



# Operational Manual of MBBS Curriculum 2021

**Subject:**  
**Obstetrics & Gynaecology**



**Developed By**  
Research, Publication & Curriculum Development Wing  
**Directorate General of Medical Education (DGME)**  
Mohakhali, Dhaka-1213



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**September 2023**

## Preface

Curriculum is not the sole determinant of the outcome, it is very important as it guides the faculty in preparing their instruction and tells the students what knowledge, skills and attitude they are to develop through the teaching learning process. The ultimate indicators of assessing curriculum in medical education is the quality of health services provided by its graduates with required competencies.

To implement that curriculum all concerned such as teachers, students, deans, administrators, policymakers to be more dynamic, should run smoothly with the time & appropriate pace. This operational manual to implement the curriculum will act as a catalyst, will give momentum in implementing the curriculum. This operational manual will help to implement the curriculum uniformly, effectively, efficiently & smoothly at all the govt. & non govt. medical colleges under all the universities all over the country.

I would like to mention that the curriculum planning process is continuous, dynamic and never-ending as it is not static. If it is to serve best, the needs of the individual student, teacher, educational institution and the community to whom we are ultimately accountable, must be assessed. Before that assessment we should seriously concentrate for the better implementation of the curriculum. Implementation in regards to teaching-learning, integrated teaching, teaching on generic topics on medical humanities, clinical teaching, ambulatory care/OPD based teaching and acquiring identified competencies of each subject. There is a proverb that “Assessment drives Learning”. To ensure students’ learning formative and summative assessments should be taken care of properly. This operational manual on developed MBBS curriculum 2021 will play a vital role in those regards.

I congratulate all who were involved in developing this operational manual implement MBBS curriculum 2021, particularly the Director (Research, Publication & Curriculum Development), DGME, focal persons, teachers, members of the concerned society, seniors, juniors, legendary teachers & heads of the departments of Obstetrics & Gynaecology.

Different Govt. and non Govt. medical colleges. Special appreciation to the Deans, Faculty Medicine of different medical Universities who were requesting to develop this operational manual and will take lead to implement this operational manual. They contributed a lot to complete this activity, a commendable job and deserve special appreciation.

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Director General

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## **Acknowledgement**

It is easier to change a graveyard than to change a curriculum. Yet then time & society demand for the change of the curriculum. In such a situation MBBS curriculum 2012 was reviewed and updated in 2021 to fulfill the need of the stakeholders. The updated MBBS curriculum 2021 was started to implement from the August 2022. For implementation of that reviewed & updated curriculum operational manual is also the demand of the present time.

For better implementation of integrated teaching, teaching as per identified competencies, teaching on generic topics on medical humanities, planning, designing, constructing assessment tools for formative and summative assessment, this operational manual will act as the road map.

Research, Publication & Curriculum Development (RPCD) of DGME in association with heads of the departments of Obstetrics & Gynaecology of Phase IV of different Govt. & non govt. medical colleges & Deans Offices, DGME, ME, FWD, BM&DC took the initiative to develop the operational manual. Concerned stakeholders meetings were held through active participation of different professional groups, focal persons, faculty members, heads of the department of Obstetrics & Gynaecology of Phase IV of different govt. & non govt medical colleges of Bangladesh.

I hope this operational manual will help to serve as guiding principle for the students and as well as for faculty members.

Last but not least, I would like to extend my deep gratefulness to the Director General, DGME, ADG(ME) & ADG(Admin), DGME, all Directors of DGME, faculty members of Obstetrics & Gynaecology of different Govt & non Govt medical colleges and others who shared their expertise, insights, contributed and worked hard to develop this precious document. Efforts given by the focal persons providing their valuable time, opinions & efforts during the development process of this operational manual for Phase IV of MBBS curriculum are duly acknowledged.

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## **Background and Rationale**

Curriculum is a study track along which students travel throughout the course of study. In this journey teachers play an important role in regards to teaching learning and assessment. To produce need based, community oriented, competent graduate medical doctors, MBBS curriculum was reviewed and updated in 2021. The updated MBBS curriculum 2021 was started to implement from the August 2022. For better implementation of MBBS curriculum 2021 effectively, uniformly & competently an operational manual of each subject was felt by each of the Faculty of Medicine of all universities. In this regard Director (Research, Publication & Curriculum Development (RPCD) of Directorate General of Medical Education (DGME) has taken the time felt initiative under the guidance of Director General, DGME. Thanks to DG, DGME, Director (RPCD), DGME, focal persons, members of the concerned society, senior, junior and legendary teachers and heads of the department of concerned subject of different government & non government medical colleges to finalise this operational manual. This operational manual will work as the skeleton of the curriculum in a comprehensive manner. This user-friendly document will serve the purposes of the faculty to ensure better teaching-learning and assessment to produce knowledge competent and compassionate physicians in Bangladesh.

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## Basic Information about MBBS Course

1. **Name of the course:** Bachelor of Medicine & Bachelor of Surgery (MBBS)
2. **Basic qualifications & prerequisite for entrance in MBBS Course:**
  - (i) HSC or equivalent with Science.(Biology, Physics, Chemistry)
  - (ii) Candidate has to secure required grade point in the SSC and HSC examinations.
3. **Students selection procedure for MBBS course:** According to decision by the proper competent authority as per merit.
4. **Medium of Instruction:** English
5. **Duration:** MBBS course comprises of 5 Years, followed by mandatory logbook based rotatory internship for one year
6. **Course structure, subject with duration and professional examination**

The MBBS course is divided into four phases.

Phase	Duration	Subjects	Examination
1 <sup>st</sup> phase	1½ years	<ul style="list-style-type: none"> <li>• Anatomy</li> <li>• Physiology</li> <li>• Biochemistry</li> </ul>	First Professional MBBS
2 <sup>nd</sup> phase	1 year	<ul style="list-style-type: none"> <li>• Pharmacology &amp; Therapeutics</li> <li>• Forensic Medicine &amp; Toxicology</li> </ul> <p><i>Only lecture, small group teaching (practical, tutorial etc.), clinical teaching (as applicable) &amp; formative assessment will be conducted in following subjects- General Pathology part of Pathology, General Microbiology part of Microbiology, Medicine &amp; Allied subjects, Surgery &amp; Allied subjects</i></p>	Second Professional MBBS
3 <sup>rd</sup> phase	1 year	<ul style="list-style-type: none"> <li>• Community Medicine &amp; Public Health</li> <li>• Pathology</li> <li>• Microbiology</li> </ul> <p><i>Only lecture, small group teaching (practical, tutorial etc.), clinical teaching (as applicable) &amp; formative assessment be conducted in following subjects- Medicine &amp; Allied subjects, Surgery &amp; Allied subjects, Obstetrics and Gynaecology.</i></p>	Third Professional MBBS
4 <sup>th</sup> phase	1½ years	<ul style="list-style-type: none"> <li>• Medicine &amp; Allied subjects</li> <li>• Surgery &amp; Allied subjects</li> <li>• Obstetrics and Gynaecology</li> </ul>	Final Professional MBBS

**NB:** All academic activities including professional examination of each phase must be completed within the specified time of the phase.

**Special note:** After taking admission into the first year of MBBS course, a student must complete the whole MBBS course (pass the final professional MBBS examination) within 12 years timeline.

**4<sup>th</sup> Phase : Hour Distribution**

Subject	Lecture (in hours)	Small group teaching (in hours)	Departmental integrated teaching (in hours)	Common hours for phase integrated teaching	Clinical teaching (in weeks)	Block posting (in weeks)	Formative Exam		Summative exam		Total (in hours)	
		PBL, Practical demonstration, Instrumental demonstration, Skill lab, Demonstration on equipment, Demonstration on common clinical procedure, Tutorial & etc.					Preparatory leave	Exam time	Preparatory leave	Exam time		
Teaching- learning, both formative & summative assessment	Medicine & Allied subjects	153	199	20	126	24	4	Preparatory leave 10 days	Exam time 1.5days	Preparatory leave 10 days	Exam time 30days	372
	Surgery & Allied subjects	186	134	22		24	4					342
	Obstetrics and Gynaecology	60	58	20		08	4					138
Total		399	391	62	126	56wks	12 wks	25 days	40 days			852
Grand Total		978 hours				68 wks		65 days				852+126 (IT)=978
<b>Generic Topics on Medical Humanities:</b> (i) Medical professionalism, (ii) Inter-professionalism & (iii) Patient Safety & Medical Error will be taught within 4 <sup>th</sup> phase.											5 hrs	
<i>Time for integrated teaching, examination preparatory leave and formative and summative assessment is common for all subjects of the phase</i>												
Preventive aspects of all diseases will be given due importance in teaching learning considering public health context of the country and others parts of the world.												
Related behavioral, professional & ethical issues will be discussed in all clinical and other teaching learning sessions												
<b>Generic Topics on Medical Humanities for Internship Period:</b> (i) White coat ceremony, (ii) Career planning & (iii) Continuing Medical Education (CME), Continuing Professional Development (CPD) & Infection Control Practice (ICP)											10 hrs	



### **Generic Topics on Medical Humanities to be taught in Phase –IV**

The following topics will be taught within 4<sup>th</sup> phase under supervision of Phase-IV coordination committee in collaboration with medical education unit (MEU). The sessions will be under the guidance of Principal & Vice-principal, coordinated by concerned departments and sessions will be delivered by concerned experts of the topics. Each session will be one and half hour. Attending these session will be mandatory and will be reflected in the formative & summative assessment of Phase-IV.

#### **Topics:**

1. Medical professionalism
2. Inter-professionalism
3. Patient Safety & Medical Error

<b>Topics</b>	<b>Learning objective</b>	<b>List of Contents</b>	<b>Method</b>	<b>Time</b>
<b>Medical Professionalism</b>	<ul style="list-style-type: none"> <li>• explain the terminology: professionalism , medical professionalism</li> <li>• state the importance of medical professionalism</li> <li>• explain the professional responsibilities in health care</li> <li>• mention the ways and means of improving medical professionalism</li> </ul>	<ul style="list-style-type: none"> <li>• The terminology: professionalism , medical professionalism</li> <li>• Importance of medical professionalism</li> <li>• Professional responsibilities in health care</li> <li>• Ways and means of improving medical professionalism</li> </ul>	Interactive Lecture Or Seminar	One and half hour
<b>Inter-professionalism</b>	<ul style="list-style-type: none"> <li>• define Inter-professionalism (IP)</li> <li>• mention importance of IP in health care</li> <li>• list the members of the inter-professional collaboration</li> <li>• state the means of developing inter-professional collaboration among health team</li> <li>• mention some health service related areas requiring inter-professional collaboration</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of Inter-professionalism (IP)</li> <li>• Importance of IP in health care</li> <li>• Members of the inter-professional team collaboration</li> <li>• Means of developing inter-professional collaboration among health team</li> <li>• Some health service related areas requiring inter-professional collaboration</li> </ul>	Interactive Lecture Or Seminar	One and half hour
<b>Patient Safety &amp; medical error</b>	<ul style="list-style-type: none"> <li>• define patient safety</li> <li>• mention importance of patient safety</li> <li>• define medical errors and medical negligence</li> <li>• list common medical errors and medical negligence</li> <li>• explain responsibility of patient safety and rights of a patient</li> <li>• mention the common patient safety issues and goals</li> <li>• explain means of administration of quality care to the patient</li> </ul>	<ul style="list-style-type: none"> <li>• Definition and importance of patient safety</li> <li>• Definition and common medical errors and medical negligence</li> <li>• Responsibility of patient safety and rights of a patient</li> <li>• Common patient safety issues and goals</li> <li>• Means of administration of quality care to the patient</li> </ul>	Interactive Lecture Or Seminar	One and half hour

# Obstetrics & Gynaecology

## Departmental Objectives

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

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

**List of Competencies to acquire:**

- History taking, communication skill, obstetrical examination, gynaecological examination.
- Diagnosis of common clinical problems
- Preparation of a patient before anaesthesia
- Writing a discharge certificate after
  - Normal delivery
  - Caesarean section
  - D & C
  - Evacuation of mole
  - Hysterectomy
- Care of antenatal patients including nutrition and daily calorie calculation
- Care of postnatal patient
  - Appropriate technique of breast feeding including position and attachment.
  - Demonstration of complementary feeding- amount, frequency, content of food
- Management of normal labour with partograph plotting
- 1st stage, 2nd stage & 3rd stage (AMTSL)
- Skill about Episiotomy
- PPH management
- Management of Eclampsia
- Shock management
- Writing a BT order
- Blood transfusion note
- Insertion of a cannula
- Catheterization
- Drawing of blood
- Hand washing
- Wearing of gloves, wearing PPE (Donning and Doffing)
- Identification of instruments/suture materials
- Trolley preparation for major & minor surgery

## Obstetrics & Gynaecology: Hours distribution in 3<sup>rd</sup> & 4<sup>th</sup> phases in details

Lecture (in hours)			Small group teaching (in hours)	Departmental integrated teaching (in hours)	Phase integrated teaching (in hours)	Clinical/Bedside teaching (in weeks)		Block posting (in weeks)	Formative examination (in days)		Summative examination (in days)	
3 <sup>rd</sup> Phase	4 <sup>th</sup> Phase	Total	PBL, Practical demonstration, Instrumental demonstration, Skill lab, Tutorial & etc.			3 <sup>rd</sup> Phase	4 <sup>th</sup> Phase		Preparatory leave 10 days	Exam time 15 days	Preparatory leave 10 days	Exam time 15 days
							8wks	8wks				
Total	30	60	90	58 hours	(10 topics × 2 hours) = 20 hours	(42 topics × 3 hours) = 126 hours	16 weeks	04 wks	25 days		40 days	
<b>Grand Total</b>	<b>168 hours</b>				<b>126 hours</b>	<b>20 weeks</b>			<b>65 days</b>			
<i>Time for integrated teaching, examination preparatory leave and formative &amp; summative assessment is common for all subjects of the phase</i>												
Preventive aspects of all diseases will be given due importance in teaching learning considering public health context of the country and others parts of the world.												
Related behavioral, professional & ethical issues will be discussed in all clinical and other teaching learning sessions												

**Obstetrics & Gynaecology: Hours distribution for Clinical/Bedside teaching in 3<sup>rd</sup> & 4<sup>th</sup> phases in details**

Subject	Clinical/Bedside & Ambulatory care teaching (in hours)						Total hours (in three phases)	Total weeks {(2 <sup>nd</sup> phase wks + 3 <sup>rd</sup> phase wks + 4 <sup>th</sup> phase wks = Total three phases wks) ×(6 days× 4 or 7 hours)}
	2 <sup>nd</sup> Phase		3 <sup>rd</sup> Phase		4 <sup>th</sup> Phase			
	Indoor clinical/ bedside teaching & Ambulatory care teaching		Indoor clinical/ bedside teaching & Ambulatory care teaching		Indoor clinical/ bedside teaching & Ambulatory care teaching			
	Morning	Evening	Morning	Evening	Morning	Evening		
	Indoor/ OPD/ Emergency/ Out reached center	Indoor/ Emergency	Indoor/ OPD/ Emergency/ Out reached center	Indoor/ Emergency	Indoor/ OPD/ Emergency/ Out reached center	Indoor/ Emergency		
8 weeks			8 weeks					
Basic Clinical Skills (in-patient)	-	-	48 h (4w)	48 h (4w)	-	-	96 h	(0+4+0)= <b>04 w</b> × (6 days × 4 hrs)
Family Planning Clinic	-	-	24 h (2w)	24 h (2w)	-	-	48 h	(0+2+0)= <b>02 w</b> × (6 days × 4 hrs)
Gynae & Antenatal Out-patient Clinic	-	-	24 h (2w)	24 h (2w)	-	-	48 h	(0+2+0)= <b>02 w</b> × (6 days × 4 hrs)
Routine Obstetrics	-	-	-	-	36 h (3w)	36 h (3w)	72 h	(0+0+3)= <b>03 w</b> × (6 days × 4 hrs)
Routine Gynaecology	-	-	-	-	36 h (3w)	36 h (3w)	72 h	(0+0+3)= <b>03 w</b> × (6 days × 4 hrs)
Emergency Obstetric Care E.O.C (Labour Room)	-	-	-	-	24 h (2w)	60 h (2w)	84 h	(0+0+2)= <b>02 w</b> × (6 days × 7 hrs)
<b>Total</b>	-	-	<b>96 hrs</b>	<b>96 hrs</b>	<b>96 hrs</b>	<b>132 hrs</b>	<b>420 hrs</b>	<b>16 weeks</b>

## Teaching/learning methods, teaching aids and evaluation

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

### Final Professional Examination:

#### Marks distribution of Assessment of Obstetrics & Gynaecology

#### Total marks – 500 (Summative)

- Written =200

(Formative =(10+10)=20, MCQ=40 (SBA-20, Multiple true false -20), SAQ & SEQ=140 (SAQ-50+50=100) (SEQ-20+20=40)

- SOE=100
- Clinical=100
- Practical=100

#### Related Equipments/Instrument:

Forceps, Ventouse, Female bony pelvis & dummy foetus, Folley's catheter, Plain rubber catheter  
Sponge holding forceps, Allis's tissue forceps, Artery forceps, Volsellum, Hegar's dilators,  
Uterine sound & Curette, Sim's vaginal speculum, Cusco's speculum, BP blade with handle,  
Dissecting forceps, Needle holder, Suture materials  
Contraceptives – OCP, progesterone only pill (POP or minipill), implants (2 rods and 1 rod),  
Injectable contraceptives (IM and sub-cutaneous), IUCD, Barrier methods (condoms), IUD and  
Emergency Contraceptive Pill (ECP).  
MR Syringe with Canula

## **Core contents of Obstetrics:**

### Conception and development of fetoplacental unit

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

### Anatomical and physiological changes during pregnancy

#### Diagnosis of pregnancy

#### Counselling in reproductive health

#### Antenatal care

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

#### Normal labour

- (a) Criteria of normal labour
- (b) Stages, mechanism of normal labour
- (c) Diagnosis of labour
- (d) Management of normal labour
- (e) Assessment of progress of labour
- (f) Monitoring maternal and fetal condition
- (g) Partograph
- (h) Pain relief

#### Normal puerperium

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

#### Hypertensive disorder in pregnancy including pre-eclampsia and eclampsia

#### Medical disorders in obstetrics

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

#### Ante-partum haemorrhage

Definitions, classification, clinical features, complications and management

#### Rh incompatibility

#### Blood transfusion in Obstetrics

#### Multiple pregnancy

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

#### Malposition and malpresentation

Types, causes, diagnosis, complications and management

#### Abnormalities of labour

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



Post-partum haemorrhage (PPH)

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

Abnormal puerperium

Causes ,diagnosis and management

The newborn

Resuscitation, examination and care of the newborn.

**Neonatal problems**

- Birth Asphyxia
- Jaundice
- Infection
- Feeding
- Other problems of newborn
- IYCF -- Breast feeding & Complementary feeding

IUGR & IUD

Causes, diagnosis and management

Obstetric operative procedures

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

Steps of operation:Episiotomy,vacuum & forcep delivery

**Vital statistics:**

- Maternal morbidity & mortality
- Perinatal morbidity.and mortality
- Neonatal morbidity & mortality

Diagnostic aids in obstetrics

- (a) Ultrasonography
  - Basics of ultrasound
  - Role in obstetrics
- (b) Fetal monitoring- CTG
- (c) Amniocentesis and other prenatal diagnostic techniques

**Social Obstetrics**

- (a) Maternal & perinatal morbidities and mortalities
- (b) Direct causes of maternal & perinatal morbidity and mortality – Contributing socio-economic & environment factors
- (c) Importance of family planning in prevention of obstetric problem
- (d) Strategies for promotion of maternal health & prevention of illness emphasising maternal nutrition, hygiene & medical care
- (e) National programs for MCH&FP, EOC, Combined service delivery

**Core contents of Gynaecology**

Anatomy of the female reproductive organs

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

Physiology of reproduction

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

### Bleeding in early pregnancy

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

### Vaginal discharge

Physiological and pathological, Diagnosis and treatment.

### Menstrual disorder

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

### Genital tract infection

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

### Urinary incontinence – definition, types

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

### Other genital tract injuries:

- (a) Perineal tear
- (b) RVF

### Genital prolapse

Types, aetiology, supports of uterus, clinical features, diagnosis, differential diagnosis, principles of management, prevention

### Endometriosis

Definition, types, clinical features, principles of management

### Neoplasia of reproductive organs

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

### Subfertility

- (a) Causes, investigation and management both male and female partner.

- (b) Assisted reproductive techniques
- (c) Concepts of medical biotechnology in relation to Obstetrics

#### Contraception

Importance

Counselling

Classification, mechanism of action, advantages, disadvantages, complications of all methods particularly sterilization and MR & MRM

#### Menopauses

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

#### Diagnostic Technique

- (a) Cervical smear
- (b) Laparoscopy
- (c) Hysteroscopy
- (d) Colposcopy
- (e) Ultrasonography
- (f) CT scan
- (g) MRI

Principles of common gynaecological operations: MVA, D&C, E&C, suction evacuation, hysterectomy.

### **Additional Contents**

#### **Obstetrics**

- (1) Developmental structure of placenta
- (2) Antenatal foetal screening
- (3) Mechanism of onset of normal labour (theories)
- (4) Labour analgesia
- (5) Thromboembolism
- (6) Other hypertensive disorders
- (7) Pathophysiology of pre-eclampsia and eclampsia in details
- (8) Haemolytic anaemia
- (9) Nephritis and renal failure in obstetrics
- (10) Treatment of Rh incompatibility
- (11) Management of IUGR
- (12) Management of inversion of uterus
- (13) Post-partum and post-MR contraception
- (14) Diagnostic aids in obstetrics
  - (a) Ultrasonography
  - (b) Foetal monitoring-CTG
  - (c) Amniocentesis, CVS, MSAFP
  - (d) X ray

#### **Gynaecology**

- (1) Management of endometriosis - recent advances
- (2) Assisted reproductive techniques
- (3) Hormone replacement therapy
- (4) Diagnostic techniques
  - (a) Laparoscopy

- (b) Hysteroscopy
- (c) Colposcopy
- (d) Ultrasonography
- (5) Hormonal disorders in gynaecology
- (6) STDS

### Lectures in Obstetrics (4<sup>th</sup> Year)

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

### Lecture contents in Obstetrics (5<sup>th</sup> Year)

Content		Lecture Hours
<b>FIRST TERM</b>		
1. Hypertensive disorder in pregnancy including pre-eclampsia and eclampsia		2 hours
2. Medical disorders in obstetrics	(a) Anaemia in pregnancy	3hours
	(b) Diabetes	
	(c) Heart diseases	
	(d) UTI, Hepatitis, Dengue, COVID & other	
3. RH incompatibility		1 hour
4. Ante-partum haemorrhage	(a) Definitions, classification, clinical features, complications and management	2 hours

5. Multiple pregnancy	Types and definitions, clinical features, complications, diagnosis and principles of management	1 hour
6. Malposition and malpresentation: causes and management (Breech, transverse lie)		1 hours
Formative Assesment		1 hour
<b>SECOND TERM</b>		
7. Normal labour	<ul style="list-style-type: none"> <li>• Review of what has already been taught</li> <li>• Diagnosis of stages and assessment of progress of labour</li> <li>• PARTOGRAPH</li> <li>• Pain relief</li> <li>• Foetal monitoring</li> </ul>	2 hours
8 Induction of labour		1 hour
9. Abnormal labour	(a) Prolonged labour: Definition, aetiology, diagnosis, complications, management (b) Obstructed labour: Definition, aetiology, diagnosis, complications, management (c) Ruptured uterus	3 hours
10. Post-partum haemorrhage (PPH)	Definitions, causes (atonic, traumatic and others) of PPH, prevention and management	1 hour
11. Puerperium	(a) Review of what has already taught (b) Abnormal puerperium and management	1 hour 1 hour
12. The new born	(a) IYCF --Breast feeding and complementary feeding (b) Management of asphyxia neonatorum (c) Jaundice & other problems in new born	1 hours 1 hour 1 hour
Formative Assesment		1 hour

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

## Learning Objectives and Course Contents in Obstetrics

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

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



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

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



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

## Learning Objectives for Obstetrics

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

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

6. Puerperium:
  - Definition of normal puerperium
  - Anatomical and physiological changes
  - Management of normal puerperium
  - Post-natal care including general advice
  - Course of abnormal puerperium
  - Management of abnormal puerperium
7. New born:
  - Definitions related to newborn
  - Examinations and care of newborn
  - Resuscitations
  - Diagnosis and management of asphyxia, jaundice and neonatal infections
  - Feeding problems
8. Common diagnostic techniques Ultrasonography, Radiology, Foetal Monitoring and Amniocentesis, CVS
  - Uses
  - Advantages
  - Disadvantages
9. Obstetric procedures and operations:
  - Induction of labour
  - Version
  - Episiotomy
  - LUCS
  - Forceps delivery
  - Ventouse delivery
  - Destructive operations
10. Vital statistics and social obstetrics
  - Maternal & Perinatal mortality and morbidities
  - Causes of maternal and perinatal mortality and morbidities including socio-economic and environmental factors.
  - Method of calculating MMR, PNMR
  - National programs for MCH&FW, EOC,
  - Counseling –basic concepts and specific counselling in specific obstetric situations.
  - Ethical issues in obst. & gynae

### Lectures in Gynaecology (4<sup>th</sup> Year)

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

## Lecture contents in Gynaecology (5<sup>th</sup> Year)

Content		Lecture Hours
<b>FIRST TERM</b>		
1. Genital tract infection	(a) Defense mechanism of genital tract (b) Pelvic inflammatory diseases: acute and chronic (c) Sexually transmitted diseases including AIDS (d) Genital tuberculosis	1 hour 1 hour 1 hour
2. Urinary incontinence	(a) Definition, types (b) Genitourinary fistula: Types, causes, clinical features, principles of management, prevention	1 hour 1 hour
Genital tract injuries:	(a) Perineal tear (b) RVF (c) Vaginal stenosis	1 hour
Genital prolapse	Types, aetiology, clinical features, diagnosis, differential diagnosis, principles of management	2 hours
Formative Assessment		1 hour
<b>SECOND TERM</b>		
Endometriosis	Definition, types, clinical features principles of management	1 hour
Neoplasia of reproductive organs	(a) Benign and malignant tumours of cervix Classification (fibroid, polyp, carcinoma cervix), clinical features, staging investigation, diagnosis, principles of management (b) Benign and malignant tumours of uterus (c) Benign and malignant tumours of ovary	5 hours 2+1+2
Fertility	(a) Causes, investigation and management both male and female partner (b) Assisted reproductive techniques	2 hours
Formative Assessment		1 hour
<b>THIRD TERM</b>		
Contraception	Importance of contraception, classification, mechanism of action, advantages, disadvantages, complications of all methods particularly sterilization and menstrual regulation and MRM	3 hours
Menopause	(a) Definition, physiological basis, changes in different organs of body, clinical features of menopausal syndrome, principles of management (b) Post menopausal bleeding (c) Hormone replacement therapy	2 hours
Diagnostic Technique	(a) Cervical smear (b) Laparoscopy (c) Hysteroscopy (d) Coloscopy (e) Ultrasonography	2 hours
Principle of common gynaecological surgeries		1 hour
Preoperative preparation & post operative management of common gynaecological surgery		1 hour
Formative Assessment		1 hour



### Learning Objectives and Course Contents in Gynaecology

Learning Objectives	Contents	Teaching hours
<p>At the end of session the students will be able to:</p> <ul style="list-style-type: none"> <li>• describe the gross anatomy of ovaries, uterus, fallopian tubes, vagina &amp; vulva</li> <li>• mention the blood supply, lymphatic drainage and nerve supply of these organs</li> <li>• discuss the relations of the pelvic organs with each other</li> <li>• describe the development and developmental anomaly of pelvic organs</li> </ul>	<p><b>Basic Anatomy of genital organs</b></p>	<p>2 hours</p>
<ul style="list-style-type: none"> <li>• define puberty, ovulation, menstruation, menopause, climacteric, fertilisation and implantation</li> <li>• mention the changes in reproductive organs in different stages of life</li> <li>• describe the mechanism of ovulation, menstruation fertilisation, implantation</li> <li>• mention the situations where physiology can get disturbed.</li> </ul>	<p><b>Physiology of reproduction</b></p>	<p>2 hours</p>
<ul style="list-style-type: none"> <li>• describe the subject more clearly</li> <li>• demonstrate communication and presentation skill.</li> </ul>		

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

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





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

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

## CLINICAL TEACHING OF OBSTETRICS & GYNAECOLOGY

### INTRODUCTION

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

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

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

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

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

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

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

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

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

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

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

### CONTENTS:

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

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

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

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

The study guide for the respective topic details

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



**4<sup>TH</sup> YEAR BASIC CLINICAL SKILLS  
(COMPONENT – ONE)**

4 weeks – 24 sessions in the morning

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

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

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

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

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

**Family Planning Course**  
**For**  
**4<sup>th</sup> year Medical Students**  
**(COMPONENT –TWO)**

**Venue – Model Clinics of the Medical College Hospitals**

**Duration–2 weeks**

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Day	1	-	Administration and maintenance of records
	2	-	Promotion of family planning
	3	-	Counselling
	4	-	Oral combined contraceptive pills (OCPs) and Progesterone only pills (POPs)
	5	-	Intra-uterine contraceptive device
	6	-	Permanent methods
	7	-	Injectable contraceptives (IM and sub-cutaneous)
	8	-	Implant (One rod and two rods)
	9	-	Safe period, lactational amenorrhoea method (LAM), condoms, coitus interruptus
	10	-	Day visit: Management issues in family planning. Organisation of a clinic.
	11	-	Day visit: Organisation of a clinic (continued) Working as a member of a team. Acting as a supervisor.
	12	-	Assessment and feedback

## Family Planning Course

Methods	Aids	Assessment
<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Visit antenatal clinic &amp; paediatric clinic.</li> <li>• Group discussion</li> <li>• Demonstration of record keeping</li> <li>• Inspection of raw data collected at the clinic.</li> <li>• Interpretation of the results in group discussion</li> <li>• Small group teaching</li> <li>• Role play</li> <li>• Demonstration</li> <li>• Brainstorming</li> <li>• Visit postnatal ward, Interview of patients individually to motivate them towards family planning.</li> <li>• History of patients &amp; counselling observation of examination.</li> <li>• Demonstration of operative steps on models or video</li> <li>• Demonstration of counselling of a patient in real life or by video</li> <li>• Demonstrating on injection, syringes, needle</li> <li>• Demonstrate on storage</li> <li>• Demonstration of condoms</li> <li>• Referral procedures</li> </ul>	<ul style="list-style-type: none"> <li>• Black board</li> <li>• OHP</li> <li>• Radio</li> <li>• Cassette</li> <li>• Posters</li> <li>• Flip chart</li> <li>• Video</li> <li>• Variety of OCPs including progesterone only pill (POP)</li> <li>• Menstrual chart</li> <li>• Client</li> <li>• Specimen of IUCD</li> <li>• Clients and dummy</li> <li>• Models</li> <li>• Chart</li> <li>• Different types of injectable contraceptives (IM and SC)</li> <li>• Implant (one rod and two rods)</li> <li>• Model of arm for demonstration of implant insertion</li> <li>• Model breast + baby</li> <li>• Condom</li> <li>• Emergency Contraceptive Pills (ECPs)</li> </ul>	<ul style="list-style-type: none"> <li>• Question &amp; answers</li> <li>• Observation of students</li> <li>• Check-list completion</li> </ul>

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

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

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

**Day 2:****Promotion of Family Planning**

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

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

**Day 3:****Counselling**

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

Specific educational objectives	Contents
A. At the end of the session the student should be able to: i) explain and define counselling and it's need ii) explain inter-personal communication iii) list the barriers to inter-personal communication B. Students should have acquired the skill to be able to: 1. greet the client 2. establish rapport 3. ask reasons for coming 4. Inform about available contraceptive methods with their - mode of actions - effectiveness - method of application - availability of services - follow up - referral system 5. Assist the client in making decisions	I) Definition of counselling and the need for it II) Level of communication III) Inter-personal communication and feedback IV) Barrier to communications  i) Communication skill ii) Counselling skill iii) Taking account of educational status of the client  Merits and demerits

**Day 4:****Oral Contraceptive Pill**

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

Specific educational objectives	Contents
The student should be able to: 1. explain the mode of action and effectiveness of the OCP 2. list the advantages and disadvantages of OCP 3. make a checklist for indications and contraindications, and make appropriate case selection 4. describe different OCP for making options for the client and advise the client about proper administration of OCP 5. write history and physical findings to identify contraindications to the OCP 6. list the appropriate investigations 7. explain the follow-up procedure to the patient 8. describe the side-effects and complications of OCP and their management 9. describe how to keep proper records for patients on OCP	Pharmacology of Oral contraceptives  Comparison of OCP with other contraceptives  Side effects and complications of their management  History and physical examination prior to OCP prescription



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

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

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

**Day 6:****Permanent Methods**

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

Specific educational objectives	Contents
<p>At the end of the session, students should be able to:</p> <ol style="list-style-type: none"> <li>1. name and define different permanent methods of contraception and their effectiveness</li> <li>2. counsel the patients</li> <li>3. select the patients</li> <li>4. list the merits and demerits of these methods</li> <li>5. refer the patients to the appropriate centres</li> <li>6. take informed consent (obtaining consent from both husband and wife is not mandatory according to Bangladesh Government policy)</li> <li>7. describe the steps of the operative techniques of these methods and the anaesthetic techniques used</li> <li>8. list the complication sand their management</li> <li>9. mention the time of effectiveness of each method</li> <li>10. describe the importance of record keeping</li> <li>11. give appropriate advice for post-operative follow-up</li> <li>12. give advice about the very limited scope of reversal and the techniques used</li> </ol>	<p>Description of different method</p> <p>Health care interview</p> <p>Steps of history taking and physical examination</p> <p>Steps of operative techniques</p> <p>Advantages and disadvantages</p> <p>Complications and their management</p>

**Day 7:****Injectables**

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

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

**Day 8:****Implant**

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

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

**Day 9: Safe period, lactational amenorrhoea method (LAM), condoms, coitus interruptus**

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

**Session 1 – Safe period**

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

**Session 2- Lactational amenohorrea method (LAM)**

Intermediate Educational Objective: Student will be able to advise clients about lactation as a contraceptive method by explaining it be an Exclusive Breast Feeding approach.

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

### Session 3 – Condom

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

<b>Specific educational objectives</b>	<b>Contents</b>
A. At the end of the session the student should acquire knowledge of the following and be able to: 1. explain condom as a method of contraception 2. describe its mode of action 3. list its advantages and disadvantages 4. describe the role of condoms in preventing STD/HIV infection.  B. At the end of the session the student should acquire skill of the following and be able to: explain what to tell about the use of condom to the client	1. Description of condom - materials 2. How it works as contraceptive 3. Advantages and disadvantages - follow-up 4. STD/HIV- AIDS Use of condom

### Session 4 – Coitus Interruptus

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

<b>Specific educational objectives</b>	<b>Contents</b>
At the end of the session the student should be able to: 1. describe the place played by coitus interruptus in reducing the fertility rate in the population 2. recognise from what a couple say that they are using coitus interruptus as a method of family planning 3. communicate with clients about the method and describe its advantages and disadvantages, especially the failure rate	1. Local terminology used to describe coitus interruptus 2. Reasons for failure of the method 3. Advantages and disadvantages

**Management issues in family planning. Organisation of a clinic**

**Day 10:**

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

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

**Day 11**

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

**Day 12:****Assessment and Feedback**

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

**4<sup>TH</sup> YEAR in 3<sup>rd</sup> Phase GYNAE AND ANTENATAL OUTPATIENT CLINIC  
COMPONENT – THREE**

**2 weeks (12 sessions in the morning)**

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



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

**5<sup>th</sup> YEAR in 4<sup>th</sup> Phase ROUTINE OBSTETRICS**  
(COMPONENT – FOUR)

3 weeks – 18 sessions in the morning

SESSION	TOPIC	LEARNING OBJECTIVES	TEACHING METHOD	
			TEACHERS' ROLE	STUDENTS' ROLE
Session 1 & 2	Ante-natal Care and Screening for high risk pregnancies	1. Interpret the findings obtained by history taking physical examination and investigation 2. Identify anaemia clinically 3. Identify nutritional status 4. Identify hypertension 5. Counsel women on importance of (a) Regular antenatal care (b) Nutrition (c) Personal hygiene (d) Healthy life style during pregnancy (e) Breast feeding (f) Contraception	Demonstration by a teacher      Lecture      Demonstration by the teacher      Role play by a teacher	Practise by case study in groups  Case study by group  Practice by students on individual cases  -do-  Role play by students in small group  Exercise with patient

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

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

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

**5<sup>TH</sup> YEAR in 4<sup>th</sup> Phase ROUTINE GYNAECOLOGY**  
**(COMPONENT – FIVE)**

3 weeks – 18 sessions in the morning

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

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

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

**5<sup>TH</sup> YEAR in 4<sup>th</sup> Phase/ EMERGENCY OBSTETRIC CARE (EOC) AND LABOUR ROOM**  
(COMPONENT – SIX)

2 weeks – 12 sessions in the morning

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

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

## OBSTETRICS & GYNAECOLOGY MBBS COURSE SCHEDULE

### 4<sup>th</sup> YEAR M.B.B.S in 3<sup>rd</sup> Phase

Lecture 28 hours + Evaluation 2 hours =30 hours

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

### 5<sup>th</sup> YEAR M.B.B.S in 4<sup>th</sup> Phase

Lectures 60 hours+ Demonstration/Practical/Tutorial 58 hours+Departmental Integrated teaching = 20 hours + Phase IV Common Integrated teaching =126 hours

TERM – I = 20hours		TERM – II = 22 hours		TERM – III = 18 hours		Demonstration/Practical/Tutorial in TERM I, II & III= 58 hours
18hours	Evaluation 2hr	20 hours	Evaluation 2hr	16 hours	Evaluation 2hr	
Lecture –18hours	<i>NB: Lectures will be followed by evaluation</i> (MCQ, SBA, SEQ, SAQ)s	Lecture – 20 hours	<i>NB: Lectures will be followed by evaluation</i> (MCQ, SBA, SEQ, SAQ)	Lecture – 16 hours	<i>NB: Lectures will be followed by evaluation</i> (MCQ, SBA, SEQ, SAQ)	Demonstration / Video presentation
Gynae – 8 hrs Obs – 10hrs		Gynae – 8hours Obs – 12 hours		Gynae –9 hours Obs –7 hours		Gynae & Obs

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

**\*Integrated teaching : Only for 5<sup>th</sup> year**



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

Components	Marks	Total Marks
<b>WRITTEN EXAMINATION</b>		
Paper – I –MCQ (SBA & Multiple true-false question)	10+10 =20	100
SAQ	5x10= 50	
SEQ	10x2= 20	
Two groups, in each group 5 SAQ ,1 SEQ		
Marks from formative assessment	10	100
<b>PAPER - II</b>		
Paper - II-MCQ( SBA & Multiple true-false question)	10+10 = 20	100
SAQ	5x10 = 50	
SEQ	10x2 = 20	
Two groups, in each group 5 SAQ ,1 SEQ		
Marks from formative assessment	10	
<b>PRACTICAL EXAMINATION</b>		
OSCE / OSPE		100
<b>CLINICAL EXAMINATION</b>		
Obs. Case	<u>50</u>	100
Gynae. Case	<u>50</u>	
<b>ORAL EXAMINATION (Structured)</b>		
Obs	50	100
Gynae	50	
<b>Grand Total</b>		<b>500</b>

➤ Pass marks 60 % in each of theoretical, oral and practical  
There will be separate answer script for SBA & Multiple true-false question

### **3. Topics of Phase – IV**

- Generic Topics on Medical Humanities to be taught in Phase-IV
- Integrated Teaching in Phase IV
- Subjects of Phase IV--
  - Medicine & Allied subjects
  - Surgery & Allied subjects
  - Obstetrics and Gynaecology

**Generic Topics on Medical Humanities to be taught in Phase –IV**

The following topics will be taught within 4<sup>th</sup> phase under supervision of Phase-IV coordination committee in collaboration with medical education unit (MEU). The sessions will be under the guidance of Principal & Vice-principal, coordinated by concerned departments and sessions will be delivered by concerned experts of the topics. Each session will be one and half hour. Attending these session will be mandatory and will be reflected in the formative & summative assessment of Phase-IV.

**Topics:**

1. Medical professionalism
2. Inter-professionalism
3. Patient Safety & Medical Error

Topics	Learning objective	List of Contents	Method	Time
<b>Medical Professionalism</b>	<ul style="list-style-type: none"> <li>• explain the terminology: professionalism , medical professionalism</li> <li>• state the importance of medical professionalism</li> <li>• explain the professional responsibilities in health care</li> <li>• mention the ways and means of improving medical professionalism</li> </ul>	<ul style="list-style-type: none"> <li>• The terminology: professionalism , medical professionalism</li> <li>• Importance of medical professionalism</li> <li>• Professional responsibilities in health care</li> <li>• Ways and means of improving medical professionalism</li> </ul>	Interactive Lecture Or Seminar	One and half hour
<b>Inter-professionalism</b>	<ul style="list-style-type: none"> <li>• define Inter-professionalism (IP)</li> <li>• mention importance of IP in health care</li> <li>• list the members of the inter-professional collaboration</li> <li>• state the means of developing inter-professional collaboration among health team</li> <li>• mention some health service related areas requiring inter-professional collaboration</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of Inter-professionalism (IP)</li> <li>• Importance of IP in health care</li> <li>• Members of the inter-professional team collaboration</li> <li>• Means of developing inter-professional collaboration among health team</li> <li>• Some health service related areas requiring inter-professional collaboration</li> </ul>	Interactive Lecture Or Seminar	One and half hour
<b>Patient Safety &amp; medical error</b>	<ul style="list-style-type: none"> <li>• define patient safety</li> <li>• mention importance of patient safety</li> <li>• define medical errors and medical negligence</li> <li>• list common medical errors and medical negligence</li> <li>• explain responsibility of patient safety and rights of a patient</li> <li>• mention the common patient safety issues and goals</li> <li>• explain means of administration of quality care to the patient</li> </ul>	<ul style="list-style-type: none"> <li>• Definition and importance of patient safety</li> <li>• Definition and common medical errors and medical negligence</li> <li>• Responsibility of patient safety and rights of a patient</li> <li>• Common patient safety issues and goals</li> <li>• Means of administration of quality care to the patient</li> </ul>	Interactive Lecture Or Seminar	One and half hour

### Integrated Teaching In Phase IV

All the departments of phase iv (Medicine & allied Topics, Surgery & Allied Topics and Gynecology & Obstetrics) must be present and take part in the integrated teaching while the faculty representatives from concerned clinical and other departments will also participate actively. Teachers will be the speakers in each session. Participation of the students of phase IV should be ensured. Students need to get some take home message from every session. To ensure presence of the students 10 (ten) marks will be allocated from practical part of the professional examination as a part of integrated teaching and submission of write up on what was learned by the student as summary. Schedule of integrated teaching session will be set at the phase IV committee meeting in collaboration with medical education unit (MEU).

Each session will be for at least 3 hours

#### Topics :

1. Hypertension
2. Tuberculosis
3. Thyroid Disorder
4. Acute Kidney Injury(AKI)
5. Fever
6. Oedema
7. Chest pain
8. Acute respiratory distress
9. DM
10. Jaundice
11. Diarrhea and vomiting
12. Nutrition
13. Pediatric Emergency
14. Headache
15. Anxiety
16. Depression
17. Psychosis
18. Drug reaction
19. Generalised pruritus
20. Purpura
21. STI
22. Low Back Pain
23. Joint Pain
24. Osteoporosis
25. Acute abdomen
26. Thrombophlebitis/Phlebothrombosis
27. Sepsis
28. Infection Prevention & Control
29. Shock
30. Fluid and Electrolytes-
31. Burn
32. Per rectal bleeding-
33. Vertigo
34. Congenital anomalies
35. Wound infection
36. Urinary Tract Infection (UTI)
37. AUB
38. Convulsion
39. Abdominal Lump
40. Anaemia
41. Unconsciousness
42. Delirium & Dementia

Topic	Learning Objective	Core Contents	Other Discipline Involved
<b>Hypertension</b>	At the end of the session students will be able to - <ul style="list-style-type: none"> <li>• define hypertension</li> <li>• classify hypertension</li> <li>• mention causes of secondary hypertension</li> <li>• mention complications</li> <li>• mention accelerated and malignant hypertension</li> <li>• plan Investigations</li> <li>• manage hypertension as well as complications</li> <li>• evaluate and manage hypertension in pregnancy</li> <li>• manage of hypertension before, during and after surgery</li> </ul>	<ul style="list-style-type: none"> <li>• Definition</li> <li>• Classification</li> <li>• Etiology</li> <li>• Secondary hypertension</li> <li>• Approach to newly diagnosed hypertension</li> <li>• Measurement of blood pressure in different posture with importance</li> <li>• History and physical examination</li> <li>• Target organ damage</li> <li>• Investigation</li> <li>• Management</li> <li>• Anti-hypertensive drugs</li> <li>• Hypertension in pregnancy</li> <li>• Hypertension and surgery</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine/ Cardiology</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Ophthalmology</li> </ul>
<b>Tuberculosis</b>	At the end of the session students will be able to - <ul style="list-style-type: none"> <li>• mention epidemiology</li> <li>• explain pathology and pathogenesis</li> <li>• enumerate organ involvement</li> <li>• describe the natural history of untreated primary TB</li> <li>• mention clinical features of pulmonary TB</li> <li>• mention clinical features of extra pulmonary TB</li> <li>• perform necessary investigations</li> <li>• manage a case of TB</li> <li>• manage TB in pregnancy</li> <li>• diagnose and manage drug reaction to Anti TB drugs</li> <li>• evaluate role of surgery in TB</li> </ul>	<ul style="list-style-type: none"> <li>• Epidemiology</li> <li>• Pathogenesis &amp; Pathology</li> <li>• Clinical features – pulmonary, extra pulmonary</li> <li>• Investigations</li> <li>• Management</li> <li>• TB in pregnancy</li> <li>• Drug reaction to Anti TB drugs</li> <li>• TB and surgery</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Dermatology</li> <li>• Ophthalmology</li> <li>• Otolaryngology</li> <li>• Orthopedics</li> <li>• Pediatrics</li> </ul>
<b>Thyroid Disorders</b>	At the end of the session students will be able to - <ul style="list-style-type: none"> <li>• list common thyroid disorders</li> <li>• mention hypo function of thyroid with etiology</li> <li>• mention hyperfunction of thyroid with etiology</li> <li>• state the causes of thyroid enlargement</li> <li>• enumerate the clinical features of hypothyroidism and hyperthyroidism</li> <li>• perform necessary investigations for suspected case of thyroid dysfunction and their interpretation</li> </ul>	<ul style="list-style-type: none"> <li>• Thyrotoxicosis <ul style="list-style-type: none"> <li>○ Definition</li> <li>○ Causes</li> <li>○ Clinical features</li> <li>○ Investigations</li> <li>○ Management</li> <li>○ Crisis</li> </ul> </li> <li>• Hypothyroidism <ul style="list-style-type: none"> <li>○ Definition</li> <li>○ Causes</li> <li>○ Clinical features</li> <li>○ Investigations</li> <li>○ Management</li> <li>○ Crisis</li> </ul> </li> <li>• Thyroid lump/swelling <ul style="list-style-type: none"> <li>○ Causes</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Otolaryngology</li> <li>• Skin and VD</li> </ul>

	<ul style="list-style-type: none"> <li>• manage hypothyroidism and hyperthyroidism</li> </ul>	<ul style="list-style-type: none"> <li>○ Clinical assessment</li> <li>○ Investigations</li> <li>• Transient thyroiditis</li> <li>• Autoimmune thyroiditis</li> <li>• Thyroid disorder in pregnancy</li> <li>• Surgery and thyroid dysfunction</li> </ul>	
<b>Acute Kidney Injury(AKI)</b>	<p>At the end of the session students will be able to -</p> <ul style="list-style-type: none"> <li>• define AKI</li> <li>• list causes of AKI</li> <li>• describe the pathophysiology of AKI</li> <li>• mention clinical features</li> <li>• plan Investigations</li> <li>• manage cases</li> <li>• mention complications of AKI</li> <li>• identify and manage AKI in paediatrics</li> <li>• evaluate and manage pregnancy with AKI</li> <li>• diagnose and manage AKI related with surgery</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of AKI</li> <li>• Causes of AKI</li> <li>• Pathophysiology of AKI</li> <li>• Clinical features</li> <li>• Investigations</li> <li>• Management</li> <li>• Complications of AKI</li> <li>• AKI in paediatrics</li> <li>• AKI in Pregnancy</li> <li>• AKI related with surgery</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine/ Nephrology</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Paediatrics</li> </ul>
<b>Fever</b>	<p>At the end of the session students will be able to -</p> <ul style="list-style-type: none"> <li>• list the etiology of fever</li> <li>• Investigate a case</li> <li>• mention management of cases &amp; management of complications both in adults and in children.</li> <li>• evaluate and manage fever during pregnancy</li> <li>• mention the role of surgery in management of a case of fever</li> <li>• list the consequences of fever</li> </ul>	<ul style="list-style-type: none"> <li>• etiology of fever</li> <li>• Investigation of a case of fever</li> <li>• management of fever and management of complications both in adults and in children.</li> <li>• management of fever during pregnancy</li> <li>• the role of surgery in management of a case of fever</li> <li>• consequences of fever</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine/ Gastroenterology</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Paediatrics</li> </ul>
<b>Oedema</b>	<p>At the end of the session students will be able to -</p> <ul style="list-style-type: none"> <li>• define oedema</li> <li>• explain the pathophysiology</li> <li>• list the causes</li> <li>• mention clinical assessment of a case of oedema</li> <li>• investigate a case</li> <li>• plan management both in adults and in children.</li> <li>• evaluate and manage oedema during pregnancy</li> <li>• mention the role of surgery in selective cases of oedema</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of oedema</li> <li>• Pathophysiology</li> <li>• Causes of oedema</li> <li>• Clinical assessment of a case of oedema</li> <li>• Investigations</li> <li>• Management both in adults and in children.</li> <li>• Evaluation and management of oedema during pregnancy</li> <li>• Role of surgery in selective cases of oedema</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Paediatrics</li> </ul>

<b>Chest pain</b>	At the end of the session students will be able to- <ul style="list-style-type: none"> <li>• mention the causes of chest pain</li> <li>• outline the Systematic approach to most of the common causes chest pain (History and clinical exam)</li> <li>• interpret the findings in term of diseases, possible causes, and plan of investigations</li> <li>• make emergency decision regarding management</li> <li>• plan treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Causes of chest pain</li> <li>• Systemetic approach to chest pain</li> <li>• Clinical features of chest pain</li> <li>• DDs of chest pain</li> <li>• Lab diagnosis of chest pain</li> <li>• Treatment of chest pain</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine/Respiratory Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Cardiology</li> </ul>
<b>Acute respiratory distress</b>	At the end of the session students will be able to- <ul style="list-style-type: none"> <li>• mention the causes</li> <li>• outline the systematic approach to most of the common causes of respiratory distress(history and clinical exam)</li> <li>• outline the plan of investigations</li> <li>• interpret the findings to reach the cause and to exclude differential diagnosis</li> <li>• plan treatment approach</li> </ul>	<ul style="list-style-type: none"> <li>• Causes</li> <li>• Systemetic approach</li> <li>• Clinical features</li> <li>• Lab diagnosis</li> <li>• Treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Cardiology</li> <li>• Respiratory Medicine</li> </ul>
<b>Diabetes Malaitus(DM)</b>	At the end of the session students will be able to: <ul style="list-style-type: none"> <li>• define DM</li> <li>• classify DM</li> <li>• describe brief pathophysiology</li> <li>• state presenting features</li> <li>• mention short term and long term complications.</li> <li>• outline laboratory diagnosis</li> <li>• mention WHO guideline</li> <li>• manage DM in different clinical settings (in pregnancy, children, in kidney disease)</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of DM</li> <li>• Classification of DM</li> <li>• Pathophysiology of DM</li> <li>• C/F of DM</li> <li>• Complications of DM</li> <li>• Lab. diagnosis of DM</li> <li>• Management of DM (Including Special situation)</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Endocrinology</li> <li>• Skin and VD</li> </ul>
<b>Jaundice</b>	At the end of the session students will be able to: <ul style="list-style-type: none"> <li>• define jaundice</li> <li>• classify jaundice</li> <li>• explain the pathophysiology of different type of jaundice</li> <li>• outline systematic approach to differentiate different types of jaundice</li> <li>• plan relevant investigations</li> <li>• outline treatment approaches.</li> </ul>	<ul style="list-style-type: none"> <li>• Definition</li> <li>• Causes</li> <li>• Classification</li> <li>• Pathophysiology</li> <li>• C/F</li> <li>• Diffential diagnosis</li> <li>• Lab.investigations</li> <li>• Treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Gastroenterology</li> <li>• Paediatrics</li> </ul>



<b>Diarrhea and vomiting</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define diarrhea</li> <li>• mention causes</li> <li>• describe pathogenesis</li> <li>• classify dehydration</li> <li>• assess dehydration</li> <li>• describe clinical presentation and consequences</li> <li>• plan investigations and interpretation</li> <li>• outline management</li> <li>• mention preventive measures</li> </ul>	<ul style="list-style-type: none"> <li>• Vomiting and causes</li> <li>• Diarrheal disease- <ul style="list-style-type: none"> <li>a. Acute watery diarrhea</li> <li>b. Persistent diarrhea</li> <li>c. Dysentery</li> </ul> </li> <li>• Assess dehydration and appropriate management</li> <li>• Composition of ORS , cholera saline</li> <li>• Complication</li> <li>• Prevention</li> </ul>	<ul style="list-style-type: none"> <li>• Paediatrics</li> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Nutrition</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define IYCF</li> <li>• define nutrition</li> <li>• mention common nutritional problem</li> <li>• define malnutrition</li> <li>• classify malnutrition</li> <li>• explain growth chart</li> <li>• assess malnutrition</li> <li>• mention principals of management</li> <li>• describe vitamin deficiency</li> <li>• describe briefly the micronutrient deficiency</li> <li>• define obesity and malnutrition</li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition</li> <li>• IYC</li> <li>• Definition</li> <li>• Common nutritional problems</li> <li>• Malnutrition definition</li> <li>• classification</li> <li>• Growth chart</li> <li>• Assessment of malnutrition</li> <li>• Principals of Management</li> <li>• Vitamin</li> <li>• Deficiency- common vit deficiency like A, D, K.</li> <li>• Micronutrient</li> <li>• Deficiency- Iron deficiency anemia</li> <li>• Obesity- definition, BMI, cause, clinical presentation, Investigations and interpretation</li> <li>• Complications</li> </ul>	<ul style="list-style-type: none"> <li>• Paediatrics</li> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Pediatric Emergency</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• mention the type of Poisoning</li> <li>• outline management of drowning, burn, dog bite, snake bite &amp; status epilepticus</li> <li>• mention the preventive measures</li> </ul>	<ul style="list-style-type: none"> <li>• Poisoning- <ul style="list-style-type: none"> <li>a) common house</li> <li>b) hold poisoning,</li> <li>c) kerosene poisoning,</li> <li>d) OPC poisoning,</li> <li>e) drug poisoning</li> </ul> </li> <li>• Drowning</li> <li>• Burn</li> <li>• Dog bite</li> <li>• Snake bite</li> <li>• Status epilepticus</li> </ul>	<ul style="list-style-type: none"> <li>• Paediatrics</li> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Headache</b>	<p>At the end of the session students will be able to:</p>	<ul style="list-style-type: none"> <li>• Definition of headache</li> <li>• Epidemiology of headache</li> </ul>	<ul style="list-style-type: none"> <li>• Psychiatry</li> </ul>



	<ul style="list-style-type: none"> <li>• define headache</li> <li>• mention the types of headache</li> <li>• perform the history taking of headache</li> <li>• state the clinical features of headache</li> <li>• mention the symptoms of headache related to intracranial causes</li> <li>• explain the symptoms of headache due to ophthalmic or ENT causes</li> </ul>	<ul style="list-style-type: none"> <li>• Common causes of headache</li> <li>• Types of headache</li> <li>• Tension headache</li> <li>• Migraine</li> <li>• Differential diagnosis of headache</li> <li>• Management of headache</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• Neurology</li> <li>• Eye</li> <li>• ENT</li> </ul>
<b>Anxiety</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define anxiety</li> <li>• classify anxiety disorders</li> <li>• state the clinical features of anxiety disorder</li> <li>• diagnose GAD</li> <li>• mention the organic causes of anxiety</li> <li>• manage a case of anxiety disorder</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of anxiety, anxiety disorder</li> <li>• Neurotransmitter involve in anxiety</li> <li>• Epidemiology of GAD</li> <li>• Signs and symptoms of anxiety disorders</li> <li>• Treatment of Anxiety disorder</li> <li>• Postpartum blue anxiety</li> </ul>	<ul style="list-style-type: none"> <li>• Psychiatry</li> <li>• Internal Medicine</li> <li>• Pediatrics</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Depression</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define depression</li> <li>• classify depressive disorder</li> <li>• state the clinical features of depressive disorder</li> <li>• diagnose depressive disorder</li> <li>• mention the organic causes of depression</li> <li>• manage a case of depressive disorder</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of depression &amp; depressive disorder</li> <li>• Neurotransmitter involves in depression</li> <li>• Epidemiology of Depressive disorder</li> <li>• Sign symptoms of depressive disorder</li> <li>• Treatment of depressive disorder</li> <li>• Postpartum blue depression in children</li> </ul>	<ul style="list-style-type: none"> <li>• Psychiatry</li> <li>• Internal Medicine</li> <li>• Pediatrics</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Psychosis</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define Psychosis</li> <li>• classify Psychotic disorder</li> <li>• state the clinical features of Psychotic disorder</li> <li>• diagnose Schizophrenia</li> <li>• diagnose Bipolar Disorder</li> <li>• manage a case of Schizophrenia</li> <li>• manage a case of Bipolar Disorder</li> <li>• state the prognosis of Psychotic disorder</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of Psychosis, Hallucination, Delusion</li> <li>• Classification of Psychosis</li> <li>• Neurotransmitter involve in Psychosis</li> <li>• Epidemiology of Schizophrenia</li> <li>• Epidemiology of Bipolar disorder</li> <li>• Sign symptoms of Psychosis</li> <li>• ICU Psychosis</li> <li>• Postpartum Psychosis</li> <li>• Diagnostic criteria of schizophrenia</li> </ul>	<ul style="list-style-type: none"> <li>• Psychiatry</li> <li>• Internal Medicine</li> <li>• Obstetrics and Gynaecology</li> </ul>

		<ul style="list-style-type: none"> <li>• Diagnostic criteria of Bipolar Disorder</li> <li>• Treatment of Schizophrenia</li> <li>• Treatment of Bipolar disorder</li> </ul>	
<b>Delirium &amp; Dementia</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define delirium &amp; dementia</li> <li>• mention the causes of delirium &amp; dementia</li> <li>• classify dementia</li> <li>• state the clinical features of delirium &amp; dementia</li> <li>• diagnose a case of delirium &amp; dementia</li> <li>• manage a case of delirium &amp; dementia</li> <li>• state the prognosis of dementia</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of delirium</li> <li>• Definition of dementia</li> <li>• Causes of delirium</li> <li>• Causes of dementia</li> <li>• Classification of dementia</li> <li>• Clinical feature of delirium</li> <li>• Clinical feature of dementia</li> <li>• Diagnosis of delirium</li> <li>• Diagnosis of dementia</li> <li>• Management of delirium</li> <li>• Management of dementia</li> <li>• Prognosis of dementia</li> </ul>	<ul style="list-style-type: none"> <li>• Psychiatry</li> <li>• Internal Medicine</li> <li>• Neurology</li> </ul>
<b>Drug reaction</b>	<p>At the end of the session students will be able to</p> <ul style="list-style-type: none"> <li>• define drug reaction</li> <li>• explain the pathogenesis of drug reaction</li> <li>• state the clinical features of drug reaction</li> <li>• differentiate drug reaction from other diseases</li> <li>• outline the investigations of drug reaction</li> <li>• outline the management of drug reactions</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of drug reaction</li> <li>• Types of drug reaction</li> <li>• Pathogenesis of drug reaction</li> <li>• Clinical features of drug reaction</li> <li>• Differential diagnosis of drug reaction</li> <li>• Investigation of drug reaction</li> <li>• Management of drug reaction</li> </ul>	<ul style="list-style-type: none"> <li>• Department of Skin &amp; VD,</li> <li>• Internal Medicine,</li> <li>• Paediatrics,</li> <li>• General Surgery,</li> <li>• Obstetrics and Gynaecology</li> <li>• Pharmacology,</li> <li>• Pathology</li> </ul>
<b>Generalised pruritus</b>	<p>At the end of the session students will be able to</p> <ul style="list-style-type: none"> <li>• define pruritus</li> <li>• mention the causes of generalized pruritus</li> <li>• mention the pathway of pruritus</li> <li>• explain pathophysiology of pruritus</li> <li>• outline the investigation of pruritus</li> <li>• outline the general and specific management of pruritus</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of pruritus</li> <li>• Pathway of pruritus</li> <li>• Causes of pruritus</li> <li>• Pathophysiology of pruritus</li> <li>• Differential diagnosis</li> <li>• Investigation of pruritus</li> <li>• Management of pruritus</li> </ul>	<ul style="list-style-type: none"> <li>• Department of Skin &amp; VD,</li> <li>• Internal Medicine,</li> <li>• Paediatrics,</li> <li>• General Surgery,</li> <li>• Obstetrics and Gynaecology</li> </ul>
<b>Purpura</b>	<p>At the end of the session students will be able to</p> <ul style="list-style-type: none"> <li>• define purpura and related terms</li> <li>• mention the causes of purpura</li> <li>• explain the pathogenesis of purpura</li> <li>• mention the types of purpura</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of purpura</li> <li>• Types of purpura</li> <li>• Pathogenesis of purpura</li> <li>• Investigation of purpura</li> <li>• Management of purpura</li> </ul>	<ul style="list-style-type: none"> <li>• Department of Skin &amp; VD,</li> <li>• Internal Medicine,</li> <li>• Haematology,</li> <li>• Paediatrics,</li> <li>• General Surgery,</li> <li>• Pathology</li> </ul>

	<ul style="list-style-type: none"> <li>• mention the investigation of purpura</li> <li>• describe the management of purpura</li> </ul>		
<b>STI</b>	<p>At the end of the session students will be able to</p> <ul style="list-style-type: none"> <li>• define STI and related terms</li> <li>• classify STI</li> <li>• clinical features of STI</li> <li>• mention the laboratory investigation of STI</li> <li>• differentiate STI from other diseases</li> <li>• describe the management of STI</li> <li>• outline prevention and control measures</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of STI</li> <li>• Classification of STI</li> <li>• Clinical feature of STI</li> <li>• Laboratory investigations of STI</li> <li>• Differential diagnosis of STI</li> <li>• Management of STI</li> <li>• Prevention and control of STI</li> </ul>	<ul style="list-style-type: none"> <li>• Department of Skin &amp; VD,</li> <li>• Internal Medicine,</li> <li>• General Surgery,</li> <li>• Microbiology</li> <li>• Community Medicine</li> </ul>
<b>Low Back Pain</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• define Low Back Pain</li> <li>• mention different types of Low Back Pain</li> <li>• describe the pathogenesis of Low Back Pain</li> <li>• enumerate the clinical features</li> <li>• list the required laboratory investigations</li> <li>• management with prevention.</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of Low Back Pain</li> <li>• Types of Low Back Pain</li> <li>• Clinical stages of Low Back Pain</li> <li>• Pathophysiology</li> <li>• Clinical feature</li> <li>• Complication</li> <li>• Indication of operative and non-operative treatment.</li> </ul>	<ul style="list-style-type: none"> <li>• Pathology</li> <li>• Pharmacology</li> <li>• Physical Medicine</li> <li>• Radiology</li> <li>• Orthopedics</li> </ul>
<b>Joint Pain</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• explain the etiopathogenesis of the disease.</li> <li>• mention the causes of joint pain</li> <li>• list the types of arthritis</li> <li>• outline the management of the disease according to the causes</li> </ul>	<ul style="list-style-type: none"> <li>• Types of arthritis</li> <li>• Stages of all types of arthritis</li> <li>• Complications</li> <li>• Conservative vs surgical treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Anatomy</li> <li>• Pathology</li> <li>• Pharmacology</li> <li>• Physical Medicine</li> </ul>
<b>Osteoporosis</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• mention basic physiology of the bone and pathology of osteoporosis</li> <li>• explain the consequences of osteoporosis</li> <li>• describe social and economic burden in the society</li> <li>• outline the management with a protocol of prevention</li> </ul>	<ul style="list-style-type: none"> <li>• Causes and types of Osteoporosis</li> <li>• Pathophysiology of osteoporosis</li> <li>• Complication</li> <li>• Drug used for Preventions</li> </ul>	<ul style="list-style-type: none"> <li>• Physiology</li> <li>• Pathology</li> <li>• Pharmacology</li> <li>• Endocrinology</li> <li>• Radiology</li> <li>• Obstetrics &amp; Gynaecology</li> </ul>
<b>Acute abdomen</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define acute abdomen</li> <li>• list the common causes of acute abdomen</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of acute abdomen</li> <li>• Causes and examples of acute abdomen</li> <li>• Surgical causes of acute abdomen</li> <li>• Medical causes of acute abdomen</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> </ul>

	<ul style="list-style-type: none"> <li>• mention the surgical, medical &amp; gynecological causes of acute abdomen</li> <li>• state the specific management protocol of acute abdomen</li> </ul>	<ul style="list-style-type: none"> <li>• Gynecological causes of acute abdomen</li> <li>• Specific management of acute abdomen</li> </ul>	<ul style="list-style-type: none"> <li>• Paediatrics,</li> </ul>
<b>Thrombophlebitis/Phlebothrombosis</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define thrombophlebitis</li> <li>• define phlebothrombosis</li> <li>• mention the etiology of thrombophlebitis &amp; phlebothrombosis</li> <li>• explain the pathogenesis of thrombophlebitis &amp; phlebothrombosis</li> <li>• state the clinical features of thrombophlebitis &amp; phlebothrombosis</li> <li>• differentiate between thrombophlebitis &amp; phlebothrombosis</li> <li>• state the name of procoagulant &amp; anticoagulant</li> <li>• mention the complications of thrombophlebitis &amp; phlebothrombosis</li> <li>• outline the management of thrombophlebitis &amp; phlebothrombosis</li> <li>• state the measures of physiotherapy for prevention of thrombophlebitis &amp; phlebothrombosis</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of thrombophlebitis &amp; phlebothrombosis</li> <li>• Etiology of thrombophlebitis &amp; phlebothrombosis</li> <li>• Pathology of thrombophlebitis &amp; phlebothrombosis</li> <li>• Clinical features of thrombophlebitis &amp; phlebothrombosis</li> <li>• Names procoagulant &amp; anticoagulant</li> <li>• Complications of thrombophlebitis &amp; phlebothrombosis</li> <li>• Management of thrombophlebitis &amp; phlebothrombosis</li> <li>• Preventive measures</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Pathology</li> </ul>
<b>Sepsis</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define sepsis, MODS, SIRS, bacteremia, pyemia, septic shock</li> <li>• mention the etiology of sepsis</li> <li>• explain the pathophysiology of sepsis</li> <li>• state the clinical features of sepsis</li> <li>• differentiate the stages of sepsis</li> <li>• state the investigations for sepsis</li> <li>• outline the general management of sepsis</li> <li>• assess the need of HDU and ICU support in sepsis</li> <li>• state the fate of sepsis</li> </ul>	<ul style="list-style-type: none"> <li>• Definition-MODS, SIRS, bacteremia, pyemia, septic shock</li> <li>• Etiology of sepsis</li> <li>• Pathophysiology of sepsis</li> <li>• Clinical features of sepsis</li> <li>• Investigations of sepsis</li> <li>• General management of sepsis</li> <li>• Fate of sepsis</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine,</li> <li>• General Surgery,</li> <li>• Obstetrics and Gynaecology</li> <li>• Pathology</li> <li>• Pharmacology</li> </ul>

<b>Infection Prevention &amp; Control</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define sterilization</li> <li>• state the concept of disinfection</li> <li>• mention universal precaution of infection prevention &amp; control</li> <li>• define hospital acquired infection</li> <li>• describe the cross infection</li> <li>• describe infection control in emerging diseases</li> <li>• mention prevention of hospital infections</li> </ul>	<ul style="list-style-type: none"> <li>• Concept of sterilization</li> <li>• Concept of disinfection</li> <li>• Universal precaution</li> <li>• Hospital acquired infection</li> <li>• Cross infection</li> <li>• Infection control in emerging diseases</li> <li>• Prevention of hospital infection</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine,</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Pathology</li> <li>• Anaesthesiology</li> <li>• Critical care Medicine</li> </ul>
<b>Shock</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define shock</li> <li>• state the types of shock</li> <li>• explain the pathogenesis of shock</li> <li>• list the clinical features of shock</li> <li>• state the complications of shock</li> <li>• outline the general management of shock</li> <li>• state the indications of HDU and ICU</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of shock</li> <li>• Types of shock</li> <li>• Pathogenesis of shock</li> <li>• Clinical features of shock</li> <li>• Complications of shock</li> <li>• General management of shock</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine,</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Pathology</li> <li>• Anaesthesiology</li> <li>• Critical care Medicine</li> </ul>
<b>Fluid and Electrolytes</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• state the daily input/output of fluids and electrolytes</li> <li>• mention the normal level of common electrolytes</li> <li>• define hypo and hyper natraemia</li> <li>• list the causes of hypo and hyper natraemia</li> <li>• mention the clinical feature of hypo and hyper natraemia</li> <li>• outline the treatment of hypo and hyper natraemia</li> <li>• define hypo and hyper kalaemia</li> <li>• state the causes of hypo and hyper kalaemia</li> <li>• mention the clinical feature of hypo and hyper kalaemia</li> <li>• outline the treatment of hypo and hyper kalaemia</li> <li>• define hypo and hyper calcimea</li> <li>• state the causes of hypo and hyper calcimea</li> <li>• mention the clinical feature of hypo and hyper calcimea</li> <li>• state the treatment of hypo and hyper calcimea</li> </ul>	<ul style="list-style-type: none"> <li>• Daily input/output</li> <li>• Normal level of common electrolytes</li> <li>• Definition of hypo and hyper natraemia,</li> <li>• Causes of hypo and hyper natraemia</li> <li>• Clinical features of hypo and hyper natraemia</li> <li>• Treatment of hypo and hyper natraemia</li> <li>• Definition of hypo and hyper kalaemia,</li> <li>• Causes of hypo and hyper kalaemia</li> <li>• Clinical features of hypo and hyper kalaemia</li> <li>• Treatment of hypo and hyper kalaemia</li> <li>• Definition of hypo and hyper calcimea ,</li> <li>• Cuses of hypo and hyper calcimea</li> <li>• Clinical features of hypo and hyper calcimea</li> <li>• Treatment of hypo and hyper calcimea</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine,</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Pathology</li> <li>• Anaesthesiology</li> <li>• Critical care Medicine</li> <li>• Biochemistry</li> <li>• Physiology</li> </ul>

<b>Burn</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define burn</li> <li>• state clinical feature of burn according to depth</li> <li>• explain the pathogenesis of burn</li> <li>• state the complications of burn</li> <li>• mention the assessment criteria of surface area of burn</li> <li>• state the assessment criteria of fluid requirement of burn</li> <li>• outline the general management of burn</li> <li>• state the compartmental syndrome and fasciotomy</li> <li>• define contracture</li> <li>• state the prevention of contracture</li> <li>• mention the reconstructive measures of contracture</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of burn</li> <li>• Clinical features of burn according to depth</li> <li>• Pathogenesis of burn</li> <li>• Complications of burn</li> <li>• Surface area assessment of burn</li> <li>• Fluid requirement assessment of burn</li> <li>• General management of burn</li> <li>• Compartmental syndrome and fasciotomy</li> <li>• Contracture, prevention and reconstructive measures</li> </ul>	<ul style="list-style-type: none"> <li>• General Surgery</li> <li>• Plastic Surgery,</li> <li>• Paediatrics,</li> <li>• Anaesthesiology</li> <li>• Critical care Medicine</li> </ul>
<b>Per rectal bleeding</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define per rectal bleeding</li> <li>• state the types of per rectal bleeding</li> <li>• list the causes of per rectal bleeding</li> <li>• mention the clinical features of per rectal bleeding</li> <li>• state the investigation protocol of per rectal bleeding</li> <li>• outline the management of per rectal bleeding</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of per rectal bleeding</li> <li>• Types of per rectal bleeding</li> <li>• Causes of per rectal bleeding</li> <li>• Clinical features of per rectal bleeding</li> <li>• Investigation protocol of per rectal bleeding</li> <li>• Management of per rectal bleeding</li> </ul>	<ul style="list-style-type: none"> <li>• Internal Medicine,</li> <li>• General Surgery</li> <li>• Obstetrics and Gynaecology</li> <li>• Pediatric surgery</li> </ul>
<b>Vertigo</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• define vertigo</li> <li>• classify vertigo</li> <li>• explain anatomy &amp; physiology of balance</li> <li>• describe pathophysiology of vertigo</li> <li>• explain causes of vertigo</li> <li>• state sign &amp; symptoms of vertigo</li> <li>• mention the investigations of vertigo</li> <li>• describe the management of vertigo</li> <li>• state rehabilitation procedure of patient with chronic vertigo</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of vertigo</li> <li>• Classification of vertigo</li> <li>• Anatomy &amp; physiology of balance</li> <li>• Pathophysiology of vertigo</li> <li>• Causes of vertigo</li> <li>• Symptoms &amp; signs of vertigo</li> <li>• Investigation of vertigo</li> <li>• Management of vertigo</li> <li>• Rehabilitation of chronic vertigo</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Otolaryngology</b></li> <li>• <b>Medicine</b></li> <li>• Ophthalmology</li> <li>• Orthopedics</li> <li>• Anatomy</li> <li>• Physiology</li> </ul>
	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• define congenital anomalies / birth defects</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of congenital anomalies / birth defects</li> <li>• Classification of congenital anomalies</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Pediatrics</b></li> <li>• <b>Orthopedics</b></li> <li>• <b>Cardiology</b></li> </ul>



<b>Congenital Anomalies</b>	<ul style="list-style-type: none"> <li>• classify congenital anomalies</li> <li>• mention the causes and risk factors of congenital anomalies</li> <li>• state the screening of congenital anomalies</li> <li>• list the common congenital anomalies</li> <li>• state epidemiology of common congenital anomalies</li> <li>• outline manage congenital anomalies</li> <li>• explain prevention of congenital anomalies</li> <li>• describe rehabilitation of a patients with congenital anomalies</li> </ul>	<ul style="list-style-type: none"> <li>• Causes &amp; risk factors of congenital anomalies</li> <li>• Screening of congenital anomalies</li> <li>• Epidemiology of congenital anomalies</li> <li>• Common congenital anomalies</li> <li>• Management of congenital anomalies</li> <li>• Prevention of congenital anomalies</li> <li>• Rehabilitation of patients with congenital anomalies</li> </ul>	<ul style="list-style-type: none"> <li>• Plastic surgery</li> <li>• Otolaryngology</li> <li>• Anatomy</li> </ul>
<b>Wound Infection</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>• define wound infection, surgical site infection &amp; nosocomial infection</li> <li>• mention the causes and risk factors of wound infection and nosocomial infection</li> <li>• describe the pathophysiology of wound infection</li> <li>• list the clinical features of wound infection</li> <li>• describe the management of wound infection</li> <li>• explain prevention of wound infection and nosocomial infection</li> <li>• state the consequences of untreated wound infection</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of wound infection, surgical site infection &amp; nosocomial infection</li> <li>• Causes and risk factors of wound infection and nosocomial infection</li> <li>• Pathophysiology of wound infection</li> <li>• Clinical features of wound infection</li> <li>• Management of wound infection</li> <li>• Prevention of wound infection and nosocomial infection</li> <li>• Consequences of untreated wound infection</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Surgery</b></li> <li>• <b>Obstetrics &amp; Gynecology</b></li> <li>• <b>Otolaryngology</b></li> <li>• Pathology</li> <li>• Microbiology</li> </ul>
<b>Urinary Tract Infection (UTI)</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>• define UTI</li> <li>• enumerate the micro-organisms responsible for UTI</li> <li>• explain the signs and symptoms of UTI</li> <li>• enumerate different investigations for UTI</li> <li>• explain the effects of pregnancy (hormonal) on UTI</li> <li>• explain the complications of UTI especially on pregnancy and fetus</li> <li>• list the drugs used for treatment of UTI</li> <li>• mention appropriate referral criteria for UTI</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of UTI</li> <li>• Micro-organisms responsible for UTI</li> <li>• Signs and symptoms of UTI</li> <li>• Investigations for UTI</li> <li>• Effects of pregnancy (hormonal) on UTI</li> <li>• Complications of UTI on pregnancy and fetus</li> <li>• Drugs used for treatment of UTI</li> <li>• Criteria of referral for UTI</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Medicine / Nephrology</b></li> <li>• <b>Obstetrics &amp; Gynecology</b></li> <li>• Microbiology</li> <li>• Pharmacology</li> </ul>

<b>Abnormal uterine bleeding (AUB)</b>	<p>At the end of the session students will be able to :</p> <ul style="list-style-type: none"> <li>define different types abnormal uterine bleeding (AUB)</li> <li>explain the causes and pathophysiology of AUB</li> <li>state the clinical features of AUB</li> <li>mention the investigations for AUB</li> <li>name the differential diagnosis of different causes AUB</li> <li>outline the management approach of the cases of AUB</li> </ul>	<ul style="list-style-type: none"> <li>Definition of different types AUB (like-menorrhagia, polymenorrhoea, oligomenorrhoea, amenorrhoea etc.)</li> <li>Causes &amp; Pathophysiology of AUB</li> <li>Clinical features of AUB</li> <li>Investigations for AUB</li> <li>Differential diagnosis of different causes AUB (like- hypothalamic pituitary dysfunction, ovarian dysfunction, thyroid dysfunction, diabetes mellitus, haemoglobinopathies, thrombocytopenia &amp; dengue)</li> <li>Management approach of the cases of AUB</li> </ul>	<ul style="list-style-type: none"> <li><b>Obstetrics &amp; Gynecology</b></li> <li><b>Medicine</b></li> <li>Endocrinology</li> <li>Haematology</li> </ul>
<b>Convulsion</b>	<p>At the end of the session students will be able to:</p> <ul style="list-style-type: none"> <li>define convulsion</li> <li>state the magnitude &amp; patient profiles of convulsion</li> <li>mention the causes of convulsion</li> <li>list the clinical features convulsion</li> <li>mention D/Ds of different types of convulsion</li> <li>list the investigations for convulsion</li> <li>outline the treatment of convulsion</li> <li>state the prevention of convulsion</li> <li>state complications of convulsion</li> </ul>	<ul style="list-style-type: none"> <li>Definition of convulsion</li> <li>Magnitude &amp; patient profiles of convulsion</li> <li>Causes of convulsion</li> <li>Clinical features convulsion</li> <li>D/Ds of different causes of convulsion ( like- Head Injury, Brain Abscess, Brain Tumour, Tuberculosis, Epilepsy, Sepsis, Poisoning, Eclampsia)</li> <li>Investigations for convulsion</li> <li>Treatment of convulsion</li> <li>Prevention of convulsion</li> <li>Complications of convulsion</li> </ul>	<ul style="list-style-type: none"> <li>Paediatrics</li> <li>Obstetrics &amp; Gynecology</li> <li>Medicine / Neuro-medicine</li> <li>Surgery /Neuro-surgery</li> </ul>
<b>Abdominal Lump</b>	<p>At the end of the session students will be able to-</p> <ul style="list-style-type: none"> <li>define abdominal lump</li> <li>mention the causes of different forms of abdominal lump</li> <li>state the magnitude &amp; patient profiles of abdominal lump</li> <li>mention the clinical presentation abdominal lump</li> <li>mention the investigations for abdominal lump</li> <li>explain differential diagnosis of different form of abdominal lump</li> <li>outline treatment of abdominal lump</li> </ul>	<ul style="list-style-type: none"> <li>Definition of abdominal lump</li> <li>Causes of abdominal lump (Different forms of abdominal lump like - GIT lumps, Lymphoma, Mesenteric Cyst, Enlarged liver, Enlarged Spleen, Fibroid Uterus, Benign Ovarian Tumor, Malignant Ovarian. Tumor &amp; TO mass)</li> <li>Magnitude &amp; patient profiles of abdominal lump</li> <li>Clinical presentation abdominal lump</li> <li>Investigations for abdominal lump</li> <li>Differential diagnosis of different form of abdominal lump</li> <li>Treatment of abdominal lump</li> </ul>	<ul style="list-style-type: none"> <li><b>Obstetrics &amp; Gynecology</b></li> <li><b>Surgery</b></li> <li>Medicine</li> <li>Oncologist</li> </ul>

	<ul style="list-style-type: none"> <li>explain follow up of abdominal lump</li> </ul>	<ul style="list-style-type: none"> <li>Follow up of abdominal lump</li> </ul>	
<b>Anaemia</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>define anaemia</li> <li>classify anaemia</li> <li>list common causes of anaemia in Bangladesh</li> <li>explain clinical approaches (history taking, physical examination &amp; investigations)) a patient with anaemia</li> <li>describe treatment of anaemia</li> <li>state management of anaemia before surgery</li> <li>outline management of anaemia during pregnancy</li> <li>mention prevention of anaemia</li> </ul>	<ul style="list-style-type: none"> <li>Definition of anaemia</li> <li>Classification of anaemia</li> <li>Common causes of anaemia in Bangladesh</li> <li>Approach (history taking, clinical examination and lab investigation) towards an anaemic patient</li> <li>Treatment of anaemia</li> <li>Management of anaemia before surgery</li> <li>Management of anaemia during pregnancy</li> <li>Prevention of anaemia</li> </ul>	<ul style="list-style-type: none"> <li><b>Medicine/ Hematology</b></li> <li><b>Obstetrics &amp; Gynecology</b></li> <li>Surgery</li> </ul>
<b>Unconsciousness</b>	<p>At the end of session students will be able to:</p> <ul style="list-style-type: none"> <li>define unconsciousness</li> <li>mention the level of unconsciousness.</li> <li>list the causes of unconsciousness.</li> <li>explain clinical approaches (history taking, physical examination &amp; investigations)) towards an unconsciousness patient</li> <li>outline emergency management of an unconscious patient.</li> <li>describe general management of unconscious patient</li> <li>mention indications emergency surgery for unconscious patient</li> <li>mention emergency obstetrics care for unconscious patient.</li> </ul>	<ul style="list-style-type: none"> <li>Definition of unconsciousness</li> <li>Level of unconsciousness(including Glasgow Coma Scale)</li> <li>Approach to an unconscious patient (history taking ,clinical examination, lab investigation and bedside investigation)</li> <li>Responsibility of an emergency medical officer(ABC )</li> <li>General management of unconscious patient</li> <li>Indications emergency surgery for unconscious patient</li> <li>Emergency obstetric care for unconscious patient.</li> </ul>	<ul style="list-style-type: none"> <li><b>Medicine- Neuro-medicine</b></li> <li><b>Surgery</b></li> <li><b>Obstetrics &amp; Gynecology</b></li> </ul>

## **Obstetrics & Gynaecology: Departmental Integrated Teaching- Phase -IV**

## Obstetric & Gynecology : Departmental Integrated Teaching-Phase-IV

Obstetric & Gynecology of phase IV will organized the departmental integrated teaching on the following topics where faculty members of Obstetric & Gynecology and concerned other subjects must be present and take part in the integrated teaching. Teachers will be the speakers in each session. Participation of the students of phase IV should be ensured. Students need to get some take home message from every session. To ensure presence of the students few marks will be allocated from practical part of the professional examination as a part of integrated teaching and submission of write up on what was learned by the student as summary. Schedule of the departmental integrated teaching session will be set by the department in coordination with the phase IV committee.

Each session will be for at least 2 hours

### Topics :

1. Pelvic Inflammatory Disease (PID)
2. Vaginal Discharge
3. Ovarian Tumour
4. Contraceptives
5. Pelvic tuberculosis
6. Normal labour
7. Antenatal care
8. Vital statistics (maternal & perinatal mortality)
9. Puerperium
10. Puberty

Topic	Learning Objective	Core Contents	Discipline involved
<b>Pelvic Inflammatory Disease (PID)</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define PID</li> <li>• explain the etiology of PID</li> <li>• describe clinical presentations of PID</li> <li>• differentiate between PID from other DDs</li> <li>• manage a case of PID</li> <li>• describe consequences of PID</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of PID</li> <li>• Etiology of PID</li> <li>• Clinical presentations (Pt. Profile and Clinical sign symptoms)</li> <li>• D/Ds</li> <li>• Investigations</li> <li>• Treatment</li> <li>• Complications of PID</li> </ul>	<ul style="list-style-type: none"> <li>• Gynecology</li> <li>• Microbiology</li> <li>• Pathology</li> <li>• Pharmacology</li> <li>• Radiology imaging</li> <li>• Surgery</li> </ul>
<b>Vaginal Discharge</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define Vaginal discharge</li> <li>• list causes of Vaginal discharge</li> <li>• identify clinical types of Vaginal discharge</li> <li>• differentiate between different types of vaginal discharge</li> <li>• describe management approach of a patient with Vaginal discharge</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of vaginal discharge</li> <li>• Natural defence of Genital tract</li> <li>• Important causative organism of vaginal discharge</li> <li>• Differential diagnosis</li> <li>• Investigation</li> <li>• Management</li> </ul>	<ul style="list-style-type: none"> <li>• Gynecology</li> <li>• Microbiology/ Pathology</li> <li>• Pharmacology</li> <li>• Skin &amp; VD</li> </ul>
<b>Ovarian Tumour</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• classify ovarian tumour</li> <li>• describe Clinical presentations of ovarian tumour</li> <li>• differentiate ovarian tumour from other abdominal lumps</li> <li>• outline the investigations</li> </ul>	<ul style="list-style-type: none"> <li>• Classification of ovarian tumour</li> <li>• Clinical presentation of ovarian tumour</li> <li>• Differential diagnosis (fibroid, mesenteric cyst, other abdominal lump)</li> <li>• Investigations</li> </ul>	<ul style="list-style-type: none"> <li>• Gynecology</li> <li>• Pathology</li> <li>• Pharmacology</li> <li>• Oncology</li> <li>• Radiology &amp; Imaging</li> <li>• Surgery</li> </ul>

	<ul style="list-style-type: none"> <li>describe treatment outline</li> <li>mention the complications</li> </ul>	<ul style="list-style-type: none"> <li>Treatment</li> <li>Complications</li> </ul>	
<b>Contraceptives</b>	<p>At the end of the session students will be able to :</p> <ul style="list-style-type: none"> <li>describe national status and targets of Family planning</li> <li>describe importance of contraceptives</li> <li>classify contraceptives</li> <li>list advantages and disadvantages of different contraceptives</li> <li>mention mechanism of action of each method</li> <li>state complications of each method</li> <li>mention counselling about contraceptive</li> </ul>	<ul style="list-style-type: none"> <li>Contraceptive prevalence rate</li> <li>Unmet need</li> <li>Importance of contraceptives</li> <li>Classification of contraceptives</li> <li>Advantages and disadvantages of each method(natural,barrier,hormonal,non hormonal IUCD, sterilization)</li> <li>Mechanism of action of hormonal and non hormonal method</li> <li>Complications of each method</li> <li>Counselling about contraceptive</li> <li>Follow up of user</li> </ul>	<ul style="list-style-type: none"> <li>Obstetrics &amp; Gynecology</li> <li>Community Medicine</li> <li>Pharmacology</li> </ul>
<b>Pelvic tuberculosis</b>	<p>At the end of the session students will be able to :</p> <ul style="list-style-type: none"> <li>define pelvic tuberculosis</li> <li>state magnitude of the problem (Nationally &amp; Globally)</li> <li>state pathogenesis &amp; pathology of pelvic tuberculosis</li> <li>mention clinical presentations of pelvic tuberculosis</li> <li>mention differential diagnosis</li> <li>list investigation</li> <li>mention treatment of pelvic tuberculosis</li> <li>discuss complication of pelvic tuberculosis</li> </ul>	<ul style="list-style-type: none"> <li>Definition of pelvic TB</li> <li>Magnitude of the problem</li> <li>Aetiopathogenesis</li> <li>Clinical presentations</li> <li>Lab investigations</li> <li>Treatment outline of pelvic tuberculosis</li> <li>Complications of pelvic tuberculosis</li> </ul>	<ul style="list-style-type: none"> <li>Obstetrics &amp; Gynecology</li> <li>Pharmacology</li> <li>Community Medicine</li> <li>Pathology</li> </ul>
<b>Normal labour</b>	<p>At the end of the session students will be able to :</p> <ul style="list-style-type: none"> <li>define normal labour</li> <li>describe anatomy &amp; physiology of uterus</li> <li>list the hormones involved in labour</li> <li>mention the criteria of normal labour</li> <li>mention onset and stages of normal labour</li> <li>describe mechanism of normal labour</li> <li>state monitoring and progress of normal labour</li> <li>mention management in different stages of normal labour</li> </ul>	<ul style="list-style-type: none"> <li>Definition of normal labour</li> <li>Anatomy &amp; physiology of uterus</li> <li>Hormones involved in labour</li> <li>Criteria of normal labour</li> <li>Stages of normal labour</li> <li>Mechanism of normal labour</li> <li>Monitoring and progress of normal labour(partograph)</li> <li>Management in different stages of labour</li> </ul>	<ul style="list-style-type: none"> <li>Obstetrics &amp; Gynecology</li> <li>Physiology</li> <li>Community medicine</li> <li>Pharmacology</li> </ul>

<b>Antenatal care</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define antenatal care</li> <li>• mention objective of antenatal care</li> <li>• mention physiological changes during pregnancy</li> <li>• describe management of an antenatal patient</li> <li>• identify high risk patient</li> <li>• state nutrition during pregnancy</li> <li>• describe counselling of antenatal patient</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of antenatal care</li> <li>• Objectives of antenatal care</li> <li>• Physiological changes during pregnancy</li> <li>• Management of antenatal patient (history,examination,investigation,treatment)</li> <li>• High risk pregnancy</li> <li>• Calculation of calorie intake for a pregnant lady</li> <li>• Counselling of antenatal patient</li> </ul>	<ul style="list-style-type: none"> <li>• Obstetrics &amp; Gynecology</li> <li>• Physiology</li> <li>• Community Medicine</li> <li>• Pharmacology</li> </ul>
<b>Vital statistics (maternal &amp; perinatal mortality)</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define MMR &amp;perinatal mortality</li> <li>• mention current situation of MMR &amp;perinatal mortality in Bangladesh</li> <li>• list important causes of maternal and perinatal mortality</li> <li>• describe measures to reduce maternal and perinatal mortality</li> <li>• Govt. initiatives to prevent maternal and perinatal mortality</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of maternal and perinatal mortality</li> <li>• current situation of MMR &amp;perinatal mortality in Bangladesh</li> <li>• Causes of maternal and perinatal mortality</li> <li>• Measures taken to reduce maternal and perinatal mortality</li> <li>• Govt. initiatives to prevent maternal and perinatal mortality</li> </ul>	<ul style="list-style-type: none"> <li>• Obstetrics &amp; Gynecology</li> <li>• Community Medicine</li> </ul>
<b>Puerperium</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define normal puerperium</li> <li>• mention the anatomical and physiological changes in normal puerperium</li> <li>• describe process of involution</li> <li>• mention management of normal puerperium</li> <li>• describe abnormal puerperium</li> <li>• mention complications of puerperium</li> <li>• state management of abnormal puerperium</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of normal puerperium</li> <li>• Anatomical and physiological changes in puerperium</li> <li>• Process of involution</li> <li>• Management of normal puerperium(rest,diet,ambulation,care of breast,care of genital organ,contraceptive)</li> <li>• Abnormal puerperium</li> <li>• Complications of puerperium</li> <li>• Management of abnormal puerperium</li> </ul>	<ul style="list-style-type: none"> <li>• Obstetrics &amp; Gynecology</li> <li>• Physiology</li> <li>• Pharmacology</li> <li>• Microbiology</li> </ul>
<b>Puberty</b>	At the end of the session students will be able to : <ul style="list-style-type: none"> <li>• define puberty</li> <li>• mention physiological changes of puberty</li> <li>• list complications of puberty</li> <li>• describe clinical management of puberty problems</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of puberty</li> <li>• Physiological changes of puberty</li> <li>• Complications/problems during puberty</li> <li>• Clinical management of puberty problems</li> </ul>	<ul style="list-style-type: none"> <li>• Obstetrics &amp; Gynecology</li> <li>• Anatomy</li> <li>• Physiology</li> <li>• Endocrinology</li> </ul>