Our purpose was to train residents in performing gynecologic surgical procedures using a patient simulator and papaya model. Some training institutions have used papayas, cantaloupes or other fruits as uterine models for practice of various surgical procedures. We proposed to further the realism of this design and take advantage of this learning tool in combination with our institution's innovative patient simulator lab to better represent actual gynecologic patients and surgical procedures.

At ETSU, we currently have several simulator models which we employ in a variety of training scenarios and simulations. One of these, the NOELLE™ Birthing Simulator (Gaumard Scientific Company), represents an obstetric/gynecologic patient, allowing our faculty, residents, and students to participate in procedures and scenarios specific to our field.

Resident participants of all training levels have undertaken this simulation. Residents found the educational experience to be valuable and an effective teaching tool which prepared them for and realistically simulated actual surgeries on human patients.

This papaya model enables the learning curve to rapidly increase in a controlled setting, with unlimited "patients" and time. This allows interns and even students to act as primary surgeon in a practical experience not typically provided at their levels of training. It is well-suited for increasing the learner's familiarization with the techniques and instrument-ation of the simulated procedures.

We agree with Paul and Nobel's suggestion "that simulation is an effective first step in teaching uterine aspiration procedures." The simulation provides an accurate surgical experience with the potential for competency evaluation and pre- and post-procedure testing and safety analysis. The risks involved with live patients and the costs associated with a real-time operating room, staff, anesthesia, and instruments are avoided.