

Jinnah Medical & Dental College

OBSTRETICS & GYNAECOLOGY

Study Guide



MBBS 2021

Where ever the art of medicine is loved, there is also a love of humanity.

HIPPOCRATES

Team Members of Obstetrics/ Gynecology 2021

Name	Committee	Department
Dr. Asha Mahesh Professor	Member	Gynecology & Obstetrics
Associate Professor	Member	
Assistant Professor	Member	Gynecology & Obstetrics
Dr. Zeelaf Shahid Associate Director	Member	Medical Education

Introduction

A very warm welcome to medical students in the Gynecology & Obstetrics posting. Obstetrics and Gynecology are medical specialties that focus on two different aspects of the female reproductive system. The diseases of Obstetrics and Gynecology had been one of the leading challenges for health care administration and providers in underdeveloped countries like Pakistan. Proper treatment in time may let a woman deal with some of the most important health issues in life including birth control, childbirth and menopause.

This clinical rotation has been developed to impart integrated teaching as a part of curriculum in Jinnah Medical and Dental College, Karachi. It will be covered in 3 years. This will benefit the students to understand the basic biomedical information in relation to clinical sciences. This clinical posting has been designed to introduce new entrants to the MBBS program basic concepts essential for understanding a number of topics in Obstetrics and Gynecology. It aims to provide the care of women during pregnancy and childbirth and in the diagnosis and treatment of diseases of the female reproductive organs. This clinical posting hence provides a framework within which learners are expected to build future competencies

Rationale

The clinical posting of Obstetrics and Gynecology is designed to focus on two different aspects of female reproductive system, providing patient centered approach or diagnosis and management of common clinical presentations.

General Learning Objectives

By the end of the Obstetrics and Gynecology, students will be able to

- 1. Understand diagnosis, types, pathophysiology and management of menstrual cycle disorder.
- 2. Understand the diagnosis and physiologic changes in normal pregnancy with normal labor
- 3. Learn about antenatal care.
- 4. Learn about the fetal surveillance and understand fetal growth disorders.
- 5. Understand Rh-isoimmunization and its management.
- 6. To recognize different type of pelvic infections and its management.
- 7. Recognize miscarriages, Molar pregnancy and Ectopic pregnancy & its management.
- 8. Learn the different modalities of contraception.



JMDC CURRICULUM FRAMEWORK: MBBS 1-5 YEARS

Year 1	Module 1	E O M	Modul	le 2		E O M	Modul	le 3		E O M	Module	4	E O M	Module 5		E O M	Mo 6	dule		EOM* End of Exa	am
	Foundation- 1 8 weeks			ood-1 veeks			Loco 8 v	omoto week			Respirat 4 weel			CVS-1 4 weeks			GIT 4 w	Γ-1 veeks			
2	Module 7	E O M	Modul	le 8		E O M	Modul	le 9		E O M	Module	10	E O M	Module 11		E O M	Mo 12	dule		ЕОМ	
	Head & Neck-1 5 weeks		Neuros 7 w	eeks	es-1		Specia 3 v	l Ser veek			Endocrii 5 we			Reproductive- 4weeks	1		1	nary- eeks			
3	Module 13	E O M	Modul	le14		E O M	Modu	le15		E O M	Module	16	E O M	Module17		E O M	Mo 18	dule		ЕОМ	l i r
	Foundation 2 10 weeks		Blood- 5wee				Loco 4 w	eeks	S		Respirat 4 week	s		CVS-2 5 weeks				eeks			i 1
	Clinical Rotations (Each Batch) WT* = Ward test x																				
	Medicine 2 weeks	w	Psychi 2weeks		W	Surg 2 we	ery	W	Orthope dics 2 weeks			eeks		Pediatrics 2 weeks			eeks			Ent 3 weeks	W
	Medicine 2 weeks		Psychi 2weks	atry		Surg 2 w	ery eeks		Orthope dics 2weeks	•	OBS/ 0 2 we			Pediatrics 2 weeks		Ey 2 w				Ent 3 weeks	
4	Module 19	E O M	Modul	le 20		E O <u>M</u>	Modul			E O M	Module	22	E O M	m Module 23		E O M	Mo 24	dule		E O Lectur M	es
	Orthopedics 7 weeks		Repro 7 w	ductiv eeks	e-2		Neuro 9 w	sciei eeks			Genetic 1 week	s		Dermatology 2 weeks				abilita 2 weel		ENT EYE	
									Clinical	Rota	tions (Eac	h Batch	1)								
	Medicine 3 weeks	W T	Psychi 3 wee		w	Surg 3 we	eks	W T	Ortho pedics 3 weeks	w	OBS/0		W	Pediatrics 3 weeks	T	Eye 3 weeks		w	E1 3	it weeks	W
	Medicine 3weeks		w T			Surg 3wee			W T		3	Eye weeks			W T			Er 3we			W T
5	Medicine					Sur	gery			Ll	ECTURE O	s BS/Gy	nae			Pedi	atric	S			
3						8	Ð- √			Clini	cal Rotat										
	Medicine 4 weeks					Surge 4 we	eks				0	BS/ GYI 4 weeks					eeks				
	Medicine 5 weeks					Surge 5 we						BS/ GYI 5 weeks				Pedia 5 w	trics eeks				

MAIN CONTENT AREAS

Obstetrics

- 1. Understand the diagnosis and physiologic changes in normal pregnancy and multiple pregnancy.
- 2. Learn about antenatal care of low risk & high-risk pregnancy.
- 3. Understand about the normal and abnormal labor.
- 4. Learn about the fetal surveillance and understand fetal growth disorders.
- 5. Understand Rh-isoimmunization and its management.
- 6. Learn about puerperium, newborn care and post-natal care.

Gynecology

- 1. To recognize different type of pelvic infections and its management.
- Understand diagnosis, types, pathophysiology and management of menstrual cycle disorder.
- 3. Recognize miscarriages, Molar pregnancy and Ectopic pregnancy & its management.
- 4. Recognize and manage the benign and malignant tumors of upper and lower female genital tract.
- 5. Learn the different modalities of contraception.
- 6. Learn, diagnose and manage male and female subfertility.

Competencies assessed in this module

K=Knowledge

S=Skill

A=Attitude

Teaching / Learning Methods

The teaching learning sessions of the final year will be of diverse types:

- a. Large group interactive sessions (LGIS)
- b. Small group teaching will include tutorials, case based learning session.
- c. Problem based learning sessions.
- d. Practical session,
- e. Clinical Rotations,
- f. Bedside Teaching
- g. Clinical rotations at STH and MCJH,
- h. Skill laboratories,
- i. Seminars: on different topics, in which students will make oral presentations on different aspects of the allocated topic.
- j. Self-directed learning sessions: This is the time during which students are expected to revise what they have learnt in the class, clear their concepts by consulting different textbooks, reference material and prepare their assignments and projects.

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Students Assessment

There is continuous assessment of students throughout the year in the form of Mini CEX (Mini

Clinical Evaluation Exercise) and **DOPS** (Direct Observation of Procedural Skill).

4 to 6 sessions for each of the student take place.

In addition, there will be an end of ward examination after completion of clinical rotation in

surgery ward which will comprise the following components: -

i. Written Assessment

The theory paper will have components of one – best type multiple – choice questions (MCQs).

ii. OSCE examination:

This will comprise Objective Structured Practical Examination (OSCE). The OSCE will have both

observed and non-observed stations. The end of rotation written exam will be ofhours

duration. This will comprise the following components:

The OSCE will be conducted in batches. The students will be having different patterns of OSCE

in the subject's surgery

Summary of marks of each module exam

Theory (BCQs) = 100 marks

OSCE (10 stations) = 100 marks

Total =200 marks

Internal Assessment:

- Continuous monitoring of attendance and practical assessment in short groups.
- It may be in the form of MCQs and OSCE.
- Internal assessment carries 20% weightage

Course Evaluation:

Course evaluation will be obtained through a feedback form which will be posted on the

JMC website

Mandatory Policy:

Eligibility for sitting in Professional Examinations is as follows:

- 75% overall Class Attendance
- 75% Attendance all Clinical Wards with passing marks in all Clinical Ward Tests.
- Minimum 40% aggregate marks on all Internal Examinations (Module Tests, Midterm, Pre-Professional Examinations)
- MBBS 4th& Final Year: CPC Presentation at least once in a year
- Skills Labs: Must be completed with passing marks

Failure to Meet the Eligibility Requirements:

• A Student failing to meet the above listed eligibility for sitting in the professional examination will NOT be allowed to sit in 1st attempt of the Professional Examination. The college has the right to withhold all students who however, not met the eligibility requirements from sitting in the 1st attempt.

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• Such students who have been withheld from sitting in the 1st attempt of the Professional

exam because of failure to meet the eligibility requirements will be allowed only to sit in

the retake of that examination.

It is expected that deficiency in requirements of Professional communication assignments,

Behavioral Sciences & Research Module assessments, journal Club presentations, CPC,

Skills Labs must be made up and fulfilled before a student will allowed to sit in the retake

exam.

Details of ATTENDANCE POLICY

The CR is responsible to bring attendance sheets from Student Affairs Office to each class. At the

end of class, the attendance sheet must be signed and returned by the faculty member to the Student

Affairs Office. No attendance sheets from students will be accepted.

These attendances will be compiled together as follows:

<u>LECTURE ATTENDANCE</u> = # Lectures Attended / Total # of Lectures

PRACTICAL ATTENDANCE = # Practicals Attended / Total # of Practicals

<u>TUTORIAL ATTENDANCE</u> = # Tutorials Attended / Total # of Tutorials

NOTE: All tutorials will be conducted by a Senior Faculty Member (AP or above), assisted by a

Junior Faculty Member (Lecturer)

FINAL CLASS ATTENDANCE =

%Lecture Attendance + %Tutorial Attendance + %Practical Attendance

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Recommended Reading Material

TEXT BOOK

- 1. Obstetrics by Ten Teachers, Louise C. Kenny, Jenny E. Myers
- 2. Gynecology by Ten Teachers, Louise Kenny, Helen Bickerstaff
- 3. Hacker & Moore's Essentials of Obstetrics and Gynecology
- 4. Textbook of Gynecology, Rashid Latif Khan
- 5. Fundamentals of Gynecology, Dr Arshad Chohan

Organization

Time requirements:

• Gynecology 325 hours

• Obstetrics 325 hours

650 Hours

Total = 650 Dedicated hours

Obstetrics

Lectures

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Clinical Rotations

Sr. No.	At the end of the clinical rotation the students will be able:	CONTENT AREA	LEARNING ACTIVITIES (Duration)	ASSESSMENT
		Normal Pregnancy		
1.	 Diagnose the pregnancy. Learn the physiological changes in pregnancy. How to calculate EDD and LMP. (K) 	 Diagnosis of pregnancy. Physiological changes during pregnancy both in the fetus in the pregnant women. Dating of pregnancy. 	LGIS 50mins	BCQS
	 Learn the incidence causes and types of multiple pregnancy. Learn to manage the multiple pregnancy (S) (A) 	 Incidence, types and causes of multiple pregnancy. Signs and symptoms, diagnosis, investigations and management of multiple pregnancy. Difference between monochorionic and dichorionic pregnancies. 	CBD 1hour	OSPE
	• Take obstetric history. (S) (A)	History and examination of real or simulated obstetric patient	Demonstrations 75 mins	OSPE
		Antenatal care		
2.	 Learn about Antenatal care, screening and diagnostic test. Describe the indications and advantages of prenatal screening and diagnosis. Discuss the advantages and disadvantages of prenatal diagnostic test. (K) 	 Importance and process of antenatal care Differentiation between the screening and diagnostic tests. Purpose and advantages of prenatal diagnosis and their differences. Indications for prenatal screening and diagnosis especially for Down's syndrome and neural tube defects. CVS, amniocentesis and cordocentesis procedures, advantages and disadvantages. 	LGIS 50mins	BCQS

		High risk pregnancy		
3.	 Describe high risk pregnancy and factors which complicates the life of mother and fetus Learn the referral of a high-risk pregnancy to a tertiary care facility. Understand methods for prevent maternal and perinatal mortality and morbidity. (K) (S) (A) 	 Definition of High-risk pregnancy. List of the high-risk factors which endanger the life of the mother or baby and can complicate pregnancy. Referral of a high-risk pregnancy patient to a tertiary care facility. Methods for preventing maternal and perinatal mortality and morbidity. List of the early and late complications of Pregnancy. 	LGIS 50 mins + Demonstrations 1 hour	BCQ's /OSCE
		Normal labor		
4.	 Describe labor and the stages of normal labor. Learn the basic mechanisms of labor (K) 	 Definition of Labor. Stages of normal labor. Basic mechanisms of labor. 	Tutorial/CBD 1 hour	BCQ's
	In	duction and augmentation of l	ahor	
5.	 Define Induction and Augmentation of labor. Explain the indications, contraindication, advantages, disadvantages of Induction Explain Augmentation of labor. Discuss the Monitoring and management of induced and augmented labor. (K) 	 Induction and Augmentation of labor. Indications, contraindication, advantages, disadvantages of Induction and Augmentation of labor. Monitoring and management of induced and augmented labor. 	LGIS 50 mins	BCQ's
		Abnormal labor		
6.	 Describe Malpresentations and Malpositions. Explain the different type's malpresentations and Malpositions. (K) 	 Malpresentations and Malposition and their different types. Causes of Breech, Transverse lie and other 	Tutorial/ CBD 1 hour	BCQ's/OSPE

	Describe causes and management of different type of malpresentation and malposition (S) (A) Learn different types of Breech presentations, Transvers lie, Face and Brow presentations and malpositions on the mannequins and pelvic Models. (S) (A)	malpresentations and malpositions. Management options for each malpresentation and malposition. Identification of different types of Breech presentations, Transvers lie, Face and Brow presentations and malpositions on the mannequins and pelvic Models.	Demonstrations 75mins	OSPE
		Fetal surveillance		
7.	 Define Partograph and CTG. Interpret normal and abnormal Partograph and CTG. Understand the management of normal and abnormal labor with uses of partograph and CTG. (K) (S) (A) 	 Partograph and CTG. Uses of partograph and CTG in the management of normal labor. Interpretation of normal and abnormal Partograph and CTG. Management of abnormal Partograph and CTG. 	Tutorial/ CBD 1 hour	BCQ's/OSPE
	Learn the purpose, advantages and indications of fetal surveillance. Describe the methods of fetal surveillance (Interpret CTG. (K)	 Purpose and advantages of fetal surveillance. Different indications for fetal surveillance. Methods of fetal surveillance (fetal kick count, ultrasound for fetal growth, biophysical profile and CTG). Interpretation of CTG Rh-isoimmunization 	LGIS 50mins	BCQ's
8.	 Define Rh Incompatibility and Erythroblastosis Fetalis. Describe the pathophysiology of Rh Incompatibility. Understand the steps of management and 	 Rh Incompatibility and Erythroblastosis Fetalis. Pathophysiology of Rh Incompatibility Justify the steps of management and prevention of Rh Incompatibility. 	Tutorial/ CBD 1 hour	BCQ's/OSPE

	prevention of Rh Incompatibility. (K) (S) (A)			
		Fetal growth disorder	<u> </u>	
9.	 Define IUGR, SGA, and Low birth weight in neonates. Understand types of IUGR, investigation and management of a neonate with IUGR. Understand complications and long-term outcome of a neonate with IUGR. (K) 	 IUGR, SGA, Low birth weight. Evaluation, types of IUGR, investigation and management of a neonate with IUGR. Complications and long-term outcome of a neonate with IUGR. 	LGIS 50mins	BCQ's
		Puerperium	<u> </u>	L
10.	 Define puerperium Describe signs and symptoms of normal and abnormal puerperium. Understand its management (including for puerperal pyrexia and puerperal sepsis). (K) 	 Definition of Puerperium. Signs and symptoms of normal and abnormal puerperium and its management (including for puerperal pyrexia and puerperal sepsis). 	LGIS 50mins	BCQ's
		Breast feeding & lactation ca	re	
11.	 Learn the advantages of breastfeeding for the baby, mother and family. (K) (S) (A) 	 Advantages of breastfeeding for the baby, mother and family. Counseling of the mother about advantages of breast feeding. 	Tutorial/ CBD 1 hour	BCQ's/OSPE
		New born care		
12.	 Explain routine care of newborn. Discuss the initial steps in resuscitation of newborn babies. Explain the ventilatory assistance in newborns and when & how to support the heart in newborn babies. (K) (S) (A) 	 Routine care of newborn. Discuss the initial steps in resuscitation of newborn babies. Ventilatory assistance in newborns. Support the heart in newborn babies. 	Tutorial/ CBD 1 hour	BCQ's/OSPE

	Analgesia & Anesthesia in Obstetrics							
13.	 Describe different analgesic techniques in labor and cesarean delivery. Understand different anesthetic options used in labor and cesarean delivery. Discuss the risks and benefits of general anesthesia, spinal anesthesia, epidural anesthesia, pudendal nerve block, and narcotics in obstetrics. (K) 	Analgesic techniques in labor and cesarean delivery Anesthetic options used in labor and cesarean delivery including the risks and benefits of general anesthesia, spinal anesthesia, epidural anesthesia, pudendal nerve block, and narcotics in obstetrics	LGIS 50mins	BCQ's				

GYNAECOLOGY

Lectures

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Clinical Rotations

Sr. No.	LEARNING OBJECTIVES	CONTENT AREA	LEARNING ACTIVITIES	ASSESSMENT
	At the end of the clinical rotation the students will be able:		(Duration)	
		 GENITOURINARY INFECTIO	NS	
1.	 Describe the causes of vaginal discharge (candida, bacterial vaginosis, Trichomoniasis). Differentiate between a normal vaginal discharges (Leucorrhea) and pathological vaginal Discuss vaginal discharges on the basis of history and its management. (K) (S) (A) 	 Causes of vaginal discharge. Differentiation between normal vaginal discharge (Leucorrhea) and pathological vaginal discharge on the basis of clinical history. Symptoms, signs, investigations and treatment options for vaginal discharge due to Candidiasis, Bacterial vaginosis, Trichomoniasis, Gonorrhoea and Chlamydia trachomatis infection. Steps for prevention and recurrence of vaginal discharge. 	LGIS 50mins Tutorial/ CBD 1 hour	BCQS BCQS/OSPE
	 Define the pelvic inflammatory diseases Understand the actiology of PID and Diagnose the PID on the basis of symptoms, signs and investigation. Discuss the differential diagnosis and the management options for acute and chronic PID. (K) 	 Definition of the pelvic inflammatory diseases and sexually transmitted infections. Etiology of PID i.e. Sexually Transmitted Infections (STIs), Post delivery PID, Post abortion PID and Post surgical PID. Diagnosis of PID based on symptoms, signs and investigation findings. Differential diagnosis of PID and its possible complications. Management options for acute and chronic PID. 	LGIS 50mins	BCQS

		MENSTRUAL DISORDERS		
2.	 Define primary and secondary amenorrhea and understand its etiology, sign, symptoms and management. Explain polycystic ovarian syndrome its sign, symptoms, investigations and management. (K) (S) (A) 	 Definition of primary & secondary amenorrhea. and oligomenorrhea Etiology, symptoms and signs, for primary, secondary amenorrhea and oligomenorrhea. Polycystic ovarian syndrome its sign, symptoms, investigation options and management. 	LGIS 50mins	BCQS/OSPE
	 Define Primary & Secondary dysmenorrhea Explain the etiology, pathophysiology, symptoms, signs for primary & secondary dysmenorrhea. (K) 	 Definition of Primary & Secondary dysmenorrhea. Etiology, pathophysiology, symptoms, signs for primary & secondary dysmenorrhea. 	LGIS 50mins	BCQS
	 Define heavy menstrual bleeding dyspareunia, intermenstrual bleeding, Post-Menopausal Bleeding, Post Coital Bleeding. Explain the aetiology, sign, symptoms and its management of heavy menstrual bleeding dyspareunia, intermenstrual bleeding, Post-Menopausal Bleeding, Post Coital Bleeding. (S) (A) 	 Definition of heavy menstrual bleeding, dyspareunia, intermenstrual bleeding, Post-Menopausal Bleeding, Post Coital Bleeding. Etiology, sign, symptoms and its management of heavy menstrual bleeding, dyspareunia, intermenstrual bleeding, Post-Menopausal Bleeding, Post Coital Bleeding, 	Tutorial/ CBD 1 hour	OSCE
	EAR	LY PREGNANCY COMPLICA MISCARRIAGE	TIONS	
3.	 Define miscarriages Differentiate among the various types of miscarriages. 	 Definition of miscarriage according to WHO criteria. Differentiation among the various types of miscarriage (threatened, missed, 	LGIS 50mins	BCQS/OSCE
		incomplete, complete and in	Tutorial/ CBD	

	1					
	of di misc	lain the management ifferent type of carriage. (S) (A)	evitable) based of provided history examination and investigations • Management of type of miscarria	different	hour	
_			ECTOPIC PRI		-[
4.	 Disc diag abdo Expl man ecto 	ine ectopic pregnancy. cuss the differential gnosis of acute omen in women. lain the Diagnoses and lagement options for pic pregnancy (S) (A)	 Ectopic pregnan Differential diag acute abdomen i Diagnosis of ect pregnancy based provided (history examination find investigations). Management op ectopic pregnand the criteria for natreatment. 	mosis of n women. opic 5 l on data y, dlings, and tions for ey including	LGIS Omins	BCQS/OSCE
	•	GESTA	TONAL TROPHO	DBLASTIC DISEAS	SES	
5.	etiol discr of be mali Gest dise	ine and classify the logy, risk factors and uss the management oth benign and ignant varieties of tational Trophoblastic ases. (S) (A)	 Definition, etiologiactors and the conferce of GTD. Principles of mand both benign and varieties 	lassification 5 nagement of	LGIS Omins	BCQS/OSPE
		TUM	ORS OF UPPER	GENITAL TRACT		
6.	beni uteri Take exar inve eval endo Disc optio Expl disea class stagi man	lain the common agn conditions of us and cervix. The the History, mination and estigations used to uate uterus and cometrium. The treatment cons available lain the malignant ases of uterus its sification, FIGO ing, investigations and tagement (S) (A)	 Common benign that affect the ut according to tiss the cervix the en and the myomet endometrial hyp fibroid and aden Presenting sympexamination find associated with uterine patholog Common tests u evaluate the uter endometrial cav Treatment option and adenomyosi Learn the malign of uterus its class 	erus ue of origin, dometrium rium. (polyp, erplasia, omyosis) otoms and dings benign y seed to rus and ity. Tuto 1 ns for fibroid s. nant diseases	CBD rial/ CBD	BCQS/OSPE

		FIGO staging, investigations and management. (endometrial carcinoma and sarcomas)		
	 Discuss the types, symptoms diagnosis and management of benign ovarian cyst) Explain the diagnosis and treatment of endometriosis Explain the presentation, etiology and management of acute and chronic pelvic pain. Describe the malignant diseases of ovary its investigations staging and management. (K) (S) (A) 	 Benign ovarian cyst, their symptoms, diagnosis and treatment. (Functional ovarian cyst, epithelial ovarian tumors, sex cord stromal tumors, germ cell tumors etc.) Presentation and management of acute pelvic pain. Pathology of endometriosis and recognize its involvement in chronic pelvic pain and subfertility Endometriosis. Potential causes for chronic pain. Multifactorial nature of CPP and potential management options. Malignant diseases of ovary its investigations staging and management. 	ASES OF CERVIN	BCQS/OSPE
	IKEWIALIONA	INI AND MALIGNANT DISER	ASES OF CERVIS	•
7.	 Take the history and understand how to do examination, screening (Pap smear) and diagnostic test of premalignant and malignant diseases of cervix. Explain the classification and managements of premalignant and malignant diseases of cervix (K) 	 Premalignant (cervical polyp, ectropion, Nabothian cyst) and malignant diseases of cervix. (CIN its classification and Carcinoma cervix) Classification and managements of premalignant and malignant diseases of cervix 	LGIS 50mins Tutorial/ CBD 1 hour Simulated Based Learning	BCQS

	BENIGN AND MA	LIGNANT DISORDERS OF V	ULVA AND VAG	INA
8.	 Describe the presentation and management of common benign and malignant conditions of vulva and vagina. Discuss the causes of superficial and deep dyspareunia (K) 	 Describe the presentation and management of common benign (vulvodynia, vulvar cyst, lichen planus, lichen sclerosis etc.) and malignant conditions of vulva and vagina. Describe the causes of superficial and deep dyspareunia. SUBFERTILITY 	LGIS 50mins	BCQS
9.	 Describe the definition and causes of subfertility. Take the history, examination and investigations relevant to subfertility. Discuss the treatment options for Sub fertility Explain the processes and procedures, outcomes and success rates of assisted reproductive treatment (ART) 	 Sub-fertility History, examination findings, investigation reports and diagnosis of sub fertility in a male and female Causes of anovulation in women Interpret the reports of Semen analysis in male and hormone profile in female treatment options for Sub fertility 	LGIS 50mins	BCQS
	(K)	Processes and procedures involved in assisted reproductive treatment (ART) CONTRACEPTION		
10.	 Expalin the mechanism of action of current contraceptive methods. Describe factors that affect contraceptives. Understand the noncontraceptive benefits of methods. Explain the use of medical eligibility criteria for contraception's. (K) (S) (A) 	 Mechanism of action of current contraceptive methods. Factors that affect contraceptives. Non-contraceptive benefits of different methods. Use of medical eligibility criteria for contraception's. 	LGIS 50mins Tutorial/ CBD 1 hour	BCQS/OSPE

Problem/ Case Based Learning (PBL)

- PBLs /CBLs will be conducted in this module
- Each will be introduced in one week and will be discussed the next week

Learning Tool	Theme	PBL Trigger	Subjects integrated in PBL
PBL 1			Learning objectives will be from Anatomy,
			Biochemistry and Physiology
PBL 2			Learning objectives will be from Anatomy, Biochemistry and Physiology

Learning Resources:

The students will be guided to look for the relevant study material from the books, internet guided by each discipline in the study guide in their relevant section in addition to other reference books from the college library

Medical Education

Lectures / Workshop

S.NO	Learning Objectives (domain) At the end of session, student will be able to:	Content Areas	Teaching Activity (Duration)	Assessment
1.	How to do Educational Planning (S)	Educational Planning	Workshop 3 Hours	-
2.	Writing Educational Objectives (How, What, Why) (S)	Educational Objectives	Workshop 3 Hours	
3.	Develop OSPE/OSCE stations (S)	OSPE/OSCE Development	Workshop 3 Hours	_
4.	How to do students engagement and Teaching methodologies (S)	Student Engagement & Teaching Methodologies	Workshop 3 Hours	
5.	Prepare TOS and Assessment Planning (S)	TOS and Assessment planning	Workshop 3 Hours	

TIMETABLE

Jinnah Medical & Dental College

MBBS Final Year 2021 – Batch 21 (TIME TABLE)

Starting Date: March 15, 2021 Lecture Venue: JMCH AUDITORIUM,

KORANGI

D A Y	9:00 – 9:50	10:00- 10:50	11:00- 12:00	12:00- 01:00	01:0 0- 01:3 0	01:30 - 02:00	02:10- 03:00	3:30pm– 9:00am	TEACHIN G SUPERVIS OR
M O N	MEDICI NE LECTUR E	SURGER Y LECTURE	BED SIDE TEACH ING	CBD	PRA YER & LUN CH BRE AK	MINI CEX / DOPS	CLINICAL TUTORIAL	NIGHT DUTY of PGs/HOs As Per Dept. Schedule	DR.
T U E	PEDIAT RIC LECTUR E	GYNECO LGY LECTURE	BED SIDE TEACH ING	CBD	PRA YER & LUN CH BRE AK	MINI CEX / DOPS	CLINICAL SCENARIO DISCUSSI ON GYNECOL OGY	NIGHT DUTY of PGs/HOs As Per Dept. Schedule	PROF.

w	9:00-12:00	12:15- 01:05	01:05-01:30	01:30- 02:00	02:10- 03:00	3:30pm– 9:00am	TEACHI NG SUPERVISO R
E D	CLINICAL / OPERATIVE TEACHING IN OPERATION ROOM	SURGE RY LECTUR E	PRAYERS & LUNCH BREAK	CLINICAL SCENARIO DISCUSSIO N PEDIATRIC	CLINICAL TUTORIAL	NIGHT DUTY of PGs/HOs As Per Dept. Schedule	PROF.

T H	9:00 – 9:50	10:0 0- 10:5 0	11:00- 12:00	12:05- 01:00	01:05 - 02:00	02:00- 02:15	02:15- 03:10	3:30pm-9:00am	TEACHI NG SUPERVI SOR
U R	BED SIDE TEACHIN G	CBD	MINI CEX / DOPS	CLINCIAL PATHOLO GY CONFERENCE	MEDI CINE LECT URE	PRAYERS & LUNCH BREAK	CLINICAL SCENARIO DISCUSSIO N Obstetrics	NIGHT DUTY of PGs/HOs As Per Dept. Schedule	PROF.
F R I	BED SIDE TEACHIN G	CBD	MINI CEX / DOPS	OBSTETRI CS LECTURE	JUMMA PRAYERS		NIGHT DUTY of PGs/HOs As Per Dept. Schedule	DR.	

S	9:00- 12:00	12:05-01:00	01:00- 01:30	01:30-02:00	02:00-03:00	3:30pm-9:00am	TEACHING SUPERVISOR
T	SKILL LAB	DEPARTMENT	PRAYERS & LUNCH BREAK	CLINICAL	RESEARCH WORK	NIGHT DUTY of PGs/HOs As Per Dept. Schedule	DR.
		CLUB	DILE III				

- At the end of each Rotation Ward Test (it includes both BCQs and OSCE).
 Midterm Examination (At the Mid of Academic Year).
- 3- Pre-Prof Examination (At the end of the Academic Year).

END of Clinical Rotation

Obstetrics Test Theory
Gynecology Test Theory
&
Obstetrics Test OSCE
Gynecology Test OSCE