What are you looking for specifically in an impressive candidate?

We are looking for outstanding evaluations of the rotations during clerkship, especially in obstetrics and gynecology. The perfect candidate needs to be able to work in a team and to adapt easily to different situations. Judgment, motivation and perseverance are also qualities that we look for. The candidate also needs to have a good balance between his or hers professional and personal life.

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

Show interest in the specialty and stand from the crowd during his or hers clerkship rotation. Do at least one elective in obstetrics and gynecology. Research.

How is your residency program organized?

Every year, the resident usually does a 2- or 3-months rotation in obstetrics and 2- or 3-months rotation in gynecology. However, the program is very flexible to accommodate the resident’s interests. Hence, the resident can choose to substitute one or more rotation within this established framework.

PGY-1

NICU 1 month
Emergency 1 month
General Surgery 1 month
ICU 1 month
Ambulatory Clinic 1 month
Genetics 1 month
Introduction to Surgery 1 month
Rural (Iles de la Madeleine) 1 month
Obstetrics 3 months
Gynecology 2-3 months
PGY-2
Obstetrics 3 months
Gynecology 3 months
Suggested Electives (x6):
Gynecology Oncology
Breast Diseases Clinic
Ambulatory Clinics
Genetics
Family Planning
Research
Rural Rotation (Îles de la Madeleine or other)

PGY-3
Ultrasound 3 months
Rural Rotations (usually Trois-Rivières or other as desired) 3 months
Gynecology 3 months
Obstetrics 3 months

PGY-4
Reproductive Endocrinology 3 months
Obstetrics 3 months
Gynecology 3 months
Options (usually colposcopy) 3 months

PGY-5
High Risk Pregnancy 3 months
Gynecology Oncology 3 months
Gynecology 6 months

What is your residency program’s orientation and focus?
Development of technical abilities and focus on clinical exposition.

What is the availability of experiences in subspecialty areas during training?
As you have read in the detailed description of the program above, we are exposed to many subspecialties including gynecology oncology, high risk pregnancy and reproductive endocrinology... Furthermore, we have good exposition in urogynecology, laparoscopic procedures and adolescent gynecology due to the specific interests of some of our attending staff.

What is the typical day in the life of a resident?
The day usually starts around 8 AM, with the exception of gynecology or gynecology oncology where the day starts around 6:30 or 7 AM.

We have courses by staff or residents once at twice a week from 7:15 to 8:00 am.

We also have a half-academic day of courses by staff and residents on Wednesday afternoon.
The call schedule starts at 5 PM.

There are home calls in gynecology in two of our centers and in house calls in obstetrics. For house calls, the resident may take his post call day at his discretion if he has been called to go to the hospital in the middle of the night and has not had 6 consecutive hours at home.

In regards to the IN house calls, the schedule respects a maximum of 16h per day and usually follows this pattern: 17h to 23h is covered by a different resident each evening (no pre or post call day); one resident is on call at night (23h-8h) from Monday to Thursday and has pre and post call days; during week-ends, a resident is on call between 8-20h on Saturday and Sunday (no pre or post call day). Another resident covers for the nights on Friday (23h-8h), Saturday and Sunday (8h-20h) and has Friday and Monday off.

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

We think so. See the opportunities for options in the program description above. As mentioned in the program description, the program is very flexible.

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

The call schedule starts at 5 PM and you can do either home calls (in gynecology) or in house calls (in obstetrics). For the in house calls, you MUST take your post call day. For house calls, the resident may take his or her post call day at his or her discretion if he or she has been called to go to the hospital in the middle of the night and has not had 6 consecutive hours at home.

If you are doing outside program rotations, you might have to do calls in this specialty (like in surgery or ICU).

**What distinguishes your program from the other programs?**

Early exposure to gynecological surgeries, research exposure, and flexibility of the program.

**What distinguishes your city from others?**

It is an attractive city with many festivals and great history. It is not too big (no traffic!), but just big enough to make it interesting to live in. It is a safe city. Life is relax. There are many outdoor activities to be done. And of course, the main spoken language is French.

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

For the year 2013-2014, there were 60 applicants in our program and 45 were asked for an interview. There were 6 spots to be filled for 2013-2014.

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

The completion of a research project is mandatory during residency. Support is offered. There is one attending that is responsible to help residents with their research project.
What local, national or international conferences would benefit candidates interested in your residency program?

The 2 main conferences where students can get noticed are: AOGQ and SOGC. They can also come to our annual department meeting (“Journées annuelles du department”).

Where can we look for more information?

Sec.gyneco@crchul.ulaval.ca

Tel: (418) 654-2738 Fax: (418) 525-4281

Website: http://w3.fmed.ulaval.ca/postmd

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

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