

## Evaluation Form

Practices may wish to evaluate and document the competences of the APPs in their office. This *Training Guide Evaluation Form* has been developed to provide a systematic approach to a competence-based assessment. The evaluation has been divided into two levels:

- Level One – APP is new to urogynecology (up to 2 years’ experience)
- Level Two – APP has experience working in a gynecologic/urogynecologist practice (2 plus years’ experience) When **Level Two** is completed, APP would be managing interactions independently, accessing consultation at the discretion of the APP, and/or in accordance with individualized practice guidelines and state-specific regulatory statutes. An APP that has achieved Level Two would focus on maintaining Urogynecology-focused Technical Skills by attending related educational meetings/courses.

<b>LEVEL ONE</b>	
(APP is new to urogynecology, and shadowing mentors and/or co-examining and co-managing patients.)	
<b>Competency</b>	<b>Date Achieved/Initials</b>
Describe basic abdominal, pelvic, and pelvic floor anatomy, and distinguish abnormal Findings.	
Describe basic normal lower urinary tract and pelvic floor physiology and functional anatomy.	
Describe pathophysiology of stress urinary incontinence (SUI), overactive bladder/urgency urinary incontinence (OAB/UUI), neurogenic lower urinary tract dysfunction, and pelvic organ prolapse (POP).	
Describe risk factors, symptoms, expected physical exam findings for SUI, OAB/UUI, POP.	
Identify resources to inform clinical urogyn questions (texts, online tools and websites).	
Obtain comprehensive urogynecology history from women who report lower urinary tract and pelvic floor symptoms at both new and return visits, including assessment of quality of life and symptom bother.	
Perform advanced pelvic and external genitalia examination including neurologic components, POP-Q examination, perineal skin assessment, pelvic muscle evaluation for integrity, function and pain, and vaginal and/or rectal examination as appropriate.	
Assess for contributing factors to incontinence, including cognition and mobility.	
Perform basic bladder function assessment including uroflow interpretation, post void residual (straight catheter and ultrasound scanner), and appropriate testing for urinary tract infection and hematuria.	
List abnormal findings related to pelvic floor symptoms that would indicate need for urgent referral (e.g. unexplained weight loss, bleeding, acute pain, atypical findings).	
Formulate basic differential diagnoses for pelvic floor conditions.	
Interpret findings and describe basic management options to women with varied levels of education and understanding.	
Formulate an initial management plan for uncomplicated pelvic floor disorders, working.	



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with each woman to incorporate her values and preferences, and reviewing options at a basic level (behavioral, physical therapies, devices, surgeries).	
Provide education related to specific lifestyle (dietary, fluid, weight) and behavioral treatments to women with OAB/UUI, SUI, and POP.	
Provide evidenced-based dietary and behavioral treatment counseling regarding constipation and bowel dysfunction.	
Describe basic pharmacologic management for women with OAB/UUI, SUI, and POP.	
Demonstrate ability to use setting's medical record, including problem lists/coding, visit documentation, order entry and result retrieval and follow-up.	
Demonstrate basic understanding of cost-effective care.	
Utilize appropriate terminology to describe pelvic floor function.	
<b>LEVEL TWO</b>	
(APP is ready to see women without direct oversight but may be reviewing select cases with a mentor.)	
<b>Competency</b>	<b>Date Achieved/Initials</b>
Demonstrate basic knowledge of abnormal lower urinary tract and pelvic floor anatomy and physiology.	
Assess bowel dysfunction (stool and symptom history, physical examination, any indicated laboratory testing or imaging, differential diagnosis).	
Demonstrate ability to perform or interpret complex urodynamics, anal manometry, pelvic floor physical therapy and biofeedback.	
Demonstrate ability to interpret common laboratory results (urine microscopy, urine and vaginal yeast culture and sensitivity, pathology reports) and imaging results.	
Demonstrate application of basic surgical principles, including informed consent, universal precautions, aseptic technique, and handling of tissue biopsies.	
Formulate comprehensive patient-centered management plans for women with common comorbidities (e.g. hypertension, diabetes, obesity, mobility-impairment, anxiety/ depression).	
Formulate comprehensive patient-centered, management plans with women with recurring or chronic pelvic floor disorders.	
Describe general algorithms for management of higher-risk findings (e.g. asymptomatic microscopic hematuria, gross hematuria, refractory OAB, underactive bladder/incomplete bladder emptying/urinary retention, chronic constipation, pelvic pain syndromes).	
Discuss treatment options, risks and benefits with women and their families, guiding formulation of realistic initial treatment goals and correlated management options.	
Analyzes and interprets routine and advanced diagnostic and imaging tests. Formulates a differential diagnosis based on a comprehensive genitourinary assessment, knowledge of age and age-related changes, potential roles of polypharmacy and drug adverse effects, and comorbidities affecting lower urinary tract and pelvic floor function.	



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<b>Counsel</b>	
	<b>Date Achieved/Initials</b>
Provide education on behavioral strategies to women with OAB/UUI, SUI, and POP.	
Provide pre- and post-operative counseling.	
Describe pharmacologic treatment options for women with pelvic floor disorders complicated by multiple medication use.	
Determine need for consultation, referral, or transfer of women with complex pelvic floor disorders, adverse responses to treatment, or comorbidities.	
Monitor own practice outcomes to improve practice.	
Participate in patient-safety tracking/quality improvement projects and systems analysis.	
Incorporate cost awareness into clinical decision-making (formulary and generic drugs, tailored diagnostic tests).	