



European Federation of Colposcopy Training Curriculum Core Competencies: A Delphi consensus study

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INTRODUCTION

In 2000 a list of 51 core competencies required for colposcopic practice was determined by experts from 21 countries through a Delphi study.

In view of changes in colposcopic practice that have occurred over the past decade and the expansion of the European Federation of Colposcopy (EFC), the decision was made for a review of the contents of the training curriculum and to repeat the Delphi study in order to gain approval for any changes from the EFC membership.

METHODS

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In view of changes in colposcopic practice that have occurred over the past decade and the expansion of the European Federation of Colposcopy (EFC), the decision was made for a review of the contents of the training curriculum and to repeat the Delphi study in order to gain approval for any changes from the EFC membership.

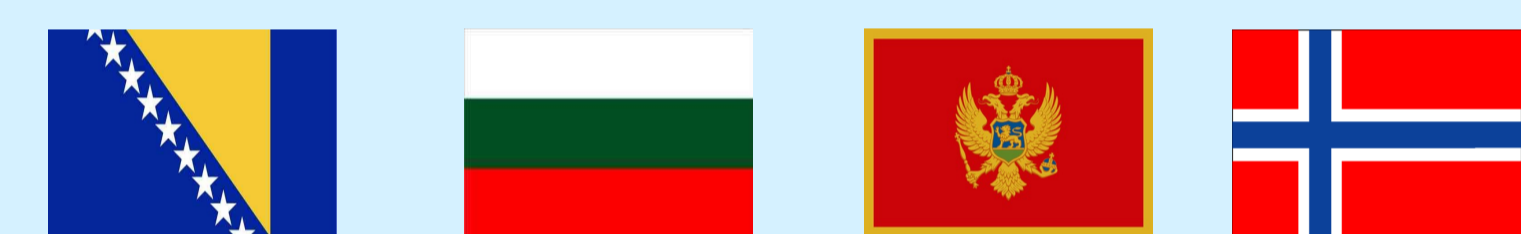
Members



Associate members



Potential members



RESULTS

• Responses were received from 28 (93%) EFC members, 4 (80%) EFC associate members and 2 (50%) potential member countries.

General	Members	Members and Associate members	All
Understand the development of cervical neoplasia	5	5	5
Ensure that practice complies with health and safety recommendations	5	5	5
Manage patients within EFC guidelines	5	5	5
Provide adequate information prior to colposcopy	5	5	5
Answer questions about management	5	5	5
Communicate with other health professionals	5	5	5
Understand national cervical screening guidelines	5	5	5
Be able to communicate results in a sensitive manner	5	5	5
Provide data to national body	4	4.5	4.33

Basic examination	Members	Members and Associate members	All
Be able to take a history	5	5	5
Examine the vagina	5	5	5
Examine the vulva	5	5	5
Position and adjust the colposcope	5	5	5
Be able to position a patient for colposcopy	5	5	5
Be able to insert a vaginal speculum	5	5	5
Use endocervical speculum	5	5	5
Document colposcopic findings	5	5	5
Provide adequate information after colposcopy	5	5	5

Colposcopic procedure	Members	Members and Associate members	All
Perform cervical sampling (including cytobrush)	5	5	5
Perform bacteriological swabs	4.1	4.75	4.35
Examine the transformation zone with acetic acid	5	5	5
Perform Schiller's and iodine test	5	5	5
Examine the transformation zone with saline and green filter	5	5	5
Quantify and describe acetic acid changes	5	5	5

Colposcopic findings	Members	Members and Associate members	All
Determine whether colposcopy is satisfactory or not	5	5	5
Determine the type of transformation zone (1,2,3)	5	5	5
Recognise the extent of abnormal epithelium	5	5	5
Recognise original squamous epithelium	5	5	5
Recognise columnar epithelium	5	5	5
Recognise metaplastic epithelium	5	5	5
Recognise congenital transformation zone	5	5	5
Recognise minor colposcopic changes	5	5	5
Recognise major colposcopic changes	5	5	5
Recognise features suggestive of invasion	5	5	5
Recognise abnormal vascular patterns	5	5	5
Recognise changes associated with previous treatment	5	5	5
Recognise the effects of pregnancy on the cervix	5	5	5
Recognise features of a postmenopausal cervix	5	5	5
Recognise acute inflammatory changes	5	5	5
Recognise VaIN	5	5	5
Recognise VIN	5	5	5
Recognise benign cervical polyps	5	5	5
Recognise condyloma plana	5	5	5
Recognise condyloma accuminata	5	5	5

Biopsies and treatment	Members	Members and Associate members	All
Obtain informed consent for performing a procedure	5	5	5
Be able to administer local analgesia	5	5	5
Determine where to take directed biopsies	5	5	5
Perform directed cervical biopsies	5	5	5
Perform directed vaginal biopsies	5	5	5
Perform directed vulval biopsies	5	5	5
Control bleeding from biopsy sites	5	5	5

• Of the 51 competencies previously identified only 2 did not receive support to be included in the revised curriculum: 'perform bacterial swabs' and 'provide data to national body'.

• There was no significant difference in the responses given by member, associate member or potential member countries.

DISCUSSION

This Delphi consultation has utilised the expert opinion of senior colposcopists in order to gain consensus opinion from 34 countries on the contents of the EFC core curriculum.

The final outcome can be concluded as being representative of the views of the member, associate member and potential member countries and is a constructive step towards optimizing colposcopy training throughout Europe.

CONCLUSIONS

The revised curriculum has a mandate from the EFC member countries to be implemented across Europe as the standard for colposcopic training.