Written report NFOG Fund 2018 (NF18023)

I had the pleasure of attending the “Comprehensive Colposcopy Course” in Atlanta, Georgia in oktober 2018. It was a 4-day course, with classes from 8 AM to 5 PM. The course run 2 times a year, and it is very well organized by ASCCP.

The program differs from master classes for all participants to patient-based small classes with many examples where we all were tested in the theoretical subjects learned earlier. The participants of the course were a mix of nurse practitioners and physicians. Some had very little experience in colposcopy and others were very experienced, but in need of a brush-up. The teachers were all experienced in their field of knowledge, some more practical and others more academically, but they all had many patient cases to refer to and were all inspirational teachers. All the lectures were available electronically and have outstanding galleries of all cervical normalities and abnormalities.

The most recent ASCCP Consensus Guidelines is the base of the course, and this guideline is very similar to the Danish guidelines in cervical pathology. The greatest difference in treatment between Danish and American women is because of the American private health insurance.

The first day of the course, the themes were: “The normal cervix”, “Epidemiology of HPV”, “Screening program” and basic knowledge on colposcopy equipment and procedure. The second day, the themes were: “Abnormal transformation zone”, “ASC-US/LSIL/CIN1” and “HSIL/CIN2,3”. The third day, the themes were “Warning signs of cervical cancer”, “Cervical treatment”, “Cervical cancer risk and preventions in immunocompromised populations” and “Colposcopy in pregnancy”. The last day the themes were “Pre-malignant and malignant diseases of the vagina”, “Benign conditions of the vulva and condyloma” and the course ended with testing our colposcopic skills. At the end of every day, there were breakout sessions into smaller groups, with teaching of practical skills and a lot of galleries of images to illustrate the theory and to test our knowledge.

All together the course is very systematic and thorough. In Denmark we could learn from this systematic approach in teaching colposcopy, and we should consider teaching our residents and nurse practitioners’ the same way.

I thank the NFOG Fund for financial support to participate in this inspirational course on colposcopy.

Yours Sincerely
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