



STUDY GUIDE GYNAECOLOGY AND OBSTETRICS

Final Professional MBBS Students

**Khyber Girls Medical
College**

Peshawar

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Vision and Mission of KGMC

Khyber Medical University: Vision



Khyber Medical University will be the global leader in health sciences academics and research for efficient and compassionate health care.

Khyber Girls Medical College: Vision



“Excellence in health care, research, teaching and training in the service of Humanity”

Khyber Girls Medical College: Mission



The mission of KGMC is to promote compassionate and professional health care leaders Who are knowledgeable, skillful, and community oriented lifelong learners serving humanity through evidence-based practices.

Curriculum Committee:

Chair:

- Professor Dr. Zahid Aman Dean KGMC.

Co-Chair:

- Dr. Amin ul Haq, Associate Dean KGMC.

Clinical Sciences:

- Dr. Mohammad Noor Wazir, Department of Medicine KGMC/HMC
- Dr. Bushra Rauf Department of Gynae KGMC/HMC.
- Dr. Sofia Iqbal, Department of Ophthalmology KGMC/HMC.
- Dr. Said Amin Department of Medicine KGMC/HMC.
- Dr. Ghareeb Nawaz Department of ENT KGMC/HMC.
- Dr. Jamshed Alam Department of Surgery KGMC/HMC.
- Dr. Ambreen Ahmad, Department of Pediatrics KGMC/HMC.
- Dr. Ain-ul-Hadi Department of Surgery KGMC/HMC.
- Dr. Fawad Rahim Department of Medicine KGMC/HMC.

Behavioral Sciences:

- Dr. Ameer Abbas Department of Psychiatry

Basic Sciences:

- Dr. Amin-ul-Haq Department of Biochemistry, KGMC.
- Dr. Khalid Javed Department of Pathology, KGMC.
- Dr. Raheela Amin Department of Community Medicine, KGMC.
- Dr. Zubia Shah Department of Physiology, KGMC.
- Dr. Naheed Siddique Department of Forensic Medicine, KGMC.
- Dr. Shams Suleman Department of Pharmacology, KGMC.
- Dr. Shahab-ud-Din, Department of Anatomy, KGMC.

Medical education

- Dr. Naheed Mahsood, Department of Medical Education, KGMC.
- Dr. Naveed Afzal Khan, Department of Medical Education, KGMC.
- Dr. Khurram Naushad, Department of Medical Education, KGMC.

Integrated Curriculum:

An integrated curriculum is all about making connections, whether to real life or across the disciplines, about skills or about knowledge. An integrated curriculum fuses subject areas, experiences, and real-life knowledge together to make a more fulfilling and tangible learning environment for students. Integrated teaching means that subjects are presented as a meaningful whole. Students will be able to have better understanding of basic sciences when they repeatedly learn in relation to clinical examples, Case based discussions, computer-based assignments. Early exposure to clinics, wards, and skills acquisition in skills lab are characteristics of integrated teaching program.

Outcomes of the curriculum:

The Curricular Outcomes of the MBBS Program for a Graduating Doctor according to the PMDC are as follows:

1. Knowledgeable

Knowledgeable about the diseases and health conditions prevalent in the population of Pakistan and use Evidence-based medicine to provide best possible cost-effective care.

2. Skillful

Skillful in History taking and Physical examination to compassionately deal with a patient.

3. Community health promoter

Take appropriate decisions and actions for protecting and promoting the health of their community.

4. Critical Thinker

Evaluate critically the patient data to effectively deal with complexity of medical decisions for the best possible outcomes using evidence-based practices in service of humanity.

5. Professional

Display professional values (honesty, accountability, cultural and religious sensitivity), attitudes and behaviors (empathy, ethics, good communication skills and lifelong learner) that embody good medical practice.

6. Researcher

Exhibit a spirit of inquisitiveness, inventiveness, and ethical conduct while carrying out research in accordance with the prescribed guidelines.

7. Leader and role Model

Demonstrate exemplary conduct and leadership in Advancing healthcare, enhancing medical education, and enhancing the trust of the public in the medical profession by being exceptional role models.

Knowledge

By the end of five-year MBBS program the KGMC student should be able to;

1. Acquire a high level of clinical proficiency in history taking, physical examination, differential diagnosis, and the effective
2. Use of medicine's evolving diagnostic and procedural capabilities including therapeutic and palliative modalities.
3. Manage the common prevalent diseases in community
4. Identify the common medical emergencies
5. Develop plan for prevention of common community diseases
6. Formulate a referral plan
7. Compose a prescription plan

Psychomotor

By the end of five year MBBS program the KGMC student should be able to;

1. Demonstrate the ability to perform the disease specific relevant examination
2. Respond to common medical emergencies
3. Master the skill of first aid
4. Perform BLS

Affective

By the end of five-year MBBS program the KGMC student should be able to

1. Relate to patient and careers vulnerability
2. Demonstrate ethical self-management
3. Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.
4. Display compassion with patient and colleagues
5. Demonstrate in clinical care an understanding of the impact of psychological, social, and economic factors on human health and disease.

FOR FINAL YEAR MBBS STUDENTS
Subject: Obstetrics & Gynaecology

**MODULE: REPRODUCTIVE
HEALTH**

Reproductive health is a state of complete physical, mental and social wellbeing not merely the absence of disease or infirmity. The module is reproductive health includes knowledge of anatomy and physiology of genital tract. The application of various diagnostic modalities, their outcome, ascertaining diagnosis and scientific treatment of different disorders pertaining to genital tract. God has gifted one of the most beautiful functions of reproduction to female genital tract that blesses mankind with love, affection, need of care, creation of social bonding and kindness. The female who creates a life at the expense her own deserves utmost care during parturition. All the needs during antenatal, intra natal and postnatal period pertaining to good health, healthy outcome of pregnancy, prevention of complications and skilled deliveries are the subject of reproductive health.

The gynaecology part of this module comprises of genital tract normal behaviour, and its different disorders ranging from simple to complicated ones and from benign to malignant one. The possible solution to these problems is the mainstay of this module.

The obstetrical portion is comprised of physiology of conception, antenatal care, early pregnancy complications, fetal wellbeing, pregnancy specific problems, intra natal assistance, operative interventions and post-natal care. Neonatal resuscitation, initiation of breast feeding, early neonatal health issues also come in this domain along with pediatrician help.

FACULTY MEMBERS

(Chairman and Head of Department).

Prof. Dr. Shamshad begum

Professors

Dr Naeema Utman

Dr Bushra Rauf

Prof. Samia Zahid

Associate professors:

Dr Rabea Sadaf

Dr Ghazala Shams

Dr Sadia Shamsher

Assistant professors

Dr Rubina Akhtar

Dr Sadia Ali

Dr Rukhsana Kareem

Dr Shazia khattak

Dr Madeeha Iqbal

Dr Nassreen Kishwar

1. Introduction:

A study guide is just like a travel guide. As travel guide is a useful resource for the traveler. It is an aid, either in printed or electronic form, designed to serve the same functions relative to students' studies. It encourages effective study skills and self-directed lifelong learning. [1]

Study guide is like a 24/7 tutor sitting on the students' shoulder to advise them on what they should be doing at any stage in their study. The study guide is an important tool in the educational process because of information overload, curriculum change, spiral curriculum, distance learning, work-based learning and self-directed learning [2, 3]. The study guides are usually made to direct the students toward a pathway that dictates completion of syllabus through integrated curriculum. It is a time bound document which facilitate timely completion of proposed curriculum and any one can identify at any time what is to be taught in which part of academic year. A preloaded document that ensures how and when to complete the part of curriculum. This helps the need for documentation and prevents information overload. These are helpful to students to manage their own learning [4]. These are helpful in planning for excellence awards to be achieved in a competitive environment. These can be used for distance learning, curriculum maintenance and curriculum dissemination.

The benefits of study guide are:

- It helps in incorporating integrated programs.

- It facilitates student's interaction with curriculum.

- Provides a frame work for learning
- It ensures uniformity
- Record of students' work can be obtained
- Helps inculcating self-study skills
- It prepares the student for examinations
- It presents content related to the subject
- Provides knowledge about the content
- Reading is the only activity required
- Concerned mainly with the area of knowledge.

2. Rationale

Since doctors are concerned with community health that makes it necessary to acquire knowledge and skills to impart health care in order to make a 7 Star doctor who has to be a care provider, good communicator, decision maker community leader, manager, researcher and professional he has to be guided through a system that can impart all these competencies. This requires orientation and introduction to medical sciences in relation to health and disease. These guidelines will help the doctor to become a successful health care leader and ethical doctor of tomorrow.

Female genital tract and diseases related to reproductive system are very important and gaining attention constantly and has been incorporated in millennium development goals as well. The diseases related to genital tract are core teaching in this module. There are 7 themes of gynaecology that make up the major portion of genital tract disorders. Themes are further having multiple clinical conditions. Table of specification of each clinical condition are made accordingly. There is a separate portion for obstetrics as well.

Part I. Gynaecology

1. Dysfunctional uterine bleeding
2. Pelvic pain
3. Vaginal discharge
4. Pelvic mass
5. Urogynaecology
6. Infertility, contraception.
7. Disorders of puberty

Part II. Obstetrics

1. Basic maternal physiology
2. Normal pregnancy
3. Early pregnancy problems
4. Maternal Medicine
5. Fetal Medicine
6. Birth
7. post-natal care

In this integrated curriculum we must incorporate all knowledge of basic level and clinical together so that students can understand a system in relation to disease as well. The module is usually constituted in a way to start from basic to research up to clinical in a continuum. For this purpose, the reproductive system has been divided in to module 1 & module II. For final year the major portion of module is clinical & small portion is comprised of basic. In a spiral curriculum the module 1 is included in 2nd, 3rd year. While module II in for 4th & final year.

Final year will learn module of genital tract disorders. That includes menstrual disorders, pelvic inflammatory disease, sexually transmitted diseases, vaginal discharge and genital tract tumors.

3. General outcomes

At the end of this module the final year student shall be able to:

- a) Understand the importance of women's health.
- b) Acquire adequate knowledge regarding women's health
- c) Learn sufficient skills to exercise his competency
- d) Learn professional behavior
- e) Identify ethical barriers while in practice
- f) Participate in improvement of patient care
- g) Able to recognize and differentiate different problems of reproductive health
- h) Actively participate as a team member and demonstrate leadership qualities
- i) Handle conflicts and stressful situations at work with effective communication
- j) Learn and practice principles of effective communication
- k) Use effective resources to positively communicate with patients and colleagues
- l) Demonstrate empathy in breaking bad news to patients
- m) Develop skills of a good counselor
- n) Exchange opinion and knowledge
- o) Demonstrate ethical behaviour while attending female patients

4. Specific learning outcomes

- a) At the end of academic session, through modular system the final year MBBS student shall be able to demonstrate the ability to obtain a relevant clinical history from a woman with gynaecological problem.
- b) Perform adequate clinical examination in a gynaecological Patient.
- c) Can Interpret clinical & laboratory data to make a differential/ provisional diagnosis.
- d) Should be able to counsel the woman and her attendant about the nature of clinical problem with reasonable communication skills.
- e) Can identify high risk cases for referral to senior gynaecologist& be able to provide initial life-saving measures in emergency before referring to tertiary care hospital.
- f) Shall be able to practice ethically and can follow principles of safe and value-based community health services focusing on wellness of woman.
- g) Present a summary of at least one assigned case to a faculty member during a ward round. (CBL)
- h) Observe communication between doctor and patient, including explanation of the condition, treatment options and complications of treatment.
- i) Suggest a management plan for the patient.
- j) Observe the following:
 - Pelvic ultrasound scan.
 - Hysteroscopy.
 - Diagnostic laparoscopy.
 - Endometrial sampling
- k) Perform a cervical smear (model/patient).
- l) Explain the significance of cervical smear result and appropriate management.
- m) Attend a family planning clinic.
- n) Attend a genitourinary clinic.

5. Policies and Ground Rules

5.1 Eligibility

This module shall be offered in the Final year of MBBS program and the students must have passed their fourth year.

5.2 Duration of Studies

The minimum duration of studies for completing this module shall be Six (06) weeks.

5.3 Scheme of Studies

Course work for this module comprises Theory Classes, Small Group Discussions, Self-Directed Learning, Bedside teaching, OPD attendance, Operation Theatre Work, Labor room practical demonstrations, Skill Lab, Laboratory Work, Radiology imaging and Community visits.

5.4 Evaluation

5.4.1 Paper Setting

The examination paper for internal and summative exams shall be set as per standard procedure of Khyber Medical University.

5.4.2 Conduct of Examination

The Controller of Examinations will arrange the final examinations, including preparation of date sheet, appointment of the invigilation staff, etc. Each examination hall will be supervised by a Superintendent, who will be a senior teacher of the same department, and other staff, who will be from other departments.

5.5 Attendance and Punctuality

- a) A student is expected to attend 100% of the classes held in course. Under extenuating circumstances, up to 25% shortage of attendance may be overlooked. However, a student will not be allowed to appear in the final examination, if the attendance fails below 75% in the course.
- b) Students should arrive in the class on time not later than 15 minutes of the scheduled time. Any student who reports late more than 15 minutes of the scheduled time shall be marked as absent.
- c) If you need to leave early, do so after asking your instructor and if he/she permits it.

5.6 Dress Code

- a) The students must follow Dress Code of the institution.
- b) Students must display their Student Identity Card while being in the institution premises.

5.7 Class Discipline

- a) Cell phones should be kept on “Silent” mode.
- b) Discrimination of any sort in the class is prohibited c)

Respect and tolerance for all is mandatory.

- d) During interactive sessions, listen carefully and wait for your turn to speak, please do not interrupt each other.

5.8 Code of Conduct

Every student shall observe the following code of conduct:

- a) Faithfulness in his religious duties, and respect for convictions of others in matters of religion, conscience, and customs.
- b) Loyalty of Pakistan and refraining from doing anything which might lower its honor and prestige in any way.
- c) Truthfulness and honesty in dealing with others.
- d) Respect for elders, and politeness to all, especially to women, children, old people, weak, deformed and the helpless.

- e) Respect for teachers and others in authority in the University.
- f) Cleanliness of body, mind, speech, and habits.
- g) Helpfulness to fellow-beings.
- h) Devotion to studies and sports.
- i) Protection of Government property.
- j) In case of emergency or suspected crime please report to the department of public safety

6. Prerequisites

The prerequisites for this module are the knowledge and skills required by the students before they start studying diseases of female genital tract and their management. These include basic concepts and terminologies the students had previously learned. Lecture rooms, demonstration rooms along with resources will be available to the students.

Anatomy:

Students should have knowledge of anatomy of internal and external female genital organs. They should understand embryology of ovulation, fertilization, and human development.

Histology:

They should know classification and distribution of various tissues specially related to female reproductive system.

Physiology:

They should understand physiology of puberty, menstruation, menopause, and pregnancy. Role of various hormones in reproductive system.

Pharmacology:

Students should recall knowledge of drugs related to pregnancy, lactation, contraception and their effect on fetus. Mechanism of action of various drugs used in obstetrics and gynecology. Finally, role of hormones related to female reproductive system.

Biochemistry:

Knowledge of biochemical and hormonal changes during menstruation, pregnancy, menopause.

Pathology:

Students should have knowledge of cellular and structural changes that occur in inflammation, infection, ischemia and neoplasia of female reproductive system.

Basic clinical skills:

Student should have sufficient knowledge, attitude and skills regarding History taking, examination and communication.

Pre-Test:

A pre-test may be included to assess the students' basic knowledge in cognitive, psychomotor and affective domains

Learning recourses:**Gynaecology Rotation:**

Students will take history, examine, and communicate with patients in ward, OPD and operation theatre. This will enhance their learning, help them apply their knowledge and improve communication skills.

Hands on Activities:

There will have practical sessions related to female reproductive system.

Skill labs:

In skill labs students will be encouraged to learn in a simulated environment. This will help in building their confidence thus ensuring safety of the patient.

Digital library:

Students will have access to internet, computers, and laptops. This will update their knowledge about latest research.

Library:

Students will be provided with free access to library, journals and books.

Radiology department:

Students will have rotation in radiology department where they will be exposed to imaging related to female genital tract.

Other learning resources:

Community Medicine setting for public health awareness.

Laboratories.

Obstetrics and Gynecology:

Obstetrics and Gynecology is the medical specialty that encompasses the two subspecialties of obstetrics and gynecology. **A branch of medicine that specializes in the care of women during pregnancy and childbirth and in the diagnosis and treatment of diseases of the female.**

Gynecology:

A gynecologist specializes in caring for the reproductive health of a woman from the time she gets her first period all the way to post-menopause.

Any conditions that affect the reproductive system, such as those with the cervix, uterus, ovaries, fallopian tubes, or vagina, are diagnosed and treated by a gynecologist.

Obstetrics:

An obstetrician specializes in obstetrics, which deals with all aspects of pregnancy, from prenatal care to post-natal care. An obstetrician delivers babies, whereas a gynecologist does not. An obstetrician can also provide therapies to help you get pregnant, such as fertility treatments. If you deliver a premature baby, an obstetrician can also provide guidance in the Neonatal Intensive Care Unit (NICU). An obstetrician will ensure you have a healthy pregnancy and that you deliver a healthy baby.

Themes

S. No	Theme
	<u>Blood and Immunology System</u>
1.	Pallor
	<u>Endocrine and Reproduction System</u>
2.	Pregnancy and breast feeding
	<u>8 GIT and Hepatobiliary System</u>
3.	Difficulty in swallowing and Epigastric Pain
4.	Yellow discoloration of the sclera
	<u>Multisystem System</u>

*A minimum of 4 hours daily must be allocated for clinical teaching and training at the bedside in different units as specified by the Pakistan Medical Commission

Specific learning objectives

<u>Blood and Immunology Module</u>				
Subject	Topic	S. No	Domain of learning	Learning objective <i>At the end of this session, the students of year 5 will be able to:</i>
Theme-1: Palor				
Gynecology	Anemia in pregnancy	1	Cognitive	List the various causes of anemia in pregnancy.
		2	Cognitive	Describe Feto-maternal complications of anemia in pregnancy.
		3	Cognitive	Interpret the blood picture of a pregnant patient with anemia
		4	Cognitive	Outline diagnostic workup and management plan of a patient with anemia in pregnancy.
		5	Psychomotor	Take history and perform physical examination of a patient with anemia in pregnancy.
		6	Affective	Counsel a pregnant patient with anemia.
<u>Endocrine and Reproduction Module</u>				
Theme-2: Pregnancy and breast feeding				
Gynaecology and Obstetrics	Obstetrics history and examination	7	Psychomotor	Take an obstetric history and perform abdominal, pelvic, and obstetric/gynaecological examination of a lady
		8	Psychomotor	Measure and interpret blood pressure in a

				pregnant lady
		9	Psychomotor	Examine the breast of a full term pregnant female
		10	Psychomotor	Perform urine examination via dipstick technique for pregnancy, glucose, urine and bacteria
	Antenatal care	11	Cognitive	Define and explain the aims of antenatal care
		12	Cognitive	Discuss the components of antenatal care
			Cognitive	Explain different types of screening tests during antenatal care
		13	Cognitive	Discuss the maternal and neonatal complications associated with increased BMI in pregnancy
		14	Cognitive	Identify high risk women of developing pre-eclampsia, preterm birth, fetal growth restriction, and vitamin D deficiency
		15	Psychomotor	Perform and record proper antenatal checkups
		16	Affective	Counsel a pregnant lady about the complications of pregnancy
	Assessment of fetal wellbeing	17	Cognitive	Explain the methods of assessment of fetal wellbeing
		18	Cognitive	Explain the types and diagnosis of fetal abnormalities

	Prenatal diagnosis	19	Cognitive	Explain the reasons, classification and methods of prenatal diagnosis
	Antenatal maternal and obstetric complications	20	Cognitive	Discuss musculoskeletal, gastroenterological and haematological problems associated with pregnancy
		21	Cognitive	Discuss the risk factors and management of venous thromboembolism in pregnancy
		22	Cognitive	Explain the causes, complications and management of polyhydromnias and oligohydromnias
		23	Cognitive	Discuss the etiology, complications and management of fetal malpresentations
		24	Cognitive	Explain the approach and management of a pregnant lady with antepartum bleeding
		25	Cognitive	Discuss the etiology, prevalence, management and prevention of Rh isoimmunization
	Preterm labour <ul style="list-style-type: none"> • PROM • PPRM 	26	Cognitive	Discuss the etiology, complications and management of preterm labour
Family medicine/ Obstetrics	Hypertensive disorders in pregnancy	27	Cognitive	Classify hypertension in pregnancy and disorders of hypertension in pregnancy
		28	Cognitive	Discuss the diagnostic approach,

				management, complications and prevention of Pre-eclampsia and Eclampsia
Family medicine/ Obstetrics	Diabetes mellitus and pregnancy	29	Cognitive	Explain the management of a pregnant lady with gestational DM and overt DM
Obstetrics	Perinatal infections	30	Cognitive	Classify perinatal infections
		31	Cognitive	Explain the screening and preventive strategies of common perinatal infections
	Labour	32	Cognitive	Explain the management of normal labour at different stages
		33	Cognitive	Explain the management of abnormal labour at different stages
		34	Cognitive	Discuss the indications and complications of analgesia and anaesthesia in labor
	Management of labour at special circumstances	35	Cognitive	Discuss the management of labour at special circumstances like uterine scar, fetal malpositions, fetal death, multiple pregnancies and post-date pregnancies
		36	Cognitive	Explain the types, indications and complications of operative deliveries
		37	Cognitive	Discuss the indications and complications of Caesarean section
		38	Psychomotor	Observe normal labour and assisted deliveries

	Obstetric emergencies	39	Cognitive	Classify obstetric emergencies
		40	Cognitive	Discuss the management of sepsis in pregnancy
		41	Cognitive	Explain the management and complications of placental diseases in a pregnant women
		42	Psychomotor	Observe a normal delivery
	Postpartum bleeding	43	Cognitive	Discuss the aetiology, diagnostic and management approach to a patient with postpartum haemorrhage
	Puerperium	44	Cognitive	Classify puerperal disorders and their management
Psychiatry	Psychiatric disorders in pregnancy and puerperium	45	Cognitive	Classify different psychiatric disorders in pregnancy and puerperium
		46	Cognitive	Discuss the management of puerperal psychosis and depression
		47	Affective	Counsel a patient and her family with postpartum psychosis/depression
Pediatrics	The neonate		Cognitive Psychomotor	Discuss the types and management of common problems of preterm and term babies Discuss the principles of neonatal care Observe the care of a neonate in nursery

				Take history and perform physical examination of a neonate
Surgery	Breast diseases		Cognitive Psychomotor Skills Affective domain	Discuss approach to a patient with breast lump emphasizing on diagnostic work-up of different breast pathologies (complexity of benign and malignant breast diseases) including imaging and procedures Discuss the diagnostic approach and management of a patient with nipple discharge. Perform a Clinical breast examination by all techniques including “radial wagon wheel” and “spoke” method Counsel a patient with breast cancer about the diagnosis, management, and screening of her family members
<u>8 GIT and Hepatobiliary</u>				
Theme-3: Difficulty in swallowing and Epigastric Pain				
Gynecology	Hyperemesis gravidarum	48	Cognitive	Discuss the management of a patient with vomiting of pregnancy
		49	Affective	Counsel a patient with hyperemesis gravidarum
Theme-4: Yellow discoloration of the sclera				
Gynecology	Obstetrics cholestasis in	50	Cognitive	Discuss the management of cholestasis in pregnancy and fatty liver in pregnancy

	pregnancy/fatty liver			
<u>Multisystem</u>				
Gynecology	Genetic counselling and perinatal diagnosis	51	Cognitive	Explain the modes and indications of perinatal diagnosis
		52	Cognitive	Discuss the concept of genetic counseling
		53	Affective	Observe premarital counseling of a family for thalassemia

Final year topic schedule for the year 2023
WEEK -1

S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
1.	Monday 20-2-2023	ORIENTATIN SESSION(HOD Gynae Department) Maternal pelvis and fetal skull Dr. Samiya Zahid Aman Gynae_____ Demo Room	APH Dr. Sadia Ali Gynae_____ Demo Room	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 21-2-2023	Vaginal birth after cesarean section (VBAC) Dr. Naeema Uthman Gynae_____ Demo Room	Analgesia & pain relief during labour Dr. Robina Akhtar Gynae_____ Lecture room	-----
	Wednesday 22-2-2023	PPH (Primary + Secondary) Dr. Bushra Rauf Gynae_____ Demo Room	Renal Disease in Pregnancy Dr. Saadia Shamsher Gynae_____ Demo room	-----
	Thursday 23-02-2023	IUGR Dr Shamshad Begum Gynae_____ Demo Room	Preterm labour Dr. Rukhsana Karim	-----
	Friday 24-2-2023	Intrauterine fetal death Dr. Rabia Sadaf Gynae_____ Demo Room	Epilepsy in pregnancy Dr. Ghazala Shams Gynae_____ Demo Room	-----

Week -2

S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
2.	Monday 27-02-2023	Premature Rupture of Membranes Prof. Dr. Samia Zahid Aman Gynae_____Demo Room	Cardiac disease in pregnancy Dr. Sadia Ali Gynae_____Lecture room	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 28-02-2023	Poly hydramnios + oligohydramnios Prof. Dr. Naeema Utman Gynae_____Demo Room	Skill Lab activity Obstetric examination / fetal Heart sounds Dr. Robina Akhtar + SR KGMC	-----
	Wednesday 01`-03-2023	Thyroid disease in pregnancy Prof. Dr. Bushra Rauf Gynae----- lecture room	Tranverse lie / unstable lie Dr. Saadia Shamsher Gynae Lecture room	-----
	Thursday 2-03-2023	Peurpurial pyrexia Prof. Dr. Shamshad Begum Gynae A Lecture room	Skill Lab activity Forceps Delivery Dr. Rukhsana Karim + SR KGMC	-----
	Friday 3-03-2023	Diabetes in Pregnancy Dr. Rabia Sadaf Gynae_____Lecture Room	Acute abdominal pain in pregnancy Dr. Ghazala Shams Gynae_____Lecture room	-----

Week – 3

S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
3.	Monday 06-03-2023	Multiple pregnancy Prof. Dr. Samia Zahid Aman Gynae_____Demo room	Skill Lab activity Management of PPH Dr. Sadia Ali + SR KGMC	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 07-03-2023	Instrumental delivery (Forceps + Vacuum delivery) Prof. Dr.Naeema Utman Gynae_____Demo Room	Jaundice in pregnancy Dr. Robina AKhtar Gynae_____Demo room	
	Wednesday 08-03-2023	Hypermeses Gravidarum Prof. Dr. Bushra Rauf Gynae_____Demo room	Partogram + labour care Guide Dr. Saadia Shamsher Gynae_____Demo room	
	Thursday 09-03-2023	Maternal & Perinatal Mortality Prof. Dr. Shamshad Begum Gynae_____Demo Room	Congenital anomalies Dr. Rukhsana Karim Gynae_____Demo room	
	Friday 10-03-2023	A/N Care + Physiological changes in pregnancy Dr. Rabia Sadaf Gynae_____ Demo room	Breech presentation Dr. Ghazala Shams Gynae_____ Demo room	

Week – 4

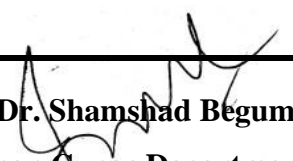
S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
4.	Monday 13-03-2023	Counseling Session + breast feeding Prof. Dr. Samia Zahid Aman Gynae_____Demo room	Prolong pregnancy Dr. Sadia Ali Gynae_____Demo room	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 14-03-2023	Cesarean section Prof. Dr. Naeema Utman Gynae_____Demo room	Skill Lab activity Breech Delivery Dr. Robina Khattak + SR KGMC	
	Wednesday 15-03-2023	Abnormal presentation Prof. Dr. Bushra Rauf Gynae_____Demo room	Abnormal labour Dr. Saadia Shamsher Gynae_____Lecture room	
	Thursday 16-03-2023	HTN in Pregnancy Prof. Dr. Shamshad Begum Gynae_____Demo room	Maternal resuscitation (Skill Lab) Dr. Rukhsana Karim + SR KGMC	
	Friday 17-3-2023	Mental disorder in pregnancy Dr. Rabia Sadaf Gynae_____ Demonstration room	Prenatal screening Ghazala Shams Gynae_____Demo room	

Week – 5

S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
5.	Monday 20-3-2023	Normal Labour Prof. Dr. Samia Zahid Aman Gynae____Lecture room	Skill Lab activity Shoulder Dystocia Dr. Sadia Ali + SR KGMC	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 21-3-2023	Fetal hydrops Prof. Naeema Utman Gynae____demo room	Skill Lab topic Normal Vaginal Delivery Dr. Robina AKhtar KGMC	
	Wednesday 22-3-2023	Recurrent Miscarriage Prof. Dr. Bushra Rauf Gynae____Lecture room	Cord Prolapse Dr. Saadia Shamsher Gynae____Lecture room	
	Thursday 24-3-2023	Role of U/S in pregnancy Prof. Dr. Shamshad Begum Gynae____ Demo room	Eclampsia Dr. Rukhsana Karim Gynae____Lecture room	
	Friday 25-03-2022	RH incompatibility Dr. Rabia Sadaf Gynae____Lecture room	Shoulder Dystocia Dr. Ghazala Shams Gynae____Lecture room	

Week - 6

S. No	DAY/ DATE	SESSION -1 8:00 To 10:00 HRS	SESSION -2 1000 -1400 HRS	SESSION -3 Clinical classes
6.	Monday 27-03-2023	Minor Problem of new born Prof. Dr. Samia Zahid Aman Gynae_____Demo room	Skill Lab activity Neonatal Assessment / Resuscitation Dr. Sadia Ali + SR KGMC	Group 1 (Labour Room) Group 2 (Operation theater) Group 3 (OPD)
	Tuesday 28-03-2023	Early pregnancy complications Dr. Ghazala Shams Gynae_____Lecture room	Fetal Monitoring Dr. Robina AKhtar Gynae Demonstration room	
	Wednesday 29-03-2023	Induction of labour Prof. Dr. Bushra Rauf Gynae_____Lecture room	Infections in Pregnancy Dr. Saadia Shamsher Gynae_____Lecture room	
	Thursday 30-3-2023	Haemoglobinopathiasis Dr. Rabia Sadaf Gynae_____Lecture room	Skill Lab activity Vaccum Delivery Dr. Rukhsana Karim + SR KGMC	
	Friday 31.3.2023	Evaluation test		


Prof. Dr. Shamshad Begum
Chairman Gynae Department
KGMC/HMC, Peshawar.

1. Assessment tools:

Theoretical knowledge is tested by a written examination system constituted by multiple choice questions (MCQs). The assessment of practical knowledge involves oral, spot, or objective structured practical examinations (OSPE).

Multiple Choice Questions (MCQs):

- Multiple choice questions (MCQs) are a form of assessment for which students are asked to select the best choice from a list of answers.
- MCQ consists of a stem and a set of options. The stem is usually the first part of the assessment that presents the question as a problem to be solved; the question can be an incomplete statement which requires to be completed and can include a graph, a picture or any other relevant information. The options are the possible answers that the student can choose from, with the correct answer called the key and the incorrect answers called distractors.
- Correct answer carries one mark, and incorrect „zero mark“. There is NO negative marking.
- Students mark their responses on specified computer-based sheet designed for the college.
- The block exam will comprise of 100 MCQs and will be compiled according to the shared blueprint.

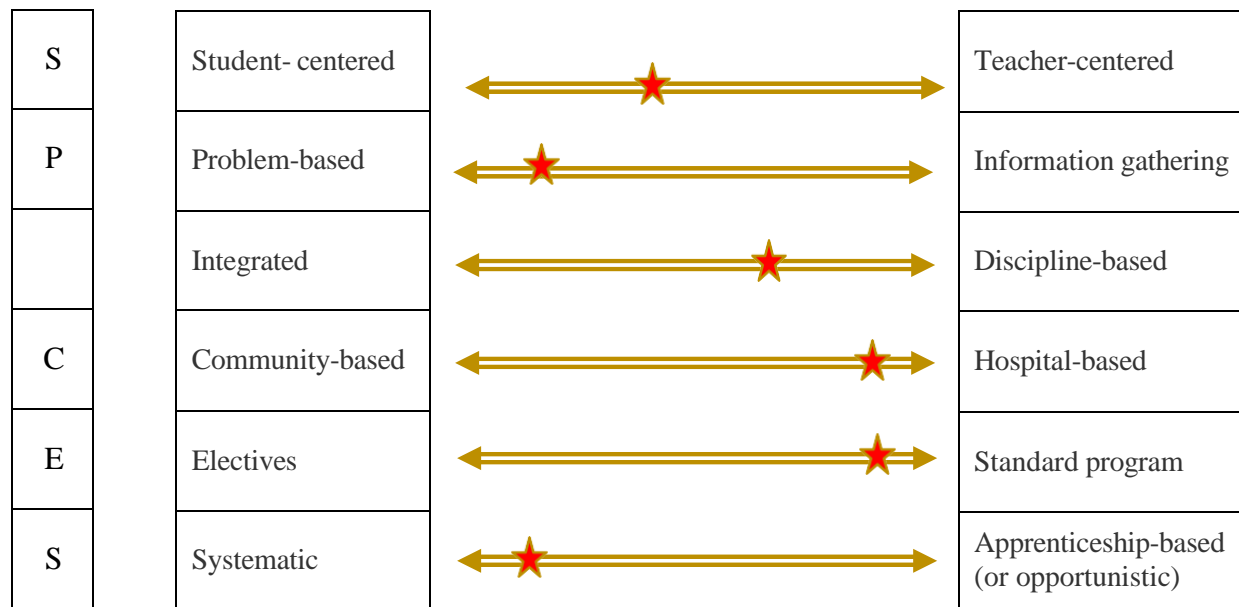
Objective Structured Practical Examination (OSCE)

- The content may assess application of knowledge, or clinical skills.
- Student will complete task in define time at one given station.
- All the students are assessed on the same content by the same examiner in the same allocated time.
- A structured examination will have observed, unobserved, interactive and rest stations.

- Observed and interactive stations will be assessed by internal or external examiners.
- Unobserved will be static stations in which students will have to answer the questions related to the given pictures, models or specimens the provided response sheet.

Rest station is a station where there is no task given, and in this time student can organize his/her thoughts

SPICES Model



9 List of Reference books:

Obstetrics and Gynaecology:

1. Obstetrics by Ten Teachers, Louise C. Kenny, Jenny E. Myers.
2. Gynaecology by Ten Teachers, Louise Kenny, Helen Bickerstaff.
3. Fundamentals of Gynaecology. Dr Arshad Chohan.
4. Textbook of Gynaecology, Rashid Latif Khan.
5. Essentials of obstetrics and gynaecology Neville F. Hacker, J.George Moore, and Joseph C. Gambone. 4thED.2004.

Clinical Examination:

1. Hutchinson's clinical methods, 23rd edition.
2. Macleod's clinical examination 13th edition.

Gross Anatomy:

1. Grant Atlas of anatomy Agur 12th edition 2019.
2. Last anatomy- regional and applied- Sinnatamby – 12th edition 2011.
3. K.L. Moore, Clinically Oriented Anatomy.

Embryology: .

1. Basic concepts of embryology- Sweeney 1st edition 1998.
2. Keith L. Moore. The developing human.
3. Langman's medical embryology.

Physiology:

1. Review of medical physiology by Ganong 24th edition 2012.
2. Textbook of medical physiology- Guyton Hall 12th edition 2012.
3. Essentials of medical physiology -Sembulingum 6th edition 2012.

Pharmacology:

1. Lipincott's illustrated reviews: pharmacology 6th edition 2014.
2. Basic and clinical pharmacology 10th edition by Bertram G. Katzung.

Biochemistry:

1. Textbook of biochemistry by M.N. Chatterjea 8th edition 2011.
2. Harper's illustrated biochemistry 27th edition.

Pathology:

1. Robbins and Cotran, pathologic basis of disease, 9th edition.
2. Rapid review of pathology, 4th edition by Edward F. Goljan MD.

Radiology:

1. Ultrasound, The requisites, William D. Middleton, Alfred B. Kurt, Barbara S. Hertzberg.
2. An imaging atlas of human anatomy, James Weir, Peter Abrahams: 5th Edition.

10 References

1. Stephen F Jennings. Personal development plans and self-directed learning for healthcare professionals: are they evidence based?
Postgrad Med J 2007; 83: 518-24.
2. Harden RM, Laidlaw JM & Hesketh EA. AMEE Medical Education Guide, No.16. Study Guides: their use and preparation. Med Teach
1999; 21: 248-65.
3. Laidlaw JM, Hesketh EA, Harden RM. Study guides. In: Dent JA, Harden RM. A Practical Guide for Medical Teachers.3rd Ed.
Edinburgh: Churchill Livingstone, 2009; pp 211-6.
4. Jenkins GA. The Use of Study Guides to Improve Learning Outcomes in Engineering Fluid Mechanics and Hydraulics. AaeE Conference Sydney, 2010.