

Course Content

Subject: Obstetrics and Gynecology Lectures

(Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 3; page nos. 102-129)

Integration: Upto 20% of the topics are to be taken in integration with other subjects as per directives.

Second MBBS phase II (from October 2020)

Total Teaching hours :

A. Lectures: 25 hours

Serial number	Competency Nos.	Integration	Lecture topics & Subtopics	Hours
1.	OG 2.1	AN 48.8, 49.1, 49.2, FM 3.18	Anatomy of the female reproductive tract,	1
2.	OG 3.1.		Physiology of menstruation	1
3.	OG 3.1	AN 77.3,77.4	Physiology of gametogenesis, Ovulation, conception, implantation , & reproductive endocrinology	1
4.	OG 4.1	AN 80.3 80.5, 80.6	Early development of embryo and fetus, development of Placenta, amniotic fluid, cord	1
5.	OG 2.1	AN 52. 8, 79.4	Embryology and developmental defects of female genital tract	1
6.	OG 6.1	FM3.19, PY 9.10	Diagnosis of pregnancy	1
7.	OG 7.1	PY 9.8	Physiological changes in pregnancy	1
8.	OG 1.1, 1,2	CM10.1, 10.2	Maternal and perinatal mortality	1
9.	OG- 5.1, 5.2 An		Preconceptional counseling	1

Serial number	Competency Nos.	Integration	Lecture topics & Subtopics	Hours
	75.5			
10.	OG 8.1, 8.2(K), 8.3(K)		Antenatal Care, birth planning, and Obstetric examination	1
11.	OG 8.4, 16.3	AN 75.5	Antenatal screening, genetic counselling and antenatal monitoring of fetal well being	
12.	OG 8.7		Vaccines and medications in pregnancy, Teratology	1
13.	OG 14.1	AN 53.2, 53.3	Fetal skull, pelvis	1
14.	OG 13.1		Labor physiology	1
15.	OG 13.1		Labor mechanism	1
16.	OG 13.1		Management of labor 1 st stage with, partogram, intrapartum monitoring of fetal well being and labor analgesia	1
17.	OG 13.1		Management of labor 2 nd and third stage	1
18.	OG 19.1		Physiological changes in puerperium, Management of puerperium	1
19.	OG 17.1, 17.2	CM10.3	lactation physiology and management	1
20.	OG 9.5		Hyperemesis , vomiting in pregnancy management	1
21.	1.3, 9.1	AN 78.5	Hemorrhage in early pregnancy (abortions)	1
22.	9.3	AN 78.3	Hemorrhage in early pregnancy (ectopic pregnancy)	1
23.	9.4		Hemorrhage in early pregnancy (Molar pregnancy)	1
24.			Recurrent pregnancy loss	1
25.	11.1	AN 80.4	Multifetal pregnancy	1

Third MBBS phase III

Total Teaching hours :

A. Lectures: **25 hours**

Serial number	Competency Nos.	Integration	Topics & Subtopics	Hours
1.	OG 12.1		Hypertensive disorders in pregnancy	1
2.	OG 12.1		Hypertensive disorders in pregnancy	1
3.	OG 13.2		Preterm and PROM	1
4.	OG 13.2		Prolonged pregnancy	1
5.	OG 16.3		Intrauterine growth restriction	1
6.			Disorders of amniotic fluid	1
7.			Abnormalities of placenta . cord	1
8.			Intrauterine fetal death	1
9.	OG 10.1		Antepartum hemorrhage 1 Placenta previa	1
10.	OG 10.1		Antepartum hemorrhage 2 Abruptio+ vasa previa	1
11.	OG 12.8	PA 22.2	Rh negative pregnancy	1
12.	OG 12.2		Anemia (Iron deficiency + Megaloblastic)	1
13.	OG 12.2		Anemia (Others)	1
14.	OG 12.4		Heart disease in pregnancy	1
15.	OG 12.3		Diabetes in pregnancy	1
16.	OG 12.5		Infections in pregnancy UTI,(Incl Malaria etc)	1
17.	OG 12.6		Hepatic disorders in pregnancy	1
18.			Thyroid disorders in pregnancy	1
19.			Respiratory disorders in pregnancy including TB, COVID, Flu	1
20.			Viral infections in pregnancy (Viral)	1
21.	OG 12.7 ,27.3		HIV in Obstetrics and Gynecology	1
22.			Gynecological disorders in pregnancy	1
23.			Surgical disorders in pregnancy	1

Serial number	Competency Nos.	Integration	Topics & Subtopics	Hours
24.		CM 10.4	National Health programs-I safemotherhood, reproductive and child health	1
25.			National Health programs-II Respectful maternity care, Laqshya guidelines	1

Third MBBS phase IV

Total Teaching hours :

A. Lectures: **70 hours**

Serial number	Competency Nos.	Integration	Topics & Subtopics	Hours
1.	OG 14.4	FM 3.21	Malpositions: Occipito posterior presentation + DTA	1
2.	OG 14.4		Face, Brow Mechanism of labor in each	1
3.	OG 14.4		Malpresentations Breech	1
4.	OG 14.4		Unstable lie (Transverse/ oblique)	1
5.		AN 79.5,	Congenital anomalies of fetus	1
6.			Shoulder dystocia	1
7.	OG 14.4		Abnormal labor,classification, diagnosis and management.	1
8.	OG 14.1		Types of pelvis, Contracted pelvis, cephalopelvic disproportion	1
9.	OG 14.2		Obstructed labor, Rupture uterus causes, diagnosis and management .	1
10.	OG 15.1		Instrumental vaginal deliveries+ Ref to destructive operations	1
11.	OG 15.1		Cesarean section	1
12.			Pregnancy with previous cesarean section .	1
13.	OG 16.1		Third stage complications PPH	1
14.	OG 16,2		Third stage complications- inversion of uterus, Injuries to birth canal	1

15.	OG 19.1,17.3		Disorders of puerperium	1
16.	OG 13.1		Induction of labor,	1
17.	OG 13.1		Obstetric analgesia	1
18.	23.1		Physiology of Puberty and Abnormal puberty	1
19.	23.2, 23.3		Delayed puberty, precocious puberty	1
20.			Disorders of sexual development	1
21.	OG 23.1		Menstruation and common complaints (Dymenorrhea+ PMDD)	1
22.	OG 24.1, PA 30.9	PA 30.9	Abnormal uterine Bleeding Endometrial polyps , hyperplasia	1
23.	25.1		Amenorhea: Primary/ secondary	1
24.	OG 32.1	PY 9.11	Menopause & management , premature ovarian failure	1
25.	OG 22.1, 22.2	PA 30.6	Leucorrhoea , cervical erosion, Cervicitis, vaginitis syndromic management	1
26.	OG 27.1,27.4		PID, Chronic pelvic pain ,	1
27.	27.2		Genital tuberculosis	1
28.	OG 30.1, 30.2		PCOS	1
29.	OG 28.1, 28.2	PY 9.12	Infertility-Cervical & Uterine & Tubal Factors	1
30.	OG 28.3	PH 1.40	Infertility- Ovulation Factors, Endocrine Factors, Galactorrhoea, Hirsutism	1
31.	OG 28.4		ART in infertility	1
32.	OG 28.1		Infertility- Male & Unexplained	1
33.	OG 29.1		Benign tumors: Leiomyoma and polyps	1
34.	Pa 30.7. 30.8, OG 26.1	PA 30.7, 30.8	Endometriosis and adenomyosis	1
35.	OG 31.1		Displacements of uterus	1
36.			Urinary incontinence	1
37.	OG 26.2		Genitourinary fistulae	1

38.	26.2		Old healed perineal tear and rectovaginal fistula	1
39.	OG 33.2		Premalignant lesions of the female genital tract , Cervical intraepithelial neoplasia	1
40.	OG 33.3, 33.4		Screening and early detection of women's cancers including breast cancer	1
41.	OG 33.1	PA 30.1	Invasive cervical cancer	1
42.	OG 32.2		Approach to a patient of Post menopausal bleeding,	1
43.	OG 34.1	PA 30.2, PA 30.3	Uterine cancers	1
44.			Benign and malignant Lesions of vulva and vagina	1
45.	OG 34.3	PA 30.5	Gestational trophoblastic neoplasia	1
46.	OG 34,2		Benign ovarian tumors+ including non neoplastic enlargements of ovary	1
47.	OG 34.2	PA 30.4	Malignant ovarian tumors	1
48.		BI 10.2	Principles of Chemotherapy and Radiotherapy in Gynecology	1
49.	21.1		Contraception: male and female barrier methods	1
50.	21.1	PH 1.39	Hormonal contraception	1
51.	21.2		IUDs, PPIUCD program	1
52.	21.1		Female sterilization, postpartum sterilization	1
53.	21.1		Reversal of sterilization male and female	1
54.	21.1		Contraception in special populations	1
55.	OG 20.1		MTP:Act, first trimester procedures	1
56.	OG 20.2		MTP second trimester procedures	1
57.	18.1, 18.3		Neonatal Asphyxia , , convulsions in the newborn	1
58.			Neonatal resuscitation	1
59.			Neonatal Jaundice + Birth injuries	1
60.	OG 8.8		Imaging in Obstetrics	1
61.			Imaging in gynecology	1
62.		PH 1.41	Pharmacotherapeutics in obstetrics	1
63.			Principles of gyn-surgical care- (pre op)	1

64.			Principles of gyn surgical care-(post op)	1
65.	OG 10.2		Critical care in Obstetrics , appropriate use of blood and blood products, their complication and management	1
66.	20.3	FM 3.13-17	PC PNDT act	1
67.		FM 3.13-17	Examination of the sexual assault survivor	1
68.			Domestic Violence act and role of gynecologist Gender	1
69.			Medicolegal issues related to Obstetrics and gynecology	1
70.			Adoption acts	1

Course Content

Subject: Obstetrics and gynecology Gyn skills

Clinical Postings: phase II 4 weeks – (Mon-Fri)
 phase III-1 4 weeks – (Mon-sat)
 phase III-2 12 weeks – (Mon-sat)

Competency Nos.	skill	topic	Suggested Teaching learning method	Hours	Student should complete this skill by end of mentioned phase
Phase II					
OG35.1	Obtain a logical sequence of history, and perform a humane and thorough clinical examination, excluding internal examinations (per rectal and per-vaginal) K/S SH	History taking in obstetrics	Bed side clinics	15 hours(1 week)	II
OG35.5	Determine gestational age, EDD and obstetric formula K/S SH	Informed consent for examination	Mannequin/demonstration on patient		
OG35.7	Obtain informed consent for any examination / procedure S SH				
OG35.2.	Arrive at a logical provisional diagnosis after examination K/S SH				
OG36.2	Organise antenatal clinics K/S KH	Antenatal clinic, (set up of OPD) Routine antenatal investigations, Antenatal care	OPD tour, Demonstration of the set up and how OPD functioning is carried out	3 hrs	II

OG8.6	Assess and counsel a patient in a simulated environment regarding appropriate nutrition in pregnancy K/S SH	Nutritional counselling in pregnancy	Case based learning.	3 hrs	II
OG 35.12	History taking in gynecology, demonstrate P/S, P/V examination		Bed side clinic /OPD demonstration, skill lab for PS PV practice	3 hrs	II
OG8.5	Describe and demonstrate pelvic assessment in a model K/S SH	Maternal pelvis Pelvic assessment Fetal skull	Model,	3 hrs	II
OG8.4	Describe and demonstrate clinical monitoring of maternal and fetal well-being K/S SH	Antepartum monitoring of fetal well being- screening, USG doppler, NST, BPP,	Demonstration	3 hrs	II
OG13.4	Demonstrate the stages of normal labor in a simulated environment / mannequin	Mechanism of labor Management of Labor stage 1 Intrapartum monitoring of fetal well being- Partogram, CTG	Skill lab Models and mannequins Labor room demonstrations	15 hrs	II
OG35.13	Demonstrate the correct technique to perform artificial rupture of membranes in a simulated / supervised environment S SH	ARM			
OG35.14	Demonstrate the correct technique to perform and suture episiotomies in a simulated/ supervised environment S SH	Management of labor stage 2- Episiotomy			

OG35.16	Diagnose and provide emergency management postpartum hemorrhage in a simulated / guided environment K/S SH	Management of labor stage 3 Emergency management of PPH oxytocics			
	Conduction of 2 exams and feedback			15 hours	
			Phase 2 clinical posting Total	60 hours(4 weeks mon -fri)	
Phase III-1					
OG37.6	Observe and assist in the performance of outlet forceps application of vacuum and breech delivery K/S/A/C SH	Forceps and vaccum, breech delivery	Mannequins and models skill lab	3 hrs 3 hrs	III-1
OG36.2	Organise postnatal and well-baby clinics K/S KH	Post natal clinic and well baby clinic. PNC case Normal and abnormal Puerperium,	OPD visit Bed side clinics, case based learning	3 hrs 3 hrs 3 hrs	III-1
OG17.2	Counsel in a simulated environment, care of the breast, importance and the technique of breast feeding S/A/C SH	Breast care, technique of breast feeding	Bed side clinic	3 hrs	III-1
OG35.17	Demonstrate the correct technique of urinary catheterisation in a simulated/ supervised environment S SH	Female urinary catheterizaion	Mannequin/ demonstration, Video demonstration	1 hr	III-1
OG37.4	Observe and assist in the performance of Dilatation & Curettage (D&C) K/S/A/C SH	Dialation and curettage	OT procedure, video	2 hrs	III-1

			demonstration		
OG37.5	Observe and assist in the performance of Endometrial aspiration - endocervical curettage (EA-ECC) K/S/A/C SH	Endometrial and endocervical curettage	OT procedure, video demonstration	3 hrs	III-1
OG36.1	Plan and institute a line of treatment, which is need based, cost effective and appropriate for common conditions taking into consideration (a) Patient (b) Disease (c) Socio-economic status (d) Institution/ Governmental guidelines. K/S SH	Cost effective approach	Case based learning	3 hrs	III-1
OG35.4	Demonstrate interpersonal and communication skills befitting a physician in order to discuss illness and its outcome with patient and family A/C SH	Doctor patient communication	Role play, OPD visit	3 hrs	III-1
OG35.6	Demonstrate ethical behavior in all aspects of medical practice. A/C SH	Ethics in medical practise	Case based learning	3 hrs	III-1
OG35.10	Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details. S SH	Referral note	Case based learning	3 hrs	III-1
OG38.4	Assess the need for and issue proper medical certificates to patients for various purposes K/S/A/C KH	Issue Medical certificates	Case based learning	3 hrs	III-1
		Cover 6 cases mentioned in III-2		18 hrs	
	Conduction of 2 exams and feedback			15 hours	
			Phase III-1 clinical posting Total	72 hours(4 weeks -mon - sat)	
Phase III-2					
	Revision of all topics in phase II			45 hrs	

	Revision of topic 14, 15 from phase III-1			15 hrs	
	Obtain history and on basis of examination findings(internal examination excluded) arrive at a logical provisional diagnosis for type of abortion	Abortions	Case based learning	3 hrs	
OG35.8	Write a complete case record with all necessary details S SH	Case record-.....10 cases over 3 phases, anemia. Drugs used in anemia Preeclampsia, Antihypertensives in prgnancy Eclampsia ,anticonvulsants in pregnancy IUGR,fetal well being tests Multifetal gestation, Breech, prev caesarean, preterm, tocolytics Prolonged labor induction of labor and drugs used in induction	Bed side clinics/ case based learning	3 hrs 3 hrs 3 hrs 3 hrs 3 hrs 3 hrs 6 hrs	III-1, III-2
OG35.16	Diagnose and provide emergency management of antepartum in a simulated / guided environment K/S	placenta previa case	Bed side clinics/ case	6 hrs	III-1/2

	SH	abruptio placentae case Emergency management of APH with placenta previa case	based learning		
OG35.11	Demonstrate the correct use of appropriate universal precautions for self-protection against HIV and hepatitis and counsel patients S SH	HIV in pregnancy Universal precaution, PPTCT, counselling in HIV	Case based learning Demonstration on PPTCT centre visit	3 hrs 3hrs	III-2
OG35.3	Recognize situations, which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment. K/S SH	Identifying a high risk pregnancy	Case based learning	3 hrs	III-2
OG13.5	Observe and assist the conduct of a normal vaginal delivery S P	Normal vaginal delivery-2 cases in log book	Labor room	6 hrs	III-2
OG37.1	Observe and assist in the performance of a Caesarean section K/S/A/C SH	Caesarean section	OT procedure/ video demonstration	3 hrs	III-2
OG35.9	Write a proper discharge summary with all relevant information S SH	Discharge summary..VD, CS, gyne case	Case based learning	3 hrs	III-2
OG35.12	Obtain a PAP smear in a stimulated environment S SH	PAP smear	Cancer detection OPD/ video demonstration	3 hrs	III-2
OG36.3	Demonstrate the correct technique of punch biopsy of uterus in a simulated/ supervised environment S SH	Cervical biopsy			III-2
OG33.3	Describe and demonstrate the screening for cervical cancer in a simulated environment K/S SH	Cervical cancer screening, VIA, VILI, Colposcopy			III-2
OG35.15	Demonstrate the correct technique to insert and remove	Contraception	Mannequin/	6 hrs	III-2

	an IUD in a simulated/ supervised environment S SH	methods, Intrauterine contraceptive device insertion and removal	video demonstration/ demonstration on small group		
OG13.4	counsel on methods of safe abortion.	Counselling for safe abortion		3 hrs	III-2
OG20.2	In a simulated environment administer informed consent to a person wishing to undergo Medical Termination of Pregnancy S/A/C SH	Informed consent for MTP, MTP act, forms to be filled	Demonstration	3 hrs	III-2
OG37.7	Observe and assist in the performance of MTP in the first trimester and evacuation in incomplete abortion K/S/A/C SH	Suction and evacuation(spontaneous abortion , first trimester MTP)	OT procedure		III-2
OG38.3	Lap sterilization K/S/A/C KH	Lap sterilization- 1 case of sterilization	OT procedure/ video demonstration	3 hrs	III-2
OG19.2	Counsel in a simulated environment, contraception and puerperal sterilisation S/A/C SH	Counselling for contraception sterilization. Puerperal sterilization(case based learning)	Case based learning Family welfare clinic	3 hrs	III-2
OG36.2	Organise family welfare clinics K/S KH	Family welfare clinic			III-2
OG 35.12	History taking in gynecology, Reaching a provisional diagnosis	Gynecology case Vaginitis Fibroid uterus Genital prolapse Infertility	Case based learning	3 hrs 3 hrs 3 hrs 3 hrs	II

		Adenexal mass		3 hrs	
		Abnormal uterine bleeding(O)		3 hrs	
		Post menopausal bleeding		3 hrs	
		Cancer cervix		3 hrs	
OG37.2	Observe and assist in the performance of Laparotomy K/S/A/C SH	Exploratory laparotomy	OT procedure/ video demonstration	3 hrs	III-2
OG37.3	Observe and assist in the performance of Hysterectomy – abdominal/vaginal K/S/A/C SH	Vaginal hysterectomy, abdominal hysterectomy	OT procedure/ video demonstration	6 hrs	III-2
OG38.1	Laparoscopy K/S/A/C KH	laparoscopy	OT procedure/ video demonstration	3 hrs	III-2
OG38.2	Hysteroscopy K/S/A/C KH	hysteroscopy	OT procedure/ video demonstration	3 hrs	III-2
		Revision drugs in obstetrics and gynecology		3 hrs	

		Revision instruments		3 hrs	
		Revision contraception specimen		3 hrs	
OG18.2	Demonstrate the steps of neonatal resuscitation in a simulated environment S SH	Neonatal resuscitation			paeds
		Conduction of exams and feedback And miscellaneous		24 hrs	
		Phase III-2 clinical posting Total		216 hrs(12 weeks mon- sat)	

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(Based on Indian Gazette on CBME and Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 3; page nos. 102-129)

Self directed learning(SDL)

Medical council directs to dedicate 5 hrs in third phase part 1 and 15 hrs in third phase part2 for self directed learning in OBGY.

University leaves it to the discretion of institute to plan the SDL using various methods in which students should be briefed about topic, guided towards learning resources, curiosity, innovation, motivation, competitiveness should be inculcated.

Life long learning capacity should be built.

The record of these SDL sessions should be included in Logbook as reflections of the session

Small group teaching/tutorials

Medical council directs to dedicate 35 hrs in third phase part 1 and 125 hrs in third phase part2 for small group teaching/tutorials/ integrated teaching/ seminars in OBGY.

Suggested topics:

Dummy Pelvis 4
Obst specimens 4
Gynec specimens 4
X-rays & HSG 2
NST/ CTG 2
Obst Instruments 3
Gynec Instruments 4
Forceps 1
Vacuum 1
Partograph 2
NST, CTG 2
Drugs in obstetrics 3
Gynec drug 2
Contraception 4
Sterilization 2
Minor procedures 2

Apart from this SGT, can comprise of MCQ solving, group seminars, poster making, skit making,

Guidelines for Electives:

Medical council directs to dedicate 2 months of elective posting between third phase part 1 and part 2

1. Each college can put up department wise lists of electives depending on facilities and resources available.
2. Electives modules should be designed well in advance with mention on specific learning objectives, daily work record, report and assessment of the same.
3. Allotment of electives will be merit based on combined marks of previous 3 yrs.
4. Medical college can have MOU with other hospitals or centers for elective courses to student.
5. Student can opt for doing elective in any other hospital, city or abroad, provided facility of subject of interest is not available in his/her college, with prior permission of institute.
6. If opting for elective abroad then one month can be contact program and another month will be online program as for one month of elective student is supposed to attend clinical posting also.
7. Only 10% students will be allowed per subject for outside elective.
8. Student will have to apply to centre where he desires to do elective well in advance, application must go through concerned department through institute. The centre where student is doing elective must be government or semi government or teaching institute or center affiliated by university or National association of that subject of country.
9. Responsibility of applying, getting admission, expenses incurred for tuition fees and travel and stay will have to take care of by student.
10. At the end of electives Student should produce certificate of completing elective term from head of the institution or centre.

AETCOM

Medical council directs to dedicate 28 hrs + 16 hrs SDL in third phase part 2 for AETCOM. Out of these each subject gets 7 hours + 4 hrs SDL

As decided by university OBGY department will cover module 4.2 and 4.7 out of 9 modules mentioned in AETCOM booklet for phase III part 2.

Internal Assessment

Obst. & Gynaec.

Applicable w.e.f August 2019 onwards examination for batches admitted from June 2019 onwards

Phase	IA – 1 -Exam			IA – 2 -Exam		
	Theory (January)	Practical EOP	Total Marks	Theory (May)	Practical	Total Marks
Second MBBS	50	50	100	50	50	100

Phase	IA – 3 Exam			IA – 4 - Exam		
	Theory (January)	Practical EOP	Total Marks	Theory (April)	Practical	Total Marks
Third MBBS Part I	50	50	100	50	50	100

Phase	IA – 5 - Exam			Prelim Examination		
	Theory (May)	Practical EOP (after 8 weeks posting)	Total Marks	Theory (November)	Practical	Total Marks
Third MBBS Part I	100	100	200	100 x 2 papers = 200	200	400

**Internal Assessment Practical Examinations
II MBBS**

Internal Assessment - 1

OBGY

Subject: OBGY Practical (IA – 1)					
Spotting	OSCE 1	OSCE 2	Viva	Journal & log book	Practical Total
10	10	10	10	10	50

OSCE Stations to include Signs of General examinations, Local examinations, Psychomotor skills and Communication skills.

Subject: OBGY Practical (IA – 2)					
Long Case					
History	Examination	Investigation	Treatment	AETCOM	Practical Total
10	10	10	10	10	50

Subject: OBGY Practical (IA – 3)					
Spotting	OSCE 1	OSCE 2	Viva	Journal & log book	Practical Total
10	10	10	10	10	50

OSCE Stations to include Signs of General examinations, Local examinations, Psychomotor skills and Communication skills.

Subject: OBGY Practical (IA – 4)					
Long Case					
History	Examination	Investigation	Treatment	AETCOM	Practical Total
10	10	10	10	10	50

Subject: OBGY Practical (IA –5)				
Long Case (Obstetrics)	Gynaecology Case	Family Planning	Journal & log book	Practical Total
50	20	20	10	100

Subject: OBGY Practical (Prelim)								
ANC Case	Gynaecology Case	PNC / Post – Op Case	Family Planning Viva	Obstetrics Table Viva	Gynaec Table Viva	Spotting (2 x 10 spots)	Journal & log book	Practical Total
50	25	20	25	20	20	20	20	200

Subject: OBGY Practical (MUHS Final)							
ANC Case	Gynaecology Case (Diagnosis and discussion)	PNC / Post – Op Case (Diagnosis and discussion)	Family Planning Viva	Obstetrics Table Viva	Gynaec Table Viva	Spotting (4 x 10 spots)	Practical Total
50 *	25	20	25	20	20	40	200

* 10 marks each for history, examination, AETCOM, investigation & treatment.

Assessment in CBME is ONGOING PROCESS,

No Preparatory leave is permitted.

1. There shall be 6 internal assessment examinations in OBGY.
2. The suggested pattern of question paper for internal assessment, except prelim examination is attached at the end. Pattern of the prelims examinations should be similar to the University examinations.
3. Internal assessment marks for theory and practical will be converted to out of 50 (theory) +50 (practical). Internal assessment marks, after conversion, should be submitted to university within the stipulated time as per directives from the University. **Conversion Formula for calculation of marks in internal assessment examinations.**

	Theory	Practical
Phase II	100	100
Phase III/I	100	100
Phase III/II	300	300
Total	500	500
Conversion out of	50	50
Conversion formula	Total marks in 6 IA theory examinations /10	Total marks in 6 IA Practical examinations /10
Eligibility criteria after conversion	20	20
	Combined theory + Practical = 50	

4. While preparing Final Marks of Internal Assessment, the rounding-off marks shall done as illustrated in following table.

Total Internal Assessment Marks	Final rounded marks
33.01 to 33.49	33
33.50 to 33.99	34

5. Students must secure at least 50% marks of the total marks (combined in theory and practical / clinical; not less than 40 % marks in theory and practical separately) assigned for internal assessment in order to be eligible for appearing at the final University examination of that subject.
6. Internal assessment marks will not to be added to marks of the University examinations and will be shown separately in mark list.

7. Remedial measures

A. Remedial measures for non-eligible students

- i) At the end of each internal assessment examination, students securing less than 50% marks shall be identified. Such students should be counseled at the earliest and periodically.
- ii) Extra classes for such students may be arranged. If majority of the students found to be weak in a particular area then extra classes must be scheduled for all such students. Even after these measures, if a student is failed to secure 50% marks combined in theory and practical (40% separately in theory and practical) after prelim examination, the student shall not be eligible for final examination.
- iii) Non eligible candidates are offered to reappear for repeat internal assessment examination/s, which must be conducted 2 months before next University examination. The pattern for this repeat internal assessment examination shall be similar to the final University examination. Only the marks in this examination shall be considered for deciding the eligibility criteria. Following conversion formula shall be used for converting the marks.

	Theory	Practical
Remedial examination (as per final examination pattern)	200	200
Conversion out of	50	50
Conversion formula	Marks in remedial theory examinations /4	Marks in remedial Practical examinations /4
Eligibility criteria after conversion	20	20
	Combined theory + Practical = 50	

B. Remedial measures for absent students:

- i. If any of the students is absent for any of the 6 IA examinations due to any reasons, following measures shall be taken.
- ii. The student is asked to apply to the academic committee of the college for reexamination, through HOD, to ascertain the genuineness of the reason for absentee.
- iii. If permitted by academic committee, an additional examination for such students is to be conducted after prelims examination. Marks for such additional examination shall be equal to the missed examination.
- iv. Even if a student has missed more than one IA examination, he/she can appear for only one additional IA examination. In such scenario, eligibility should be determined by marks obtained in internal assessment examinations for which the candidate has appeared, without changing the denominator.

**Format for Internal Assessment
Theory Examination
IA – 1, IA – 2, IA – 3 & IA - 4**

Question No.	Type of Question	No. of Questions (no. To be solved)	Max. Marks
1.	MCQ	10	10 (1 marks each)
2.	SAQ	6 (Any 5 out of 6)	25 (5 marks for each question x 5 questions)
3.	LAQ	1 (Compulsory)	15
		Total	50

**Format for Internal Assessment
Theory Examination IA - 5**

Question No.	Section	Type of Question	No. of Questions	Max. Marks
1.	A	MCQ	20	20 (1 marks each)
2.	B	LAQ	4 (Any 3 out of 4)	45 (15 marks for each question x 3 LAQ)
3.	C	SAQ	7 (Any 6 out of 7)	30 (5 marks for each question x 6 SAQ)
4.	C	SAQ	1 question from AETCOM	5
			Total	100

Format for MUHS Final Theory Examination Paper I & II

Question No.	Section	Type of Question	No. of Questions	Max. Marks
1.	A	MCQ	20	20 (1 marks each)
2.	B	LAQ	4 (Any 3 out of 4)	45 (15 marks for each question x 3 LAQ)
3.	C	SAQ	7 (Any 6 out of 7)	30 (5 marks for each question x 6 SAQ)
4.	C	SAQ	1 question from AETCOM	5
			Total	100

**Maharashtra University of Health
Sciences, Nashik**

OBSTETRICS AND GYNECOLOGY

Journal

Name of the College

Admission Year : _____

CERTIFICATE

This is to certify that,

Mr/Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this journal as per the guidelines prescribed by Medical Council of India, for MBBS Competency Based Curriculum in the subject of Obstetrics and Gynaecology.

Date: ___/___/_____

Place: _____

Teacher -in-Charge

Professor and Head

Instructions

The journal is a record of the cases seen by the designated student during her/his clinical postings in OBGY and during the labour room posting.

The student is expected to write down the details of:

1. Two normal low risk pregnant patients.
2. Five patients whose normal vaginal delivery the student has witnessed/assisted/conducted.
3. Two instrumental deliveries.
4. Three caeserean sections.
5. Pregnancies with complications.(12 Cases)
6. Three postnatal cases.
7. Eight gynaecology cases
8. Four family planning cases

Index

S. no	Topic	Page number	
	Normal pregnancy cases		
	Index of Antenatal Cases		
	Antenatal case record		
	Index of Labour cases		
	Labour case record		
	Index of postnatal cases		
	Postnatal case record		
	Index of Gynaecology cases		
	Gynaecology case record		
	Index of Family planning cases		
	Family planning case record		

Record of Attendance

Phase	Duration of posting	Posting from date	Posting to date	Attended days/out of days	Signature of Unit In charge
Phase II	4 weeks				
Phase III part 1	4 weeks				
Phase III part 2	12 weeks				

Teacher -in-Charge

Professor and Head

Department of Obstetrics and Gynaecology

Antenatal Cases
(Seen and recorded)

Serial number	Case	Page number
1.	Anemia in pregnancy	
2.	Preeclampsia	
3.	Eclampsia	
4.	IUGR	
5.	Multifetal gestation	
6.	Breech	
7.	Previous caesarean	
8.	Preterm	
9.	Placenta praevia	
10.	Abruptio placentae	
11.	Heart disease in pregnancy	
12.	Diabetes in pregnancy	

Antenatal case-1(2+12 similar repetitions)

Name: Age:

Address: Occupation:

Socioeconomic status: Religion: Caste:

Education:

Booked/ registered (number of antenatal visits in pregnancy):

H/O Amenorrhoea

Chief complaints:

History of present pregnancy:

Menstrual history:

PMC:

LMP: EDD:

Obstetric history:

Past medical history:

Family history:

Diet history:

Personal history:

General examination:

Built: Height:

Weight: Nourishment:

General condition:

Temperature:

Pulse:

Respiration:

BP:

Pallor:

Icterus, cyanosis, glossitis, angular stomatitis, JVP, Lymphadenopathy, clubbing, goitre

Breasts:

Systemic examination:

CVS

RS

CNS

Obstetric examination:

Inspection:

Palpation: Fundal height.....weeks

Symphysiofundal height:.....cms. Abdominal girth:.....cms

Leopold's 1st manoeuvre

Leopold's 2nd manoeuvre

Leopold's 3rd manoeuvre

Leopold's 4th manoeuvre

Auscultation

Provisional Diagnosis:

Investigations:

Routine: ANC Profile

Blood group, Rh Typing		Hb Platlet	
Blood sugar		HIV	
HBs antigen		VDRL	
Sickling/ Hb electrophoresis		Serum TSH	
Urine albumin Urine sugar		Urine culture sensivity	

USG:

Special investigations:

Final diagnosis:

Management:

Signature of teacher

Date:

Labour Cases
(Attended and recorded)

Serial number	Case	Page numbers
1.	Normal Delivery: 5 cases	
2.	Instrumental delivery; 2 cases	
3.	Caesarean section: 3 cases	

Labour and delivery case-1(10 similar pages)

Name:

Age:

Address:

Occupation:

Socioeconomic status:

Religion:

Caste:

Education:

Booked/ registered (number of antenatal visits in pregnancy):

H/O Amenorrhoea:

Chief complaints:

History of present pregnancy:

Menstrual history:

PMC:

LMP:

EDD:

Obstetric history :

Past medical history:

Family history:

Diet history:

Personal history:

General examination:

Built:

Height:

Weight:

Nourishment:

General condition:

Temperature:

Pulse:

Respiration:

BP:

Pallor, icterus, cyanosis, glossitis, angular stomatitis, thyroid, JVP, Lymphadenopathy, clubbing

Breasts:

Systemic examination:

CVS

RS

CNS

Obstetric examination:

Inspection:

Palpation:

Fundal height

Symphysio fundal height

Abdominal girth

Leopold's 1st manoeuvre

Leopold's 2nd manoeuvre

Leopold's 3rd manoeuvre

Leopold's 4th manoeuvre

Auscultation

Provisional Diagnosis:

Investigations:

Routine:

Blood group, Rh Typing		Hb Platelets	
PGBS		HIV	
HBs antigen		VDRL	
Sickling/ Hb electrophoresis		Serum TSH	
Urine albumin Urine sugar		Urine culture sensitivity	

USG:

Final diagnosis: Labour :Induced/Spontaneous/Active management

Delivery details: Normal/Low Forceps/Ventouse

Presentation: Vertex/Face/Breech

Episiotomy: Yes/No

AMTSL; Yes/No: Details if yes:

Placental delivery: controlled cord traction/Manual removal of placenta

Delivery/Operations Notes:

Indication for Intervention in case of Instrumental delivery or Caeserean section:

Name of Obstetrician:

Assistant:

Anaesthesia

Anaesthesiologist:

PPH: Yes/No

Placental weight:

Placental abnormality:

Cord length

Baby notes:

Date of birth

Sex of baby :

Birth weight :

Full term/ Preterm/Postterm

Apgar score: 1 min

5 min

Congenital malformation

Postnatal period follow up including breast feeding:

Condition at the time of discharge:

Involution of uterus

Perineum

Lochia:

Treatment received:

Mother

Baby

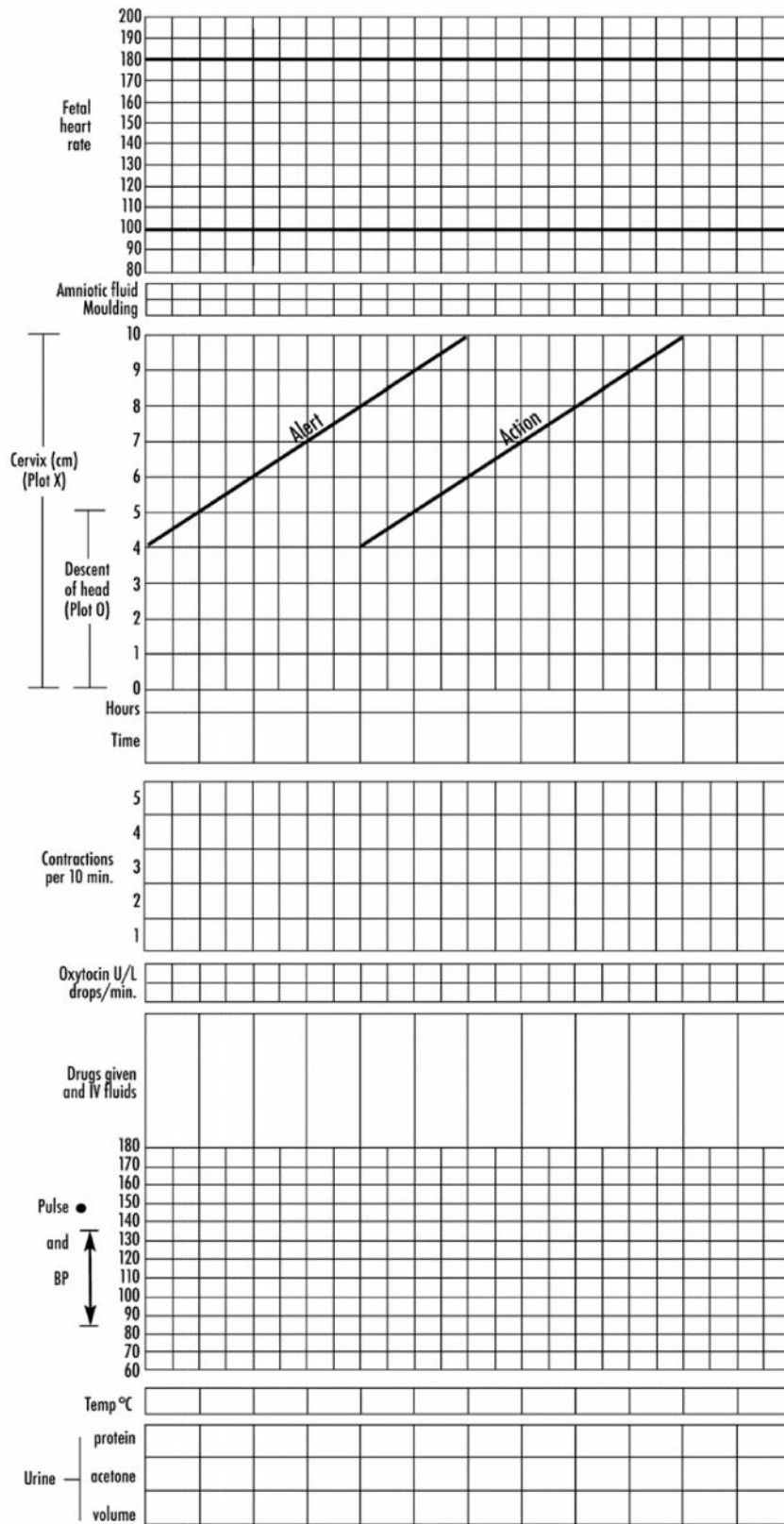
Treatment advised at discharge:

Contraception advised

Signature of teacher:

Date:

Name	Gravida	Para	Hospital number
Date of admission	Time of admission	Ruptured membranes	hours



Postnatal Cases

(Seen and recorded)

Serial number	Case	Page number
1.	Post vaginal delivery 1 case	
2.	Post caesarean section 1 case	
3.	Abnormal puerperium 1 case	

Postnatal case-1(3 similar repetitions)

Name: Age:
Address: Occupation:
Socioeconomic status: Religion: Caste:
Education:
Booked/ registered (number of antenatal visits in pregnancy):
Date and time of delivery:
Gestational age at delivery:

Intranatal history:

Relevant complaints at time of admission:

Examination findings at time of admission:

Duration of labour:

PPH: Yes/No

Any abnormal findings:

Type of delivery:

If caesarean or instrumental delivery: Indication

Condition of baby at birth:

Time of birth, sex of baby, birth weight:

Baby with mother /in NICU:

Postnatal history:

Lochia:

Pain:

Bowel/bladder:

Breast feeding or any problem:

Antenatal history:

Obstetric history :

Past medical history:

Family history:

Diet history:

Personal history:

General examination:

Built:

Height:

Weight:

Nourishment:

General condition:

Temperature:

Pulse:

Respiration:

BP:

Pallor, icterus, cyanosis, glossitis, angular stomatitis, JVP, Lymphadenopathy, clubbing, goitre

Breasts:

Systemic examination:

CVS

RS

CNS

Abdominal examination:

Inspection:

Palpation:

Fundal height:

Involution of uterus:

Bowel sounds in case of caeser:

Abdominal wound/Perineum:

Bleeding PV/Lochia:

Urine Output:

Provisional Diagnosis:

Investigations:

Routine:

Blood group, Rh Typing		Hb	
BS		HIV	
HBs antigen		VDRL	
Sickling/ Hb electrophoresis		Serum TSH	
Urine albumin		Urine culture sensitivity	

Special investigations:

Treatment advised/given to

Mother :

Baby:

Treatment advised at discharge:

Contraception advised:

Signature of teacher:

Date:

Gynaecology Cases
(Seen and recorded)

Serial number	Case	Page number
1.	Vaginitis	
2.	Fibroid uterus	
3.	Genital prolapse	
4.	Infertility	
5.	Adenexal mass/Ovarian mass	
6.	Abnormal uterine bleeding(O)	
7.	Post menopausal bleeding	
8.	Cancer cervix	

Gynaecology case-1(8 similar repetitions)

Name:

Age:

Address:

Occupation:

Socioeconomic status:

Religion:

Caste:

Education:

Chief complaints:

History of present illness:

Menstrual history:

Obstetric history:

Past medical history:

Family history:

Diet history:

Personal history:

General examination:

Built:

Height:

Weight:

Nourishment:

General condition:

Temperature:

Pulse:

Respiration:

BP:

Pallor, icterus, cyanosis, glossitis, angular stomatitis, goitre, JVP, Lymphadenopathy, clubbing

Breasts:

Systemic examination:

CVS

RS

CNS

Per Abdomen examination:

Per Speculum findings:

Per vaginum findings:

Provisional Diagnosis:

Investigations as indicated

Blood group, Rh Typing		CBC Hb TLC DLC Platelet	
BS- F, PP		LFT	
KFT		Serum TSH	
Sickling/ Hb electrophoresis		ECG	
Urine albumin		Urine culture sensitivity	
ECG			
Pap smear			
USG			
Colposcopy			
Cervical biopsy			
Endometrial, endocervical			

biopsy	
CT/MRI	

Any other investigations:

Final diagnosis:

Operation notes:

Treatment received

Postoperative period

Histopathology:

Condition on discharge:

Treatment advised:

Signature of teacher:

Date

Family planning Cases

(Seen and recorded)

Serial number	Case	Page number
1.	Tubectomy-Minilap or laparoscopic	
2.	MTP first trimester (suction and evacuation)	
3.	MTP second trimester	
4.	CuT insertion	

Family planning case-1(4 similar repetitions)

Name:

Age:

Address:

Occupation:

Socioeconomic status:

Religion:

Caste:

Education:

Menstrual history:

Obstetric history :

Previous Contraceptive history:

Past medical history:

Family history:

Personal history:

General examination:

Systemic examination:

Per Abdomen examination:

Per Speculum findings:

Per vaginum findings:

Investigations as indicated

Blood group, Rh Typing		Hb	
BS- F, PP		Urine albumin	
USG			

Any other investigations:

Operation notes:

Treatment received

Postoperative period

Condition on discharge:

Advice on discharge;

Signature of teacher:

Date:

Maharashtra University of Health Sciences Nashik

OBSTETRICS AND GYNECOLOGY LOGBOOK - MBBS AS PER COMPETENCY BASED CURRICULUM

Name of the College

Admission Year : _____

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BIODATA OF THE CANDIDATE

Name of the student:

Name of the course: MBBS

Date of birth:

Father's / Guardian's name:

Mother's name:

Blood group:

Permanent Address:

Temporary Address:

.....

.....

.....

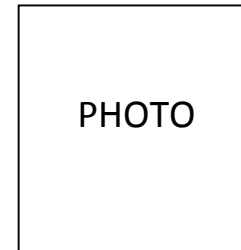
.....

Student's contact no:

Father's/ Guardian's contact no:

Student's Email id:

Father's/ Guardian's Email id:



Candidates Signature:

Date:

LOG BOOK CERTIFICATE

This is to certify that,

Mr/Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for MBBS Competency Based Curriculum in the subject of Obstetrics and Gynecology.

Date: ___/___/_____

Place: _____

Teacher -in-Charge

Professor and Head

Department of Obstetrics and Gynecology

Instructions

The undergraduate medical education program is designed with a goal to create an “Indian Medical Graduate” (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a physician of first contact of the community while being globally relevant.

This Logbook gives an opportunity to achieve goals pertaining to skill learning in Obstetrics and Gynecology, so that IMG becomes capable to provide respectful maternity and Gynecology care to the society.

1) Logbook is a record of the academic / co-curricular activities of the designated student, who would be responsible for maintaining his/her logbook.

2) The student is responsible for getting the entries in the logbook verified by the Faculty in charge regularly. Certifications for competencies to be taken on same day.

3) Refer to university course content for skill to ensure which competencies to be covered in which phase

4) Entries in the logbook will reflect the activities undertaken in the department & have to be scrutinized by the, teacher in charge of session, Head of the concerned unit and department.

5) The logbook is a record of various activities by the student like:

- Overall participation & performance
- Attendance
- Participation in sessions
- Record of completion of pre-determined activities.
- Acquisition of selected competencies

6) The logbook is the record of work done by the candidate in that department / specialty and should be verified by the college before submitting the application of the students for the University examination.

Record of Attendance

Phase	Duration of posting	Posting from date	Posting to date	Attended days/out of days	Signature of Unit In charge
Phase II	4 weeks				
Phase III	4 weeks				
Phase IV	12 weeks				

.....

Signature of Head of the Department

Records of Internal Assessments

-	Exam No.	Date	Theory	Date	Practical including Viva	Signature of teacher
1	Phase II-1 st exam		/50		/50	
2	Phase II-2 nd exam		/50		/50	
3	Phase III-1 st exam		/50		/50	
4	Phase III-2 nd exam		/50		/50	
5	Phase IV-1 st exam		/100		/100	
6	Prelims		/200		/200	
	Remedial if any					
	Total		/500		/500	
	Conversion= Total/5		/100		/100	

.....
Signature of Head of the Department

CLINICAL SKILLS : LIST OF COMPETENCIES

Clinical skills can be assessed by case presentation, case-based discussion, objective structured clinical assessment the checklist, MiniCex, as per the institutional preference.

Competency # addressed	Name of Activity
OG5.1	Describe, discuss and identify pre-existing medical disorders and discuss their management; discuss evidence-based intrapartum care
OG5.2	Determine maternal high risk factors and verify immunization status
OG6.1	Describe, discuss and demonstrate the clinical features of pregnancy, derive and discuss its differential diagnosis, elaborate the principles underlying and interpret pregnancy tests.
OG8.2	Elicit, document and present history in a OBGY patient including obstetric and menstrual history, last menstrual period, comorbid conditions and past medical history
OG8.3	Describe, demonstrate, document and perform a general, systemic and abdominal examination including obstetrical examinations and clinical monitoring of maternal and fetal well-being.
OG8.4	Describe and demonstrate clinical monitoring of maternal and fetal well-being

OG8.5	Describe and demonstrate pelvic assessment in a model
OG35.1	Obtain a logical sequence of history, and perform a humane and thorough clinical examination, excluding internal examinations (perrectal and per-vaginal)
OG35.2	Arrive at a logical provisional diagnosis after examination.
OG35.3	Recognize situations, which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.
OG35.5	Determine gestational age, EDD and obstetric formula
OG36.1	Plan and institute a line of treatment, which is need based, cost effective and appropriate for common conditions taking into consideration (a) Patient (b) Disease (c) Socio-economic status (d) Institution/ Governmental guidelines.
OG36.2	Organise antenatal, postnatal, well-baby and family welfare clinics
OG38.4	Assess the need for and issue proper medical certificates to patients for various purposes

PSYCHOMOTOR / PERFORMANCE SKILLS:

Skills can be assessed by objective structured clinical assessment with checklist, Global Rating Scale, Simulated patients as per the institutional preference.

Colleges are instructed prepare modules for skill training as per NMC guidelines.

Module 5 Skill Training.

I – independent certification

D - demonstration

LIST OF COMPETENCIES

Competency # addressed	Name of Activity
OG9.2	Describe the steps and observe/ assist in the performance of an MTP evacuation

OG13.3	Observe/ assist in the performance of an artificial rupture of membranes
OG13.4	Demonstrate the stages of normal labor in a simulated environment / mannequin
OG13.5	Observe and assist the conduct of a normal vaginal delivery
OG15.2	Observe and assist in the performance of an episiotomy and demonstrate the correct suturing technique of an episiotomy in a simulated environment. Observe/Assist in operative obstetrics cases – including - CS, Forceps, vacuum extraction, and breech delivery
OG18.2	Demonstrate the steps of neonatal resuscitation in a simulated environment
OG19.3	Observe/ assist in the performance of tubal ligation
OG19.4	Enumerate the indications for, describe the steps in and insert and remove an intrauterine device in a simulated environment
OG33.3	Describe and demonstrate the screening for cervical cancer in a simulated environment
OG34.4	Operative Gynaecology : Understand and describe the technique and complications: Dilatation & Curettage (D&C); EA-ECC, cervical biopsy; abdominal hysterectomy; myomectomy; surgery for ovarian tumours; staging laparotomy; vaginal hysterectomy including pelvic floor repair; Fothergill's operation, Laparoscopy; hysteroscopy; management of postoperative complications
OG35.7	Obtain informed consent for any examination / procedure
OG35.8	Write a complete case record with all necessary details

OG35.9	Write a proper discharge summary with all relevant information
OG35.10.	Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details
OG35.11	Demonstrate the correct use of appropriate universal precautions for self-protection against HIV and hepatitis
OG35.12	Obtain a PAP smear in a stimulated environment
OG35.13	Demonstrate the correct technique to perform artificial rupture of membranes in a simulated / supervised environment
OG35.14	Demonstrate the correct technique to perform and suture episiotomies in a simulated/ supervised environment
OG35.15	Demonstrate the correct technique to insert and remove an IUD in a simulated/ supervised environment
OG35.16	Diagnose and provide emergency management of antepartum and postpartum hemorrhage in a simulated / guided environment
OG35.17	Demonstrate the correct technique of urinary catheterisation in a simulated/ supervised environment
OG36.3	Demonstrate the correct technique of punch biopsy of uterus in a simulated/ supervised environment
OG37.1	Observe and assist in the performance of a Caesarean section
OG37.2	Observe and assist in the performance of Laparotomy
OG37.3	Observe and assist in the performance of Hysterectomy – abdominal/vaginal

OG37.4	Observe and assist in the performance of Dilatation & Curettage (D&C)
OG37.5	Observe and assist in the performance of Endometrial aspiration - endocervical curettage (EA-ECC)
OG37.6	Observe and assist in the performance of outlet forceps application of vacuum and breech delivery
OG37.7	Observe and assist in the performance of MTP in the first trimester and evacuation in incomplete abortion
OG38.1	Laparoscopy :observe
OG38.2	Hysteroscopy ;observe
OG38.3	Lap sterilization: observe

AETCOM SKILLS

Counselling for Investigation, Treatment, Prognosis, Blood donation, Organ Donation, Breaking Bad news. All types of consent. Medicolegal aspects and Ethics, Empathy and professionalism as per the Phase of the MBBS. Include cases of Allied branches also.

Competency to be assessed during Clinical postings and /or small group discussions.

LIST OF COMPETENCIES

Competency addressed	Name of Activity
OG8.6	Assess and counsel a patient in a simulated environment regarding appropriate nutrition in pregnancy
OG13.4	Counsel on methods of safe abortion.
OG17.2	Counsel in a simulated environment, care of the breast, importance and the technique of breast feeding
OG19.2	Counsel in a simulated environment, contraception and puerperal sterilisation

OG20.2	In a simulated environment administer informed consent to a person wishing to undergo Medical Termination of Pregnancy
OG35.4	Demonstrate interpersonal and communication skills befitting a physician in order to discuss illness and its outcome with patient and family
OG35.6	Demonstrate ethical behavior in all aspects of medical practice.
OG35.11	HIV and hepatitis- counselling patients

Log book record of clinical skills

Sr. no.	Phase	Competency # addressed	Name of Activity	Site Ward, skill lab, opd, casualty	Date completed	Attempt at activity First (F) Repeat (R) Remedial (Re)	Rating	Decision of faculty	Initial of faculty	Feedback received Initial of Learner	Method of assessment and Score
							Below (B)expectations Meets (M)expectations Exceeds (E) expectation s OR Numerical Score	Completed (C) Repeat (R) Remedial (Re)			
1.		OG5.1									
2.		OG5.2									
3.		OG6.1									
4.		OG8.2									
5.		OG8.3									
6.		OG8.4									
7.		OG8.5									
8.		OG35.1									
9.		OG35.2									
10.		OG35.3									
11.		OG35.5									
12.		OG36.1									

13.		OG36.2								
14.		OG38.4								

Psychomotor skills

Sr. no.	Phase	Competency # addressed	Name of Activity	Site Ward, skill lab, opd , casualty ,	Date completed	Attempt at activity First (F) Repeat (R) Remedial (Re)	Rating Below (B)expectations Meets (M)expectations Exceeds (E) expectation s OR Numerical Score	Decision of faculty Completed (C) Repeat (R) Remedial (Re)	Initial of faculty	Feedback received Initial of Learner	Method of assessment and Score
1.		OG9.2									
2.		OG13.3									
3.		OG13.4									
4.		OG13.5									
5.		OG15.2									
6.		OG18.2									
7.		OG19.3									
8.		OG19.4									
9.		OG33.3									

10.	OG34.4									
11.	OG35.7									
12.	OG35.8									
13.	OG35.9									
14.	OG35.10.									
15.	OG35.11									
16.	OG35.12									
17.	OG35.13									
18.	OG35.14									
19.	OG35.15									
20.	OG35.16									
21.	OG35.17									
22.	OG36.3									
23.	OG37.1									
24.	OG37.2									
25.	OG37.3									
26.	OG37.4									
27.	OG37.5									
28.	OG37.6									
29.	OG37.7									

30.		OG38.1								
31.		OG38.2								
32.		OG38.3								

AetCom skills

Sr. no.	Phase	Competency # addressed	Name of Activity	Site Ward, skill lab, opd , casualty	Date completed	Attempt at activity First (F) Repeat (R) Remedial (Re)	Rating Below (B)expectations Meets (M)expectations Exceeds (E) expectation s OR Numerical Score	Decision of faculty Completed (C) Repeat (R) Remedial (Re)	Initial of faculty	Feedback received Initial of Learner	Method of assessment and Score
1.		OG8.6									
2.		OG13.4									
3.		OG17.2									
4.		OG19.2									
5.		OG20.2									
6.		OG35.4									

7.		OG35.6									
8.		OG35.11									

REFLECTION ON AETCOM MODULE For PHASE IV

Module 4.2- Case studies in medico-legal and ethical situations

Competency addressed	Level
Identify and discuss medico-legal, socio-economic and ethical issues as it pertains to abortion/ Medical Termination of pregnancy and reproductive rights	KH

Reflection (minimum 200 words) -1

Date:

Signature of Teacher-in-charge

REFLECTION ON AETCOM MODULE

Module 4.9- Medical Negligence

Competency addressed	Level
1. Identify, discuss and defend medico-legal, socio-cultural, professional and ethical issues pertaining to medical negligence	KH
2. Identify, discuss and defend medico-legal, socio-cultural, professional and ethical issues pertaining to malpractice	KH

Reflection (minimum 200 words)-2

Date:



Signature of Teacher-in-charge

PAP smear obtaining and filling form for same.
(2 cases so 2 similar repetitions)

Signature of teacher:

Date:

Discharge summary(as per institutional format)

1. Vaginal delivery

Signature of teacher:Date:

Discharge summary

2. Caesarean section

Signature of teacher:

Date:

Discharge summary

3. Hysterectomy abdominal

Signature of teacher:

Date:

Discharge summary
4. Hysterectomy vaginal

Signature of teacher:

Date:

Discharge summary

5. MTP

Signature of teacher:

Date:

Discharge summary

6. Tubal ligation

Signature of teacher:

Date

Medical certificate(for obstetric or gynaecological condition)

Signature of teacher:

Date:

Self-Directed Learning, Seminars, Tutorials, Projects, Quizzes, extracurricular activities

Sr. No.	Self- directed learning (Seminars, Tutorials, Projects, Quizzes, Extracurricular activities)	Date	Phase	Signature of Teacher

Reflection (minimum 200 words) – 1

Date

:

TOPIC:

**Reflection
Date :**

(minimum

200

words)

-

2

TOPIC:

ANNEXURE 1:

RECORDING FORM FOR MINI – CEX

EVALUATOR :

DATE :

STUDENT :

YEAR :

PATIENT DIAGNOSIS :

SETTINGS :

AMBULATORY
IN PATIENT
ED

NEW
FOLLOW UP

COMPLEXITY : LOW
MODERATE
HIGH

PATIENT AGE

OTHER :

PATIENT SEX

FOCUS : DATA GATHERING / DIAGNOSIS / THERAPY / COUNSELLING

1. MEDICAL INTERVIEWING SKILLS (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

2. PHYSICAL INTERVIEWING SKILLS (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

3. HUMANISTIC QUALITIES / PROFESSIONALISM (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

4. CLINICAL JUDGEMENT (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

5. COUNSELLING SKILLS (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

6. ORGANIZATION / EFFICIENCY (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

7. OVERALL CLINICAL COMPETENCE (OBSERVED / NOT OBSERVED)

1 2 3 / 4 5 6 / 7 8 9

MINI CEX TIME : OBSERVING : _____ MINS

PROVIDING FEEDBACK _____ MINS

UNSATISFACTORY 1,2,3

SATISFACTORY 4, 5, 6

SUPERIOR 7, 8, 9

EVALUATOR SATISFACTION WITH MINI CEX

LOW 1 2 3 4 4 5 6 7 8 9 HIGH

RESIDENT SATISFACTION WITH MINI CEX

LOW 1 2 3 4 4 5 6 7 8 9 HIGH

COMMENTS :

STUDENT SIGNATURE

EVALUATOR SIGNATURE

ANNEXURE 2:

AetCom skills can be assessed by use of Kalamazoo consensus.

Criteria
Builds relationship
Opens the discussion
Gathers information
Understands the patient's perspective
Shares information
Manages flow
Overall rating
Signature of teacher

Rating 3 - Poor, 4 -6

Satisfactory, 6 -10 Superior

Communication skills rating scale adapted from Kalamazoo consensus statement.