



Gynaecology & Obstetrics

CURRICULUM

MBBS Final Year

Faisalabad Medical University (FMU) Faisalabad.

HEADS OF GYNAE DEPARTMENT

Prof. Dr. Sumera Tahir
MBBS, MCPS, FCPS
Head of Gynae Unit-I
Allied Hospital, Faisalabad.



Prof. Dr. Robina Ali
MBBS, MCPS, FCPS
Head of Gynae Unit-II
DHQ Hospital, Faisalabad.



Prof. Dr. Tasnim Tahira
MBBS, MCPS, FCPS
Head of Gynae Unit-IIr
Allied Hospital, Faisalabad.



AUTHORS

Prof. Dr. Sumera Tahir
MBBS, MCPS, FCPS
Head of Gynae & Obs Department, FMU.



Dr. Naureen Javed
MBBS, FCPS
Associate Professor Gynae & Obs. FMU.



Dr. Sumera Ehsan
MBBS, MHPE, Phd (s)
Head of HPE&RD, FMU.



CONTENTS LIST OF OBS & GYNAE

Obstetrics

Sr. No.	Contents
1	Obstetrics history and examination
2	Antenatal care
3	Normal fetal development and growth
4	Assessment of fetal wellbeing
5	Prenatal diagnosis
6	Antenatal obstetric complications
7	Multiple pregnancy
8	Preterm labour
9	Hypertensive disorders of pregnancy
10	Medical complications of pregnancy
11	Perinatal infections
12	Labour: normal and abnormal
13	Operative delivery
14	Obstetric emergencies
15	The puerperium

Gynaecology

Sr. No.	Contents
1	The development and anatomy of the female sexual organs and pelvis
2	Gynaecological history, examination and investigations
3	Hormonal control of the menstrual cycle and hormonal disorders
4	Disorders of menstrual bleeding
5	Implantation and early pregnancy
6	Contraception and abortion
7	Subfertility
8	The menopause and post reproductive health
9	Genitourinary problems
10	Urogynaecology and pelvic floor problems
11	Benign conditions of the ovary and pelvis
12	Benign conditions of the uterus, cervix and endometrium
13	Benign conditions of the vulva and vagina, psychosexual disorders and female genital mutilation
14	Malignant disease of the ovary
15	Malignant disease of the uterus
16	Premalignant and malignant disease of the lower genital tract
17	Gynaecological surgery and therapeutics

Department of Obstetrics & Gynaecology
Faisalabad Medical University Faisalabad.

Vision

To be the leader for women's healthcare.

Mission

Our mission is to provide excellence, innovation and superior quality in the compassionate care of patients, in the training and mentoring of health professionals, and in the creation and sharing of knowledge in woman's health.

PMDC study hours detail for Obstetrics & Gynaecology

Subject	5th Year
Obstetrics & Gynaecology	130 Hrs.

Course Outcomes

Obstetrics

Module 1

Antenatal Care

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
To design the management plan for antenatal care.	<ul style="list-style-type: none"> Describe the aims and pattern of routine antenatal care. Present pertinent obstetric history. Measure blood pressure. Filling of antenatal card. Perform obstetric abdominal exam. Interpret relevant investigations. Prescribe vitamin supplements, tetanus toxoid and Anti-D (if required). Counseling, education and reassurance of women and her family regarding routine antenatal care. 	<p>Aims of antenatal care.</p> <p>Schedule of antenatal care.</p> <p>General pregnancy dietary advice.</p> <p>Booking test in pregnancy.</p> <p>Maternal and neonatal complications associated with increase BMI in pregnancy.</p> <p>Identification of high risk women.</p>	<p>- OPD - Antenatal Ward (Bedside teaching Small group Discussion)</p> <p>Obstetrics history and examination (Self study)</p> <p>Normal fetal development and growth (Self study)</p>	OSCE + viva	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p> <p>www.nice.org.uk/guidance/qs22</p>

Module 2

Assessment of fetal well being

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage concerns about fetal wellbeing prior to labour.	<ul style="list-style-type: none"> • Describe basics of USG in obstetric practice (recognize the site and viability of early pregnancy, identify congenital abnormalities and monitor growth of fetus). • Define important features of CTG and Doppler ultrasound. • Interpretation of BPP and its management accordingly. • Perform, interpret and label CTG to recognize fetal compromise. • Counsel the patient and her family regarding loss of fetal well being. • Explain line of action in case of fetal compromise. 	<p>Diagnostic ultrasound in obstetric practice.</p> <p>Ultrasound schedule in clinical practice.</p> <p>Ultrasound in the assessment of fetal well being.</p> <p>Components of CTG.</p> <p>Important features of Doppler ultrasound.</p>	<ul style="list-style-type: none"> - Labour Ward - Small group discussion 	<p>MCQ</p> <p>OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Module 3

Prenatal diagnosis

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
To understand the significance of prenatal diagnosis.	<ul style="list-style-type: none"> Describe purpose of prenatal diagnosis. Describe invasive & non invasive tests and risk associated with them. Describe methods to perform these tests. Define when & for which conditions these tests are performed. Detailed counseling of women prior and after these screening or diagnostic test regarding purpose and outcome of these tests. Define Down's syndrome and other aneuploidies. 	<p><u>Non invasive test</u></p> <ul style="list-style-type: none"> Ultrasound Cell-free fetal DNA <p><u>Invasive test</u></p> <ul style="list-style-type: none"> Chorion villus sampling Amniocentesis Cordocentesis Care after invasive test Down's syndrome and other aneuploidies 	- Team based learning (TBL)	MCQ SEQ	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p> <p>www.nice.org.uk/guidance/qs22</p>

Module 4

Management of Labour

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Plan management of labour and delivery.	<ul style="list-style-type: none"> • Recognize triaging of patients in the labour ward. • Identify obstetrics emergencies. • Describe mechanisms of normal labour and delivery. • Describe induction and augmentation of labour. • Describe monitoring maternal and fetal wellbeing including the partogram. • Describe pain relief in labour. • Indication options and complication. • Describe principles of management of collapsed obstetric patient. • Participate in the management of labour. • Perform maneuver of mechanism of labour on mannequin. • Assist normal vaginal delivery. • Empathy and decision making. • Awareness of multi professional working. • Counseling of patient's relative in case of obstetric emergencies. 	<ul style="list-style-type: none"> • Management of normal and abnormal labour. • Methods of induction and augmentation of labour; indications, contraindications and complications. • Structure and use of partogram. • Analgesia and anaesthesia in labour. • Causes and management of obstetric emergencies (e.g. massive haemorrhage, Sepsis, eclampsia, amniotic fluid embolism, umbilical cord prolapse, uterine inversion and rupture, trauma to the genital organ). 	<ul style="list-style-type: none"> - Small group discussion. - Labour Ward 	MCQ OSPE + Viva	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Module 5

Operative obstetrics instrumental delivery – shoulder dystocia

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Plan management of operative vaginal delivery and C-Section.	<ul style="list-style-type: none"> • Describe normal vaginal delivery: • Describe operative vaginal delivery: indications, methods and complications • Describe caesarean section: indications, procedures and complications. • Assist operative vaginal delivery. • Assist caesarean section. • Perform shoulder dystocia maneuver on mannequin. • Perform breech delivery and ECV (external cephalic version) on mannequin • Video of C-section in transverse lie • Counsel and empathise with the needs of mothers in labour. • Communicate clearly and effectively at times of stress. • Respect confidentiality 	Perineal repair Episiotomy Operative vaginal delivery Shoulder dystocia Breech delivery & ECV Caesarean Section	- Small group discussion Skill workshop Audio visual Aid Operation Theatre -	MCQ + SEQ OSPE + viva	Obstetrics by Ten Teachers 20 th Edition Hacker & Moore's 1 st South Asian Edition

Module 6

High Risk Pregnancy

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Identify and plan management of high risk pregnancy.	<ul style="list-style-type: none"> • Demonstrate risk and monitoring of high risk pregnancy. • Monitoring of fetal well being. • Interpret relevant investigations. • Recognize complications in high risk pregnancy. • Assist cervical cerclage application. • Counsel the women and her partner regarding risk in pregnancy. 	<ul style="list-style-type: none"> • Multiple pregnancy • Preterm pregnancy • Intrauterine growth restriction • Antepartum haemorrhage • Rhesus isoimmunization 	<ul style="list-style-type: none"> - Small group discussion - Antenatal / Labour Ward (Bedside teaching) - Audio visual aid 	MCQ + SEQ OSPE + viva	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Module 7

Medical Disorders in Pregnancy

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage pre-existing medical conditions and medical conditions arising in pregnancy.	<ul style="list-style-type: none"> • Describe aetiology, risk factors and risk of pre-existing medical conditions on pregnancy. • Interpret relevant investigations. • Demonstrate modification required to continue drug treatment. • Observe the formulation of multidisciplinary management plan. • Perform detailed general physical examination. • Interaction with multidisciplinary team. • Awareness of impact of disease on pregnancy and effect of pregnancy on disease. 	<ul style="list-style-type: none"> • Hypertensive disorder in pregnancy • Diabetes mellitus in pregnancy • Renal disease in pregnancy • Heart disease in pregnancy • Respiratory disease in pregnancy • Epilepsy disease in pregnancy • Anemia in pregnancy • Viral hepatitis • Bleeding disorder in pregnancy 	<ul style="list-style-type: none"> - Small group discussion - Labour Ward/ Antenatal Ward (Bedside teaching) 	MCQ + SEQ OSPE + viva	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p> <p>NICE clinical guidelines 107 (HTN)</p> <p>NICE clinical guidelines 63 (GDM)</p>

Module 8

Perinatal Infection

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Mange common viral and bacterial infections in pregnancy.</p>	<ul style="list-style-type: none"> • Describe the common viral and bacterial infections seen in pregnancy as well as acquired around the time of delivery having implications for mother, fetus and infant. • Interpretation of lab tests. • Describe infections which are included in routine pregnancy screening and principles of their management. • Describe perinatal infection causing long term disease along with measures to prevent vertical transmission. • Explain active management of HIV in pregnancy. • Awareness of mode of transmission and prevention from viral infection. • Awareness of vaccine against rubella. 	<ul style="list-style-type: none"> • Rubella • Chickenpox • Herpes simplex virus (HSV) • Group B streptococcus • HIV 	<p>- Team based learning (TBL)</p> <p>Self Study</p> <ul style="list-style-type: none"> • Syphilis • Toxoplasmosis • Cytomegalo virus • Parvovirus • Chlamydia • Gonorrhoea 	<p>MCQ + SEQ</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Module 9

Antenatal Obstetric Complications

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage complications in pregnancy affected by lifestyle.	<ul style="list-style-type: none"> Describe aetiology risk factor and management of common complications in pregnancy. Interpret relevant investigations. Assist in procedure of amnioreduction. Assist in heparin administration. Awareness of risk and its impact on mother & fetus. 	<ul style="list-style-type: none"> Minor problems in pregnancy Urinary tract infection Venous thromboembolism 	<ul style="list-style-type: none"> Small group discussion Antenatal / Labour Ward (Bedside teaching) 	MCQ OSPE + Viva	Obstetrics by Ten Teachers 20 th Edition Hacker & Moore's 1 st South Asian Edition

Module 10

Postpartum problems

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage the postnatal period and its related complications.	<ul style="list-style-type: none"> • Describe an understanding of a normal physiological changes after child birth. • Describe the common abnormalities of the postpartum period. • Identify and describe management of postpartum psychosis. • Describe the importance and techniques of breastfeeding. • Appropriate use of blood and blood products. • Describe the management of perineal trauma. • Advice regarding postpartum contraception. • Awareness of the roles of other healthcare professionals (psychiatrists, physiotherapists). • Awareness and importance of breastfeeding. • Display empathy with women with puerperal problems. 	<ul style="list-style-type: none"> • Physiological changes. • Recovery after child birth. • Puerperal disorder. • Psychiatric disorder. • Use of common drugs in breast feeding mother. • Postpartum contraception. • Define perinatal death. 	<ul style="list-style-type: none"> - Small group discussion - Antenatal Ward Bedside teaching 	SEQ + MCQ	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Gynaecology

Module 1

Disorders of Menstrual Bleeding and Hormonal Disorders

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Being able to manage disorders of menstrual bleeding.</p>	<ul style="list-style-type: none"> • Describe symptoms, terminology and aetiology of abnormal uterine bleeding including uterine polyp and hyperplasia, fibroid and adenomyosis. • Discuss the mnemonic PALM COEN. • Describe management of premenstrual syndrome. • Describe symptoms investigations and management of HMB. • Describe classification and causes of abnormal puberty and disorders of sexual differentiation. • Describe causes and investigations of primary and secondary amenorrhoea. • Interpret criteria to diagnose polycystic ovarian syndrome. • Describe management of polycystic ovarian syndrome. • Describe premature cessation of periods. • Take pertinent history and after examination able to make diagnosis of HMB. • Assist in making management plan for HMB. • Assist endometrial sampling. • Assist procedure of ovarian drilling. • Counsel the patient regarding action of medicine in case of menorrhagia and dysmenorrhoea. • Counsel the parents in case of primary amenorrhoea. • Awareness regarding lifestyle modification in polycystic ovarian syndrome and premenstrual syndrome. 	<p>Management of Premenstrual syndrome.</p> <p>Management of HMB.</p> <p>Primary & secondary amenorrhoea</p> <p>Management of polycystic ovarian syndrome.</p> <p>Primary & secondary dysmenorrhoea</p>	<p>- TBL</p> <p>- Indoor Small group discussion (SGD)</p> <p>OPD</p> <p>Bedside teaching</p>	<p>MCQ</p> <p>SEQ</p> <p>Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p> <p>Int. J. Gynaecol. Obstet 113(1):3-13 (AUB)</p> <p>https://www.nice.org.uk/cg44ICE guidelines (HMB)</p>

Module 2
Early pregnancy complications

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Manage vaginal bleeding and pain in early pregnancy.</p>	<ul style="list-style-type: none"> • Describe classification and type of miscarriages. • Describe aetiology clinical presentation and management of miscarriage including recurrent miscarriage. • Describe management of ectopic pregnancy and gestational trophoblastic disease. • Interpret ultrasound and biochemical marker in early pregnancy problem. • Perform urine for pregnancy test and interpret the result. • Assist Dilatation and Curettage (D&C) procedures. • Assist suction curettage. • Assist laparotomy for ectopic pregnancy. • Assist in resuscitation technique (hypovolemic shock) • Ability to communicate effectively and sensitively with patients and relatives. • Recognize the importance of high suspicion of pregnancy in all women of reproductive age. 	<p>Miscarriages</p> <p>Ectopic pregnancy</p> <p>Gestational trophoblastic disease</p>	<p>SGD – Indoor</p> <p>Labour Ward & Operation Theatre</p> <p>Implantation & Establishment pregnancy (Self Study)</p>	<p>MCQ</p> <p>SEQ</p> <p>Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore’s 1st South Asian Edition</p> <p>NCG 154: Ectopic pregnancy and miscarriage</p> <p>GTG 38: Management of GTD.</p> <p>GTG 17: The investigation and treatment of couple with recurrent 1st trimester and 2nd trimester miscarriages</p>

Module 3 Contraception

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Being able to advise use of reversible and irreversible contraceptive methods to prevent unintended pregnancies.</p>	<ul style="list-style-type: none"> • Describe the mechanism of action, efficacy. • Define non-contraceptive benefits of methods. • Describe indication, contraindication and complications of reversible, irreversible contraceptive methods. • Identify the use of emergency contraception. • Method of using Mac Wheel. • Assist insertion of implanon. • Assist insertion of IUCD (Intra Uterine Contraceptive Device). • Assist PPIUCD (Postpartum Intra Uterine Contraceptive Device) insertion. • Assist insertion of Mirena. • Assist procedure of female sterilization. • Counsel the couple regarding various methods of contraception and help them to choose the best method. • Provide information to the couple either verbally or in form of leaflets. 	<p>Different methods of contraception.</p> <p>Contraceptive & non contraceptive health benefits.</p>	<p>SGD – Indoor</p> <p>Antenatal Ward & Operation Theatre</p>	<p>MCQ SEQ Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore’s 1st South Asian Edition</p> <p>WHO (2015). Medical eligibility criteria for contraceptive use 5th edition, Geneva.</p>

Module 4
Urogynae and pelvic floor problems

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage urogenital prolapse and incontinence .	<ul style="list-style-type: none"> • Describe aetiolo yg clinical features, investigations and treatment of urinary incontinence and genital prolapse. • Describe management of urinary tract infection. • Explain the principles of urodynamic testing. • Interpret urodynamic testing. • Recognize prolapse on examination. • Take pertinent history from a patient with incontinence and/or prolapse. • Assist in making management plan of urinary incontinence and prolapse. • Assist vaginal hysterectomy and anterior, posterior repair. • Assist sacrocolpopexy • Awareness to patients regarding incontinence and beware of society showing reluctance to discuss incontinence and consequently to deal sensitivity with issues surrounding incontinence. • Counsel the patient and her relatives regarding potential side effects and complications of treatment offered. • Importance of multidisciplinary approach. 	<p>Urinary incontinence and genital prolapse.</p> <p>Urinary tract infection.</p>	<p>SGD – Indoor</p> <p>OPD</p> <p>Operation Theatre</p>	<p>MCQ</p> <p>SEQ</p> <p>Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore’s 1st South Asian Edition</p> <p>Dewhurst’s textbook of Obstetric & Gynaecology 9th edition (Urinary incontinence & UVP)</p>

Module 5
Premalignant and malignant diseases of genital tract

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Being able to make management plan of ovarian, endometrial and cervical cancer.</p>	<ul style="list-style-type: none"> • Describe aetiology, pathophysiology diagnosis, investigations and treatment of premalignant disease of cervix, ovary and vulva. • Describe of ovarian CA, aetiology, screening, clinical features, staging of ovarian, endometrial and cervical cancer. • Suggest and interpret investigations. • Describe management of above mentioned cancer. • Briefly describe primary peritoneal tumour. • Perform pap smear. • Assist colposcopy after acetic acid or lugol iodine application. • Assist staging laparotomy. • Awareness regarding prophylactic HPV vaccination and importance of cervical screening. • Recognize need for a supportive environment to counsel patients and relatives regarding the treatment prognosis. 	<p>Premalignant and malignant diseases of cervix.</p> <p>Premalignant and malignant disease of ovary.</p> <p>Premalignant and malignant disease of uterus.</p> <p>Premalignant and malignant disease of vulva.</p>	<p>SGD – Indoor OPD Operation Theatre</p>	<p>MCQ SEQ Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition.</p> <p>Dewhurst's textbook of Obstetric & Gynaecology 9th edition</p>

Module 6 Subfertility

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage subfertility couple.	<ul style="list-style-type: none"> • Describe management of male and female infertility. • Explain processes and procedures involve in ART along with outcome and its success rate. • Suggest and interpret investigations. • Define complications of ovulation induction. • Describe management of endometriosis. • Take patient history and examination. • Assist diagnostic laparoscopy. • Assist in formulating a management plan subfertile patients. • Assist laparotomy for endometriosis. • Counseling of couple regarding psychosocial problems. • Maintain patient confidentiality • Display empathy with the couple. 	<p>Causes and history of subfertile couple.</p> <p>Management of endometriosis</p>	<p>SGD – Indoor OPD Operation Theatre</p>	<p>MCQ SEQ Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p> <p>NICE Clinical guidelines 11 (Fertility assessment and treatment for couple with fertility problems).</p> <p>www.nice.org.uk/guidance/cg156</p>

Module 7
Upper and Lower Genital Tract Infection & Chronic Pelvic Pain

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
<p>Manage chronic pelvic pain, sexually transmitted infections (STI) and blood borne viruses.</p>	<ul style="list-style-type: none"> • Describe testing, diagnosis and transmission of STI and blood borne viruses. • Describe care of HIV positive mother and child. • Suggest and interpret investigations for STI. • Enumerate list of potential causes of chronic pelvic pain and management option. • Perform high vaginal swab. • Counsel and give support to patients to undertake screening of STI. • Give awareness to patients and their relatives regarding preventive measures for STI and blood borne viruses. • Liaison with pain clinic. 	<p>Viral sexually transmitted infections and systemic manifestations.</p> <p>Infective causes of vaginal discharge.</p> <p>Pelvic inflammatory disease.</p> <p>Human immunodeficiency virus.</p>	<p>SGD – Indoor OPD</p>	<p>MCQ SEQ Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Module 8 Menopause

Exit learning outcome	Enabling learning outcome	Contents	Teaching & Learning method	Assessment	Learning resources
Manage menopause and postmenopausal care.	<ul style="list-style-type: none"> • Define menopause. • Describe effects of menopause on women. • Describe modifiable aspects of menopause. • Describe main treatment options in menopause. • Describe side effects absolute and relative contra indications of hormonal replacement therapy. • Formulate management plan for menopausal patient. • Recognize the importance of care of women during post reproductive years. • Counseling of menopausal patients regarding pros & cons of hormonal replacement therapy. 	<p>Physiological and non physiological menopause.</p> <p>Hormonal replacement therapy.</p>	<p>SGD – Indoor OPD</p>	<p>MCQ SEQ Viva & OSPE</p>	<p>Obstetrics by Ten Teachers 20th Edition</p> <p>Hacker & Moore's 1st South Asian Edition</p>

Calendar for the academic year

<p>Day 1</p>	<p>Time: 08:00 AM to 09:30 AM <u>Module 1 (Gynae)</u> <i>Disorders of menstrual bleeding and hormonal disorders</i></p> <p>Duration: 8 Days Day: 1</p> <p>Facilitator: Prof. Sumera Tahir</p> <p><u>Small group discussion</u></p> <ul style="list-style-type: none"> • Gynae history taking <ul style="list-style-type: none"> ○ Ward Class Room (SGD with LCD display) ○ Practical session <p>History and examination of following cases on patients/scenario, plan investigation, diagnosis and treatment:</p> <ul style="list-style-type: none"> • HMB <ul style="list-style-type: none"> ○ Case discussion with history taking pertinent to (PALM COEIN) ○ Plan investigation ○ Interpret investigation ○ Final diagnosis (BEO) ○ Treatment ○ Counseling for action of medicines used for heavy menstrual bleeding/ dysmenorrheal 	<p>Time: 09:30 AM to 11:00 AM <u>Module 1 (Obs)</u> <i>Antenatal care</i></p> <p>Duration:1 Day</p> <p>Facilitator: Dr. Saadia Saleem</p> <p><u>Small group discussion</u></p> <ul style="list-style-type: none"> • Obstetric history • Filling of antenatal card • Measuring B.P. • Genera physical examination • Abdominal examination • Interpret investigations • Suggest supplements iron and calcium • Tetavax toxoid/Anti-D • Counseling education reassurance of women regarding antenatal care. 	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p> <p>Observe/assist in endosampling (OPD or OT)</p> <p>Observe/assist in Laparoscopy for ovarian drilling</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>
---------------------	---	---	---------------------------------------	---	---	---

<p>Day 2</p>	<p>Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u> History and examination of following cases on patients/scenario, plan investigation, diagnosis and treatment:</p> <p>Cases:</p> <ol style="list-style-type: none"> 1. Multiparous with fibroid (family complete) 2. Primary subfertility with fibroid 3. Submucous prolapse fibroid 4. Adenomyosis 5. Endometrial hyperplasia 6. Pelvic infection and HMB 7. Coagulation defects (chronic liver disease, chronic kidney disease). 8. Not yet classified. <p>Counseling regarding treatment options.</p>	<p>Time: 09:30 AM to 11:00 AM <u>Module 2</u> <i>Assessment of fetal well being</i> Duration: 1 Day Facilitator: Prof. Sumera Tahir</p> <p><u>Small group discussion</u></p> <ul style="list-style-type: none"> • Basics of ultrasound in obstetrics • Interpretation of biophysical profile • Interpretation of CTG (Intrapartum & antipartum) • Counseling for fetal well being. • Detail counseling of women prior to screening, diagnostic test and explaining line of action in case of fetal compromise/fetal anomalies. 	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>
<p>Day 3</p>	<p>Time: 08:00 AM to 10:30 AM <u>Module 3</u> <i>Prenatal diagnosis (Obs)</i> Duration: 1 Day Facilitator: Dr. Saadia Saleem</p> <p><u>Team based learning (TBL)</u></p> <ul style="list-style-type: none"> • Prenatal diagnosis 	<p>10:30 AM to 11:00 AM Tea Break</p>	<p>11:00 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>	

<p>Day 4</p>	<p>Time: 08:00 AM to 09:30 AM Day: 3 <u>Small group discussion</u> History and examination of following cases on patients/scenario, plan investigation and treatment:</p> <p>Cases:</p> <ol style="list-style-type: none"> 1. Multiparous with fibroid (family complete) 2. Primary subfertility with fibroid 3. Submucous prolapse fibroid 4. Adenomyosis 5. Endometrial hyperplasia 6. Pelvic infection and HMB 7. Coagulation defects (chronic liver disease, chronic kidney disease). 8. Not yet classified. 	<p>Time: 09:30 AM to 11:00 AM <u>Module 4</u> Management of labour</p> <p>Duration: 4 Days Day: 1</p> <p>Facilitator: Prof. Sumera Tahir</p> <p><u>Small group discussion</u> History and examination of following cases on patients/scenario:</p> <ul style="list-style-type: none"> • Mechanism of labor on mannequin, diagnosis and management of normal labour including use of partogram. • Analgesia & anesthesia in labour • Fetal monitoring in labour. 	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p> <p>Observe/assist in endosampling (OPD or OT)</p> <p>Observe/assist in Laparoscopy / ovarian drilling</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>
<p>Day 5</p>	<p>Time: 08:00 AM to 09:30 AM Day: 4 <u>Small group discussion</u> History and examination of following cases on patients/scenario:</p> <p>Cases:</p> <ol style="list-style-type: none"> 1. Multiparous with fibroid (family complete) 2. Primary subfertility with fibroid 3. Submucous prolapse fibroid 4. Adenomyosis 5. Endometrial hyperplasia 6. Pelvic infection and HMB 7. Coagulation defects (chronic liver disease, chronic kidney disease). 8. Not yet classified. 	<p>Time: 09:30 AM to 11:00 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to recognition, counseling and management of abnormal labour, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p> <p>Observe/assist in amnioreduction</p> <p>Observe/assist in heparin administration</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>

Day 6	Time: 08:00 AM to 10:30 AM Day 5 Facilitator: Dr. Tasnim Tahira Co-facilitator: Dr. Ammara/Dr. Ayesha <u>Team based learning (TBL)</u> <ul style="list-style-type: none"> Primary & secondary amenorrhea 	10:30 AM to 11:00 AM Tea Break	11:00 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster	
Day 7 Sunday						
Day 8	Time: 08:00 AM to 9:30 AM Day: 6 <u>Small group discussion</u> History and examination/scenario Pertinent to primary & secondary amenorrhea, plan investigation and treatment. <ul style="list-style-type: none"> Counseling of parents according to cause of primary amenorrhea. 	Time: 09:30 AM to 11:00 AM Day: 3 <u>Small group discussion</u> History and examination of following cases on patients/scenario, plan investigation, diagnosis and treatment: <ul style="list-style-type: none"> Obstetric emergencies (e.g. massive haemorrhage such as postpartum haemorrhage, amniotic fluid embolism, uterine inversion, trauma to the genital organ). 	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 9	Time: 08:00 AM to 09:30 AM Day: 7 <u>Small group discussion</u> History and examination/scenario pertinent to premenstrual syndrome plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 4 <u>Small group discussion</u> History and examination/scenario pertinent to obstetric emergencies (eclampsia & uterine rupture/cord prolapse), plan investigation, diagnosis and treatment.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break) Hypovolemic shock .	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

<p>Day 10</p>	<p>Time: 08:00 AM to 09:30 AM Day: 8 <u>Small group discussion</u> History and examination/scenario pertinent to polycystic ovarian syndrome, plan investigation, diagnosis and treatment.</p>	<p>Time: 09:30 AM to 11:00 AM <u>Module 5</u> <i>Operative obstetrics instrumental delivery – shoulder dystocia</i> Duration: 1 Day Facilitator: Dr. Naureen Javed <u>Practical session on Manniquin/Videos</u> <ul style="list-style-type: none"> • Forceps delivery • Vacuum delivery • Episiotomy • Shoulder dystocia • C-Section • Breech delivery </p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break) hypovolemic shock .</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>
<p>Day 11</p>	<p>Time: 08:00 AM to 09:30 AM <u>Module 2:</u> <i>Early pregnancy complications</i> Duration: 3 days Day: 1 Facilitator: Dr. Saadia Saleem <u>Small group discussion</u> History and examination/scenario pertinent to miscarriage, plan investigation, diagnosis and treatment. Perform pregnancy test by dip stick.</p>	<p>Time: 09:30 AM to 11:00 AM <u>Module 6</u> <i>High risk pregnancy</i> Duration: 6 days Day: 1 Facilitator: Prof. Sumera Tahir <u>Small group discussion</u> History and examination/scenario pertinent to multiple pregnancy, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster Observe/assist E&C Observe/assist suction curettage Observe/assist laparotomy for ectopic pregnancy Observe/assist in resuscitation of patients in hypovolemic shock</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>

Day 12	Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to ectopic pregnancy , plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 2 <u>Small group discussion</u> History and examination/scenario Pertinent to Rhesus isoimmunization, plan investigation, diagnosis and treatment.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster Observe/assist E&C Observe/assist suction curettage Observe/assist laparotomy for ectopic pregnancy Observe/assist in resuscitation of patients in hypovolemic shock.	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 13	Time: 08:00 AM to 09:30 AM Day: 3 <u>Small group discussion</u> History and examination/scenario pertinent to molar pregnancy , plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 3 <u>Small group discussion</u> History and examination/scenario pertinent to preterm/post-term pregnancy, plan investigation, diagnosis and treatment.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster Observe/assist in cervical cerclage.	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 14 Sunday						
Day 15	Time: 08:00 AM to 09:30 AM <u>Module 3</u> Contraception Duration: 2 Days Day: 1 Facilitator: Dr. Naureen Javed	Time: 09:30 AM to 11:00 AM Day: 4 <u>Small group discussion</u> History and examination/scenario pertinent to pre-PROM, plan investigation, diagnosis and treatment. Video of cervical cerclage, ECV and breech delivery.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

	<p><u>Small group discussion</u> History and examination/scenario pertinent to contraception.</p> <p>Video insertion of IUCD</p> <p>Video of placing implanon</p> <p>Practice methods of contraception in skill workshop</p> <p>Using MEC Wheel</p> <p>Students will learn to counsel best contraceptive method according to patient's well being.</p>					
Day 16	<p>Time: 08:00 AM to 09:30 AM</p> <p><u>Module 4</u></p> <p><i>Urogynae and pelvic floor problem</i></p> <p>Duration: 2 Days</p> <p>Day: 1</p> <p>Facilitator: Prof. Sumera Tahir</p> <p><u>Small group discussion</u> History and examination/scenario pertinent to urinary incontinence, plan investigation, diagnosis and treatment.</p> <p>Video of ring pessary insertion</p> <p>Video of vaginal hysterectomy</p>	<p>Time: 09:30 AM to 11:00 AM</p> <p>Day: 5</p> <p><u>Small group discussion</u> History and examination/scenario pertinent to intrauterine growth restriction/oligohydramnios, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p> <p>Observe/assist PPIUCD</p> <p>Observe/assist IUCD insertion</p> <p>Observe/assist Mirena insertion in Labour ward/OT</p> <p>Observe/assist tubal ligation.</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>

Day 17	<p>Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to uterovaginal prolapse, plan investigation, diagnosis and treatment.</p>	<p>Time: 09:30 AM to 11:00 AM Day: 6 <u>Small group discussion</u> History and examination/scenario pertinent to antepartum haemorrhage, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster Assist/observe vaginal hysterectomy and anterior, posterior repair Assist/observe sacrohysteropexy</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>
Day 18	<p>Time: 08:00 AM to 09:30 AM <u>Module 5</u> <i>Upper & lower genital tract infection and chronic pelvic pain</i> Duration: 2 Days Day: 1 Facilitator: Dr. Saadia Saleem <u>Small group discussion</u> History and examination/scenario pertinent to upper & lower genital tract infection and chronic pelvic pain, plan investigation, diagnosis and treatment. Video of high vaginal swab Counseling regarding prevention of genital infection.</p>	<p>Time: 09:30 AM to 11:00 AM <u>Module 7</u> <i>Medical disorders in pregnancy</i> Duration: 9 Days Day: 1 Facilitator: Dr. Naureen Javed / Dr. Saadia Saleem <u>Small group discussion</u> History and examination/scenario pertinent to hypertensive disorder in pregnancy, plan investigation, diagnosis and treatment. Multidisciplinary involvement for management of medical disorders in pregnancy. Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>

Day 19	Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to upper & lower genital tract infection and chronic pelvic pain, plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to hypertensive disorder in pregnancy, plan investigation, diagnosis and treatment. Multidisciplinary involvement for management of medical disorders in pregnancy. Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 20	Time: 08:00 AM to 10:30 AM <p style="text-align: center;"><u>Module 6</u></p> <p style="text-align: center;"><i>Premalignant and Malignant diseases of genital tract</i></p> Duration: 7 Days Day: 1 Facilitator: Dr. Tasnim Tahira Co-facilitator: Dr. Ammara/Dr. Ayesha <u>Team based learning (TBL)</u> Premalignant and malignant diseases of genital tract.		10:30 AM to 11:00 AM Tea Break	11:00 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 21 Sunday						
Day 22	Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u> History and examination/scenario pertinent to ovarian carcinoma, plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 3 <u>Small group discussion</u> History and examination/scenario pertinent to heart disease in pregnancy, plan investigation, diagnosis and treatment.	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

		<p>Multidisciplinary involvement for management of medical disorders in pregnancy.</p> <p>Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease</p>				
Day 23	<p>Time: 08:00 AM to 09:30 AM Day: 3 <u>Small group discussion</u> History and examination/scenario pertinent to ovarian carcinoma, plan investigation, diagnosis and treatment.</p>	<p>Time: 09:30 AM to 11:00 AM Day: 4 <u>Small group discussion</u> History and examination/scenario pertinent to diabetes in pregnancy, polyhydramnios/Pre GDM, plan investigation, diagnosis and treatment.</p> <p>Multidisciplinary involvement for management of medical disorders in pregnancy.</p> <p>Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease.</p>	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster
Day 24	<p>Time: 08:00 AM to 09:30 AM Day: 4 <u>Small group discussion</u> History and examination/scenario pertinent to endometrial carcinoma, plan investigation, diagnosis and treatment.</p> <p>Video regarding method of pap smear</p>	<p>Time: 09:30 AM to 11:00 AM Day: 5 <u>Small group discussion</u> History and examination/scenario pertinent to renal & respiratory disease in pregnancy, plan investigation, diagnosis and treatment.</p> <p>Multidisciplinary involvement for management of medical</p>	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster Assist/observe in taking pap smear	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

	<p>Video of performing colposcopy</p> <p>Counseling of patient regarding breaking the bad news, diagnosis and treatment.</p>	<p>disorders in pregnancy.</p> <p>Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease</p>		<p>Assist/observe in colposcopy</p> <p>Assist staging laparotomy</p>		
Day 25	<p>Time: 08:00 AM to 09:30 AM Day: 5 <u>Small group discussion</u> History and examination/scenario pertinent to cervical carcinoma, plan investigation, diagnosis and treatment.</p> <p>Management of patient with preinvasive disease of cervix</p> <p>Counseling of patient regarding breaking the bad news, diagnosis and treatment.</p>	<p>Time: 09:30 AM to 11:00 AM Day: 6 <u>Small group discussion</u> History and examination/scenario pertinent to epilepsy/viral hepatitis in pregnancy, plan investigation, diagnosis and treatment.</p> <p>Multidisciplinary involvement for management of medical disorders in pregnancy.</p> <p>Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p> <p>Assist/observe in taking pap smear</p> <p>Assist/observe in colposcopy</p> <p>Assist staging laparotomy</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>
Day 26	<p>Time: 08:00 AM to 09:30 AM Day: 6 <u>Small group discussion</u> History and examination/scenario pertinent to cervical carcinoma, plan investigation, diagnosis and treatment.</p> <p>Prevention of carcinoma of cervix</p> <p>Management of preinvasive disease</p> <p>Counseling of patient regarding</p>	<p>Time: 09:30 AM to 11:00 AM Day: 7 <u>Small group discussion</u> History and examination/scenario pertinent to anemia in pregnancy, plan investigation, diagnosis and treatment.</p> <p>Multidisciplinary involvement for management of medical disorders in pregnancy.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>

	breaking the bad news, diagnosis and treatment.	Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease				
Day 27	Time: 08:00 AM to 09:30 AM Day: 7 <u>Small group discussion</u> History and examination/scenario pertinent to vulval carcinoma, plan investigation, diagnosis and treatment. Counseling of patient regarding breaking the bad news, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM Day: 8 <u>Small group discussion</u> History and examination/scenario pertinent to anemia in pregnancy, plan investigation, diagnosis and treatment. Multidisciplinary involvement for management of medical disorders in pregnancy. Counseling of patient regarding effect of disease on pregnancy and effect of pregnancy on disease	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00PM Students will work with residents on their respective positions according to duty Roster
Day 28 Sunday						
Day 29	Time: 08:00 AM to 10:30 AM <p style="text-align: center;"><u>Module 7</u></p> <p><i>Subfertility</i></p> Duration: 3 Days Day: 1 Facilitator: Dr. Naureen Javed <u>Team based learning (TBL)</u> <ul style="list-style-type: none"> • Subfertility 		10:30 AM to 11:00 AM Tea Break	11:00 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

Day 30	<p>Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u></p> <p>History and examination/scenario pertinent to subfertility, plan investigation, diagnosis and treatment :</p> <ul style="list-style-type: none"> • Anovulation (PCOS) • Tubal factor • Male factor • Unexplained <p>Counseling of couple and display empathy.</p>	<p>Time: 09:30 AM to 11:00 AM Day: 9 <u>Small group discussion</u></p> <p>History and examination/scenario pertinent to bleeding disorder in pregnancy, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00PM Students will work with residents on their respective positions according to duty Roster</p>
Day 31	<p>Time: 08:00 AM to 10:30 AM</p> <p style="text-align: center;"><u>Module 8</u></p> <p><i>Perinatal Infection (Obs)</i></p> <p>Duration: 2 Days Day: 1</p> <p>Facilitator: Dr. Robina Ali Co-facilitator: Dr. Riffat/Dr. Ghazala <u>Team based learning (TBL)</u></p> <ul style="list-style-type: none"> • Perinatal infection 	<p>10:30 AM to 11:00 AM Tea Break</p>	<p>11:00 AM to 02:00 PM Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster</p>	

Day 32	<p>Time: 08:00 AM to 09:30 AM Day: 3 <u>Small group discussion</u></p> <p>History and examination/scenario pertinent to subfertility, plan investigation, diagnosis and treatment.</p>	<p>Time: 09:30 AM to 11:00 AM Day: 2 <u>Small group discussion</u> History and examination of following cases on patients/scenario:</p> <ul style="list-style-type: none"> • Rubella • Chicken pox • Herpes simplex • HIV • Group B Streptococcus <p>Awareness of vaccine against Rubella</p> <p>Awareness regarding mode of transmission and prevention from viral infections</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>
Day 33	<p>Time: 08:00 AM to 09:30 AM <u>Module 8</u> Menopause</p> <p>Duration: 2 Days Day: 1 Facilitator: Dr. Saadia Saleem</p> <p><u>Small group discussion</u> History and examination/scenario pertinent to menopause, plan investigation, diagnosis and treatment.</p> <p>Counseling of patient regarding pros & cons of HRT.</p>	<p>Time: 09:30 AM to 11:00 AM <u>Module 9</u> Antenatal obstetric complication</p> <p>Duration: 4 days Day: 1 Facilitator: Dr. Naureen Javed</p> <p><u>Small group discussion</u> History and examination/scenario pertinent to minor problems in obs/urinary tract infection, plan investigation, diagnosis and treatment.</p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>MCQs & SEQs assessment</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer Break)</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on their respective positions according to duty Roster</p>
Day 34	<p>Time: 08:00 AM to 09:30 AM Day: 2 <u>Small group discussion</u></p>	<p>Time: 09:30 AM to 11:00 AM Day 2: <u>Small group discussion</u></p>	<p>11:00 AM to 11:30 AM Tea Break</p>	<p>11:30 AM to 02:00 PM</p> <p>OSPE</p>	<p>02:00 PM to 03:00 PM (Lunch & Prayer</p>	<p>03:00 PM to 08:00 PM</p> <p>Students will work with residents on</p>

	History and examination/scenario pertinent to menopause, plan investigation, diagnosis and treatment.	History and examination/scenario pertinent to venous thrombo embolism, plan investigation, diagnosis and treatment. Awareness of risk factors and its effect on mother and fetus			Break)	their respective positions according to duty Roster
Day 35 Sunday						
Day 36	Time: 09:30 AM to 11:00 AM <u>Module 10 (Obs)</u> <i>Postpartum problems</i> Duration: 1 Days Facilitator: Dr. Saadia Saleem <u>Small group discussion</u> History and examination/scenario pertinent to puerperal sepsis, plan investigation, diagnosis and treatment.	Time: 09:30 AM to 11:00 AM <u>Small group discussion</u> History and examination of following cases on patients/scenario, plan investigation, diagnosis and treatment: <ul style="list-style-type: none"> • Perineal trauma • Puerperal psychosis • Counseling regarding postpartum contraception and benefits of breast feeding. • Teaching breast feeding methods/milk expression. • Cord care 	11:00 AM to 11:30 AM Tea Break	11:30 AM to 02:00 PM Long case assessment	02:00 PM to 03:00 PM (Lunch & Prayer Break)	03:00 PM to 08:00 PM Students will work with residents on their respective positions according to duty Roster

Table of Specification according to University criteria

Obstetrics (Multiple Choice Questions)

35 MCQs of one mark each

Time Allowed

45 minutes

Sr. No.	Contents	No. of Questions
1	Physiological changes in pregnancy	2
2	Normal Fetal Development	2
3	Abnormal Fetal Development	2
4	Assessment of Fetal Well Being	3
5	Role of Investigations	1
6	Antenatal Care	4
7	Pain relief in Labour	1
8	Normal Labour	4
9	Abnormal Labour	4
10	Puerperal Disorders	3
11	Medical Disorders in Pregnancy	4
12	Role of Imaging and Radiology	2
13	Statistics	2
14	Neonatology	1
Total MCQs		35

Obstetrics
(Short Essay Questions)

07 SEQs of 05 marks each

Time Allowed

2 hours

Sr. No.	Contents	No. of Questions
1	Physiology of pregnancy	1
2	Antenatal care including investigations	1
3	Assessment of Fetal Well Being	1
4	Intrapartum Care – Normal Labour	1
5	Abnormal Labour	1
6	Post – Partum Disorders	1
7	Medical disorders in Pregnancy	1
Total SEQs		07

Gynaecology
(Multiple Choice Questions)

35 MCQs of one mark each

Time Allowed

45 minutes

Sr. No.	Contents	No. of Questions
1	Anatomy and embryology of genital tract	2
2	Disorders of puberty and ovulation	2
3	Disorders of menstruation	4
4	Abortions	2
5	Ectopic gestation	1
6	Infertility	2
7	Endometriosis and adenomyosis	1
8	Infections of the genital tract	3
9	Uterovaginal prolapse	1
10	Urogynaecology and fistulae	1
11	Benign diseases of genital tract	4
12	Malignant diseases of genital tract	4
13	Contraception	2
14	Menopause and HRT	2
15	Common gynaecological procedures	2
16	Pre-intra and post-operative care	
Total MCQs		35

Gynaecology
(Short Essay Questions)

10 SEQs of 03 marks each

Time Allowed

2 hours and 15 minutes

Sr. No.	Contents	No. of Questions
1	Anatomy and development of the genital tract	1
2	Disorders of menstruation	1
3	Abortions including ectopic gestation	1
4	Infertility and Endometriosis	1
5	Infections of genital tract	1
6	Benign tumours of genital tract	1
7	Malignancies of the genital tract	1
8	Displacements of the uterus and urinary problems	1
9	Contraception	1
10	Common gynaecological procedures	1
Total MCQs		10

University exam format along with marks division

Gynaecology & Obstetrics:			
Theory	=		150 Marks
Paper Obstetrics			
07 Short Essay Questions	=	35 Marks	
35 MCQs (One best type)	=	35 Marks	
Paper Gynaecology			
10 Short Essay Questions	=	30 Marks	
35 MCQs (One best type)	=	35 Marks	
Internal Assessment	=	15 Marks	
Clinical	=		150 Marks
OSPE, long case & short cases	=	135 Marks	
Internal Assessment	=	15 Marks	
Grand Total	=		300 Marks

Role of Teachers & Students

Teacher:

The modern teacher of Obstetrics & Gynaecology provide knowledge, acts as a role model, facilitate learning and plans assessment.

Student:

Hallmarks of good learner are that he or she should be motivated, had good communication skills and language proficiency, ability to understand and apply learning, had ability to retain facts, could provide good time management and could self reflect.