

Obstetrics & Gynaecology

Departmental Objectives

At the end of the course of obstetrics & gynaecology the undergraduate medical students will be able to:

- provide proper care in managing women's health including pregnancy, labour and puerperium and to ensure maternal and neonatal health and well being and give proper advices.
- diagnose and manage patients with common obstetrical and gynaecological problems.
- describe the basic concept of Counselling and counsel the women in the field of Obstetrics and Gynaecology.
- refer high risk cases appropriately.
- resuscitate new born babies and impart proper care.
- initiate & promote infant & young child feeding practices including exclusive breast feeding
- demonstrate appropriate attitude required to practise obstetrics and gynaecology.
- demonstrate an understanding about the impact of socio-cultural beliefs and environmental factors on women in pregnancy, labour and puerperium including their overall reproductive health.
- counsel and motivate women about contraception and family planning, and women's right.
- be acquainted with ongoing programme to reduce maternal mortality & morbidity.
- value the ethical issues in obstetrics and gynaecology.

List of Competencies to acquire:

- History taking, communication skill, obstetrical examination, gynaecological examination.
- Diagnosis of common clinical problems
- Preparation of a patient before anaesthesia
- Writing a discharge certificate after
 - Normal delivery
 - Caesarean section
 - D & C
 - Evacuation of mole
 - Hysterectomy
- Care of antenatal patients
- Care of postnatal patient
 - Appropriate technique of breast feeding including position and attachment.
 - Demonstration of complementary feeding- amount, frequency, content of food
- Management of normal labour
- 1st stage, 2nd stage & 3rd stage (AMTSL)
- Skill about Episiotomy
- PPH management
- Management of Eclampsia
- Shock management
- Writing a BT order
- Blood transfusion note
- Insertion of a cannula
- Catheterization
- Drawing of blood
- Hand washing

- Wearing of gloves
- Identification of instruments/suture materials
- Trolley preparation for major & minor surgery

Distribution of teaching /learning hours

| Lecture | | Tutorial / Demonstration | Integrated Teaching | Total hours | Clinical bed side teaching in 3 rd & 4 th phase | Block placement | Formative Exam | | Summative exam | |
|--|-----------------------|-----------------------------|---------------------|-------------|---|-----------------|-------------------|-----------|-------------------|-----------|
| 3 rd Phase | 4 th Phase | | | | | | Preparatory leave | Exam time | Preparatory leave | Exam time |
| 30 hrs | 70 hrs | 85 hrs | 15hrs | 200 hrs | 16 weeks (8+8) | 4 weeks | 15 day | 15 day | 15 day | 30 day |
| <i>(Time for exam. preparatory leave and formative & summative assessment is common for all subjects of the phase)</i> | | | | | | | | | | |

Teaching/learning methods, teaching aids and evaluation

| Teaching Methods | | | | Teaching aids | In course evaluation |
|------------------------------|---|------------------------|------------|--|--|
| Large group | Small group | Self learning | Others | | |
| Lecture (video presentation) | Bed side teaching, Tutorials PBL (Problem based learning) OPD- teaching Teaching in Family planning clinic Demonstration in Operation theatre Demonstration in wards/ skill room (video presentation) Field side teaching | Assignment, Self study | Integrated | Laptop, Computer & Multimedia OHP, Transparency & Marker White board & Marker, Black board & chalks, Flip Chart, Slide projector Video, Dummy, Ultrasonography report, X-ray plate, View Box Model, Television, VCR, Cassette, Specimen, Analysis report | <ul style="list-style-type: none"> • Item Examination • Card final • Term Examination • Term final (written, oral+ practical+clinical) |

Final Professional Examination:

Marks distribution of Assessment of Obstetrics & Gynaecology

Total marks – 500 (Summative)

- Written =200 (Formative =20, MCQ=40, SAQ & SEQ=140)
- SOE=100
- Clinical=100
- Practical=100

Related Equipments/Instrument :

Forceps, Ventouse, Female bony pelvis & dummy foetus, Folley's catheter, Plain rubber catheter
Sponge holding forceps, Alli's tissue forceps, Artery forceps, Volsellum, Hegar's dilators,
Uterine sound & Currette, Sim's vaginal speculum, Cusco's speculum, BP blade with handle,
Dissecting forceps, Niddle holder, Suture materials
Contraceptives – OCP, Implanol, Injectable contraceptives, IUCD, Barrier methods.
MR Syringe with Canula

Core contents of Obstetrics:

Conception and development of fetoplacental unit

- (a) Fertilisation, implantation, fetoplacental unit, placental barrier
- (b) Placenta, amniotic fluid and umbilical cord: Development, structure and function

Anatomical and physiological changes during pregnancy

Diagnosis of pregnancy

Consulting in reproductive health:

Antenatal care

- (a) Counselling
- (b) Objectives, principles of antenatal care, identification of high risk pregnancy
- (c) Nutrition during pregnancy and lactation
- (d) Vomiting in early pregnancy

Normal labour

Assessment of Patients in labour.

- (a) Onset of labour
- (b) Stages, mechanism of normal labour
- (c) Management of normal labour
- (d) Diagnosis of stages and assessment of progress of labour
- (e) Partograph
- (f) Pain relief
- (g) Monitoring Progress of labour:

Foetal condition, Maternal conditions.

Normal puerperium

- (a) Anatomical and physiological changes during puerperium
- (b) Management of normal puerperium
- (c) IYCF -- Breast feeding & Complementary feeding

Hypertensive disorder in pregnancy including pre-eclampsia and eclampsia

Medical disorders in obstetrics

- (a) Anaemia in pregnancy
- (b) Urinary problems in obstetrics
- (c) Diabetes
- (d) Heart disease
- (e) Hepatitis

Ante-partum haemorrhage

Definitions, classification, clinical features, complications and management

Rh incompatibility and blood transfusion in Obstetrics

Multiple pregnancy

Definitions and types, clinical features, complications, diagnosis and principles of management

Malposition and malpresentation: causes and management

Types, causes, diagnosis, complications and management

Abnormalities of labour

- (a) Prolonged labour: Definition, aetiology, diagnosis, complications, management
- (b) Obstructed labour: Definition, aetiology, diagnosis, complications, management

Post-partum haemorrhage (PPH)

Definitions, causes (atonic, traumatic and others) of PPH, prevention and management, follow up.

Abnormal puerperium

Abnormal puerperium and management

The newborn

Resuscitation, examination and care of the newborn.

Definitions related to newborn

Neonatal problems

Birth Asphyxia

Jaundice

Infection

Feeding

Other problems of newborn

IYCF -- Breast feeding & Complementary feeding

IUGR & IUD

Causes, diagnosis and management

Obstetric operative procedures

perineotomy, caesarean section, vacuum and forceps deliveries, version, destructive operations: their indications and complications

Vital statistics:

Maternal morbidity & mortality

Perinatal morbidity and mortality

Neonatal morbidity & mortality

Diagnostic aids in obstetrics

(a) Ultrasonography

- Basics of ultrasound
- Role in obstetrics

(b) Fetal monitoring- CTG

(c) Amniocentesis and other prenatal diagnostic techniques

Social Obstetrics

(a) Maternal & perinatal morbidities and mortalities

(b) Direct causes of maternal & perinatal morbidity and mortality – Contributing socio-economic & environment factors

(c) Importance of family planning in prevention of obstetric problem

(d) Strategies for promotion of maternal health & prevention of illness emphasising maternal nutrition, hygiene & medical care

(e) National programs for MCH&FP, EOC, Combined service delivery

Core contents of Gynaecology

Anatomy of the female reproductive organs

- (a) Basic anatomy of uterus, ovaries, tubes, vagina and vulva
- (b) Relationship of uterus, ovaries, tubes and vagina to other pelvic organs
- (c) Developmental anomaly of genital organs

Physiology of reproduction

- (a) Puberty, menstruation, ovulation
- (b) Fertilisation and implantation

Bleeding in early pregnancy

- Abortion:
Definition, types, causes and management of all types of abortion and this complications.
- Ectopic pregnancy:
Definition, aetiopathology, clinical feature, differential diagnosis and abdomen of acute principles of surgical management
- Trophoblastic tumours:
 - (i) Hydatidiform mole: types, clinical features, complications, differential diagnosis, management and follow up.
 - (ii) Choriocarcinoma: diagnosis and management, follow up

Vaginal discharge

Physiological and pathological, Diagnosis and treatment.

Menstrual disorder

- (a) Amenorrhoea:
Types, causes and principles of management
- (b) Menorrhagia:
Definition, causes and management
- (c) Metrorrhagia:
Definition, causes and management
- (d) Dysmenorrhoea : Definition types, causes and management.
- (e) Dysfunctional uterine bleeding:
Definition, classification, diagnosis, principles of investigation and management

Genital tract infection

- (a) Defensive mechanism of genital tract
- (b) Pelvic inflammatory diseases: acute and chronic
- (c) Sexually transmitted diseases
- (d) Genital tuberculosis

Urinary incontinence – definition, types

- (a) Genitourinary fistula:-
Types, causes, clinical features, principles of management, prevention

Other genital tract injuries:

- (a) Perineal tear
- (b) RVF

Genital prolapse

Types, aetiology, clinical features, diagnosis, differential diagnosis, principles of management

Endometriosis

Definition, types, clinical features, principles of management

Neoplasia of reproductive organs

- Benign & malignant conditions of vulva & vagina
- Benign and malignant conditions of cervix
- Benign and malignant conditions of uterus
- Benign and malignant tumours of ovary

Infertility counselling

- (a) Causes, investigation and management both male and female partner.
- (b) Assisted reproductive techniques
- (c) Concepts of medical biotechnology in relation to Obstetrics

Contraception

Counselling

Importance of contraception: personal and national characteristics of ideal contraceptive, classification, mechanism of action, advantages, disadvantages, complications of all methods particularly sterilization and MR.

Menopauses

- (a) Definition, physiological basis, changes in different organs of body, clinical features of menopausal syndrome, principles of management
- (b) Post-menopausal bleeding
- (c) Hormone replacement therapy

Diagnostic Technique

- (a) Cervical smear
- (b) Laparoscopy
- (c) Hysteroscopy
- (d) Colposcopy
- (e) Ultrasonography

Principles of common gynaecological operations

Additional Contents

Obstetrics

- (1) Developmental structure of placenta
- (2) Antenatal foetal screening
- (3) Mechanism of onset of normal labour (theories)
- (4) Labour analgesia
- (5) Thromboembolism
- (6) Other hypertensive disorders
- (7) Pathophysiology of pre-eclampsia and eclampsia in details
- (8) Haemolytic anaemia
- (9) Nephritis and renal failure in obstetrics
- (10) Treatment of Rh incompatibility
- (11) Management of IUGR
- (12) Management of inversion of uterus

- (13) Diagnostic aids in obstetrics
 - (a) Ultrasonography
 - (b) Foetal monitoring-CTG
 - (c) Amniocentesis, CVS, MSAFP
 - (d) X ray

Gynaecology

- (1) Genital tuberculosis
- (2) Management of endometriosis - recent advances
- (3) Assisted reproductive techniques
- (4) Hormone replacement therapy
- (5) Diagnostic techniques
 - (a) Laparoscopy
 - (b) Hysteroscopy
 - (c) Colposcopy
 - (d) Ultrasonography
- (6) Hormonal disorders in gynaecology
- (7) STDS

Lectures in Obstetrics (4th Year)

| Content | | Lecture Hours (16) |
|---|--|--------------------|
| FIRST PHASE | | |
| 1. Conception and development of fetoplacental unit | | 1 hour |
| 2. Fertilisation, implantation, placental barrier | | 1 hour |
| 3. Placenta, amniotic fluid and umbilical cord: Development, structure and function | | 1 hour |
| 4. Anatomical and physiological changes during pregnancy | | 1 hour |
| 5. Diagnosis of pregnancy | | 1 hour |
| 6. Antenatal care | (a) Objectives, principles of antenatal care | 1 hour |
| | (b) identification of high risk pregnancy | 1 hour |
| | (c) Nutrition during pregnancy, lactation and Counseling on IYCF | 1 hour |
| | (d) Vomiting in early pregnancy | 1 hour |
| Evaluation | | 1 hour |
| SECOND PHASE | | |
| 7. Normal labour | (a) Def, Stages, mechanism of normal labour | 1 hour |
| | (b) Management of normal labour | 1 hour |
| 8. Normal puerperium | Physiology & Management | 1 hour |
| 9. Baby | (a) Examination and care of newborn baby | 1 hour |
| | (b) IYCF | 1 hour |
| Evaluation | | 1 hour |

Lecture contents in Obstetrics (5th Year)

| Content | | Lecture Hours |
|---|--|-----------------------------|
| FIRST PHASE | | |
| 1. Hypertensive disorder in pregnancy including pre-eclampsia and eclampsia | | 2 hours |
| 2. Medical disorders in obstetrics | (a) Anaemia in pregnancy (b) Diabetes (c) Heart diseases (d) UTI , Hepatitis, malaria & other | 4 hours |
| 3. RH incompatibility | | 1 hour |
| 4. Ante-partum haemorrhage | (a) Definitions, classification, clinical features, complications and management | 2 hours |
| 5. Multiple pregnancy | Types and definitions, clinical features, complications, diagnosis and principles of management | 1 hour |
| 6. Malposition and malpresentation: causes and management | | 3 hours |
| Formative Assesment | | 1 hour |
| SECOND PHASE | | |
| 7. Normal labour | <ul style="list-style-type: none"> • Review of what has already been taught • Diagnosis of stages and assessment of progress of labour • PARTOGRAPH • Pain relief • Foetal monitoring | 2 hours |
| 8 Induction of labour | | 1 hour |
| 9. Abnormal labour | (a) Prolonged labour: Definition, aetiology, diagnosis, complications, management (b) Obstructed labour: Definition, aetiology, diagnosis, complications, management (c) Ruptured uterus | 3 hours |
| 10. Post-partum haemorrhage (PPH) | Definitions, causes (atonic, traumatic and others) of PPH, prevention and management | 1 hour |
| 11. Puerperium | (a) Review of what has already taught (b) Abnormal puerperium and management | 1 hour 1 hour |
| 12. The new born | (a) IYCF --Breast feeding and complementary feeding (b) Management of asphyxia neonatorum (c) Jaundice & other problems in new born | 2 hours 1 hour 1 hour |
| Formative Assesment | | 1 hour |
| | | |

| THIRD PHASE | | |
|---|---|---------|
| 12. IUGR, Pre-maturity, Post-maturity & IUFD and their complication | | 3 hours |
| 13. Obstetric operative procedures | perineotomy, caesarean section, vacuum and forceps deliveries, version, destructive operations: their indications and complications | 2 hours |
| 14. Vital statistics: MMR and perinatal mortality and morbidity: Definitions & ethical obstetrics, MDG, EOC | | 2 hours |
| 15. Diagnostic aids in obstetrics and modern advances in obstetrics (a) Ultrasonography - Basics of ultrasound - Advantages of ultrasound - Role in obstetrics - Limitation (b) Foetal monitoring - CTG (c) Amniocentesis, CVS | | 2 hours |
| Formative Assesment | | 1 hour |

Learning Objectives and Course Contents in Obstetrics

| Learning Objectives | Contents | Teaching hours |
|---|---|-----------------|
| The student should be able to <ul style="list-style-type: none"> • define the common terms used in obstetrics • define conception, fertilization implantation, fetoplacental unit and placental barrier. | <ul style="list-style-type: none"> • Feto placental Unit : <ul style="list-style-type: none"> • Terms & definition • Fertilisation, implantation, fetoplacental unit, placental barrier | 2hrs |
| <ul style="list-style-type: none"> • mention development, structure & function of placenta. • describe the formation, circulation and function of amniotic fluid. • mention structural, function and development of umbilical cord. | <ul style="list-style-type: none"> • Placenta, amniotic fluid and umbilical cord: Development, structure and function | 1 hr |
| <ul style="list-style-type: none"> • describe the anatomical changes during pregnancy • describe the physiological changes of pregnancy | <ul style="list-style-type: none"> • Anatomical and physiological changes during pregnancy | 1 hr |
| <ul style="list-style-type: none"> • take history of early pregnancy • mention the early symptoms and signs of pregnancy | <ul style="list-style-type: none"> • Diagnosis of Pregnancy • Antenatal care | 1 hr 4 hours |
| <ul style="list-style-type: none"> • describe the characteristics of normal labour. • recognise each stage of labour • plot the events of labour on partograph and interpret the graph • describe the mechanism of labour • mention the management of each stage of labour | <ul style="list-style-type: none"> • Normal Labour – stages, Mechanism and management. | 2 hrs |
| <ul style="list-style-type: none"> • define pre-eclampsia, eclampsia, mention incidence, etiology, theories recognise complications and describe management | <ul style="list-style-type: none"> • Pregnancy induced Hypertension • Pre-eclampsia • Eclampsia | 3 hrs |
| <ul style="list-style-type: none"> • define APH, mention its causes understand the types of APH • differentiate between placenta previa and abruptio placentae • mention the complication of abruptio placentae including DIC. • manage the placenta praevia, abruptio placentae | <ul style="list-style-type: none"> • APH • Placenta previa • Abruptio placenta | 2 hrs |
| <ul style="list-style-type: none"> • define post-dated pregnancy, state etiological factors, diagnose post-dated pregnancy, list complications, manage post-dated pregnancy | <ul style="list-style-type: none"> • Post Dated Pregnancy | 1 hr |

| Learning Objectives | Contents | Teaching hours |
|---|---|----------------|
| <p>The student should be able to</p> <ul style="list-style-type: none"> define and describe, incidence, complications, diagnosis and management of anaemia, Diabetes in pregnancy , Hypertensive disorders and heart disease in pregnancy | <ul style="list-style-type: none"> Medical disorder in pregnancy :- a. Anemia b.Diabetes in pregnancy c.Hypertensive disorders d. Heart disease in pregnancy | 6hrs |
| <p>The student should be able to</p> <ul style="list-style-type: none"> define obstructed labour mention the etiological factors diagnose and manage the obstructed labour describe the complications of obstructed labour define prolonged labour differentiate prolonged labour from obstructed labour describe the complications manage the prolonged labour define the ruptured uterus mention the etiological factors and incidence diagnose and manage | <p>Abnormal labour:</p> <ul style="list-style-type: none"> Obstructed Labour Prolonged Labour Raptured Uterus | 3 hrs |
| <ul style="list-style-type: none"> define PPH list the types describe the causes of PPH describe the complications of PPH describe retained placenta diagnose and manage retained placenta diagnose and manage PPH. | <ul style="list-style-type: none"> PPH Retained placenta | 1 hrs |

| Learning Objectives | Contents | Teaching hours |
|--|--|----------------|
| <p>The student should be able to</p> <ul style="list-style-type: none"> • describe the common obstetric procedures • describe the role of these procedures in obstetrics • define and to differentiate it from trial of Labour • mention the types of induction • describe the indication and complication of each type of induction • define and know the types • describe the procedure of version • describe the indication and complications • describe the post version management • define and state the types and Episiotomy • explain the indication and procedure • describe the management • describe the complications • list the types • explain the indication and prerequisite and contraindications • describe the procedure • list the complications • write down the postnatal management | <p>Obstetric operative procedure:</p> <ul style="list-style-type: none"> • Induction of Labour • Version • Episiotomy /perineotomy • Forceps delivery | <p>2 hrs</p> |

| Learning Objectives | Contents | Teaching hours |
|---|--|----------------|
| <p>The student should be able to</p> <ul style="list-style-type: none"> • describe the ventouse extraction • mention the indications and contraindications • mention the advantages • describe the complications • give postnatal management • describe common obstetrics operations • mention the history & define LUCS • mention the different types • describe the indications • mention the steps of operation • describe the complications • write down the pre-operative and post-operative treatment. • describe the different types & perineal tear • diagnose and to manage the perennial tears • describe Cervical Tears • mention the etiological feature • diagnose and manage • mention the complications and its relations to PPH | <ul style="list-style-type: none"> • Ventouse • LUCS • Perineal tear • Cervical Tear | |

| Learning Objectives | Contents | Teaching hours |
|--|--|----------------|
| <p>The student should be able to</p> <ul style="list-style-type: none"> • describe the different destructive operations • mention the indication of each destructive operations • mention the pre-operative and post-operative management • describe the complication of each destructive operation • mention the role of destructive operations in modern obstetrics | <ul style="list-style-type: none"> • Destructive operations | 2hrs |
| <ul style="list-style-type: none"> • define and understand the normal puerperium • mention the anatomical and physiological changes in normal puerperium • describe the process of involution • manage the normal puerperium • describe the abnormal puerperium • mention the complications of puerperium • manage the abnormal puerperium | <ul style="list-style-type: none"> • Normal and abnormal puerperium | 1hrs |
| <ul style="list-style-type: none"> • describe the care of new born • mention the immunization schedule of new born care • mention the management of umbilical cord | <ul style="list-style-type: none"> • Care of New Born: | 1 hr |

| Learning Objectives | Contents | Teaching hours |
|---|---|----------------|
| <p>The student should be able to</p> <ul style="list-style-type: none"> • describe the diagnosis and in obstetrics • mention the principles of ultrasound • mention the role and advantages of ultrasonography in obstetrics • describe the indications of ultrasonography • mention the limitations • mention the principles of radiology • mention the role and advantages • describe its limitation in obstetrics • mention the different views of Radiology in obstetrics • define amniocentesis • mention the advantages • state the indications | <p>Diagnostic aid in obstetrics :</p> <ul style="list-style-type: none"> • Ultrasonography • Radiology • Amniocentesis, CVS | <p>2 hrs</p> |

Learning Objectives for Obstetrics

The student will be able to apply knowledge and understand of the following:

1. Normal pregnancy
 - Diagnosis of pregnancy
 - Antenatal Care
 - Screening for high risk pregnancy
 - Nutrition and Hygiene of a pregnant mother
2. Hypertensive disorders of pregnancy including pre-eclampsia, Eclampsia. APH, Rh incompatibility, IUGR, Multiple pregnancy, grand multiparity, pre-maturity, post maturity.
 - Definition
 - Aetiology
 - clinical presentation
 - Diagnosis
 - Management
 - Complication
 - Follow up of treatment.
3. Medical disorders in pregnancy (Anaemia, Diabetes, UTI, Heart disease, Jaundice, Tuberculosis & others)
 - Incidence of diseases
 - Natural history of diseases
 - Aetiology
 - Clinical presentation
 - Diagnosis
 - Management
 - Effect on pregnancy and vice versa
4. Normal labour –
 - Definition
 - Stages; mechanism
 - Diagnosis
 - Management
 - Partograph
5. Abnormal labour
 - Definition
 - Types
 - Diagnosis
 - Management
 - Follow-up

6. Puerperium:
 - Definition of normal puerperium
 - Anatomical and physiological changes
 - Management of normal puerperium
 - Post-natal care including general advice
 - Course of abnormal puerperium
 - Management of abnormal puerperium

7. New born:
 - Definitions related to newborn
 - Examinations and care of newborn
 - Resuscitations
 - Diagnosis and management of asphyxia, jaundice and neonatal infections
 - Feeding problems

8. Common diagnostic techniques Ultrasonography, Radiology, Foetal Monitoring and Amniocentesis, CVS
 - Uses
 - Advantages
 - Disadvantages

9. Obstetric procedures and operations:
 - Induction of labour
 - Version
 - Episiotomy
 - LUCS
 - Forceps delivery
 - Ventouse delivery
 - Destructive operations

10. Vital statistics and social obstetrics
 - Maternal & Perinatal mortality and morbidities
 - Causes of maternal and perinatal mortality and morbidities including socio-economic and environmental factors.
 - Method of calculating MMR, PNMR
 - National programs for MCH&FW, EOC,
 - Counseling –basic concepts and specific counselling in specific obstetric situations.
 - Ethical issues in obst. & gynae

Lectures in Gynaecology (4th Year)

| Content | | Lecture Hours |
|--|--|---------------|
| FIRST PHASE | | |
| 1. Anatomy of the female reproductive organs | (a) Basic anatomy of uterus, ovaries, tubes, vagina and vulva (b) Relationship of uterus, ovaries, tubes and vagina to other pelvic organs (c) Development & developmental anomaly of genital organs | 2 hours |
| 2. Physiology of reproduction | (a) Puberty, menstruation, ovulation (b) Fertilisation and implantation | 2 hours |
| 3. Formative Assesment | | 1 hour |
| SECOND PHASE | | |
| 4. Bleeding in early pregnancy | (a) Abortion Definition, types, causes and management of all types of abortion | 2 hours |
| | (b) Ectopic pregnancy Definition, aetiopathology, clinical features, differential diagnosis and principles of surgical management. | 1 hour |
| | (c) Trophoblastic tumours I. Hydatiform mole: types, clinical features, complication differential diagnosis, management and follow up. II. Choriocarcinoma: diagnosis and management | 1 hours |
| 4. Formative Assesment | | 1 hour |
| THIRD PHASE | | |
| 6. Vaginal discharge | (a) Physiological, vaginal discharge (b) Pathological and their management | 1 hour |
| 7. Menstrual disorder | (a) Amenorrhoea Types, causes and principles of management | 1 hour |
| | (b) Menorrhagia Definition, causes and management | |
| | (c) Metrorrhagia Definition, causes and management | 2 hours |
| | (d) Dysmenorrhoea | |
| | (e) Dysfunctional uterine bleeding Definition, classification, diagnosis, principles of investigation and management | 1 hour |
| 8. Formative Assesment | | 1 hour |

Lecture contents in Gynaecology (5th Year)

| Content | | Lecture Hours |
|--|---|----------------------------|
| FIRST PHASE | | |
| 1. Genital tract infection | (a) Defense mechanism of genital tract (b) Pelvic inflammatory diseases: acute and chronic (c) Sexually transmitted diseases including AIDS (d) Genital tuberculosis | 1 hour 1 hour 1 hour |
| 2. Urinary incontinence | (a) Definition, types (b) Genitourinary fistula: Types, causes, clinical features, principles of management, prevention | 1 hour 1 hour |
| 3. Genital tract injuries: | (a) Perineal tear (b) RVF (c) Vaginal stenosis | 1 hour |
| 4. Genital prolapse | Types, aetiology, clinical features, diagnosis, differential diagnosis, principles of management | 2 hours |
| 5. Formative Assesment | | 1 hour |
| SECOND PHASE | | |
| 6. Endometriosis | Definition, types, clinical features principles of management | 1 hour |
| 7. Neoplasia of reproductive organs | (a) Benign and malignant tumours of cervix Classification (fibroid, polyp, carcinoma cervix), clinical features, staging investigation, diagnosis, principles of management (b) Benign and malignant tumours of uterus (c) Benign and malignant tumours of ovary | 6 hours 3+2+1 |
| 8. Infertility | (a) causes, investigation and management both male and female partner (b) Assisted reproductive techniques | 2 hours |
| 9. Formative Assesment | | 1 hour |
| THIRD PHASE | | |
| 10. Contraception | Importance of contraception: personal and national characteristics of ideal contraceptive, classification, mechanism of action, advantages, disadvantages, complications of all methods particularly sterilization and menstrual regulation. | 4 hours |
| 11. Menopause | (a) Definition, physiological basis, changes in different organs of body, clinical features of menopausal syndrome, principles of management (b) Post menopausal bleeding (c) Hormone replacement therapy | 2 hours |
| 12. Diagnostic Technique | (a) Cervical smear (b) Laparoscopy (c) Hysteroscopy (d) Coloscopy (e) Ultrasonography | 2 hours |
| 13. Principle of common gynaecological surgeries | | 1 hour |
| 14. Formative Assesment | | 1 hour |

| Learning Objectives | Contents | Teaching hours |
|--|--|--|
| <p>At the end of session the students will be able to:</p> <ul style="list-style-type: none"> • define each problems • mention the incidence of each problem • classify abortions • differentiate different abortions • describe the pathology of mole and choriocarcinoma • diagnose each problem • manage each problem • mention the complication of each problem • describe the physiology of vaginal discharge. • differentiate physiological and pathological vaginal discharge. • diagnose the diseases causing vaginal discharge • mention the treatment of vaginitis, cervicitis • define amenorrhoea, menorrhagia, polymenorrhoea, polymenorrhagia, Metrorrhagia, dysmenorrhoea, dysfunctional uterine bleeding. • mention types of amenorrhoea its causes and management • mention types of dymenorrhoea • describe the causes and management of metrorrhagia • mention the classification, diagnosis, principles of investigations and management of dysfunctional uterine bleeding. | <p>Bleeding in early pregnancy Abortion, ectopic pregnancy, hydatidiform mole, choriocarcinoma</p> <p>Vaginal discharge</p> <p>Menstrual Disorder</p> | <p>(2 + 1+ 2+ 1) hour</p> <p>1 hour</p> <p>4 hours</p> |

| Learning Objectives | Contents | Teaching hours |
|--|--|---|
| <p>At the end of session the students will be able to:</p> <ul style="list-style-type: none"> • describe the defence mechanism of genital tract • define, classify, diagnose manage pelvic inflammatory disease. • mention the effects of sexually transmitted diseases on reproductive health of women • diagnose and treat a case of genital tuberculosis. • define and classify urinary incontinence • mention the types, causes, diagnosis, presentation and management of genitourinary fistula. • mention different types of perineal tear • diagnose and manage perineal tear and RVF, vaginal stenosis • describe the aetiology of genital prolapse • classify genital prolapse • mention the clinical features • diagnose a case of genital prolapse • mention the principles of management of genital prolapse. • demonstrate communication and presentation skill | <p>Genital Tract infections</p> <p>Urinary Incontinence</p> <p>Genital tract injuries</p> <p>Genitourinary prolapse</p> | <p>3 hours</p> <p>2 hours</p> <p>1 hour</p> <p>2 hours</p> <p>2 hours</p> |

| Learning Objectives | Contents | Teaching hours |
|---|--|----------------|
| <p>At the end of session the students will be able to:</p> <ul style="list-style-type: none"> • mention the different diagnostic techniques commonly used • mention the indication of cervical smear • describe the procedure of cervical smear • interpret the findings • explain its relation with carcinoma cervix • be acquainted with instruments used in laparoscopy • mention the indications and contraindications • describe the procedure • mention the complications • interpret the findings • describe colposcopy • be acquainted with instruments • mention the indications • describe the procedure • interpret findings • describe the advantages • be acquainted with ultrasonography • be acquainted with instrument • describe the role of ultrasonography in gynaecology • interpret the findings | <p>Diagnostic Technique</p> <p>Cervical Smear</p> <p>Laparoscopy</p> <p>Colposcopy</p> <p>Ultrasonography</p> | <p>2 hours</p> |

| Learning Objectives | Contents | Teaching hours |
|---|---|----------------|
| <p>At the end of session the students will be able to:</p> <ul style="list-style-type: none"> • describe the different gynaecological operations • mention the indication of each operation • describe the complications of each operations • write down the pre-operative treatment of each operation • mention the pre-operative investigation of each operation • write down post-operative treatment of each operation • mention the relation of each operation with pregnancy and reproductive life. • describe the name of anaesthesia for each operation | <p>Common Gynaecological Surgery</p> | <p>1 hour</p> |

CLINICAL TEACHING OF OBSTETRICS & GYNAECOLOGY

INTRODUCTION

The Core Curriculum for Clinical Attachment of 16 weeks has been organised into components of clinical experience as follows:

| | | |
|----|--|---------|
| 1. | Basic Clinical Skills (in-patient) | 4 weeks |
| 2. | Family Planning Clinic | 2 weeks |
| 3. | Gynae & Antenatal Out-patient Clinic | 2 weeks |
| 4. | Routine Obstetrics | 3 weeks |
| 5. | Routine Gynaecology | 3 weeks |
| 6. | Emergency Obstetric Care E.O.C (Labour Room) | 2 weeks |

Fourth year M.B.B.S. students will participate in batches in turns in components 1, 2 and 3.

Component 1 will have 24 clinical teaching and learning sessions (4w x 6d=24) and component 2 & 3 will have 12 like-wise sessions each (2w x 6d = 12).

Each session will be conducted for 2 hours every morning from 09.00 a.m. – 11.00 a.m.

In the evenings, students will clerk/ practise for 2 hours from 07.00 p.m. – 09.00 p.m., under supervision

Fifth year M.B.B.S. students will participate in components 4, 5 and 6.

Component 4 and 5 will have 18 clinical teaching and learning sessions each (3w x 6d =18) and component 6 will have 12 like-wise sessions (2w x 6d =12).

Each session will be conducted for 2 hours every morning from 09.00 a.m. – 11.00 a.m.

In the evenings, students will clerk/ practise under supervision from 7.00 p.m. – 9.00 p.m.

The evening timing for component 6, however, will be from 4.00 p.m. – 9.00 p.m.

CONTENTS:

Topics included are relevant to every day clinical practise in the field of Gynaecology and Obstetrics.

Learning objectives (skills) are shown against each topic under each sessions.

Many of the topics of the content of the clinical course are supplemented by a study guide.

The study guides are structured to provide students with varied opportunities to facilitate active involvement and self-directed learning and also to enable them to exercise responsibility under guidance by making maximum and productive use of the period of time of their clinical attachment.

The study guide for the respective topic details

- (a) introduction,
- (b) pre-requisite learning,
- (c) the learning objectives,
- (d) learning opportunities,
- (e) assignments,
- (f) tasks to be performed,
- (g) resources,
- (h) self assessment questions.

**4TH YEAR BASIC CLINICAL SKILLS
(COMPONENT – ONE)**

4 weeks – 24 sessions in the morning

| SESSIONS | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|-----------|---|--|--|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 1 | <p>(a) Introduction to Obstetrics & Gynaecology Review</p> <p>1. Common diseases 2. Commonly used definitions</p> <p>(b) Brief students on course objectives/ activities and student's cards</p> <p>(c) Visit to ante-natal/ postnatal wards; labour/ eclampsia room; septic ward; Gynae ward; operation theatres</p> | <p>At the end of the session student will acquire knowledge and understanding of:</p> <p>(a) common gynaecological & obstetrics terms, common disease of O&G that are prevalent in the community</p> <p>(b) Course objectives, activities and students, continuous assessment card</p> | <p>Tutorial/small group discussion</p> <p>Organise</p> | <p>Participate in the discussion</p> <p>Visit to different activity areas of O&G Department</p> |
| Session 2 | <p>Obstetric History taking</p> <p>This session will take the format of a discussion detailing Obs. History taking, followed by the opportunity to clerk an Obs. patient in the ward and subsequently present the case history.</p> | <p>Student will be able to:</p> <p>(a) Take history of an obstetrical case (b) Record the information on the history sheet (c) Present case history</p> | <p>Demonstration by teacher</p> | <p>a) Practice by students in groups b) Practice by individual student c) Case presentation</p> |

| SESSIONS | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|---------------|---|--|---|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 3 | Gynaecology history taking This session will take a similar format to Session II. | Student will be able to: (a) Take history of gynaecological case (b) Record the information on the history sheet (c) Present a case | Demonstration by teacher | a) Practice by students in groups b) Practice by individual student c) Case presentation |
| Session 4 | Obstetric examination | (a) Perform obstetrical examination (i) General (ii) Abdominal | Demonstration by teacher | a) Practice by students in groups b) Individual case study using study guide c) Present clinical findings |
| Session 5 | Gynaecological examination Taking of cervical smears (using models). | Perform gynaecological examination I. General II. Abdominal III. Speculum examination IV. Bimanual examination | Demonstration by teacher | Practice by students on dummy in clinical skill room |
| Session 6 | Antenatal care with identification of high risk pregnancies | 1. To record the finding on the antenatal cards by (I) Taking proper history (II) Performing general & abdominal examination 2. To advise pregnant women for appropriate investigation for screening for common risks | (a) Demonstration by a teacher (b) Lecture | Practice by case study in groups Case study by group |
| Session 7 & 8 | Bleeding in early pregnancy Abortion, Ectopic Pregnancy, molar pregnancy- chorio-carcinoma | Rationalize the plan of management | Lecture/ video show | Discussion on individual case study |

| SESSIONS | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------------|--|--|---|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 9 | Septic Abortion | Rationalize the plan of management | Lecturette/ video show | Discussion, individual case study |
| Session 10 to 12 | Normal labour and Partogram Diagnosis, stages, Mechanism, Management with partogram | Recognise the events of labour Plot the events on the partogram and interpret the graph Rationalize the use of analgesic Conduct normal labour | Arrange video show/ Demonstration on partograph Demonstration of conducting normal labour | a. Observe video show b. Observe teacher's demonstration c. Plotting on partograph by individual d. Conduction of labour under supervision |
| Session 13 | APGAR score, examination of new born, resuscitation & care of new born, breast feeding | Examine, diagnose problems and take immediate care of a new born | Arrange video show/ slide show/ demonstration | Observe: - video show - slide show - teacher's demonstration |
| Session 14 & 15 | Normal puerperium & post natal care Abnormal puerperium | Counsel on (a) Nutrition of mother (b) Personal hygiene (c) Postnatal exercise (d) Breast feeding and weaning (e) Immunisation of baby (f) Postnatal check-up (g) Contraception | Role play by teacher | Role play by students in small group Practice with patients |

| SESSIONS | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|---|--|--|---|-------------------------------------|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 16 | Abnormal uterine bleeding Definition, differential diagnosis | (a) Collect appropriate clinical information by history taking and examination (b) Suggest appropriate investigation (c) Interpret and correlate the investigations data with clinical findings for clinical diagnosis (d) To plan and rationalize the management | Lecture/ video show/ case demonstration | Discussion Individual case study |
| Lump Abdomen | -do- | -do- | -do- | |
| Abdominal / pelvic pain – P.I.D. | -do- | -do- | -do- | |
| Theatre sessions Preparation of patient, preoperative management, operative procedure, post operative management | (a) Write up appropriate pre & post operate order (b) Rationalize the order | Demonstration | Practise by students and peer group discussion Using study guide | |
| Evening Session | Clerk patients, observe labour room activities and practise the skills that the student learned in the morning sessions. | | | |
| Session 23 | Assessment (Oral/ Clinical / OSCE) | | | |
| Session 24 | Feedback | | | |

N.B: Students must submit 3 obs. & 2 Gynae, history and must fill up assessment card.

Family Planning Course
For
4th year Medical Students
(COMPONENT –TWO)

Venue – Model Clinics of the Medical College Hospitals

Duration–2 weeks

| | | | |
|-----|----|---|---|
| Day | 1 | - | Administration and maintenance of records |
| | 2 | - | Promotion of family planning |
| | 3 | - | Counselling |
| | 4 | - | Oral contraceptive pills |
| | 5 | - | Intra-uterine contraceptive device |
| | 6 | - | Permanent methods |
| | 7 | - | Injectable contraceptives |
| | 8 | - | Norplant |
| | 9 | - | Safe period, lactation, condoms, spermicides, coitus interruptus |
| | 10 | - | Day visit: Management issues in family planning. Organisation of a clinic. |
| | 11 | - | Day visit: Organisation of a clinic(continued) Working as a member of a team. Acting as a supervisor. |
| | 12 | - | Assessment and feedback |

Family Planning Course

| Methods | Aids | Assessment |
|---|--|--|
| <ul style="list-style-type: none"> • Lecture • Visit antenatal clinic & paediatric clinic. • Group discussion • Demonstration of record keeping • Inspection of raw data collected at the clinic. • Interpretation of the results in group discussion • Small group teaching • Role play • Demonstration • Brainstorming • Visit postnatal ward, Interview of patients individually to motivate them towards family planning. • History of patients & counselling observation of examination. • Demonstration of operative steps on models or video • Demonstration of counselling of a patient in real life or by video • Lecturette • Demonstrating on injection, syringes, needle • Demonstrate on storage • Demonstration of condoms • Referral procedures | <ul style="list-style-type: none"> • Black board • OHP • Radio • Cassette • Posters • Flip chart • Video • Variety of OCPs • Menstrual chart • Client • Specimen of IUCD • Clients and dummy • Models • Chart • Different types of injectable contracepting • Norplant capsule • Model of arm Methods • Model breast + baby • Condom • | <ul style="list-style-type: none"> • Question & answers • Observation of students • Check-list completion |

Day 1:**Administration and Maintenance of records**

Intermediate Educational Objective: At the end of the session the student will be able to perform the necessary supervisory and administrative procedures of a family planning clinic and maintain proper records.

| Specific educational objectives | Contents |
|--|--|
| <p>The student will be able to:</p> <ol style="list-style-type: none"> 1) monitor staff programme maintain harmonious staff relations maintain good communications monitor the output of a worker 2) make appropriate referrals in an effective way between departments like the antenatal clinic, paediatric clinic, menstrual regulation clinic, and the family planning clinics 3) follow standard procedures which will prevent medico-legal problems 4) write useful clinical records and maintain the ledger book 5) maintain data in an accessible and analysable form. analyse data collected at a family planning clinic and interpret the results | <p>Administration (organogram, responsibility, supervisory method, Method of communication) Staff pattern Interdepartmental linkages and Co-operation. Informed consent before prescription or procedure. Written consent. Standard procedure manuals. Communication with other staff Clinical record keeping Data recording, analysis and interpretation.</p> |

Day 2:**Promotion of Family Planning**

Intermediate role: At the end of the session the student will be able to play a leadership role in the promotion of family planning.

| Specific educational objectives | Contents |
|---|--|
| <p>A. At the end of the session the student should be able to:</p> <ol style="list-style-type: none"> 1. define Family Planning 2. describe the importance of Family planning, particularly for our country 3. demonstrate understanding that pregnancies can be avoided and spaced 4. describe the personal benefits of birth spacing 5. communicate with, advice and motivate individuals and group of clients 6. supervise and support health education programme 7. administer available posters/ leaflets 8. use electronic and other media 9. demonstrate the ways and means of community education/ mobilization 10. list the opportunities a medical practitioner has to promote Family Planning <p>B. At the end of this session the students should have acquired the required skill to:</p> <ol style="list-style-type: none"> 1. communicate with an individual client about family planning 2. build rapport | <p>Definition of family planning The population explosion - Health & population indices - Demographic pattern & trends in Bangladesh Benefits of Family Planning: - personal - national - environmental Health education Community mobilization and participation The use of media in the promotion of family planning The role of general practitioners, medical officers and specialists in the promotion of family planning Health care interview</p> |

Day 3:**Counselling**

Intermediate Educational Objective: At the end of the session the student should be able to explain the component of counselling, and be able to achieve good Inter-personal relations in a counselling situation.

| Specific educational objectives | Contents |
|---|---|
| <p>A. At the end of the session the student should be able to:</p> <ul style="list-style-type: none"> i) explain and define counselling and it's need ii) explain inter-personal communication iii) list the barriers to inter-personal communication <p>B. Students should have acquired the skill to be able to:</p> <ul style="list-style-type: none"> 1. greet the client 2. establish rapport 3. ask reasons for coming 4. Inform about available contraceptive methods with their <ul style="list-style-type: none"> - mode of actions - effectiveness - method of application - availability of services - follow up - referral system 5. Assist the client in making decisions | <ul style="list-style-type: none"> I) Definition of counselling and the need for it II) Level of communication III) Inter-personal communication and feedback IV) Barrier to communications <ul style="list-style-type: none"> i) Communication skill ii) Counselling skill iii) Taking account of educational status of the client <p>Merits and demerits</p> |

Day 4:**Oral Contraceptive Pill**

Intermediate Educational Objective: At the end of the session the student will be able to prescribe an appropriate Oral Contraceptive pill to the client.

| Specific educational objectives | Contents |
|---|---|
| <p>The student should be able to:</p> <ul style="list-style-type: none"> 1. explain the mode of action and effectiveness of the OCP 2. list the advantages and disadvantages of OCP 3. make a checklist for indications and contraindications, and make appropriate case selection 4. describe different OCP for making options for the client and advise the client about proper administration of OCP 5. write history and physical findings to identify contraindications to the OCP 6. list the appropriate investigations 7. explain the follow-up procedure to the patient 8. describe the side-effects and complications of OCP and their management 9. describe how to keep proper records for patients on OCP | <p>Pharmacology of Oral contraceptives</p> <p>Comparison of OCP with other contraceptives</p> <p>Side effects and complications of their management</p> <p>History and physical examination prior to OCP prescription</p> |

Day 5:**I.U.C.D.**

Intermediate Educational Objective: Student will be able to advise clients on I.U.C.D. insertion & refer them to specific clinic.

| Specific educational objectives | Contents |
|--|--|
| <p>A. At the end of the session the student should have acquired knowledge of the following and be able to:</p> <ol style="list-style-type: none"> 1. explain IUCD as a method of contraception 2. explain mode of action of IUCD and its effectiveness 3. explain the advantage & disadvantage of IUCD 4. list different types of IUCD 5. take history and describe the steps of physical examination for case selection 6. describe the insertion procedure 7. describe the follow-up procedure 8. explain the need of record keeping <p>B. Student should have acquired skills to do the following:</p> <ol style="list-style-type: none"> 1. Communicate with client 2. Build rapport with his/her client 3. Assure clients 4. Take history of the client 5. Physical examination of the client 6. Refer to insertion centre <p>C. Should be able to describe the 3(three) procedure of IUCD insertion</p> | <ol style="list-style-type: none"> 1. Definitions & varieties 2. Mode of action and effectiveness 3. Advantage & disadvantage 4. Selection criteria 5. Time of insertion 6. P.V. steps of examination 7. Management of complications and referral <ol style="list-style-type: none"> a. Health care interview <ul style="list-style-type: none"> - interview planning - time - space - kind of exchange - interview questions - termination of interview b. Assurance c. Steps of history taking d. Steps of physical examination e. procedure of referral <p>Procedure of insertion of IUCD</p> |

Day 6:**Permanent Methods**

Intermediate Educational Objective: Students will be able to counsel clients to enable them to make a choice about the acceptance of vasectomy or tubal occlusion.

| Specific educational objectives | Contents |
|--|--|
| <p>At the end of the session, students should be able to:</p> <ol style="list-style-type: none"> 1. name and define different permanent methods of contraception and their effectiveness 2. counsel the patients 3. select the patients 4. list the merits and demerits of these methods 5. refer the patients to the appropriate centres 6. take informed consent of the couple 7. describe the steps of the operative techniques of these methods and the anaesthetic techniques used 8. list the complication sand their management 9. mention the time of effectiveness of each method 10. describe the importance of record keeping 11. give appropriate advice for post-operative follow-up 12. give advice about the very limited scope of reversal and the techniques used | <p>Description of different method</p> <p>Health care interview</p> <p>Steps of history taking and physical examination</p> <p>Steps of operative techniques</p> <p>Advantages and disadvantages</p> <p>Complications and their management</p> |

Day 7:**Injectables**

Intermediate Educational Objective: Student will be able to select suitable patients for use of injectable contraceptives and counsel them appropriately.

| Specific educational objectives | Contents |
|---|--|
| <p>At the end of the session the student should be able to:</p> <ol style="list-style-type: none"> 1. name different types of injectables 2. counsel the clients 3. establish rapport 4. describe mode of action 5. describe the advantage of injectables 6. describe the route of administration and duration of action 7. take an appropriate history and carry out an appropriate physical examination 8. identify the different injectables and state their dose 9. select appropriate cases 10. list and manage the complications 11. advise the clients for follow-up 12. describe the importance of record-keeping | <p>Nature and type of injectables</p> <p>Mode and duration of their action</p> <p>Advantages and disadvantages</p> <p>Indications and contra-indications</p> <p>Complications and their management</p> |

Day 8:**Norplant**

Intermediate Educational Objective: Student will be able to advise clients on norplant implantation and refer them to specific clinic for implantation.

| Specific educational objectives | Contents |
|--|---|
| <p>A. At the end of the session the student should be able to:</p> <ol style="list-style-type: none"> 1. explain norplant as a contraceptive method 2. explain mode of action of norplant and its effectiveness 3. list advantages and disadvantages of norplant 4. describe how to take history 5. describe how to do physical examination needed for selection of client for implantation 6. list important laboratory investigation before doing implantation 7. describe implantation procedure 8. describe follow-up procedure 9. explain the management of minor complication 10. describe the implant removal procedure | <ol style="list-style-type: none"> 1. Definition 2. Role of norplant as contraceptive method 3. Pharmacokinetics of norplant 4. Mode of action of norplant 5. Advantages and disadvantages of norplant 6. Steps of history taking of the client for norplant 7. Steps of physical examination 8. Hb% urine for routine and microscopy 9. Implantation procedure 10. Follow-up procedure 11. Management of minor complications and referral for the major one 12. Implant removal procedure with indications |
| <p>B. At the end of the session the student should acquire skills to do the following:</p> <ol style="list-style-type: none"> 1. Communicate with the client 2. Build rapport 3. Obtain consent paper signed by couple 4. assure client 5. take history of the client 6. physical examination of clients 7. refer to implantation clinic <p>C. Should be able to describe the procedure of norplant implantation</p> | <ol style="list-style-type: none"> 1. Health care interview <ul style="list-style-type: none"> - interview planning - time - space - kinds of exchange - interview questions - terminating interview 2. Consent paper and obtain sign/ agreement from the couple 3. Assurance 4. Steps of history taking 5. Steps of physical examination 6. Procedure of referral <p>Procedure of norplant implantation</p> |

Day 9: Safe period, lactation, condoms, spermicides, coitus interruptus

Intermediate Educational Objective: Student will be able to advise clients about safe period as contraceptive procedure.

Session 1 – Safe period

| Specific educational objectives | Contents |
|---|---|
| <p>A. At the end of the session the student should acquire knowledge of the following and be able to:</p> <ol style="list-style-type: none"> 1. explain safe period as a method of contraceptive 2. explain how safe period works as contraception 3. list advantages and disadvantages of safe period 4. describe how to produce menstrual chart and its use 5. describe follow-up procedure <p>B. Should be able to:</p> <ol style="list-style-type: none"> 1. communicate with the client 2. take history of the client 3. construct menstrual chart and explain to client | <ol style="list-style-type: none"> 1. Definition of safe period 2. Physiology of safe period and its role as contraceptive 3. Advantages and disadvantages 4. Menstrual chart <ul style="list-style-type: none"> - definition - preparation - use 5. Follow up advice <ol style="list-style-type: none"> 1. Health care interviewing 2. Steps of history taking 3. Menstrual chart and its use |

Session 2- Lactation

Intermediate Educational Objective: Student will be able to advise clients about lactation as a contraceptive method.

| Specific educational objectives | Contents |
|--|---|
| <p>A. At the end of the session the student should acquire knowledge of the following and be able to:</p> <ol style="list-style-type: none"> 1. explain lactation as a method of contraception, & describe exclusive breast feeding 2. explain the amount of protection afforded by 'exclusive breast feeding' 3. describe the mode of action 4. list the advantages and disadvantages 5. describe the steps of history taking of breast feeding 6. describe the follow-up advice 7. explain the place of adopting additional method <p>B. Should have skill of the following and be able to:</p> <ol style="list-style-type: none"> 1. communicate with client 2. take history of breast feeding of the client | <ol style="list-style-type: none"> 1. Physiology of lactation 2. Role of lactation as contraception 3. Advantages and disadvantages of lactation as contraceptive method 4. History taking of breast feeding 5. Follow-up measures 6. Place of adopting additional method <ol style="list-style-type: none"> 1. Communication skill 2. Steps of history taking of breast feeding |

Session 3 – Condom

Intermediate Educational Objective: Student will be able to advise the clients about the condom and its use.

| Specific educational objectives | Contents |
|---|--|
| <p>A. At the end of the session the student should acquire knowledge of the following and be able to:</p> <ol style="list-style-type: none"> 1. explain condom as a method of contraception 2. describe its mode of action 3. list its advantages and disadvantages 4. describe the role of condoms in preventing STD/HIV infection. <p>B. At the end of the session the student should acquire skill of the following and be able to: explain what to tell about the use of condom to the client</p> | <ol style="list-style-type: none"> 1. Description of condom <ul style="list-style-type: none"> - materials 2. How it works as contraceptive 3. Advantages and disadvantages <ul style="list-style-type: none"> - follow-up 4. STD/HIV- AIDS <p>Use of condom</p> |

Session 4 – Spermicide

Intermediate Educational Objective: Student will be able to advise clients about the Spermicide

| Specific educational objectives | Contents |
|---|---|
| <p>A. At the end of the session the student should acquire knowledge of the following and be able to: (10 minutes)</p> <ol style="list-style-type: none"> 1. explain spermicide as a method of contraceptive 2. describe the mode of action 3. list advantages and disadvantages 4. explain to the client how to use spermicide | <ol style="list-style-type: none"> 1. Definition and varieties of spermicide 2. Mode of action 3. Advantages and disadvantages 4. Use of spermicide |

Session 5 – Coitus Interruptus

Intermediate Educational Objective: Student will be capable of advising a client about coitus interruptus

| Specific educational objectives | Contents |
|---|---|
| <p>At the end of the session the student should be able to:</p> <ol style="list-style-type: none"> 1. describe the place played by coitus interruptus in reducing the fertility rate in the population 2. recognise from what a couple say that they are using coitus interruptus as a method of family planning 3. communicate with clients about the method and describe its advantages and disadvantages, especially the failure rate | <ol style="list-style-type: none"> 1. Local terminology used to describe coitus interruptus 2. Reasons for failure of the method 3. Advantages and disadvantages |

Management issues in family planning. Organisation of a clinic

Day 10:

| Specific educational objectives | Contents |
|---|--|
| <p>At the end of the session the student should be able to:</p> <ol style="list-style-type: none"> 1. list characteristics of a good Manager/ Team Leader 2. identify weaknesses of a bad Manager/ Team Leader 3. differentiate good management and poor management 4. identify management issues | <ol style="list-style-type: none"> 1. Management issues 2. Leadership <ul style="list-style-type: none"> - strengths - weaknesses |

Organisation of a clinic. Working as a member of a team. Acting as a supervisor

Day 11

| Specific educational objectives | Contents |
|---|---|
| <ol style="list-style-type: none"> 5. discuss organisational issues related to: <ul style="list-style-type: none"> - booking of patients, - record keeping, - signed consent forms, - prescription, and - follow-up procedure - issuing & administration of FP methods 6. describe a good referral procedure B. Should acquire the necessary skill and be able to: <ol style="list-style-type: none"> 1. write report on day visit 2. present in forum | <ol style="list-style-type: none"> 3. Record keeping <ul style="list-style-type: none"> - booking - signed consent form - follow-up procedure 4. Referral procedure <ol style="list-style-type: none"> 1. Report writing 2. Presentation |

Day 12:**Assessment and Feedback**

- (1) An OSCE will be held. Questions will be based on the educational objectives.
- (2) Feedback on performance will be given by different teachers
- (3) Students will provide the teacher with feedback on their perception of the course
- (4) Marks will be awarded for attendance,
General performance,
Team performance on report and presentation,

The O.S.C.E.

Marks will be sent to the students the week after the course.

**4TH YEAR GYNAE AND ANTENATAL OUTPATIENT CLINIC
COMPONENT – THREE**

2 weeks (12 sessions in the morning)

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|-----------|---|--|--------------------------|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 1 | <p>Introduction to Gynaecology and obstetrics</p> <p>(a) Commonly used definitions</p> <p>(b) Common diseases prevalent in the community</p> <p>(c) Vital statistics: birth rate, MMR, causes, prevention, perinatal mortality, live birth, still birth</p> <p>(d) Brief students on course objectives/ activities and student's cards.</p> | <p>At the end of the session student will demonstrate knowledge and understanding of:</p> <p>(a) common gynaecological & obstetrics terms, common disease of O &G that prevalent in the community</p> <p>(b) vital statistics</p> <p>(c) course objectives, activities and students continuous assessment card</p> | Lecture | <p>Participate</p> <p>Discussion</p> <p>Collect student assessment card</p> |
| Session 2 | History taking (obstetric & Gynae history) | <p>Student will be able to:</p> <p>(a) take history of an obstetric and a gynaecological case</p> <p>(b) record the information on the history sheet</p> | Demonstration by teacher | <p>a) Practice by students in groups</p> <p>b) Practice by individual</p> |

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|-----------------|--|--|--|--|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 3 | Clinical examination (Obstetrical & Gynaecology) | (a) Perform obstetrical & gynaecological examination (i) General (ii) Abdominal | Demonstration by teacher | a) Practice by students in groups b) Individual case study using study guide |
| Session 4 & 5 | (a) Diagnosis pregnancy, antenatal care and advice and advice. (b) Hyperemesis and minor ailments common in pregnancy. | (a) Collect appropriate clinical information by history taking and examination (b) Suggest appropriate investigation (c) Interpret and correlate the results of investigations with clinical findings for clinical diagnosis (d) To plan and rationalize the management | Case demonstration Tutorial | Participation by students Case study in groups |
| Session 6 to 11 | Common out patient gynaecological problem Abdominal swelling, abdominal pain/ P.I.D., vaginal discharge, amenorrhoea, menorrhagia, infertility. | -do- Counsel patient or her spouse or relative or hospitalization for any common gynaecological problems | Case demonstration Tutorial Demonstration Role play | Participation by students Case study in groups Role play Practice by students |
| Session 12 | Assessment (Oral/ Clinical/ OSCE) & feedback | | | |

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------------|---|---|-----------------------------------|--|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 3 & 4 | Hypertensive disorders in pregnancy | (a) Collect appropriate clinical information by history taking and examination (b) Suggest appropriate investigation (c) Interpret and correlate the investigations data with clinical diagnosis (d) Plan and rationalize the management | Case demonstration by the teacher | Practise with problem solving exercise in tutorial |
| Session 5 | Abnormal lie/ presentation (Breech) | -do- | -do- | -do- |
| Session 6 | Multiple pregnancy & hydromnios | -do- | -do- | -do- |
| Sessions 7 & 8 | Medical disorders Diabetes, Heart disease & others | -do- | -do- | -do- |
| Session 9 | Rh isoimmunization/ Grand Multipara / BOH/ H/O / C/S | -do- | -do- | -do- |
| Session 10 | Ante partum haemorrhage | -do- | -do- | -do- |
| Session 11 | I.U.G.R. | -do- | -do- | -do- |
| Session 12 to 13 | Puerperium & its complications | -do- | -do- | -do- |

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------------------|---|--|--------------------------|--|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 14 to 16 | Theatre Session Writing of preoperative orders, operation note, post operative order, observe common obstetric operations. | To write preoperative orders, operation notes, post operative orders | Demonstration by teacher | Write preoperative orders, operation notes, post operative orders Observe common obstetric operations |
| Evening Session | Clerk patients, observe labour room activities and emergency operations and practise skills that the students learned in the morning sessions | | | |
| Session 17 | Assessment (Oral/ Clinical/ OSCE) | | | |
| Sessions 18 | Feedback | | | |

N.B. All students must submit 5 histories and fill up the assessment card.

5TH YEAR ROUTINE GYNAECOLOGY
(COMPONENT – FIVE)

3 weeks – 18 sessions in the morning

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|----------------|---|--|---|--|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 1 & 2 | Bleeding in early pregnancy Abortion, ectopic pregnancy, molar pregnancy including choriocarcinoma | (a) Collect appropriate clinical information by history taking and examination (b) Suggest appropriate investigation (c) Interpret and correlate the investigations data with clinical findings for clinical diagnosis (d) To plan and rationalize the management | Case demonstration by the teacher Arrange problem solving tutorial | Practise with problem solving exercise in tutorial Case study |
| Session 3 & 4 | Abnormal uterine bleeding/ Amenorrhea | -do- | -do- | -do- |
| Session 5 | Abdominal pain Pelvic inflammatory disease | -do- | -do- | -do- |
| Sessions 6 | Abdomino-Pelvic swelling Ovarian tumour, Fibroid | -do- | -do- | -do- |
| Session 7 & 8 | Infertility Causes, investigations and treatment | -do- | -do- | -do- |
| Session 9 & 10 | Genital cancer Carcinoma Cervix, Endometrial Carcinoma | -do- | -do- | -do- |
| Session 11 | Genital tract injuries Vesico vaginal fistula, recto vaginal fistula, third degree perineal tear, vaginal stenosis | -do- | -do- | -do- |

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------------------|--|--|--|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Sessions 12 & 13 | Fertility Control O.C.P, P.O.P, post-coital contraception , barrier and natural methods, I.U.D., T.O.P/ M.R. | Counsel clients on: Fertility Control O.C.P, P.O.P., post-coital contraception, barrier and natural methods, I.U.D., T.O.P/ M.R. | Demonstration by teacher Video Role play Tutorial | Role play Practise with the clients |
| Sessions 14 to 16 | Theatre Session Pre-operative management, post-operative management To Observe common gynaecological operation | Write preoperative orders, operation notes, post operative orders | Demonstration by teacher | Write preoperative orders, operation notes, post operative orders Observe common gynaecological operations |
| Evening Session | Clerk patients, observe gynae ward activities and practise those had learned in the morning sessions | | | |
| Session 17 | Assessment (Oral/ Clinical/ OSCE) | | | |
| Sessions 18 | Feedback | | | |

N.B. All students must submit 5 histories and fill up the assessment card.

5TH YEAR/ EMERGENCY OBSTETRIC CARE (EOC) AND LABOUR ROOM
(COMPONENT – SIX)

2 weeks – 12 sessions in the morning

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------|--|---|---|---|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Session 1 | Management of normal labour, partogram | Recognise the events of labour Plot the events on the partogram and interpret the graph Rationalise the use of analgesic Conduct normal labour | Arrange video show/ Demonstration on partograph Demonstration on conducting normal labour | a. Observe video show b. Observe teacher's demonstration c. Plotting on partograph by individual d. Conduction of labour under supervision |
| Session 2 | Induction of labour | (a) Collect appropriate clinical information by history taking and examination (b) Suggest appropriate investigation (c) Interpret and correlate the investigations data with clinical findings for clinical diagnosis (d) Plan and rationalize the management | Demonstration by the teacher | Practise with problem solving exercise in tutorial |
| Session 3 | Management of bleeding in early pregnancy | -do- | -do- | -do- |
| Sessions 4 | Management of bleeding in late pregnancy | -do- | -do- | -do- |
| Session 5 | Management of eclampsia | -do- | -do- | -do- |
| Session 6 | Management of prolonged and obstructed labour/ ruptured uterus | -do- | -do- | -do- |
| Session 7 | Management of retained plaenta & PPH | -do- | -do- | -do- |
| Session 8 | Management of shock & sepsis | -do- | -do- | -do- |
| Session 9 | Obstetric operations (C.S, Forceps & ventouse deliveries, craniotomy.) | Write preoperative orders, operation notes, post operative orders | Demonstration by teacher | Write preoperative orders, operation notes, postoperative orders Observe obstetric operations |

| SESSION | TOPIC | LEARNING OBJECTIVES | TEACHING METHOD | |
|------------------------|--|--|--|--|
| | | | TEACHERS' ROLE | STUDENTS' ROLE |
| Sessions 10 | Clinical Project work | Present a case in a small group or seminar | Allocate students the project works. At the outset of the labour room placement the students will be divided into sub groups and allotted with a common clinical problem. | They will collect data and information about etiology, diagnosis and management of the problem which will be presented by them during this session |
| Evening Session | Review sessions 1– 9: | | | |
| Session 11 | Assessment (Oral/ Clinical/ OSCE) | | | |
| Sessions 12 | Feedback | | | |

**OBSTETRICS & GYNAECOLOGY MBBS COURSE SCHEDULE
TOTAL TEACHING HOURS =200**

4TH YEAR M.B.B.S in 3rd Phase

Lecture 28 hours + Evaluation 2 hours =30 hours

| PHASE – I = 15 hours | | PHASE – II = 15 hours | |
|-----------------------|--|-----------------------|---|
| Lecture – 14 hours | Evaluation 1hr (MCQ, SBA, SEQ, SAQ) | Lecture – 14 hours | Evaluation 1hr (MCQ, SBA, SEQ, SAQ) |
| Obstetrics | | Gynaecology | |

5th YEAR M.B.B.S

Lectures 67 hours +Evaluation-3hr+ Demonstration/Practical/Tutorial 85 hours+ Integrated teaching 15 hrs = Total 170 hours

| PHASE – I = 24 hours | | PHASE – II = 22 hours | | PHASE – III = 24 hours | | Demonstration/Practical/Tutorial in Phase I, II & III= 85 hours |
|--------------------------------|--|---------------------------------|---|----------------------------------|---|--|
| 23 hours | Evaluation 1hr | 21 hours | Evaluation 1hr | 23 hours | Evaluation 1hr | |
| Lecture – 23 hours | <i>NB: Lectures will be followed by evaluation (MCQ, SBA, SEQ, SAQ)s</i> | Lecture – 21 hours | <i>NB: Lectures will be followed by evaluation (MCQ, SBA, SEQ, SAQ)</i> | Lecture – 23 hours | <i>NB: Lectures will be followed by evaluation (MCQ, SBA, SEQ, SAQ)</i> | Demonstration / Video presentation Gynae & Obs |
| Gynae – 10 hrs Obs – 13 hrs | | Gynae – 11hrs Obs – 10 hours | | Gynae –11 hours Obs –12 hours | | |

(*) A demonstration will be a practical teaching session with a small group of students. It will be based on a patient's history, specimens or instruments, graphs or models or employ a video. Student participation is expected.

***Integrated teaching : Only for 5th year- 15 hours (7 classes)**

Integrated Teaching

| Topic | Learning Objective | Teaching Aids | Assessment | Department |
|---|---|----------------------|-------------------|--|
| <ul style="list-style-type: none"> Medical disorders in pregnancy <ul style="list-style-type: none"> Hypertension in pregnancy (PIH) Diabetes, -Anaemia, - Jaundice | <ul style="list-style-type: none"> Pathology, management | Multimedia | On presentation | Internal Medicine |
| <ul style="list-style-type: none"> APH PPH | <ul style="list-style-type: none"> Aetiology, Management | Multimedia | | Haematology Blood Transfusion |
| <ul style="list-style-type: none"> Septic Abortion: | <ul style="list-style-type: none"> Pathophysiology, management | Multimedia | | Blood transfusion Pathology Oncology |
| <ul style="list-style-type: none"> Acute abdomen in obstetrics and gynaecology | <ul style="list-style-type: none"> Aetiology, management | Multimedia | | Surgery,pathology |
| <ul style="list-style-type: none"> Genital tract infection | <ul style="list-style-type: none"> Defensive mechanism PID, STD, Genital tuberculosis | Multimedia | | Pathology |
| <ul style="list-style-type: none"> Ca cervix | <ul style="list-style-type: none"> Aetiology, prevention, management | Multimedia | | Immaging, Oncology |

CLINICAL SCHEDULE
TOTAL TEACHING HOURS – 336 HOURS

| 1ST ROUND – 4TH YEAR 8 WEEKS = 144 HOURS | | | | | | 2ND ROUND – 5TH YEAR 8 WEEKS = 192 HOURS | | | | | |
|---|------------|---|------------|---|------------|---|------------|--|------------|--|--------------------|
| 2 Weeks 2W × 6D × 2 HS = 24 HOURS | | 2 Weeks 2W × 6D × 2 HS = 24 HOURS | | 4 Weeks 4W × 6D × 4 HS = 96HOURS | | 3 Weeks 3W × 6D × 4 HS = 72 HOURS | | 3 Weeks 3W × 6D × 4 HS = 72 HOURS | | 2 Weeks 2W × 6D × 4HS = 48 HOURS | |
| Family Planning | Assessment | GOPD | Assessment | Basic clinical skill (indoor placement) -morning 2 hrs -evening 2 hrs | Assessment | Routine obstetrics (indoor placement) -morning 2 hrs -evening 2 hrs | Assessment | Routine Gynaecology (indoor placement) -morning 2 hrs -evening 2 hrs | Assessment | E.O.C. (Labour Word Placement) <u>-morning 2 hrs</u> <u>-evening 2 hrs</u> | Assessment OSPE |

**Final Professional Examination
Assessment of Gynaecology & Obs.**

| Components | Marks | Total Marks |
|--------------------------------------|-----------|-------------|
| WRITTEN EXAMINATION | | |
| Paper – I –SBA & MCQ | 10+10 =20 | 100 |
| SAQ | 35 | |
| SEQ | 35 | |
| Marks from formative assessment | 10 | |
| | | |
| Paper - II- SBA & MCQ | 10+10 =20 | 100 |
| SAQ | 35 | |
| SEQ | 35 | |
| Marks from formative assessment | 10 | |
| | | |
| PRACTICAL EXAMINATION | | |
| OSCE / OSPE | | 100 |
| | | |
| CLINICAL EXAMINATION | | |
| Obs. Case | <u>50</u> | 100 |
| Gynae. Case | <u>50</u> | |
| | | |
| ORAL EXAMINATION (Structured) | | |
| Obs | 50 | 100 |
| Gynae | 50 | |
| Grand Total | | 500 |

- Pass marks 60 % in each of theoretical, oral and practical
- There will be separate answer script for MCQ & SBA