hand the use of significant local strategies to increase health outcomes. The resident will be able to compare with those in the United States.
- Exposure and management of obstetrical and gynecological scenarios using local resources and applying principles of evidence-based decision making and problem solving. Some scenarios might include active management of labor and delivery, basics of evidence based-medicine teaching (curricular)
- Witness surgical skills in resource poor setting which will provide the resident with experience on developing surgical skills with limited technological resources.
- To understand cost-effectiveness strategies to diagnostic testing and develop clinical diagnoses with low diagnostic resources.

4.2 Public Health/Epidemiology

Understanding of Health Disparities. The resident will be able to develop the knowledge and attitudes for culturally competent care in low resource settings and apply this knowledge to clinically underserved communities in the US, with the appropriate culturally sensitive care and support.

- To understand the epidemiology, trends and major health issues in the country vs. those in developed (or developing) countries.
- To understand the main socioeconomic and political determinants of health and how they impact women's health and health care access in comparison to the home country.
- To identify and understand the major governmental and/or non-governmental organizations involved in the delivery of health care in the country and its effectiveness in health care delivery and outcomes.
- To understand the impact of environmental factors on the maternal and infant mortality and morbidity, including potable water supply, food safety, sanitation, air quality, and air pollution.
- Exposure to global health ethics through unique clinical circumstances and scholarly activities.
- To become familiar with health promotion and disease prevention strategies regarding women's health, locally developed and implemented.

4.3. Specific populations

To understand health issues and health policies concerning immigrant populations in the country.

- To understand current local issues regarding adolescent pregnancy and locally developed prevention programs.

4.4 Collaboration

Work collaboratively with health care team members to assess and coordinate patient health practices in settings with limited resources (or with limited health care access, such as in the US)

- To build and establish short and long term professional collaborations in the country.

4.5 Research collaboration

- Develop an understanding of local research needs and how they can create international collaborations between the two countries.
- Develop a clear understanding of local IRB requirements and procedures.
- To understand practical applications of medical research ethics with special attention to challenges of medical research in underserved populations or in developed countries.

4.6 Interpersonal skills and communication

- To learn to effectively communicate with patients and families with different cultural background and language.
- To effectively exchange information, work and partnering with professional colleagues and coworkers in a different cultural setting.
- To become aware of effective communication skills and approaches for the delivery of health care and promotional material in local groups.

4.7 Professionalism

To demonstrate professional behavior with local staff and colleagues and be respectful of differences in knowledge level and local clinical practices.

- To understand how cultural differences and local health care delivery practices can conflict or complement one another.
- To understand the local ethical standard and review process involved in human subjects research.
- To become aware of the role of foreign health professionals in the medical systems of developing or developed nations.

5. Time of the year and Duration

The rotation will take place during the Fall or Spring. The rotation will last for 4 weeks. The first rotation will start in the Spring of 2010 with one resident coming from Costa Rica.

6. Selection criteria:

- Third or fourth year resident in the ObGyn program.
- A proficiency level of Spanish or English
- Valid passport
- Valid US visa (for Costa Rican residents only)

7. Requirements

- Two letters of recommendation from faculty members or mentors.
- Current curriculum vitae
- A brief personal statement (2 pages maximum) describing previous similar experiences, personal qualities and how the program will help you in your clinical practice.

8. Cost to individual residents:

Exchange residents will be responsible for expenses caused during their stay at the host institution, including international and local transportation, travel insurance, food and lodging and liability insurance if applies. Residents will pay normal tuition fees to their home university for the period of the exchange. Each host institution agrees to exempt the visiting exchange residents from the partner institution from tuition payment, per semester, during the term of this Agreement since there is no credit associated with this observational clinical experience.

9. Number of residents participating per experience

Only one resident at a time will be participating in the program.

10. Mentors and Faculty involvement

The resident will be mentored by one of the assigned faculty members in the community.

11. Evaluation

A standardized evaluation of the participating resident will be conducted by the assigned mentor in each country. A mid-term evaluation will be expected with the rotation supervisor and/or mentor. The evaluation will be based on the following criteria:

Clinical Knowledge: Interpretation of clinical data; problem definition; handling and understanding of diagnoses; quality of lecture presentation

Professionalism: Attitude towards patients; Attitude towards clinical staff, responsibility; self-learning; professional ethics.

Global Competency measured by research activities, professional networking and the establishment of future collaborations.

Also, the visiting resident is expected to give an oral presentation to the host institution and the home institution. The topic at the host country will be discussed ahead of time between the visiting resident and the mentor at the host institution. Upon his/her return to the home country, the resident will provide an oral presentation on the outcomes and experiences of the rotation at the foreign country.

Project Evaluation

An evaluation of the exchange experience will be done after the first completed exchange has been completed, once the residents from each country go through their rotations.

12. Lodging

In Michigan, lodging options will be identified once the Costa Rican resident chooses the community where he/she decides to do his/her rotation. Lodging options will be discussed with the resident going to Costa Rica before the start of the rotation.

13. Immigration requirements

Immigration procedures will be followed via the advice and guidance of the Office of International Studies and Programs at MSU in collaboration and constant communication with the Office of International Affairs in the community where the resident will be rotating.

14. Health insurance

Residents must have a current health insurance policy. The cost of the insurance will be covered by the resident.

15. Contact information

Applicants must contact their Residency Program Director to verify eligibility. The application information will be distributed annually through the participating departments.

If you are interested in applying and need more information, please contact the Division of Medical Education at the Department of Obstetrics, Gynecology and Reproductive Biology at Michigan State University.

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