Clinical training whilst pregnant

This statement has been approved by the Training Accreditation Committee and the RANZCOG Board and Council.

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Disclaimer This information is intended to provide general advice to practitioners. This information should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient. This document reflects emerging clinical and scientific advances as of the date issued and is subject to change. The document has been prepared having regard to general circumstances.

First endorsed by RANZCOG: July 2014
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Objectives: To provide advice regarding strategies that will facilitate training for pregnant women and parents who wish to become specialists in obstetrics and gynaecology (O&G).

Target audience: Trainees, prospective trainees, training supervisors, consultants and accredited training sites.

Background: This statement was first developed by the Training Accreditation Committee in June 2014 and most recently reviewed in July 2017.
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1. Summary of recommendations

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<tr>
<th>Recommendation 1</th>
<th>Grade and reference</th>
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<tbody>
<tr>
<td>RANZCOG encourages all pregnant trainees, once they are comfortable with making this knowledge public, to discuss the implications of this on their training with their Training Supervisor.</td>
<td>Consensus-based recommendation</td>
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<tr>
<th>Recommendation 2</th>
<th>Grade and reference</th>
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<tr>
<td>Trainees are advised to consult the relevant RANZCOG Regulations in order to understand the possible effects of absences from work on their training requirements.</td>
<td>Consensus-based recommendation</td>
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<th>Recommendation 3</th>
<th>Grade and reference</th>
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<tr>
<td>If a trainee perceives, or it is perceived by others, that the pregnancy is adversely affecting their clinical performance, they are encouraged to discuss this with their employer as soon as possible.</td>
<td>Consensus-based recommendation</td>
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<th>Recommendation 4</th>
<th>Grade and reference</th>
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<td>It is incumbent upon pregnant trainees to familiarise themselves with workplace policies and Occupation Health and Safety protocols relevant to the various tasks related to their work, and to seek clarification or any additional information by contacting appropriate officers at their place of employment.</td>
<td>Consensus-based recommendation</td>
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<th>Recommendation 5</th>
<th>Grade and reference</th>
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<tr>
<td>With regard to College examinations and other College requirements, special consideration is available to candidates. Pregnancy alone is not covered under this clause, unless there has been a severe complication with acute onset just prior to or during an examination.</td>
<td>Consensus-based recommendation</td>
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<th>Recommendation 6</th>
<th>Grade and reference</th>
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<td>The physical, professional and emotional demands during training can be exhausting and may be amplified by pregnancy. It is important to find mutually acceptable solutions that are workable for the pregnant trainee, their families and colleagues.</td>
<td>Consensus-based recommendation</td>
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2. Introduction

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) supports the choice of pregnant women and parents who wish to become specialists in obstetrics and gynaecology (O&G) and to participate in the O&G workforce. RANZCOG has developed a number of strategies that will facilitate training for pregnant women and parents, both mothers and fathers.
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3. Discussion and recommendations

3.1 What are the strategies that facilitate training for pregnant women and parents?
These strategies include: part-time fractional training (between 0.5 and 1.0 full time equivalent (FTE); extended leave of absence (including parental leave); and training credit for training blocks of 10 weeks FTE or more. Trainees are advised to consult the relevant RANZCOG Regulations in order to understand the possible effects of absences from work on their training requirements.

RANZCOG encourages all pregnant trainees, once they are comfortable with making this knowledge public, to discuss the implications of this on their training with their Training Supervisor. Considerations may include modifying work hours, organising the timing and length of leave, planning to enable blocks of training time to be credited and the potential effects that the physical demands of pregnancy may have on their training and clinical service responsibilities.

The College is not an employer and as such, matters pertaining to conditions of employment are a matter of employer-employee relationships in the relevant jurisdiction. The College supports the concept of a conversation between the person seeking accommodation of their needs and the individuals or organisations in a position to provide for these needs. The conversation is based on a mutually respectful relationship that helps the two parties:

- Determine what barriers might affect the person requesting accommodation;
- Explore options for removing those barriers; and
- Accommodate to, but not beyond, a point of undue hardship for colleagues or the employer.¹

3.2 Is it obligatory for a trainee to inform their employer of pregnancy?
From an employment perspective, it is not obligatory for a trainee to inform their employer of pregnancy, or pregnancy plans, however early notification will assist planning for clinical service provision within the relevant health service. There are benefits to both parties if this takes place earlier rather than later.² If a trainee perceives, or it is perceived by others, that the pregnancy is adversely affecting their clinical performance, they are encouraged to discuss this with their employer as soon as possible.

3.3 Where can I find more information?
It is incumbent upon pregnant trainees to familiarise themselves with workplace policies and Occupation Health and Safety protocols relevant to the various tasks related to their work, and to seek clarification or any additional information by contacting appropriate officers at their place of employment. Likewise, if a trainee feels that they are being exposed to any risk as a result of their employment; prompt discussion with their employer is advised. Pre-pregnancy, pregnancy and postpartum guidelines for both employer and employee have been produced by the Physician Health Program of British Columbia.²

3.4 Am I eligible for special consideration?
With regard to College examinations and other College requirements, special consideration is available to candidates. This may include difficulties involving examination preparation and/or performance at a College examination where the candidate has been hampered by illness or other causes to a substantial degree. Pregnancy alone is not covered under this clause, unless there has been a severe complication with acute onset just prior to or during an examination. Candidates with chronic or pre-existing illnesses
are expected to defer their examinations until such time that they are confident that their exam preparation and/or performance will not be adversely affected.

The physical, professional and emotional demands during training can be exhausting and may be amplified by pregnancy. It is important to find mutually acceptable solutions that are workable for the pregnant trainee, their families and colleagues. Pregnant trainees who find that they need assistance to balance all the competing responsibilities in their life are encouraged to bring their concerns to the attention of their Training Supervisor with consideration for professional counselling and/or other workplace support if required.
4. References


5. Links to other College statements

Fatigue and the Obstetrician Gynaecologist (WPI 18)
Appendix

Full Disclaimer
This information is intended to provide general advice to practitioners, and should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient.

This information has been prepared having regard to general circumstances. It is the responsibility of each practitioner to have regard to the particular circumstances of each case. Clinical management should be responsive to the needs of the individual patient and the particular circumstances of each case.

This information has been prepared having regard to the information available at the time of its preparation, and each practitioner should have regard to relevant information, research or material which may have been published or become available subsequently.

Whilst the College endeavours to ensure that information is accurate and current at the time of preparation, it takes no responsibility for matters arising from changed circumstances or information or material that may have become subsequently available.