



Jinnah Medical & Dental College

Study Guide

OBSTETRICS & GYNECOLOGY



**MBBS
2025-26**

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

HIPPOCRATES

Team Members of Obstetrics/ Gynecology 2025-26

Name	Committee	Department
Dr. Asha Mahesh Professor	Member	Gynecology & Obstetrics
Dr. Farzana Aamir Professor	Member	Gynecology & Obstetrics
Dr. Shazia Aftab Professor	Member	Gynecology & Obstetrics
Dr. Erum Memon Assistant Professor	Member	Gynecology & Obstetrics
Dr. Fariha Hussain Assistant Professor	Member	Gynecology & Obstetrics
Dr. Zeelaf Shahid 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 SEQUENCE: MBBS 1-5 YEARS

Year	Module 1	EOM	Module 2	EOM	Module 3	EOM	Module 4	EOM	Module 5	EOM*
1										Exam of Module
	Foundation-1 8 weeks		Blood-1 4 weeks		Locomotor-1 8 weeks		Respiratory-1 4 weeks		CVS-1 4 weeks	
	PAKISTAN STUDIES & ISLAMIAT									
2	Module 6	EOM	Module 7	EOM	Module 8	EOM	Module 9	EOM	Module 10	EOM
	Module 11	EOM	Module 12							EOM
	GIT-1 4 weeks		Head & Neck-1 5 weeks		Neurosciences-1 7 weeks		Special Senses 3 weeks		Endocrine-1 5 weeks	
	Reproductive-1 4weeks									
	Urinary-1 5weeks									
	Communication Skills Patient Safety & Infection Control Professionalism & Ethics									
3	Module 13	EOM	Module 14	EOM	Module 15	EOM	Module 16	EOM	Module 17	EOM
	Module 18									EOM
	Foundation 2 10 weeks		Blood-2 5 weeks		Locomotor-2 4 weeks		Respiratory-2 4 weeks		CVS-2 5 weeks	
	GIT-2 7weeks									
	Clinical Rotations (Each Batch) WT* = Ward test									
	Communication Skills Patient Safety & Infection Control Professionalism & Ethics									
R1	Medicine 2 weeks	WT	Psychiatry 2 weeks	WT	Surgery 2 weeks	WT	Orthopedics 2 weeks	WT	OBS/ GYN 2 weeks	WT
R2	Medicine 2 weeks		Psychiatry 2 weeks		Surgery 2 weeks		Orthopedics 2 weeks		OBS/ GYN 2 weeks	
4	Module 19	EOM	Module 20	EOM	Module 21	EOM	Module 22	EOM	Module 23	EOM
	Module 24	EOM	Module 25	EOM	Module 26	EOM	Module 27			EOM
	Nervous Sys & Psychiatry 2 8 weeks		H & N & SP Senses 2 (Eye) 4 weeks		H & N & SP Senses 3 (ENT) 4 weeks		Endocrinology 2 4 weeks		Repro 2 6 weeks	
	Lectures Eye/ENT									
	Clinical Rotations (Each Batch)									
	Communication Skills Patient Safety & Infection Control Professionalism & Ethics									
R1	Medicine 3 weeks	WT	Psychiatry 3 weeks	WT	Surgery 3 weeks	WT	Orthopedics 3 weeks	WT	OBS/ GYN 3 weeks	WT
R2	Medicine 3 weeks	WT			Surgery 3 weeks	WT			Eye 3 weeks	WT
	LECTURES R***= Rotation									
5	Medicine				Surgery			OBS/Gynae		Pediatrics
	Clinical Rotations									
	Communication Skills Patient Safety & Infection Control									
R1	Medicine 4 weeks				Surgery 4 weeks			OBS/ GYN 4 weeks		Pediatrics 4 weeks
R2	Medicine 5 weeks				Surgery 5 weeks			OBS/ GYN 5 weeks		Pediatrics 5 weeks

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-immunization 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.
2. 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.

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 JMDC 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.
- 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:

LECTURE ATTENDANCE = # Lectures Attended / Total # of Lectures

PRACTICAL ATTENDANCE = # Practicals Attended / Total # of Practicals

TUTORIAL ATTENDANCE = # 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.	LEARNING OBJECTIVES 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
Induction and augmentation of labor				
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) - Describe causes and management of different	- Malpresentations and Malposition and their different types. - Causes of Breech, Transverse lie and other malpresentations and malpositions.	Tutorial/ CBD 1 hour	BCQ's/OSPE

	type of malpresentation and malposition (S) (A)	Management options for each malpresentation and malposition.		
	Learn different types of Breech presentations, Transvers lie, Face and Brow presentations and malpositions on the mannequins and pelvic Models. (S) (A)	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	LGIS 50mins	BCQ's
Rh-isoimmunization				
8.	- Define Rh Incompatibility and Erythroblastosis Fetalis. - Describe the pathophysiology of Rh Incompatibility.	- Rh Incompatibility and Erythroblastosis Fetalis. - Pathophysiology of Rh Incompatibility Justify the steps of management and	Tutorial/ CBD 1 hour	BCQ's/OSPE

	Understand the steps of management and prevention of Rh Incompatibility. (K) (S) (A)	prevention of Rh Incompatibility.		
Fetal growth disorder				
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				
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 care				
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	- Routine care of newborn. - Discuss the initial steps in resuscitation of newborn babies. - Ventilatory assistance in newborns.	Tutorial/ CBD 1 hour	BCQ's/OSPE

	when & how to support the heart in newborn babies. (K) (S) (A)	Support the heart in newborn babies.		
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

GYNECOLOGY

Lectures

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Clinical Rotations

Sr. No.	LEARNING OBJECTIVES At the end of the clinical rotation the students will be able:	CONTENT AREA	LEARNING ACTIVITIES (Duration)	ASSESSMENT
GENITOURINARY INFECTIONS				
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 aetiology 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
EARLY PREGNANCY COMPLICATIONS				
MISCARRIAGE				
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, incomplete, complete and in	LGIS 50mins Tutorial/ CBD	BCQS/OSCE

	Explain the management of different type of miscarriage. (K) (S) (A)	evitable) based on data provided history, examination and investigations Management of different type of miscarriage.	1 hour	
ECTOPIC PREGNANCY				
4.	- Define ectopic pregnancy. - Discuss the differential diagnosis of acute abdomen in women. - Explain the Diagnoses and management options for ectopic pregnancy (K) (S) (A)	- Ectopic pregnancy. - Differential diagnosis of acute abdomen in women. - Diagnosis of ectopic pregnancy based on data provided (history, examination findings, and investigations). - Management options for ectopic pregnancy including the criteria for medical treatment.	LGIS 50mins	BCQS/OSCE
GESTATIONAL TROPHOBLASTIC DISEASES				
5.	Define and classify the etiology, risk factors and discuss the management of both benign and malignant varieties of Gestational Trophoblastic diseases. (K) (S) (A)	- Definition, etiology, risk factors and the classification of GTD. - Principles of management of both benign and malignant varieties	LGIS 50mins	BCQS/OSPE
TUMORS OF UPPER GENITAL TRACT				
6.	- Explain the common benign conditions of uterus and cervix. - Take the History, examination and investigations used to evaluate uterus and endometrium. - Discuss the treatment options available - Explain the malignant diseases of uterus its classification, FIGO staging, investigations and management (K) (S) (A)	- Common benign conditions that affect the uterus according to tissue of origin, the cervix the endometrium and the myometrium. (polyp, endometrial hyperplasia, fibroid and adenomyosis) - Presenting symptoms and examination findings associated with benign uterine pathology - Common tests used to evaluate the uterus and endometrial cavity. - Treatment options for fibroid and adenomyosis. - Learn the malignant diseases of uterus its classification,	LGIS 50mins CBD Tutorial/ CBD 1 hour	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.		BCQS/OSPE
PREMALIGNANT AND MALIGNANT DISEASES OF CERVIX				
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 MALIGNANT DISORDERS OF VULVA AND VAGINA				
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.	LGIS 50mins	BCQS
SUBFERTILITY				
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) (K)	- 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 - Processes and procedures involved in assisted reproductive treatment (ART)	LGIS 50mins	BCQS
CONTRACEPTION				
10.	- Expalin the mechanism of action of current contraceptive methods. - Describe factors that affect contraceptives. - Understand the non-contraceptive 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

Case Based Learning (CBL)

- CBLs will be conducted in this module

Learning Tool	Theme	Case Scenarios
CBL 1	Infertility	A 30-year-old patient with BMI 32 came in gynae OPD, with history of Dysmenorrhea, Dyspareunia, Heavy menstrual bleeding and inability to conceive for 3 years.

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 2025 – Batch 24

Starting Date: February 03, 2025 (Revised April 14, 2025)
Lecture Venue: Dr. Mumtazuddin Haider Auditorium

	9:00-9:50	9:55-10:45			2:00-3:00	3:30 pm – 9:00 am
MON	MEDICINE	SURGERY		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	2:00-3:00 CLINICAL TUTORIAL	NIGHT DUTY As Per Department Schedule
TUES	PEDIATRICS	SURGERY		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	2:00-3:00 CLINICAL TUTORIAL	3:00-4:30 CLINICAL WARD DUTIES NIGHT DUTY As Per Department Schedule
WED	GYNECOLOGY	MEDICINE		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	2:00-3:00 CLINICAL TUTORIAL	3:00-4:30 CLINICAL WARD DUTIES NIGHT DUTY As Per Department Schedule
THUR	CLINICAL PATHOLOGY CONFERENCE	PEDIATRICS		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	2:00-3:00 CLINICAL TUTORIAL	3:00-4:30 CLINICAL WARD DUTIES NIGHT DUTY As Per Department Schedule
FRI	OBSTETRICS	SURGERY		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	SELF STUDY PRAYER	2:00-4:00 CLINICAL WARD DUTIES NIGHT DUTY As Per Department Schedule
SAT	MEDICINE	DEPARTMENT JOURNAL CLUB		CLINICS 11:00-1:30 (Medicare 11:30-2:00)	SELF STUDY	NIGHT DUTY As Per Department Schedule

BUS FOR MEDICARE CLINICAL ROTATIONS LEAVES KORANGI 11:00 AM SHARP

NIGHT DUTY AT MEDICARE WILL START AT 3:30 PM

HALF AN HOUR LUNCH BREAK WILL BE GIVEN FROM 3:00PM TO 3:30PM BEFORE STARTING OF NIGHT DUTY
FOR ASR PRAYERS 15:00 MINUTES TIME WILL BE ALLOWED FOR NIGHT DUTY STUDENTS

END of Clinical Rotation

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