

WAH MEDICAL COLLEGE

2020-2024

Department of Medical Education

STUDY GUIDE
5th Year MBBS
Gynecology & Obs

2020-2024

The background of the cover features a photograph of the Wah Medical College building, a large, modern structure with a reddish-brown facade. The building's name, "Wah Medical College", is prominently displayed in white lettering on its side. A flagpole with a blue flag stands in front of the building. The image is partially obscured by large, diagonal, geometric shapes in shades of blue and black that create a dynamic, abstract design across the cover.

Wah
Medical
College

Table of Contents

VISION	3
MISSION	3
1.Outcomes of WMC MBBS Program	3
2.Introduction to the Study Guide	5
3.Assessment Map & Strategies	8
4.Clerkship Module Committee	10
5.Structured Summary Gynecology	11
6.Course content	12
Gynecology	12
7.Rules &Regulation:	36
8.Study Tips:	38
9.Feedback on the study guide:	39
10.References:	39
11.Timetable Template	40



VISION

National University of Medical Sciences envisions a world with a better quality of life for all by enhancing our contribution to healthcare, education, innovation, and research.



MISSION

To produce competent medical professional graduates equipped with sound knowledge & research capabilities based on scientific principles, imbued with ethics and moral values primed to serve the community through the profession and pursue research & advanced training in any branch of medicine”.

1. Outcomes of WMC MBBS Program

At the end of our five-year MBBS program, the graduates should be able to:

1. Independently manage common, non-critical clinical problems.
2. Assist in the management of critically ill patients & demonstrate competency in life saving procedures.
3. Exhibit the attributes of an ethical professional.
4. Conduct research which brings relevance to health care practices.
5. Act as an efficient community health promoter.
6. Exhibit scientific knowledge in all professional activities.
7. Demonstrate clear and efficient written & verbal communication skills.
8. Exhibit the habits of a lifelong learner.

2. Introduction to the Study Guide

I. Objectives of the Study Guide

Dear Students,

We, at the Department of Medical Education, Wah Medical College, have developed this study guide especially for you. This study guide aims to:

- Inform you about the organization of learning programs in this block which will help you to contact the right person in case of any difficulty.
- Help you in organizing and managing your studies throughout the block
- Guide you on assessment methods, rules, and regulations.
- Define the outcomes which are expected to be achieved at the end of the block.
- Identify the learning strategies that will be implemented to achieve the block outcomes such as lectures, small group discussions, clinical skills, demonstration, tutorial, and case-based learning
- Provide a list of learning resources such as books, and journals for students to consult to maximize their learning.

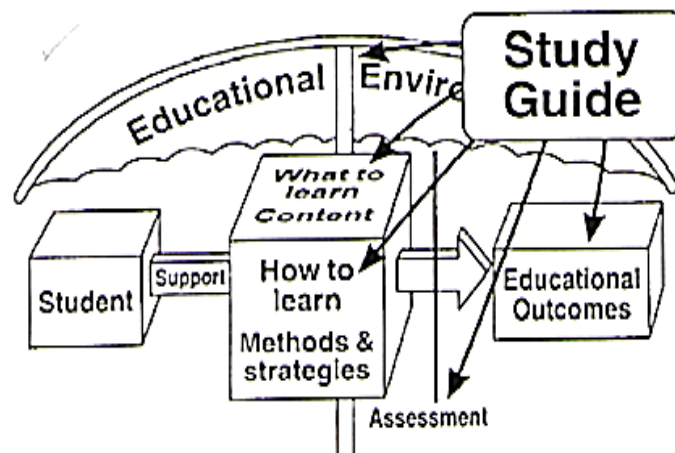


Figure 1. Objectives of the study Guide(HARDEN, J.M. LAIDLAW, E.A. HESKETH, 1999)







II. Commonly used abbreviations & Logos in the study guide

Learning Outcomes:

Learning outcomes are statements that define the expected goal of your course, lesson, or activity in terms of demonstrable skills or knowledge that will be acquired by you because of instruction. In simple words, these are the things that you must be able to tell or do with the required attitude after learning a particular topic.

1. Educational Strategies:

These are the methodologies through which you will be taught by your instructors.

Abbreviation	Logos
CBL: Case based learning.	
Demonstrations	
SGD: Small group discussions	
BST: Bedside Teaching	
Skill Lab	
Clinical Teaching (OPD/ OT/ IPD)	

Small Group Discussion

This format helps students to clarify concepts, acquired skills or attitudes. Sessions are structured with the help of specific exercises such as patient cases, interviews, or discussion topics. Students exchange opinions and apply knowledge gained from lectures, tutorials, and self-study. The facilitator's role is to ask probing questions, summarize, or rephrase to help clarify concepts.

Case-Based Learning

This is a small group discussion format where learning is focused around a series of questions based on a clinical scenario. Specifically designed case scenarios and the learning outcomes to be achieved are shared with the student before the session. Students prepare for the CBL and during class they discuss and answer the questions applying relevant knowledge gained in clinical and basic health sciences during the block. Faculty members are present as a guide and an assessor.

Self-Directed Study

Students assume responsibilities of their own learning through individual study, sharing and discussing with peers, seeking information from the Learning Resource Center, teachers, and resource persons within and outside the college. Students can utilize the time within the college schedule hours for self-study.

Bedside teaching/ Ward rounds

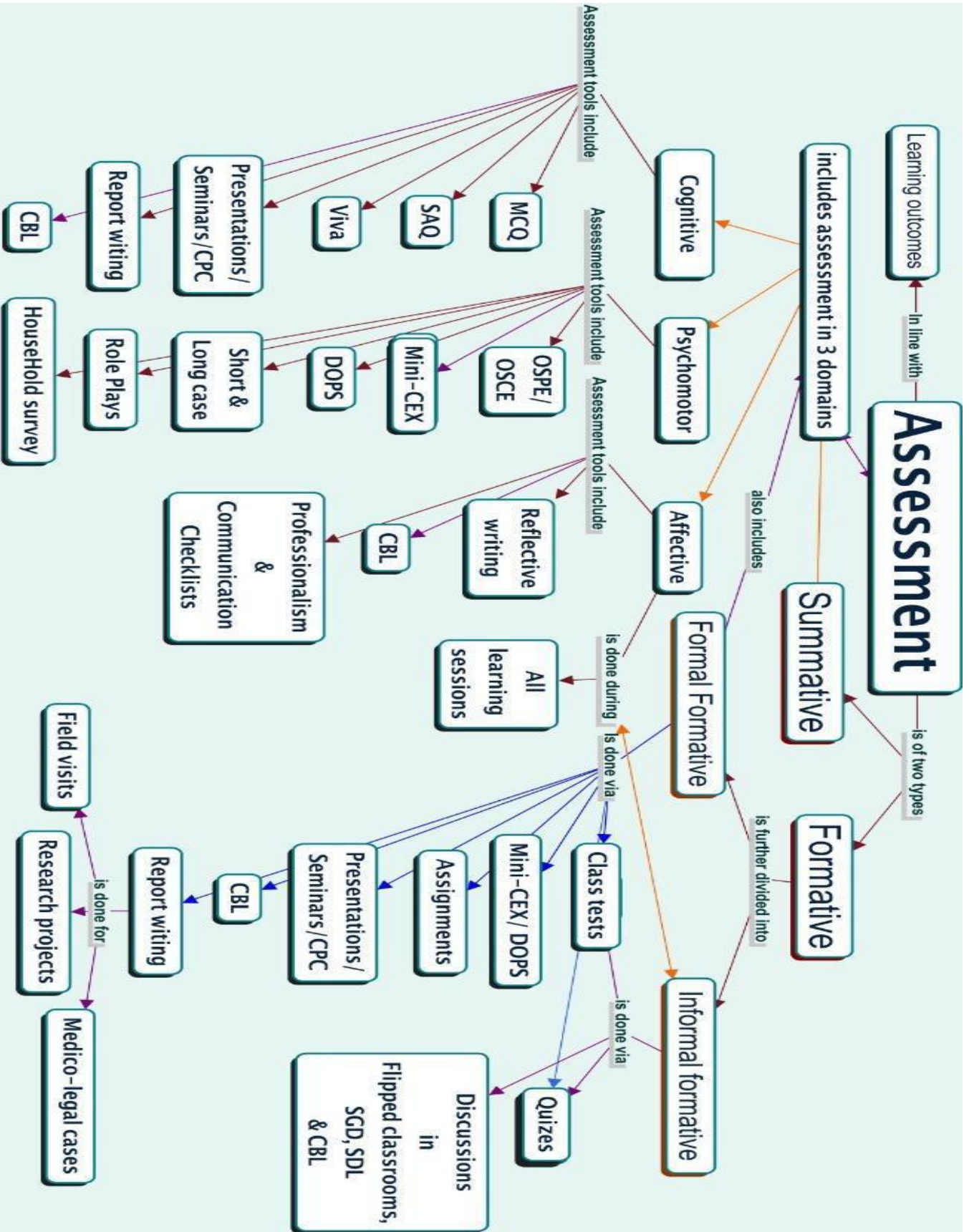
Students learn clinical case scenarios/ patient examination firsthand at the patient's bedside with the help of the instructor in case of online teaching, the same cases will be shown to you online with the help of videos and live clinical teaching.

OPD cases: This clinical teaching is based on outpatient profiles based on the models of basic and community-based care. Outpatient clinics offer more diverse and effective educational opportunities as it gives students the chance to encounter a wide range of pathologies in several evolutionary phases enhancing the clinical reasoning ability, communication skills and medical-patient relationship.

Observation of clinical procedures in OT, Minor OT

3. Assessment Map & Strategies

i. Internal Assessment.



assessment, clinical rotation assessment and pre-annual examination will be used for calculation of the internal assessment. It is mandatory for MBBS students to appear and pass the pre-annual exam with at least 33% marks in each subject as per PMC rules, failing which student is not eligible to appear in the university exam.

ii. Annual Professional Examination.

The University will take the final professional Examination as per PMC guidelines at the end of the academic year. Annual Theory & Practical Examination will be of 600 marks each in Surgery and allied & Medicine & allied. Annual Exam for Paediatrics & Gynecology and Obstetrics will be of 200 marks each. The pass score will be 50% in theory and practical separately.

4. Clerkship Module Committee

Chairperson	Prof. Dr. Musarat Ramzan	
Coordinators	<p>Medicine</p> <p>Surgery</p> <p>Gynecology</p> <p>Pediatrics</p>	<p>Prof. Dr. Muzamil Jamil</p> <p>Brig (R)Prof. Dr. M. Pervez</p> <p>Dr. Shabana Kalsoom</p> <p>Dr. Sohail Ashraf</p>
<p>Study guide developed</p> <p>By</p>	<p>Department of Medical Education</p> <p>Wah Medical College</p> <p>under Supervision of</p> <p>Dr. Sumaira Iqbal</p>	







5. Structured Summary Gynecology

Name Clerkship module	
Duration	5+1 Week
Prerequisite	4 th year MBBs
Gynecology	<ol style="list-style-type: none"> 1. Orientation, OBGYN history & examination 2. Specific antenatal complications 3. Medical problems in pregnancy 4. Menstrual problems & genital tract infections 5. Common OBGYN emergencies 6. Benign & malignant diseases of genital tract

6. Course content

Gynecology

Gynecology

Program Learning Outcomes	1	2	3	4	5	6	7	8
The medical students are expected to achieve the following Subject Learning Outcomes displaying attributes of a professional & ethical person.								
1. Triage and refer women to the appropriate facility of care. (PLO1,2)								
2. Conservatively manage common illnesses. (PLO1)								
3. Assist in management of critical cases. (PLO2)								
4. Counsel patients and their attendants regarding management options and preventive measures. (PLO5, PLO7)								

Subject Learning Outcomes:

By the end of Final year programme student in OBGYN would be able to:

1. Triage and refer women to the appropriate facility of care.
2. Conservatively manage common illnesses.
3. Assist in management of critical cases.
4. Counsel patients and their attendants regarding management options and preventive measures.

By the end of the clerkship in Obstetrics & Gynaecology, a final year student should be able to:

1. Perform risk assessment to triage /refer women with OBGYN problems to the appropriate facility of care.
2. Perform routine examination of women with obstetric and gynaecological problems/conditions.
3. Perform essential obstetric & gynaecological procedural skills on model / manikin to show concept.
4. Suggest preventive measures/management plan for common obstetric & gynaecological problems after making differential/provisional diagnosis.
5. Assist in managing critical obstetric and gynaecological cases as a member of health care team.
6. Practice evidence– based medicine & exhibit readiness to search for the latest solutions & guidelines.
7. Demonstrate effective communication skills, professional conduct and respect for women autonomy.
8. Demonstrate ethical, social & diverse perspectives to provide competent health care.

First Week.

No	Topic	Educational Strategy	Instructor	Importance (Must Know Should Know Could Know)
Day 1	Students Orientation Patient safety + Ethical issues in Obstetric	SGD	Dr. Shabana Kalsoom (Assoc Prof)	Must know
Activities <ul style="list-style-type: none"> Orientation about WARDS, OPD, LR& OT Dress code & OT dress Maternity duty Whatsapp study group Log books , maternity & history copy Learn Infection control, Patient safety & Self-safety measures in OPD, Ward, OT, LR rotation Learn ethical issues related to history taking, informed consent and patient confidentiality 				
Obstetrical History		SGD	Dr. Shabana Kalsoom / SR	Must know
Learning Outcome <ul style="list-style-type: none"> Learn basic principles of consent taking, ethics & obstetric history. Elicit current obstetric, detailed past obstetric, menstrual, medical, surgical, relevant family & personal history Formulate differential & provisional diagnosis 				
Role of ultrasound in Obstetrics (Practical) Prenatal diagnosis		Clinical teaching SGD	Radiologist Dr. Shabana Kalsoom/SR	Must know
Learning Outcome <ul style="list-style-type: none"> Appraise the use of USG in pregnancy to confirm gestational age, to detect fetal structural anomalies and to monitor fetal growth Learn various invasive and noninvasive tests used for prenatal genetic diagnosis, their risks and benefits Counsel a woman about various screening and diagnostic tests for down syndrome Counsel a woman with fetal anomaly 				
Day 2	Antenatal Care	SGD	Prof Humaira Nasir	Must know
Learning Outcome <ul style="list-style-type: none"> Discuss the purpose of antenatal care and plan a schedule of antenatal visits 				

for a pregnant woman <ul style="list-style-type: none"> • Understand the purpose and plan of antenatal screening tests & booking investigations • Manage minor ailments of pregnancy 			
Risk assessment using antenatal card & interpretation of antenatal INV	SGD	Prof Humaira Nasir/SR	Must Know
Learning Outcome <ul style="list-style-type: none"> • Perform antenatal risk assessment using antenatal card. • Appraise the importance of booking investigations 			
Obesity in pregnancy Effects of smoking, drugs and alcohol misuse in pregnancy	SDL	SR	Must Know
Learning Outcome <ul style="list-style-type: none"> • Appraise antenatal, intrapartum, postpartum complications of obesity • Understand the fetomaternal complications of smoking, alcohol and drug misuse in pregnancy 			
Obesity in pregnancy Effects of smoking, drugs and alcohol on pregnancy Drug safety in pregnancy Pre-pregnancy care	SGD	Prof Humaira Nasir/SR	Must know
Learning Outcome <ul style="list-style-type: none"> • Appraise antenatal, intrapartum, postpartum complications of obesity • Understand the fetomaternal complications of smoking, alcohol, drug misuse in pregnancy and which drugs are safe to prescribe • Identify the conditions that require pre-pregnancy care 			
Day 3	Normal labour pain relief in labour	SGD (Theme)	Prof Kinza Alam Must know
Learning Outcome <ul style="list-style-type: none"> • Appraise the stages of normal labour and their management • Critically appraise various methods of pain relief in labor • Describe techniques, indications contraindications & side effects of epidural and spinal anesthesia 			
Anatomy & diameters of fetal skull and maternal pelvis Demonstrate mechanism of labour (dummy pelvis)	SGD	Prof Kinza Alam/ Dr Irum (Assist Prof)	Must Know
Learning Outcome <ul style="list-style-type: none"> • Demonstrate normal maternal pelvic inlet, cavity and outlet diameters on model and appraise different shapes of maternal pelvis & their significance in labor • Demonstrate fetal vault fontanelles & sutures on fetal skull and different 			

presenting diameters in labor & their relevance to normal & abnormal labor (model)				
Assessment of fetal wellbeing by CTG & BPP		SDL	Dr Irum	Must Know
Learning Outcome <ul style="list-style-type: none"> Appraise the importance of CTG and biophysical profile in assessment of fetal well-being and interpret normal and abnormal CTG and biophysical profile scoring 				
Demo plotting of partograph (case discussion: normal labour) CTG (Normal & abnormal) Biophysical profile		SGD (case discussion)	Prof Kinza Alam/Dr Irum Mushtaq	Must know
Learning Outcome <ul style="list-style-type: none"> Practice plotting of partograph and discussion of patient in normal labour Observe/assist in abdominal USG (BPP) Perform & interpret CTG under direct supervision. 				
Day 4	Abnormal labour Dysfunctional labour Obstetrical labour Malposition VBAC / TOLAC	SGD(Theme)	Prof Mehreen Mehdi (HOD)	Should Know
Learning Outcome <ul style="list-style-type: none"> Identify contributors to poor progress in first stage of labor & appraise their management Identify contributors to poor progress in second stage of labor & appraise their management Appraise clinical presentation and risks associated with obstructed labour and its management Recognize fetal malposition in labor & suggest management Identify signs of scar rupture in TOLAC (trial of birth after cesarean section) Interpret laboring woman CTG 				
Demo of instruments used in normal and operative vaginal delivery (delivery set, forceps /vacuum)		SGD	Dr. Mehreen / SR	should know
Learning Outcome <ul style="list-style-type: none"> Discuss vacuum versus forceps delivery (choice of instrument, indications, prerequisites, fetal & maternal complications) Decide choice of instrument for application acc to the scenario 				

Abnormal labour Operative vaginal delivery		SDL	Dr. Mehreen / SR	Should know
Learning Outcome <ul style="list-style-type: none">• Understand the causes of poor progress in labour and their management• Appraise the indications, contraindications and complications of vacuum and forceps delivery				
Interpretation of partogram of abnormal labour CTG interpretation Biophysical profile		SGD (case discussion)	Dr. Mehreen / SR	Must know
Learning Outcome <ul style="list-style-type: none">• Identify abnormal labor on partogram• Identify contributors to poor progress in first and second stage of labor & appraise their management• Interpret CTG and practice biophysical profile				
Day 5	Puerperium & its complications Counselling of woman after delivery (breast feeding, contraception, Episiotomy and wound care)	SGD (theme)	Dr Khairun Nisa (Assoc prof)	Should know
Learning Outcome <ul style="list-style-type: none">• Describe the physiological changes that occur in the normal puerperium• Discuss common disorders of puerperium & their management i.e., secondary postpartum hemorrhage, puerperal sepsis/pyrexia, obstetric palsy etc.• Recognize & manage common postpartum psychiatric problems• Counsel woman about postnatal care and benefits of breastfeeding				
Dummy demonstration of delivery of placenta Episiotomy & Perineal tears		SGD	Dr Khairun Nisa / SR	Must know
Learning Outcome <ul style="list-style-type: none">• Demonstrate delivery of placenta on dummy• Appraise the indications, repair and complications of episiotomy• Classify perineal tears and describe their management				
Rhesus isoimmunization, Rh incompatibility Fetal hydrops immune and non-immune		SDL	SR	Must know
Learning Outcome <ul style="list-style-type: none">• Distinguish between immune and non-immune causes of hydrops fetalis• Appraise the principles of prevention and management of fetal haemolytic				

disease				
Skill lab (Practical) Obstetric abdominal examination on manikin Mechanism of normal delivery on manikin		SR	Must know	
Learning Outcome <ul style="list-style-type: none">Perform obstetrical examination after introduction, consent taking, keeping in view the privacy of patient and perform Leopold’s maneuver correctlyLearn mechanism of normal delivery and aseptic measures during normal delivery				
Second Week				
Day 6	Review of development & anatomy of female genital tract Structural problems of pelvic organs	SGD (theme)	Dr assigned by Anatomy department Dr Khairun Nisa	Should know
Learning Outcome <ul style="list-style-type: none">Discuss relevant embryonic development, sexual differentiation & anatomy of female reproductive & urinary tract.Appraise the malformations of uterus and vagina, their investigations, complications & treatment.				
History taking (Gynaecology)		SGD	Dr Khair-un-Nisa /SR	Must know
Learning Outcome <ul style="list-style-type: none">Learn basic principles of consent taking before obtaining gynecological history.Elicit targeted gynecological, menstrual, medical, surgical, family & personal history.				
Puberty and disorders of sexual development		SDL, SGD	Dr Khairun Nisa /SR	Must know
Learning Outcome <ul style="list-style-type: none">Appraise the changes & their sequence of appearance at pubertyDescribe causes and management of disorders of puberty like precocious and delayed puberty.Discuss the causes, clinical presentation and management of disorders of sexual differentiation (DSD)				
Day 7	Hormonal control of menstrual cycle Heavy menstrual bleeding Teenage menorrhagia Adenomyosis	SGD(The me)	Prof Humaira Nasir	Must know
Learning Outcome				

<ul style="list-style-type: none"> ● Review hormonal control of menstrual cycle and interpret graph of hormonal changes ● Describe the various terminologies of abnormal uterine bleeding ● Discuss the causes, investigations and management of heavy menstrual bleeding, teenage menorrhagia and adenomyosis 			
Methods of endometrial biopsy (Instruments used and method) Dx D & C Pipelle sampler Endo sampler Demonstration of bimanual pelvic exam	SGD/Demo in procedure room	Dr Humaira Nasir/SR	Must know
Learning Outcome <ul style="list-style-type: none"> ● Differentiate between dilatation & curettage & evacuation of retained products of conception ● Demo of instruments used and steps of D & C observing patient safety & asepsis ● Demo of endometrial biopsy by endosampler and pipelle sampler 			
Disorders of menstrual bleeding Endometrial polyp & hyperplasia Endometrial sampling techniques	SDL	SR	Must know
Learning Outcome <ul style="list-style-type: none"> ● Appraise the investigations & different management options of abnormal menstrual cycle according to cause & their pros & cons 			
HMB	CBL	Dr Humaira Nasir/SR	Must know
Learning Outcome <ul style="list-style-type: none"> ● Describe the various terminologies of abnormal uterine bleeding ● List the causes of heavy and irregular uterine bleeding ● Discuss the investigations and management of heavy menstrual bleeding acc to the cause 			
Day 8	Amenorrhoea (primary and secondary) Oligomenorrhoea	SGD(Theme) Prof Kinza Alam	Should know
Learning Outcome <ul style="list-style-type: none"> ● Differentiate primary from secondary amenorrhea ● Explain the causes of primary and secondary amenorrhea ● Summarize relevant and appropriate investigations & principles of management of amenorrhoea. ● Explain the causes and management of secondary amenorrhoea 			
	SGD	Dr Irum	Must know

Gynaecological examination				
Learning Outcome <ul style="list-style-type: none"> Practice gynaecological examination on dummy 				
Dysmenorrhoea Premenstrual syndrome		SDL	Dr Irum	should know
Learning Outcome <ul style="list-style-type: none"> understand the etiology, common effects and management of premenstrual syndrome Differentiate between primary and secondary dysmenorrhea, causes and management of dysmenorrhoea 				
PCOD		SGD (Case discussion)	Prof Kinza/Dr Irum	Must know
Learning Outcome <ul style="list-style-type: none"> Discuss the epidemiology & causes of PCO. Explain the effects of PCOs, its diagnosis & management Counsel an adolescent with diagnosis of PCOs 				
Day 9	Subfertility	SGD(Theme)	Prof Mehreen Mehdi	Should know
Learning Outcome <ul style="list-style-type: none"> Differentiate between primary and secondary subfertility Discuss the common causes of subfertility and identify women at risk of tubal damage Appraise the general principles of investigations & treatment of subfertile couple Discuss indications and procedures of the types of ART available Take targeted history of subfertility Counsel a couple with subfertility 				
Demo- Tests of tubal patency HSG Laparoscopy Interpretation of various reports of semen analysis		SGD	Prof Mehreen Mehdi/SR	Must know
Learning Outcome <ul style="list-style-type: none"> Appraise how to confirm tubal patency on laparoscopy and HSG Interpret HSG X-ray film Interpretation of various reports of semen analysis 				
Chronic pelvic pain		SDL	SR	Must Know
Learning Outcome <ul style="list-style-type: none"> Appraise gynecological and non-gynecological causes of chronic 				

abdominopelvic pain <ul style="list-style-type: none"> Explain the diagnostic criteria & principles of management of adenomyosis/ endometriosis, PID & their involvement in CPP and subfertility 			
Case discussion Chronic pelvic pain & Endometriosis	SGD (case discussion)	Prof Mehreen Mehdi/SR	Must Know
Learning Outcome <ul style="list-style-type: none"> Appraise gynaecological and non gynaecological causes of chronic pelvic pain Explain the diagnostic criteria & principles of management of adenomyosis/ endometriosis, PID & their involvement in CPP and subfertility Take gynaecological history 			
Day 10	Upper genital tract infections (PID) Lower genital tract infections Vaginal discharge	SGD (Theme)	Dr Shabana Should know
Learning Outcome <ul style="list-style-type: none"> Learn etiology, clinical presentation, investigation, management and complications of pelvic inflammatory disease Differentiate physiological from pathological vaginal discharge Diagnose, investigate and manage patients who present with vaginal discharge 			
Viral STIs <ul style="list-style-type: none"> Genital herpes Warts Syphilis HIV 	SGD	Dr Shabana /SR	Should know
Learning Outcome <ul style="list-style-type: none"> Appraise clinical presentation, investigations and management of STIs 			
Upper and lower genital tract infections	SDL	Dr Shabana / SR	Should know
Learning Outcome <ul style="list-style-type: none"> Understand the clinical presentation, investigations and management of PID and vaginal discharge 			
SKILL Lab Vaginal Speculum examination HVS, Pap smear		SR	Must Know
Learning Outcome <ul style="list-style-type: none"> Observe Principles of consent taking, privacy & aseptic measures Perform vaginal speculum examination, HVS, pap smear on mode 			

Third Week				
Day 11	Hypertension in pregnancy (PIH, pre-eclampsia, HELLP syndrome, Eclampsia, Chronic hypertension)	SGD (theme)	Dr Shabana Kalsoom	Must Know
Learning Outcome <ul style="list-style-type: none"> Describe etiology & fetomaternal complications in PIH, preeclampsia & chronic hypertension in pregnancy Critically appraise the drugs used in hypertensive disorders of pregnancy Interpret PIH profile Diagnose & assist in the management of HELLP syndrome & eclampsia Appraise postpartum management of hypertensive disorder in pregnancy and follow up 				
Management protocol of eclampsia Demo- reflexes Demo-urine dipstick	SGD	Dr Shabana/SR	Must Know	
Learning Outcome <ul style="list-style-type: none"> Triage of a patient with fits in pregnancy Elicit knee, ankle jerk/clonus. Demo-urine dipstick for proteinuria 				
Hypertensive disorders of pregnancy Protocol for management of eclampsia	SDL	SR	Must know	
Learning Outcome <ul style="list-style-type: none"> Learn classification, etiology, clinical presentation and management of hypertensive disorders of pregnancy Appraise protocol for management of eclampsia 				
Hypertensive disorders of pregnancy	CBL	Dr Shabana/SR	Must know	
Learning Outcome <ul style="list-style-type: none"> Discuss etiology & pathogenesis of preeclampsia and eclampsia Discuss clinical presentation of pre-eclampsia and eclampsia Discuss and interpret investigations done in hypertensive disorders of pregnancy Discuss fetomaternal complications in PIH, preeclampsia & chronic hypertension in pregnancy Critically appraise the drugs used to control blood pressure and fits(eclampsia) 				
Day 12	Anaemia in pregnancy	CBL	Prof Humaira Nasir	Must know

Learning Outcome

- Describe the effects of anemia on the mother & the fetus
- Propose a treatment plan of antenatal women with anemia on the basis of relevant investigations
- Differentiate nutritional anemia from the haemoglobinopathies on the basis of investigations
- Discuss management of antenatal women with haemoglobinopathies
- Interpret CBC, Ferritin & Hb electrophoresis report
- Counseling of antenatal beta thalassemia minor woman
- Take history relevant to causes and symptoms of anemia

Medical disorders in pregnancy 1 (cardiac, renal, respiratory, liver disease, Viral Hepatitis intrahepatic cholestasis of pregnancy)

SDL& SGD

SR/Prof. Humaira Nasir

Must know

Learning Outcome

- Emphasize importance of preconceptual counseling & multidisciplinary care on improving pregnancy outcomes in pregnant women with medical disorders.
- Discuss the effect of common medical conditions in pregnancy on mother and fetus (i.e., renal, cardiac respiratory & liver) & effect of pregnancy on the medical condition.
- Discuss the principles of management of common renal, cardiac respiratory & liver diseases in pregnancy
- Evaluate the contribution of above mentioned maternal medical diseases to maternal mortality. Identify pregnant women who need prenatal diagnosis

Day 13

Large for dates
Diabetes in pregnancy
Polyhydramnios
Fetal macrosomia

SGD

Prof KinzaAlam

Must know

Learning Outcome

- Discuss differential diagnosis of fundal height large for dates
- Evaluate the screening tests for diabetes in pregnancy
- Compare and contrast the effects on mother & fetus of known diabetes and gestational diabetes (GDM)
- Summarize the principles of management of diabetes /GDM in pregnancy
- Discuss differential diagnosis, diagnostic criteria & management of polyhydramnios.
- Comment on possible complications during labor of polyhydramnios and macrosomia
- Calculate AFI /DVP on USG image

shoulder dystocia

SGD

Dr Irum

Must know

Learning Outcome

<ul style="list-style-type: none"> • Discuss predisposing factors for shoulder dystocia • Demonstrate shoulder dystocia and its management on dummy 				
Medical disorders in pregnancy II (SLE/APS, thyroid disease, epilepsy, dermatological conditions)	SDL &SGD	Prof Kinza Alam/Dr Irum	Should know	
Learning Outcome <ul style="list-style-type: none"> • Appraise the effect of autoimmune diseases (SLE/APS) on the mother and fetus in pregnancy and outline the management plan • Compare and contrast effects of hypothyroidism and hyperthyroidism on mother and fetus in pregnancy • Describe antepartum, intrapartum and postpartum principles of management of thyroid disease & epilepsy in pregnancy • Recognize drugs with safety profile and those which have teratogenic effects on the baby • Observe /assist administration of subcutaneous injection of LMWH 				
Day 14	Fetal malpresentation and malposition (breech presentation, transverse lie, brow, face and shoulder presentation, compound presentation, cord presentation and cord prolapse)	SGD (Theme)	Prof Mehreen Mehdi	Must know
Learning Outcome <ul style="list-style-type: none"> • Appraise types of breech presentations, its incidence, predisposing factors & principles of management in antenatal period & labor. • Discuss indications, contraindications & complications of ECV procedure • Explain prerequisites for assisted breech delivery • Compare maternal & fetal outcomes in assisted breech delivery with delivery by cesarean section • Appraise clinical presentation, predisposing factors and management of transverse lie, brow, face and compound presentation and cord prolapse 				
Dummy demonstration Assisted breech delivery Difference b/w malpresentations & Malposition (OT, OP) Transverse lie, compound presentation	SGD	Dr Mehreen/SR	Should know	
Learning Outcome				

<ul style="list-style-type: none">• Demonstrate assisted breech delivery on dummy• Demonstrate difference between malposition & malpresentation (transverse lie and compound presentation)				
Malpresentations/Compound presentation/transverse lie	SDL	SR	Must Know	
Learning Outcome <ul style="list-style-type: none">• Appraise clinical findings, diagnosis and management of breech, brow, face & shoulder presentation.				
Fetal Malpresentation (Breech, Brow, face compound presentation Transverse lie, cord presentation and cord prolapse)	CBL	Prof Mehreen/SR	Must Know	
Learning Outcome <ul style="list-style-type: none">• Discuss the predisposing factors for fetal malpresentation• Diagnosis and manage breech, brow, face & shoulder presentation.• Counsel a woman with breech presentation				
Day 15	Disorders of fetal growth (SGA, IUGR) Oligohydramnios	SGD(theme)	Dr Khairun Nisa	Must Know
Learning Outcome <ul style="list-style-type: none">• Differentiate between the intrauterine growth restriction & small for gestational age terms• Diagnose intrauterine growth restriction through relevant history, clinical & USG examination• Distinguish between symmetrical & asymmetrical IUGR• Compare & contrast etiological factors, pathogenesis, principles of management & prognosis of symmetrical & asymmetrical IUGR• Take history of patients with IUGR keeping in view the predisposing factors• Discuss etiology & differential diagnosis of oligohydramnios				
Demo Obstetrical examination findings in IUGR Fetal growth charts UA, MCA and other Doppler studies in IUGR	SGD	Dr Khairun Nisa/SR	Must Know	
Learning Outcome <ul style="list-style-type: none">• Perform Obstetric examination• Interpret Fetal growth charts• Interpret UA, MCA and other doppler studies in IUGR				
Perinatal infections causing	SDL	SR	Must Know	

congenital abnormalities (rubella, Toxoplasmosis, Syphilis, CMV, Chicken pox) HIV in pregnancy				
Learning Outcome <ul style="list-style-type: none">Appraise the clinical presentation, diagnosis and management of patients with TORCH infections, chicken pox and HIV in pregnancy				
SKILL LAB Basic Neonatal resuscitation Female urinary catheterization Scrubbing, gowning and gloving		SR	Must Know	
Learning Outcome <ul style="list-style-type: none">Perform basic neonatal resuscitation on dummyPerform urinary catheterization on model keeping in view principles of sterilizationLearn surgical scrubbing and gowning while observing principles of sterilization				
Fourth Week				
Day 16	Multiple Pregnancy	SGD(theme)/case discussion	Dr Khairun Nisa	Should Know
Learning Outcome <ul style="list-style-type: none">Differentiate between monozygotic & dizygotic twins in terms of mechanism, diagnosis & complications in antenatal period and laborAppraise the role of clinical examination and USG examination in the diagnosis of multiple pregnancy. Interpret T-sign and lambda sign on USGSummarize the maternal & fetal complications in pregnancy and laborAppraise the principles of management in pregnancy and labor & how to determine zygosity at birthTake targeted obstetric history				
Dummy demonstration Obstetrical examination in twin pregnancy Twin delivery		SGD	Dr Khairun Nisa/SR	Should Know
Learning Outcome <ul style="list-style-type: none">Perform obstetrical examination of twin pregnancy on dummyAppraise the method of twin delivery				
PTL & PPRM Perinatal infections causing pregnancy loss and preterm labour (Parvovirus, listeria, malaria)		SDL	SR	Must Know
Learning Outcome				

<ul style="list-style-type: none">● Differentiate between threatened preterm labor, PTL & PPRM Appraise the principles of diagnosis, management & potential complications associated with PTL & PPRM● Appraise perinatal infections and their management causing preterm labour				
Case discussion PTL &PPROM Prolonged pregnancy Induction of labour Bishop score		SGD (case discussion)	Dr Khairun Nisa/SR	Must Know
Learning Outcome <ul style="list-style-type: none">● Differentiate between threatened preterm labor, PTL & PPRM Appraise the principles of diagnosis, management & potential complications associated with PTL & PPRM● Discuss management & potential complications associated with post term pregnancy● Counsel woman with Post term pregnancy about induction of labour				
Day 17	Obstetrical haemorrhage Postpartum haemorrhage (Obstetrical collapse	SGD (theme)	Prof Humaira Nasir	Should Know
Learning Outcome <ul style="list-style-type: none">● Explain the general principles of management of obstetric shock● Identify the risk factors for PPH in an antenatal woman● Enlist the common causes of PPH● Formulate a stepwise plan for the management of PPH● Summarize the complications of PPH				
Demonstration----Bimanual uterine compression Uterine massage Uterine packing		SGD	Dr Humaira Nasir/SR	Should Know
Learning Outcome <ul style="list-style-type: none">● Perform Bimanual uterine compression, uterine massage & uterine packing on model				
Obstetric haemorrhage Antepartum haemorrhage APH		SDL	SR	Must know
Learning Outcome <ul style="list-style-type: none">● Appraise the causes, risk factors and clinical presentation of placenta previa and placental abruption● Advise investigations and formulate management plan of patients presenting with APH.				

Antepartum hemorrhage	CBL	Prof Humaira Nasir/AP	Must know
Learning Outcome <ul style="list-style-type: none"> • Discuss causes of antepartum hemorrhage • Discuss immediate resuscitation of severe APH • Recognize the clinical presentation specific to placenta previa, placental abruption & vasa previa in an antenatal woman with APH • Discuss the investigations & management of placenta previa & placental abruption • Summarize the complications specific to placenta previa & abruptio placenta • Demonstrate different degrees of placenta previa by diagrams • Diagnose type of placenta previa on USG image 			
Day 18	Contraception Counselling of couple for sterilization Counselling for postnatal contraception	SGD (theme)	Prof KinzaAlam Must know
Learning Outcome <ul style="list-style-type: none"> • Categorize current methods of contraception • Discuss mechanism of actions, pros and cons of each with their failure rates and complications • Compare reversible methods of contraception • Discuss WHO medical eligibility criteria for contraception and emergency contraception • Compare and contrast male and female sterilization 			
Visit to family planning	SGD	Dr Irum	Should Know
Learning Outcome <ul style="list-style-type: none"> • Observe reversible and irreversible methods of contraception • Counsel and suggest the most suitable method of contraception to a woman 			
Thrombosis & thromboembolism in pregnancy	SDL	Prof Kinza/Dr Irum	Should Know
Learning Outcome <ul style="list-style-type: none"> • Identify the risk factors for thromboembolism in pregnancy • Appraise the principles of diagnosis and management of DVT and pulmonary embolism in pregnancy 			
Maternal collapse Thrombosis and thromboembolism in pregnancy, Amniotic fluid embolism	SGD	Prof Kinza/Dr Irum	Should Know
Learning Outcome <ul style="list-style-type: none"> • Identify the risk factors for thromboembolism in pregnancy 			

<ul style="list-style-type: none"> Appraise the principles of diagnosis and management of DVT and pulmonary embolism in pregnancy Know clinical presentation and management of Amniotic fluid embolism in pregnancy 				
Day 19	Bleeding in early pregnancy Miscarriage Ectopic pregnancy GTD	SGD (theme)	Prof Mehreen Mehdi	Should know
Learning Outcome <ul style="list-style-type: none"> Differentiate causes of bleeding in early pregnancy (ectopic & GTD) Recognize the social and emotional context of early pregnancy loss. Classify various types of miscarriages based on clinical presentations & USG findings. Outline conservative, medical & surgical managements of miscarriages Counsel a woman with miscarriage Appraise clinical presentation, diagnosis & management of ectopic pregnancy and GTD 				
Demo-instruments used and procedure of <ul style="list-style-type: none"> E &C MVA 		SGD	Prof Mehreen /SR	Must know
Learning Outcome <ul style="list-style-type: none"> Demonstrate the instruments and procedure of E & C on model 				
Miscarriage Ectopic pregnancy		SDL	SR	Must know
Learning Outcome <ul style="list-style-type: none"> Compare & contrast clinical presentation, diagnosis & management of miscarriage and ectopic pregnancy 				
Bleeding in early pregnancy		CBL	Prof Mehreen /SR	Must know
Learning Outcome <ul style="list-style-type: none"> D/D of bleeding in early pregnancy (ectopic & GTD) Recognize the social and emotional context of early pregnancy loss. Classify various types of miscarriages based on clinical presentations & USG findings. Outline conservative, medical & surgical managements of miscarriages Counsel a woman with miscarriage Discuss etiology, risk factors, clinical presentation, diagnosis and management of ectopic pregnancy Appraise clinical presentation, diagnosis and management of GTD 				

Day 20	Menopause and reproductive health Counselling of women for prevention of complications of menopause	SGD(theme)	Dr Shabana Kalsoom	Must Know
Learning Outcome <ul style="list-style-type: none">• Define menopause and perimenopause.• Differentiate between physiological & non physiological causes of menopause.• Describe the endocrine changes of menopause and its immediate, intermediate & long term effects on the women• Discuss the nonhormonal and hormonal management of menopause.• Compare the risks and benefits of hormonal replacement therapy.• Evaluate the important risk factors for osteoporosis and cardiovascular disease & suggest management plan• Counsel a woman about menopausal symptoms and prevention of complications of menopause				
Demo-Instrument used for Laparoscopy, indications & complications		SGD (OT)	Dr Shabana/ SR	Should know
Learning Outcome <ul style="list-style-type: none">• Identify laparoscopy & hysteroscopy instruments• Observe procedure if being done				
Menopause & reproductive health		SDL	SR	Must know
Learning Outcome <ul style="list-style-type: none">• Define menopause and perimenopause• Appraise the endocrine changes of menopause and its immediate, intermediate & long term effects on the women• Understand the nonhormonal and hormonal management of menopause and their pros and cons.				
Skill Lab Pregnant women resuscitation Revise Neonatal resuscitation			Dr Shabana/ SR	Must know
Learning Outcome <ul style="list-style-type: none">• Perform Pregnant women resuscitation on dummy• Perform neonatal resuscitation on dummy				
FIFTH WEEK				
Day 21	Uterovaginal prolapse	SGD /Case discussion	Dr Shabana Kalsoom	Must know
Learning Outcome <ul style="list-style-type: none">• Differentiate between cystocele / urethrocele, rectocele/ enterocele, vaginal vault prolapse/ uterine prolapse				

<ul style="list-style-type: none">Classify the uterine prolapse according to severityAppraise the methods of treatment of uterovaginal prolapse and select factors that are important in the choice of best treatment				
Demo Vaginal pessary insertion Vaginal packing	SGD (Procedure room)	Dr Shabana/ SR	Should know	
Learning Outcome <ul style="list-style-type: none">Observe method of vaginal pessary insertion and vaginal packing				
Urinary incontinence and UTI	SDL	SR	Should know	
Learning Outcome <ul style="list-style-type: none">Classify urinary incontinence and differentiate between detrusor overactivity and urodynamic stress incontinence.Categorize the symptoms associated with different types of incontinence, & voiding difficulty & vesico vaginal fistula.Critically appraise the role of urodynamic investigations in diagnosis of different types of incontinenceAppraise the principles of management in treatment of various incontinence.				
Case discussion Urinary incontinence and UTI	SGD (case discussion)	Dr Shabana/ SR	Should know	
Learning Outcome <ul style="list-style-type: none">Classify urinary incontinenceDifferentiate between detrusor overactivity and urodynamic stress incontinence.Categorize the symptoms associated with different types of incontinence, & voiding difficulty & vesico vaginal fistula.Critically appraise the role of urodynamic investigations in diagnosis of different types of incontinenceAppraise the principles of management in treatment of various incontinence.				
Day 22	Benign conditions of uterus cervix and endometrium	SGD (theme)	Prof Humaira Nasir	Should know
Learning Outcome <ul style="list-style-type: none">Describe the common benign conditions of uterus according to their tissue of origin, the cervix, the endometrium & the myometriumIdentify the presenting symptoms and examination findings associated with benign uterine pathology.Appraise the epidemiology, etiology, clinical presentation & principles of management of fibroid uterusDescribe the common tests used to evaluate the uterus & endometrial cavityCounsel a woman with uterine fibroid				
Role of USG in gynaecology	SGD	SR	Must know	
Learning Outcome				

<ul style="list-style-type: none"> Observe USG with various gynaecological conditions 			
Malignant diseases of uterus	SDL, SGD	Prof Humaira Nasir/SR	Must know
Learning Outcome <ul style="list-style-type: none"> Describe the incidence & classification of uterine malignancy Describe the presentation and investigations needed for women with suspected endometrial cancer Discuss the FIGO staging of endometrial cancer & survival by stage. Appraise the principles of management (role of surgery, radiotherapy & palliative treatment) of endometrial cancer 			
Day 23	Premalignant disease of cervix	SGD (theme)	Prof KinzaAlam Should know
Learning Outcome <ul style="list-style-type: none"> Discuss epidemiology, etiology & pathophysiology of cervical intraepithelial neoplasia (CIN) Appraise primary prevention of cervical cancer through human papilloma virus (HPV) vaccination & cervical screening Discuss diagnosis & management of CIN1, CIN2 & CIN3 Counsel woman with CIN about management options 			
Demo-Pap smear Colposcopy Discuss Radiotherapy& its complications	SGD (procedure room)	Dr Irum	Should know
Learning Outcome <ul style="list-style-type: none"> Perform pap smear on model Observe/learn colposcopy procedure Appraise complications of radiotherapy 			
Malignant disease of cervix	SDL, SGD (case presentation)	Prof Kinza Alam/Dr Irum	Must know
Learning Outcome <ul style="list-style-type: none"> Discuss the etiology, clinical presentation and diagnosis of cervical cancer, Describe staging and management of malignant disease of cervix according to International Federation of Gynaecology and Obstetrics (FIGO) staging for cervical cancer 			
Day 24	Benign conditions of ovary	SGD (theme)	Prof Mehreen Mehdi Must know
Learning Outcome <ul style="list-style-type: none"> Classify common benign tumors of ovary Discuss relevant investigations, role of tumor markers and follow up of ovarian cyst 			

<ul style="list-style-type: none">Describe the clinical presentation and principles of management of benign disease of ovary				
Case discussion Acute pelvic pain& Adnexal mass (torsion of ovarian cyst, intracystic haemorrhage, corpus luteal cyst rupture, ectopic pregnancy)		SGD	Prof Mehreen Mehdi/SR	Should know
Learning Outcome: <ul style="list-style-type: none">Appraise the differential diagnosis, investigations and management of acute pelvic pain				
Malignant disease of ovary		SDL, SGD, case presentation	Prof Mehreen Mehdi/SR	Should know
Learning Outcome <ul style="list-style-type: none">Classify malignant ovarian tumorsEnumerate risk factors which increase and decrease the risk of ovarian cancerDiscuss the genetic factors, clinical presentation & relevant investigation of malignant disease of ovaryApply FIGO staging of ovarian cancer & estimate survival by stage.Appraise the management (surgery & chemotherapy) of ovarian cancer				
Day 25	Postmenopausal bleeding & Postcoital bleeding	SGD (theme)	Dr Khairun Nisa	Must know
Learning Outcome <ul style="list-style-type: none">Discuss causes of postmenopausal bleedingDiscuss treatment options according to the causeEmphasize role of TVS & endometrial sampling in the management f PMBDescribe various methods of endometrial samplingObserve/assist in doing endometrial sampling				
Demo-Hysteroscopy Revisit methods of endometrial biopsy		SGD	Dr Khairun Nisa/SR	Must know
Learning Outcome <ul style="list-style-type: none">Appraise indications, method and instruments used in hysteroscopyObserve hysteroscopy if being done in Operation theaterDiscuss methods of endometrial biopsy				
Skill Lab Workshop (Revision) Obstetric examination, Mechanism of normal delivery, CPR of pregnant woman, Speculum examination, HVS, Pap smear, Urinary catheterization, D&C, Delivery of placenta			Dr Khairun Nisa/SR	Should know

Learning Outcome

- Revise above skills learned during ward rotation

SIXTH WEEK

Day 26	Sexual dysfunction (Vaginismus, Dyspareunia) Benign & malignant conditions of vulva and vagina (vulval itching, Lichen sclerosis, Bartholin cyst, VIN, vulval cancer, vaginal cancer	SGD (theme) SDL	Dr. Shabana Kalsoom	Should know
Learning Outcome <ul style="list-style-type: none">• Describe the epidemiology, etiology, clinical presentation & diagnosis of common premalignant and malignant disease of vagina & vulva• Discuss FIGO staging of vulvar & vaginal cancers• Appraise the principles of management of vulval & vaginal cancers				
Day 27	OSPE Discussion on OSPE	All Faculty members Block incharge		

Learning Resources:

1. Text Books

1. Obstetric by ten teachers
2. Gynaecology by ten teachers

2. Library resources (Reference Books)

1. Evidence based text for MRCOG by David Luesly
2. Dewhursts Text Textbook of Obs& Gynae by Keith Edmonds
3. PMC approved journals

3. Online resources

1. Royal college of Obs& Gynae guidelines
2. American college of Obs& Gynae guidelines

Teaching Faculty:

Name	Email address
Dr Mehreen Mehdi (Professor)& HOD)	mmnaqv1@gmail.com
Dr Humaira Nasir (Professor)	drhumairanasir@gmail.com
Dr Kinza Alam (Professor)	drkinzairfan@gmail.com
Dr Shabana Kalsoom (Assoc Professor)	shabanakalsoom@hotmail.com
Dr Khairun Nisa Asif (Assoc Professor)	khairunasif5@gmail.com
Dr. Mamoon Riaz (Assistant professor)	drmamoonariaz@yahoo.com
Dr. Iram Mushtaq (Assistant professor)	irmushtaq80@gmail.com
Dr. Gulwish (Assistant professor)	Gullwishhameed@gmail.com
Dr. Ayesha Irfan (Assistant professor)	nazayesha2021@mail.com

Assessment Strategies (Formative)	Assessment Strategies (Summative)
Assignments; Posters/ Projects; Mini-CEX(4); DOPS (4); CBL(5) During clinical rotation	MCQs; SEQs; OSPE: long cases (as part of OSPE) At end of rotation

7. Rules & Regulation:

I. Student's code of conduct

The Student Code of Conduct sets out the standards of conduct expected of students. It holds individuals and groups responsible for the consequences of their actions. Failure to fulfill these responsibilities may result in the withdrawal of privileges or the imposition of sanctions.

Wah Medical College is a community of students, faculty and staff involved in learning, teaching, research, and other activities. All members of the WMC community are expected to conduct themselves in a manner that contributes positively to an environment in which respect, civility, diversity, opportunity, and inclusiveness are valued, so as to assure the success of both the individual and the community. The Student Code of Conduct reflects a concern for these values and tries to ensure that members of the WMC can make use of and enjoy the activities, facilities, and benefits of WMC without undue interference from others.

WMC STUDENT CODE OF CONDUCT

- Discipline
- Decent dress
- Good Manners
- Smart Turn Out
- Healthy Activities
- No smoking
- No Abusive Language
- Cooperative Attitude
- Respect for All

II. Attendance policy

- a. Students are required to mark attendance for every class.
- b. The attendance is compiled by the respective department and submitted to student affairs by the 10th of each month.
- c. The Students Affair Department will compile the absent report and a fine of Rs. 500/- for a lecture or for the whole day will be imposed on absent students. It is pertinent to mention here that a fine is imposed on students to compel them to attend classes regularly and not to generate the funds.
- d. A compiled attendance state of all students along with those having attendance less than 75% duly highlighted will be submitted to the Students Affairs Department on monthly as well as quarterly basis by the concerned departments.
- e. At the end of the academic year, a consolidated state of attendance of students will be submitted to the Students Affair Department.
- f. Departments will submit the list of those students having attendance less than 75% at the end of academic year.
- g. Admission forms of students having attendance less than 75% will NOT be submitted to NUMS for appearing in Annual University Exams.

8. Study Tips:

Dear Students,

Becoming a doctor is a tough job, but you can make it easier for yourself by adopting some time-tested techniques or habits. It's never too early – or too late – to develop good study habits. The sooner you get into a good self-study pattern, the easier everything will be and the more your chances of getting good marks will improve. Here are our top tips for getting the most out of your self-directed study time. And remember **Perseverance is the Key to Success!**



Review the material regularly, create a study schedule

Write it down



Test yourself

Find an effective learning environment with limited distractions and some fresh air



Improve memorization with Mnemonics

Incorporate auditory methods; use online podcasts



Use visuals, images, concept maps & illustration charts

Consider forming a study group or find an accountability buddy



TAKE A STUDY BREAK!

Take strategic breaks

9. Feedback on the study guide:

We value your feedback and will use it for improvement of this Study guide.

Kindly provide feedback for this study guide. At the email:

dme@wahmedicalcollege.edu.pk

dmewahmedicalcollege@gmail.com

10. References:

HARDEN, J.M. LAIDLAW, E.A. HESKETH, R. M. (1999). AMEE Medical Education Guide No 16: Study guides-their use and preparation. *Medical Teacher*, 21(3), 248–265. <https://doi.org/10.1080/01421599979491>

11. Timetable Template

Department of obstetrics & Gynaecology
Clinical Roster Final Year MBBS (Batch C1)
Week 1 (06-11-23 to 10-11-23)

FIRST WEEK

S	Session 1 Lecture and student presentation on topic 8:00 to 9:15am)	Session 2 SGD (9:15 to10:00am)	Session 3 (10.00 11.30am) Bed Side Teaching (OPD +OT+LR +ward)	B R E A K	SDL (12-1:00pm)	Session4 (1:00to3:00pm) SGD/Tutorial)	Maternity Duty Evening (4pm to 10pm) Night (10pm to 6am) in groups
1	Dr. Shabana	Dr. Shabana	Observe Pt safety under supervision		Dr. Nazia Naz	Radiologist Dr. Nazia	LR,ER,OT,Ward activities
11-23	Kalsoom	Kalsoom /Dr. Nazia					
1-23	Prof Humaira Nasir	Dr. Ruqaiya			Dr. Ruqaiya		LR, ER, OT, Ward activities
1-23	Prof Kinza Alam	Prof Kinza Alam/Dr. Iram			Dr. Iram Mushtaq	Dr. Iram	LR, ER, OT, Ward activities
1-23	Holiday Iqbal Day						
1-23	Dr Khairun Nisa	Dr Khairun Nisa / Dr. Shaherbano			Dr. Shaherbano	Skill lab DOPS Dr. Shaherbano	