



**Islam Medical College, Sialkot**  
**Department of Obstetrics and Gynecology**

# STUDY GUIDE

**Obs & Gyn**  
**For MBBS Students**  
**Year 2026**

[Abstract](#)

This study guide should be used as a reference document throughout your MBBS training in Obstetrics and Gynecology at Islam Medical College, Sialkot.

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# PREFACE

Department of Obstetrics & Gynecology, Islam Medical College, Sialkot has prepared this Student Study guide to provide a ready source of information that will allow each new medical student to integrate quickly into the program. This handbook should be used as a reference guide throughout your MBBS training.

## HOW THIS STUDY GUIDE WILL HELP YOU?

Study guide is an aid, designed to assist students with their learning. It indicates what should be learned, how it can be learned, and how students can recognize if they have learned. This document:

- Communicates information on organization and management of the course.
- Defines the objectives which are expected to be achieved at the end of the course.
- Identifies the learning strategies such as interactive lectures, small group teachings, Practical skills, demonstration, tutorial and self-directed learning that will be implemented to achieve the objectives.
- Provides a list of learning resources such as books, computer assisted learning programs, web-links and journals for students to consult in order to maximize their learning.
- Highlights information on the distribution of marks in the examinations which is in accordance to University of Health Sciences criteria.
- Provides table of specification in accordance to University of Health Sciences' criteria.
- Includes information on the assessment methods that will be used to assess every student's achievement of objectives.

# INTRODUCTION TO OBSTETRICS AND GYNECOLOGY

Obstetrics and Gynecology (OB/GYN) is a unique medical specialty that comprises two different subspecialties.

Obstetrics focuses on providing care related to pregnancy, perinatal care, and child delivery.

Gynecology provides medical and surgical care related to the female reproductive system.

OB/GYN specialists have a large spectrum of clinical and surgical skills, ranging from regular female gynecologic exams and prenatal advising to child delivery and robotic surgery.

Some important subspecialize fields in OB/GYN are:

**Operative Gynecological Endoscopy:** deals with endoscopic surgery for gynecological indications using either laparoscope or hysteroscope. It includes robotic surgery.

**Gynecologic oncology:** deals with workup, treatment, and prevention of the female reproductive system neoplasms.

**Reproductive endocrinology and infertility:** deals with workup and treatment of infertility (e.g., in vitro fertilization and embryo transfer and other ARTs).

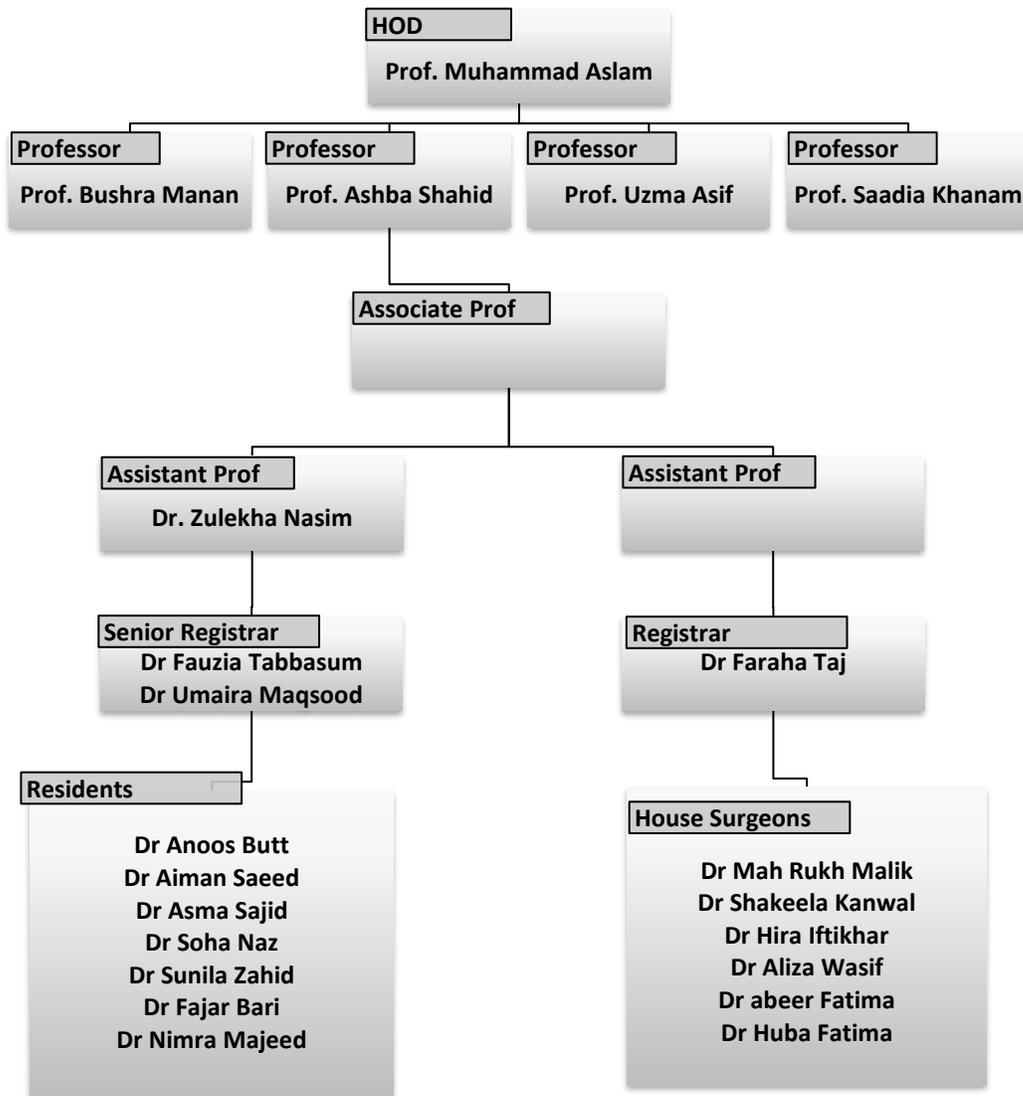
**Maternal-fetal medicine:** deals with workup and treatment of complications during pregnancy.

**Urogynecology:** deals with workup and treatment of pelvic organ prolapse and fecal/urinary/fecal incontinence

As many OB/GYN patients have concomitant health conditions, this specialty collaborates closely with other medical specialties, including family medicine, internal medicine, general surgery, oncology, and psychiatry.

# DEPARTMENT OF OBS & GYN, IMC, SIALKOT

## CURRENT STAFF



# CORE CURRICULUM TOPICS

## OBSTETRICS

1. Introduction.
2. Obstetric history taking and examination.
3. Conception, implantation and development of placenta,
  1. Fetal circulation, abnormalities of placenta.
  4. Fetal skull and bony pelvis.
  5. Diagnosis of pregnancy.
  6. Physiological changes associated with pregnancy.
  7. Ante-natal care.
  8. Early pregnancy loss and its management (Abortions)
  9. Physiology of labour.
  10. Mechanism of labour.
  11. Management of labour.
  12. Complications of 3<sup>rd</sup> stage of labour.
  13. Abnormal labour e.g. prolonged labour/obstructed labour.
  14. Pre-term labour.
  15. Induction of labour.
  16. Pre-maturity.
  17. Post-maturity.
  18. Conduction of normal delivery.
  19. Operation delivery.
  20. Forceps delivery.
  21. Vacuum delivery.
  22. Caesarean section.
  23. Ante-partum hemorrhage.
  24. Hydramnios.
  25. Hyperemesis gravidarum.
  26. Medical Disorder associated with pregnancy e.g.
    - Pregnancy with anaemia
    - Pregnancy with heart disease
    - Pregnancy with diabetes
    - Pregnancy with jaundice/hepatitis
    - Renal problems during pregnancy
    - Pyrexia in pregnancy
27. Hypertensive disorders of pregnancy e.g.
  - PET
  - Eclampsia
  - Essential hypertension
28. Obstetric shock.
29. Intra uterine growth retardation and its management.
30. Fetal distress and its management.
31. Fetal Monitoring.
32. Fetal presentations.
33. Breech presentation.
34. Occipito posterior position.
35. Brow presentation.
36. Face presentation.
37. Cord prolapse/compound presentation.
38. Transverse lie/unstable lie.
39. Multiple pregnancy
40. Puerperium (normal and abnormal).
41. Examination of the new-born baby.
42. Resuscitation of new-born.
43. Minor problems of the new-born.
44. Breast feeding and its importance.
45. Obstetric injuries/ruptured uterus.
46. Hematological disorder of pregnancy e.g.
  - Rh incompatibility
  - Thalassemia major/minor
47. Role of Ultrasound in obstetric.
48. Fetal congenital abnormalities.
49. Vital statistics.

## **GYNECOLOGY**

1. Introduction.
2. Anatomy of female
  - Genital organs
  - Development of female genital organs
3. Puberty and adolescence.
4. Ovulation and its clinical importance.
5. Normal menstruation.
6. Menstrual abnormalities.
7. Gynecological history taking and examination
8. Minor gynecological operative procedures.
9. Amenorrhea
10. Infertility.
11. Contraception.
12. Ectopic pregnancy.
13. Trophoblastic tumours.
14. Vulval lesions
15. Tumours of vagina.
16. Tumours of cervix.
17. Tumours of uterus.
18. Tumours of ovaries.
19. Tumours of fallopian tubes.
20. Menopause, Hormone replacement therapy.
21. Genital prolapse.
22. Pelvic floor injuries.
23. Urogynecology.
24. Problems of marriage and sex.
25. Vaginal discharges.
26. Infections of female genital tract

# SPECIFIC LEARNING OBJECTIVES ALIGNED WITH LEARNING AND ASSESSMENT STRATEGIES

## OBSTETRICS

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategy
1	<p><b>Obstetric history and examination:</b></p> <ul style="list-style-type: none"> <li>• To understand the principles of taking an obstetric history.</li> <li>• To understand the key components of an obstetric examination</li> <li>• How to perform an appropriate obstetric examination</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
2.	<p><b>Antenatal care:</b></p> <ul style="list-style-type: none"> <li>• To understand the principles of routine antenatal care.</li> <li>• To be aware of the rationale for, and purpose of, clinical investigations during each trimester.</li> <li>• To differentiate normal pregnancy symptoms from potential underlying pathology</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
3.	<p><b>Normal fetal development and growth:</b></p> <ul style="list-style-type: none"> <li>• To understand that fetal growth and birth weight are important determinants of immediate neonatal health and long-term adult health.</li> <li>• To appreciate the fetal, maternal and placental factors that affect fetal growth and development.</li> <li>• To be familiar with the fetal circulation, the specific shunts that ensure that the best oxygenated blood from the placenta is delivered to the fetal brain, and to appreciate how the fetal circulation transitions at birth to an adult circulation.</li> <li>• To be aware of normal development of fetal organs during pregnancy, how fetal structural abnormalities arise and what effects they have on the fetus and neonate.</li> <li>• To recognize the importance of normal amniotic fluid physiology to fetal growth and development</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
4.	<p><b>Assessment of fetal well-being:</b></p> <ul style="list-style-type: none"> <li>• To understand the principles of imaging in obstetrics, its safety and benefits for examining the fetus during gestation.</li> <li>• To know how ultrasound is used in pregnancy to confirm gestational age, to detect fetal structural abnormalities, to</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategy
	<p>monitor fetal growth and development, to study the placenta and to assess fetal wellbeing.</p> <ul style="list-style-type: none"> <li>• To recognize the value of antenatal cardiotocography (CTG) to assess fetal wellbeing and to screen for fetal hypoxia.</li> <li>• To be aware of the role of Doppler ultrasound to monitor and guide the management of pregnancies at risk of adverse outcomes.</li> </ul>		
5.	<p><b>Prenatal diagnosis:</b></p> <ul style="list-style-type: none"> <li>• To understand why prenatal diagnosis is performed and what conditions can be tested for in the fetus.</li> <li>• To be aware of the invasive prenatal diagnostic tests that can be performed, their risks and benefits.</li> <li>• To appreciate how to appropriately counsel a woman and her partner who are considering having an invasive prenatal diagnostic test.</li> <li>• To know the various screening tests that are used to predict the risk of a woman having a pregnancy affected by Down's syndrome.</li> <li>• To learn about newer non-invasive methods of prenatal diagnosis based on measurement of cell-free fetal DNA in the maternal circulation.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
6.	<p><b>Antenatal obstetrics complications:</b></p> <ul style="list-style-type: none"> <li>• To appreciate the causes and management of minor complications of pregnancy.</li> <li>• To be able to provide a differential diagnosis for abdominal pain in pregnancy and a management plan.</li> <li>• To understand the risk factors, presentation and management of venous thromboembolic disease in pregnancy.</li> <li>• To understand the complications of drug abuse in pregnancy.</li> <li>• To understand the causes, complications and management of Oligohydramnios and polyhydramnios.</li> <li>• To understand the causes and management of malpresentation in late pregnancy.</li> </ul> <p>To understand the causes, prevention and treatment of hemolytic disease of the fetus and newborn.</p>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
7.	<p><b>Multiple pregnancy:</b></p> <ul style="list-style-type: none"> <li>• Understand classification of multiple pregnancies.</li> <li>• Understand risk factors for multiple pregnancies and why prevalence is increasing.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategy
	<ul style="list-style-type: none"> <li>Understand the increased complications that occur in multiple pregnancies.</li> <li>Understand the antenatal care of women with multiple pregnancies.</li> </ul>		
8.	<p><b>Preterm labor:</b></p> <ul style="list-style-type: none"> <li>To understand the extent of the problem, its causes and consequences.</li> <li>To be aware of the limitations of our current understanding.</li> <li>To appreciate the problems and potential complications associated with our current management of preterm labour.</li> <li>To grasp the potential for improvements in our management of preterm labour.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
9.	<p><b>Hypertensive disorder of pregnancy:</b></p> <ul style="list-style-type: none"> <li>To understand the classification of hypertension in pregnancy.</li> <li>To appreciate and be able to differentiate the different risks associated with various types of hypertensive disorders in pregnancy.</li> <li>To understand the pathophysiology of pre-Eclampsia.</li> <li>To be aware of the clinical presentation of pre-Eclampsia and understand the principles of management.</li> <li>To understand the long-term risks to both mother and baby from preeclampsia</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
10.	<p><b>Medical complications of pregnancy:</b></p> <ul style="list-style-type: none"> <li>Understand the importance of medical conditions in pregnancy in relation to maternal and infant health.</li> <li>Appreciate the importance of preconceptual counseling and its impact on improving pregnancy outcomes.</li> <li>Understand the impact of common medical conditions such as hypertension, kidney disease, cardiac disease and diabetes on pregnancy.</li> <li>Appreciate the contribution of maternal medical disease to maternal mortality.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
11.	<p><b>Perinatal infections:</b></p> <ul style="list-style-type: none"> <li>To understand the common viral and bacterial infections seen in pregnancy that have implications for the mother, fetus and infant.</li> <li>Learn which infections are included in routine pregnancy screening and the principles of their management.</li> <li>Learn the consequences of prenatal infection on the developing fetus.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategy
12.	<p><b>Normal and abnormal:</b></p> <ul style="list-style-type: none"> <li>• To understand the maternal and fetal anatomy relevant to labor and delivery.</li> <li>• To understand the physiological principles of labor and delivery.</li> <li>• To understand the contributors to normal labor and its management.</li> <li>• To understand the contributors to abnormal labor and its management.</li> <li>• To introduce the social, psychological and governance elements of labor and delivery.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
13.	<p><b>Operative delivery:</b></p> <ul style="list-style-type: none"> <li>• To understand the appropriate management of perineal tears.</li> <li>• To understand the appropriate management of episiotomy.</li> <li>• To understand the indications, contraindications, procedures and complications of instrumental delivery with Ventouse or forceps.</li> <li>• To understand the indications, procedure, complications and consequences of caesarean section.</li> <li>• To introduce the concept of risk management relation</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
14.	<p><b>Obstetric emergencies:</b></p> <ul style="list-style-type: none"> <li>• To understand the incidence of common obstetric emergencies.</li> <li>• To understand the risk factors for common obstetric emergencies.</li> <li>• To be able to understand the early warning signs in obstetric emergencies.</li> <li>• To be able to provide a stepwise approach in the management of common obstetric emergencies.</li> </ul>	GIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
15.	<p><b>The puerperium:</b></p> <ul style="list-style-type: none"> <li>• To understand the physiological changes that occurs in the normal puerperium.</li> <li>• To understand the common disorders of the puerperium and how to manage them.</li> <li>• To understand the process of breastfeeding and common disorders associated with it.</li> <li>• To be able to recognize and manage common postpartum psychiatric disorders.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategy
16.	<p><b>The neonate:</b></p> <ul style="list-style-type: none"> <li>To understand and be able to describe the unique features of newborn babies and the transition to extra uterine life.</li> <li>For common neonatal problems be able to describe: <ul style="list-style-type: none"> <li>-key features from an obstetric point of view;</li> <li>-urgent action in the delivery room or soon afterwards;</li> <li>-important messages for parents.</li> </ul> </li> <li>To describe key points relevant to postnatal management that need to be communicated by professionals involved in antenatal care.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

## GYNECOLOGY

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
1	<p><b>The development and anatomy of female sexual organs and pelvis:</b></p> <ul style="list-style-type: none"> <li>Understand that sexual differentiation and development begin in early embryonic life.</li> <li>Understand the embryonic development and the anatomy of the perineum, the vagina, cervix and uterus, the adnexa and ovary and the bladder and ureters.</li> <li>Describe the blood supply and lymphatics of the perineum and pelvis.</li> <li>Understand the innervation of the perineum and pelvis.</li> <li>Understand the vulnerability of certain structures in gynecological surgery.</li> <li>Describe the structural anomalies resulting from Mullerian tract disorders.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
2.	<p><b>Gynecological history, examination and investigations:</b></p> <ul style="list-style-type: none"> <li>To understand that a detailed and structured gynecological history is vital for making a diagnosis, and will place the patient's symptoms in her social context.</li> <li>To understand that the gynecological examination will be customized by the history to elicit the appropriate signs.</li> <li>Imaging in gynecology may include ultrasound, magnetic resonance imaging (MRI) and computed tomography (CT) scanning.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
	<ul style="list-style-type: none"> <li>Biochemical, haematological and microbiological investigations will be guided by the history and examination findings.</li> </ul>		
3.	<p><b>Hormonal control of the menstrual cycle and hormonal disorders:</b></p> <ul style="list-style-type: none"> <li>Describe the features of the normal menstrual cycle and the ovarian and endometrial changes that accompany them.</li> <li>Describe the normal changes of puberty and the secondary sexual differentiation that accompanies it.</li> <li>Understand the classification and causes of abnormal puberty and disorders of sexual development (DSD).</li> <li>Describe the causes and investigation of primary and secondary amenorrhoea and oligomenorrhoea.</li> <li>Understand the epidemiology and effects of polycystic ovary syndrome (PCOS), its diagnosis and management.</li> <li>Describe the common effects and management of premenstrual syndrome (PMS). Describe premature cessation of periods.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
4.	<p><b>Disorders of menstrual bleeding:</b></p> <ul style="list-style-type: none"> <li>Understand the symptoms and etiology of abnormal uterine bleeding (AUB).</li> <li>Describe the terminology of AUB.</li> <li>Understand the symptoms, investigation and management of heavy menstrual bleeding (HMB).</li> <li>Appreciate the impact of HMB on ability to function.</li> <li>Understand the causes and investigation of dysmenorrhoea.</li> <li>Understand the action of medication used for menorrhagia and dysmenorrhoea.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
5.	<p><b>Implantation and early pregnancy:</b></p> <ul style="list-style-type: none"> <li>Understand the social and emotional context of early pregnancy loss.</li> <li>Understand why a high suspicion of pregnancy is needed in all women of reproductive age with symptoms.</li> <li>Obtain a detailed knowledge of the clinical presentation and management of miscarriage and ectopic pregnancy.</li> <li>Obtain an awareness of less common early pregnancy conditions, including recurrent miscarriage, gestational trophoblastic disease and hyperemesis gravidarum.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
6.	<p><b>Contraception and abortion:</b></p> <ul style="list-style-type: none"> <li>• Understand the mechanism of action of current contraceptive methods.</li> <li>• Describe factors that affect contraceptive effectiveness.</li> <li>• Understand the non-contraceptive benefits of methods.</li> <li>• Remember the use of medical eligibility criteria for contraception.</li> <li>• Understand the mechanism of action of modern medical methods of abortion.</li> <li>• Describe common complications of abortion.</li> <li>• Understand the importance of postabortal contraception.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
7.	<p><b>Subfertility:</b></p> <ul style="list-style-type: none"> <li>• Understand the definition and causes of subfertility.</li> <li>• Describe the concept of ovarian reserve.</li> <li>• Understand the history, examination and investigations relevant to subfertility.</li> <li>• Understand the provision and regulation of fertility treatment.</li> <li>• Explain the processes and procedures involved in assisted reproductive treatment (ART).</li> <li>• Understand the outcomes and success rates of ART</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, long case
8.	<p><b>The menopause and post-reproductive health:</b></p> <ul style="list-style-type: none"> <li>• Know the definition of menopause.</li> <li>• Understand physiological and non-physiological menopause.</li> <li>• Understand the effect of menopause on women.</li> <li>• Understand the modifiable and non-modifiable aspects of menopausal health.</li> <li>• Explain the main forms of treatment of the menopause.</li> <li>• Know the side-effects and the relative and absolute contraindications of hormonal replacement therapy (HRT).</li> <li>• Describe the benefits of hormonal and non-hormonal HRT.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, long case
9.	<p><b>Genitourinary problems:</b></p> <ul style="list-style-type: none"> <li>• Understand the importance of sexually transmitted infections (STIs) in gynecology.</li> <li>• Describe the testing, diagnosis and transmission of common STIs and blood-borne viruses (BBVs).</li> <li>• Understand that support is needed for patients to enable them to undertake screening.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
	<ul style="list-style-type: none"> <li>• Appreciate that human immunodeficiency virus (HIV) has changed from life limiting into a chronic, manageable condition.</li> <li>• Learn how to take a sexual history.</li> <li>• Understand the diagnosis of and screening for HIV.</li> <li>• Describe the care for the HIV-positive mother and child.</li> </ul>		
10.	<p><b>Urogynecology and pelvic floor problems:</b></p> <ul style="list-style-type: none"> <li>• Understand the anatomy of supporting ligaments and fascia of the female pelvic organs.</li> <li>• Understand the mechanism of continence in women, and how disorders of this lead to symptoms.</li> <li>• Appreciate the relationships between anatomical prolapse and functional symptoms, including urinary, bowel and sexual dysfunction.</li> <li>• Learn how to assess the patient with incontinence or prolapse by means of history, examination and relevant investigations.</li> <li>• Understand the principles of urodynamic testing.</li> <li>• Understand the principles of treatment of prolapse and incontinence and be able to describe the effectiveness of each treatment, together with an understanding of potential side-effects and complications.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
11.	<p><b>Benign conditions of the ovary and pelvis:</b></p> <ul style="list-style-type: none"> <li>• Describe the types of benign ovarian cysts, their symptoms, diagnosis and treatment.</li> <li>• Describe the presentation and management of acute pelvic pain.</li> <li>• Understand the pathology of endometriosis and recognize its involvement in chronic pelvic pain and subfertility.</li> <li>• Understand how to diagnose and treat endometriosis.</li> <li>• List potential causes for chronic pelvic pain (CPP).</li> <li>• Appreciate the multifactorial nature of CPP and potential management options</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
12.	<p><b>Benign conditions of the uterus, cervix and endometrium:</b></p> <ul style="list-style-type: none"> <li>• Describe the common benign conditions that affect the uterus according to their tissue of origin: the cervix, the endometrium and the myometrium.</li> <li>• Understand the presenting symptoms and examination findings associated with benign uterine pathology.</li> <li>• Describe the common tests used to evaluate the uterus and endometrial cavity.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
	<ul style="list-style-type: none"> <li>Explain the available treatment options for uterine fibroids and Adenomyosis and the rationale for selection</li> </ul>		
13.	<p><b>Benign conditions of the vulva and vagina, psychosexual disorder and female genital mutilation:</b></p> <ul style="list-style-type: none"> <li>Describe the presentation and management of common benign conditions of the vulva and vagina.</li> <li>Describe the causes of superficial and deep dyspareunia.</li> <li>Understand the impact of Vulval and vaginal conditions on sexual function.</li> <li>Understand the definition of psychosexual disorders.</li> <li>Describe the diagnosis, impact and management of psychosexual disorders.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
14.	<p><b>Malignant disease of the ovary:</b></p> <ul style="list-style-type: none"> <li>Learn how malignant disease of the ovary, Fallopian tube and peritoneum presents.</li> <li>Learn how ovarian cancer is investigated and staged.</li> <li>Learn how ovarian cancer is managed.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
15.	<p><b>Malignant disease of the uterus:</b></p> <ul style="list-style-type: none"> <li>Describe the classification of uterine malignancy.</li> <li>Learn how malignant disease of the uterus presents.</li> <li>Describe which investigations are needed for women with suspected endometrial cancer.</li> <li>Know the International Federation of Gynecology and Obstetrics (FIGO) staging of endometrial cancer.</li> <li>Understand how endometrial cancer is managed.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case
16.	<p><b>Premalignant and malignant disease of the lower genital tract:</b></p> <ul style="list-style-type: none"> <li>Understand the pathogenesis of lower genital tract malignancy.</li> <li>Understand primary prevention of cervical cancer through human papillomavirus (HPV) vaccination and cervical screening.</li> <li>Understand the diagnosis, International Federation of Gynecology and Obstetrics (FIGO) staging and management of premalignant and malignant disease of lower genital tract, I.E. cervix, vagina and vulva.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

Sr. No.	Topic Name/ Learning outcome	Learning Strategies	Assessment Strategies
17.	<p><b>Gynecological surgery and therapeutics:</b></p> <ul style="list-style-type: none"> <li>• Revise the key points of surgical anatomy applied to gynecology.</li> <li>• Understand the relative risks and benefits of abdominal and vaginal hysterectomy as well as laparoscopic hysterectomy.</li> <li>• Understand the advantages and principles of minimal access surgery.</li> <li>• Understand the advantages and disadvantages of common incisions.</li> <li>• Understand the purpose of careful pre-assessment and postoperative care.</li> <li>• Recognize the importance of fully informed consent.</li> <li>• Be aware of the common gynecological procedures and their risks.</li> <li>• Describe the common hormonal and non-hormonal drugs used in gynecology, and understand the principles of safe prescribing.</li> </ul>	LGIS, SGD,CBL	SEQ, MCQ,OSPE, , long case

## LEARNING STRATEGIES

A wide range of teaching / learning methods are used by the department of obstetrics and gynecology to teach medical students. You may be aware of most of these learning techniques. A small introduction of these tools is provided below to make you familiar with these learning strategies:

- 1. Interactive Lectures:** is an educational talk to a large group of students. The lecturer introduces a topic or common clinical conditions and explains the underlying phenomena through questions, pictures, videos etc. Students are actively involved in the learning process.
- 2. Small Group Discussion:** This learning strategy help students to clarify concepts, acquire skills or attitudes. Sessions are structured with the help of specific exercises such as patient case, presentations, quiz or discussion topics. Students exchange opinions and apply knowledge gained from lectures, tutorials and self-study. The facilitator role is to ask probing questions, summarize, or rephrase to help clarify concepts.
- 3. Tutorials:** Usually less formal than a lecture, tutorials are small classes in which material from lectures and readings can be discussed in more detail.
- 4. Student led tutorials:** students are responsible for presenting the material with the aid of PowerPoint slides and subsequently leading the discussion around the topic.
- 5. Skill Teaching:** various essential ObGyn skills are taught to the students during these sessions utilizing the models, manikins, birthing dolls, contraceptive devices, instruments, ultrasound scans, CTG, and instruments. Videos and animations are also used to demonstrate various operations and procedures techniques.
- 6. Scenario Teaching:** where a clinical case scenario is used to discuss various aspects of a disease and its management.
- 7. Case Discussion:** where students are asked to take history of a patient attending OPD and present their case during case discussion session. This follows an in-depth discussion of the patient's clinical problem.
- 8. Bed side Teaching & Clinical Teaching Rounds:** The students accompany the consultant during ward round. The students and instructor, both, attend the patient's bedside to discuss the case and/or demonstrate a clinical procedure. Students have the opportunity to see how the attending physician relates to the patient; they receive hands-on instruction in interviewing a patient, performing a physical examination, and counselling and communication skills.
- 9. Labor Ward and Operation theater attendance:** students are posted in labor ward during ward residency. During these sessions, students attend on laboring patients and watch various procedures live in operation theater.
- 10. Self-Directed Learning (SDL):** Students assume responsibilities of their own learning through individual study, sharing and discussing with peers, seeking information from learning resources, teachers and resource persons within and outside the college. Students can utilize the time within the college scheduled hours of self-study

- 11. E-Learning:** is a strategy by which learning occurs through the utilization of electronic media, typically LMS (Learning Management System). This method was used to teach student online during Covid pandemic but department of obstetrics and gynecology will continue to use this method for selective topic learning by the students.
- 12. Clinicopathological Conferences (CPC):** The process involves case presentation, diagnostic data, discussion of differential diagnosis, logically narrowing the list to few selected probable diagnoses and eventually reaching a final diagnosis and its brief discussion.

# TIME TABLES

## TEACHING SCHEDULE FOR 4<sup>TH</sup> YEAR MBBS

ISLAM MEDICAL COLLEGE, SIALKOT						
Time Table for 4th Year MBBS						
	8:30 – 9:30	9:30 - 10:30	10:30 - 12:30		12:30-01:30	
<b>Monday</b>	Community Medicine	ENT	<b>Clinical Rotations</b>			Community Medicine Tutorial
	<b>8:30 – 9:20</b>	<b>9:20 - 10:10</b>	<b>10:10 - 11</b>	<b>11:00 – 12:30</b>		Pathology Practical (A) Community Medicine Practical (B)
<b>Tuesday</b>	Community Medicine	ENT	Pathology	<b>Clinical Rotations</b>		
<b>Wednesday</b>	Obs & Gyn	Pathology	Eye	<b>Clinical Rotations</b>		
<b>Thursday</b>	Pathology	Community Medicine	Eye	<b>Clinical Rotations</b>		
<b>Friday</b>	Pathology	Surgery	Community Medicine	Pathology Practical (B) Community Medicine (A)	Pathology	Medicine

## TEACHING SCHEDULE OF FINAL YEAR MBBS

ISLAM MEDICAL COLLEGE, SIALKOT						
Time Table for 4th Year MBBS						
	8:00-9:00	9:00-12:30		12:30-1:00	1:00-2:00	2:00-3:00
<b>MON</b>	Orthopedic Lecture	<b>CLINICAL ROTATION</b>		<b>Break</b>	Surgery Lecture	Medicine Lecture
<b>TUE</b>	Obs/ Gyn Lecture	<b>CLINICAL ROTATION</b>			Surgery Lecture	Pediatrics lecture
<b>WED</b>	Medicine Lecture	9:00-10:00	10:00-01:20	1:20-2:00		Urology Lecture
		CPC	<b>CLINICAL ROTATION</b>	<b>Break</b>		

<b>THUR</b>	<b>Obs/ Gyn Lecture</b>	<b>9:00-12:30</b>	<b>12:30-1:20</b>		<b>Pediatrics lecture</b>
		<b>CLINICAL ROTATION</b>	<b>Medical Education Patient Safety</b>		
<b>FRI</b>	<b>Medicine Lecture</b>	<b>CLINICAL ROTATION</b>			<b>Surgery Lecture</b>

### **CLINICAL TRAINING SCHEDULE OF 4<sup>TH</sup> YEAR MBBS**

The 4th year students have clinical rotation in Gynecology & Obstetric unit for 16 days. The structured schedule for their training is given below:

<b>Day</b>	<b>10:45am – 11:30am</b>	<b>11:30am-12:30pm</b>	
	<b>Skill Teaching/Tutorials</b>	<b>Case Discussion</b>	
		<b>Ward/OT</b>	<b>OPD</b>
Monday	Skill Teaching History taking in OBS/GYN Prof Aslam		
Tuesday	Preconception and Prenatal Care Dr Saadia		
Wednesday	Fetal surveillance in pregnancy Dr Zulekha		
Thursday	Skill Teaching Mechanism of normal labor Prof Aslam		
Monday	Heavy menstrual bleeding Prof Aslam		
Tuesday	Prolonged Labor & Intrapartum Fetal Surveillance Dr Zulekha		
Wednesday	Student Led Tutorial Postpartum Care Dr Fauzia Ashar		
Thursday	Skill Teaching Filling of Partogram Prof Aslam		
Monday	Multiple pregnancy Dr Saadia		
Tuesday	Abnormal Puberty Dr Zulekha		

Wednesday	Skill Teaching Forceps Delivery Prof Aslam		
Thursday	Student Led Tutorial Premature Rupture of Membranes Dr Fauzia Ashar		
Monday	Preterm Labor Dr Nayla		
Tuesday	Vaginal discharge and Vulvovaginitis Dr Zulekha		
Wednesday	Student Led Tutorial Post-term Pregnancy Dr Saadia		

### **CLINICAL TRAINING SCHEDULE OF 5<sup>TH</sup> YEAR MBBS**

The final year students have clinical rotation in Gynecology & Obstetric unit for 30 days. The structured schedule for their training is given below:

TIME				
Day	9:30am-10:30am	10:30am – 11:30am	11:30am-1:00pm	
	Interactive Teaching Sessions	Skill Teaching/Student Led Tutorials	Case Discussion	
			Ward/OT	OPD
<b>Week 01</b>	INTRODUCTORY SESSION	Skill Teaching		
Monday	Prof. Aslam	History taking in OBS/GYN Prof Aslam		
Tuesday	Preconception and Prenatal Care Prof Uzma	Skill Teaching Obstetric Examination Dr Saadia		
Wednesday	Fetal surveillance in pregnancy Prof Aslam	Skill Teaching Gynecological Examination Dr Amara		
Thursday	Miscarriage Prof Uzma	Student Led Tutorial Hydatidiform Mole Prof Aslam		
Friday	Ectopic pregnancy Prof Ashba	Skill Teaching Mechanism of normal labor Dr Nayla		
<b>Week 02</b>	Stages & management of normal labor	Student Led Tutorial		
Monday	Prof Bushra	Dysmenorrhea & Chronic Pelvic Pain Dr Amara		
Tuesday	Heavy menstrual bleeding Prof Aslam	Skill Teaching SVD/Delivery of Placenta Dr Nayla		

Wednesday	Prolonged Labor & Intrapartum Fetal Surveillance Dr Zulekha	Student Led Tutorial Immediate Care of the Newborn Dr Amara		
Thursday	Hyperandrogenism/PCOS Prof Bushra	Skill Teaching HVS & Pap Test Prof Aslam		
Friday	Postpartum Hemorrhage Prof Uzma	Student Led Tutorial Postpartum Care Dr Amara		
<b>Week 03</b>	Amenorrhea Prof Ashba	Skill Teaching Filling of Partogram Prof Aslam		
Monday				
Tuesday	Multifetal Gestation Dr Saadia	Student Led Tutorial Malpresentations and Cord prolapse Prof Aslam		
Wednesday	Abnormal Puberty Prof Uzma	Skill Teaching ObGyn Instruments Dr Nayla		
Thursday	Menopause/HRT Prof Bushra	Student Led Tutorial PIH /Preeclampsia/eclampsia Prof Aslam		
Friday	Fetal Growth Restriction Dr Zulekha	Skill Teaching Forceps Delivery Dr Amara		
<b>Week 04</b>	Contraception & Sterilization Prof Bushra	Student Led Tutorial Premature Rupture of Membranes Prof Aslam		
Monday				
Tuesday	Preterm Labor Prof Ashba	Skill Teaching Ventouse Delivery Prof Aslam		
Wednesday	Vaginal discharge and Vulvovaginitis Dr Zulekha	Student Led Tutorial Sexually Transmitted Infections Dr Saadia		
Thursday	APH (Pl. previa & abruptio placentae) Prof Aslam	Skill Teaching Vaginal Breech Delivery Prof Aslam		
Friday	Uterovaginal prolapse Dr Zulekha	Student Led Tutorial Post-term Pregnancy Dr Saadia		
<b>Week 05</b>	Urinary Incontinence Prof Bushra	Skill Teaching Management of PPH Prof Aslam		
Monday				

Tuesday	Subfertility and ART Prof Uzma	Student Led Tutorial Endometriosis Dr Saadia		
Wednesday	Diabetes in pregnancy Prof Ashba	Skill Teaching IUCD Insertion Prof Aslam		
Thursday	Infectious Diseases in pregnancy Dr Saadia	Student Led Tutorial Thyroid problems in pregnancy Prof Aslam		
Friday	Anemias in pregnancy Dr Zulekha	Skill Teaching Management of Shoulder Dystocia Dr Nayla		
<b>Week 06</b>	CIN, abnormal Pap and management Prof Bushra	Student Led Tutorial Benign Ovarian Tumors Dr Saadia		
Monday				
Tuesday	Cervical Carcinoma Prof Ashba	Skill Teaching Implanon Insertion Prof Aslam		
Wednesday	Uterine Leiomyoma Prof Uzma	Student Led Tutorial Ovarian Carcinoma Dr Saadia		
Thursday	Endometrial carcinoma Prof Ashba	Skill Teaching External cephalic version Dr Nayla		
Friday	<b>Ward Test</b>			

### Self-Study Topics

- Feto-placental physiology; Maternal changes in pregnancy and minor problems in pregnancy; Genetic disorders and prenatal diagnosis; Abnormal uterine action in labor; Macrosomia, Hydramnios; Obstetric emergencies (cord prolapse, uterine inversion, uterine rupture); Episiotomy and perineal tears
- Anatomy and development of female genital organs and developmental anomalies; PMS/PMDD; Psychosexual problems; Sexual assault; Domestic Violence; Benign/malignant vulvar lesions; Benign/malignant vaginal lesions; Common Gynecological Operations

# LEARNING RESOURCES

## RECOMMENDED TEXT BOOKS

<i>SUBJECT</i>	<i>RESOURCES</i>
<b>OBSTETRICS</b>	<b>TEXTBOOKS</b> <ul style="list-style-type: none"><li>• Obstetrics by ten teachers, 20<sup>th</sup> edition.</li><li>• High-risk pregnancy, 5<sup>th</sup> edition</li><li>• Obstetrics &amp; gynecology, An evidence based text for the MRCOG, 4<sup>th</sup> edition.</li><li>• Dewhurst’s textbook of obstetrics &amp; gynecology, 9<sup>th</sup> edition.</li></ul>
<b>GYNECOLOGY</b>	<b>TEXTBOOKS</b> <ul style="list-style-type: none"><li>• Gynecology by ten teachers, 20<sup>th</sup> edition.</li><li>• Obstetrics &amp; gynecology, An evidence based text for the MRCOG, 4<sup>th</sup> edition.</li><li>• Dewhurst’s textbook of obstetrics &amp; gynecology, 9<sup>th</sup> edition.</li><li>• Gynecology by Robert W. Shaw, 4<sup>th</sup> edition.</li><li>• NICE, RCOG, FSRH guidelines</li></ul>

## OTHER LEARNING RESOURCES

- Hands-on Activities in Ward/OPD
- Skill Labs
- Videos
- Computer Lab/CDs/DVDs/ Internet Resources:
- Self-Learning

# ASSESSMENT STRATEGIES

## INTERNAL ASSESSMENT

Students will be continuously assessed by:

- Attendance
- End of term exam
- End of ward exam
- Sendup exam
- Clinical log book
- Faculty observation and feed back

30 marks are allocated for internal assessment. These marks will be included in the final aggregate of Final Professional Exam. Mark allocation is done as follows:

	Scoring Parameter	Weightage (percentage)
<b>Theory 10 %</b>	Attendance	75% attendance -1 % >85% attendance -2 %
	Ward test & Term Exam	2 %
	Continuous assessment	1 %
<b>Practical 10 %</b>	Attendance	75% attendance -1 % >85% attendance -2 %
	Ward test & Term Exam	2%
	Clinical logbooks	1 %

## SUMMATIVE ASSESSMENT

Consists of Two Theory papers and One Practical examination

### **A. Theory Papers**

**Obstetric Paper** = 7 SEQs and 35 MCQs.

**Gynecology Paper** = 10 SEQs and 35 MCQs.

### **B. Practical Examination**

**OSPE:** 15 stations

**Long Cases:** 2 long cases, one obstetrical and one gynecological

# MARKS DISTRIBUTION

## MBBS FINAL PROFESSIONAL EXAMINATION

Internal Assessment Marks = 30

Final prof Exam Marks = 270

Total Marks = 300

### DISTRIBUTION OF FINAL PROF MARKS OF OBGYN:

#### A. Theory Marks = 135 Marks

##### Obstetrics = 70 Marks

SEQ---35 marks (7 SEQs each carrying 5 marks)

MCQ---35 marks

##### Gynecology = 65 Marks

SEQ---30 marks (10 SEQs each carrying 3 marks)

MCQ---35 marks

#### B. Practical Marks = 135

OSPE---75 (15 stations each carrying 5 marks)

Long Case---60 (2 long cases each of 30 marks)

# TABLE OF SPECIFICATIONS

## MBBS FINAL PROFESSIONAL EXAMINATION

### OBSTETRICS

#### MULTIPLE CHOICE QUESTIONS

Total Marks: 35

Time Allowed: 1 hour

No. of MCQ: 35

(Note: One best answer to be chosen from 5 options)

Sr. No	Contents	No. of MCQs
1	Obstetrical history and examination	1
2	Antenatal care	2
3	Normal fetal development and growth	1
4	Assessment of fetal well being	2
5	Prenatal diagnosis	2
6	Antenatal obstetric complications.	3
7	Multiple pregnancy	1
8	Preterm labor	2
9	Hypertensive disorders of pregnancy.	3
10	Medical complications of pregnancy	4
11	Normal labor /abnormal labor	4
12	Operative delivery	2
13	Obstetrics emergencies	4
14	The puerperium	1
15	Perinatal infections	2
16	The Neonate	1
<b>Total MCQs</b>		<b>35</b>

## SHORT ESSAY QUESTIONS

Total Marks: 35

No. of SEQs: 07

Time Allowed: 2Hours  
(5 Marks for each question.)

Sr. No	Contents	No of SEQs
1	Antenatal Obstetric complications	1
2	Preterm labor	1
3	Hypertensive disorders of pregnancy	1
4	Medical complications of pregnancy	1
5	Normal/abnormal labor/pregnancy	1
6	Operative delivery	1
7	Obstetrical emergencies/APH/PPH	1
<b>Total SEQs</b>		<b>7</b>

## GYNECOLOGY

### MULTIPLE CHOICE QUESTIONS

Total Marks: 35

No. of MCQ: 35

Time Allowed: 45 minutes

(Note: One best answer to be chosen from 5 options)

Sr.No	Contents	No. of MCQs
1	Development and anatomy of the female sexual organs and pelvis	1
2	Gynecological history, exam and investigations	1
3	Menstrual cycle	1
4	Hormonal disorders	1
5	Disorders of menstrual bleeding	2
6	Early pregnancy	2
7	Ectopic pregnancy	1
8	Miscarriages/abortions	2
9	Contraception's	2
10	Subfertility	2
11	Menopause	2
12	Genitourinary problems	1

13	Urogynecology	1
14	Pelvic floor problems	1
15	Benign conditions of ovary	1
16	Benign conditions of uterus	2
17	Benign conditions of cervix	1
18	Benign conditions of endometrium	1
19	Benign condition of uterus/vagina	1
20	Malignant disease of ovary	1
21	Malignant disease of uterus	1
22	Premalignant conditions of cervix	2
23	Malignant conditions of cervix	1
24	Genital tract infections	2
25	Gynecological surgical procedures	2
<b>Total MCQs</b>		<b>35</b>

### SHORT ESSAY QUESTIONS

Total Marks: 30

No. of SEQs: 10

Time Allowed: 2Hours 15 minutes

(3 Marks for each question.)

<b>Sr. No</b>	<b>Contents</b>	<b>No of SEQs</b>
1	Disorders of menstrual bleeding	1
2	Abortion and complications of early pregnancy	1
3	Ectopic pregnancy	1
4	Contraception / Subfertility	1
5	Menopause / post-reproductive health	1
6	Urogynecology and pelvic floor problems	1
7	Malignant disease of ovary	1
8	Benign and malignant uterine	1
9	Premalignant and malignant conditions of cervix	1
10	Gynecological surgical procedures	1
<b>Total SEQs</b>		<b>10</b>

## **EXAMINATION RULES & REGULATIONS (IMC)**

- Student must report to examination hall/venue, 15 minutes before the exam.
- Exam will begin sharp at the given time.
- No student will be allowed to enter the examination hall after 15 minutes of scheduled examination time.
- Students must sit according to their roll numbers mentioned on the seats.
- Cell phones are strictly prohibited in examination hall. Any student, if found with cell phone in any mode (silent, switched off or on), he/she will be not be allowed to continue their exam.
- No students will be allowed to sit in exam without University Admit Card, IMDC College ID Card.
- Student must bring the following stationary items for the exam: Pen, Pencil, Eraser, and Sharpener.
- Indiscipline in the exam hall/venue is not acceptable. Students must not possess any help material, written or otherwise, or communicate with their fellow students.