

OBST. & GYNE.

MBBS Curriculum

Department of Obstetrics & Gynaecology

Vision/Goal

The vision of the Department of Obstetrics & Gynaecology is to train the undergraduate medical student using educational program 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.

Overall Learning Objectives in Obstetrics & Gynaecology

Learning Objectives in Obstetrics:

The student must demonstrate ability to:

1. Provide peri-conceptual counselling & antenatal care.
2. Identify high-risk pregnancies and refer appropriately
3. Conduct normal deliveries, using safe delivery practices in the primary and secondary care settings.
4. Prescribe drugs safely and appropriately in pregnancy and lactation
5. Diagnose complications of labor, institute primary care and refer in a timely manner
6. Perform early neonatal resuscitation
7. Provide postnatal care, including education in breast-feeding
8. Counsel and support couples in the correct choice of contraception,
9. Interpret test results of laboratory and radiological investigations as they apply to the care of the obstetric patient.
10. Apply medico-legal principles as they apply to tubectomy, Medical Termination of Pregnancy(MTP), Pre-conception and Prenatal Diagnostic Techniques (PCPNDT Act) and other related Acts.

Learning Objectives in Gynaecology:

The student must demonstrate ability to:

1. Elicit a gynaecologic history, perform appropriate physical and pelvic examination and PAP smear in the primary care setting
2. Recognize, diagnose and manage common reproductive tract infections in the primary care setting.
3. Recognize and diagnose common genital cancers and refer them appropriately.

Competencies

There are 38 topics and 126 competencies in Obstetrics & Gynecology. Details of competencies with Specific Learning Objectives with learning domains (Cognition, Psychomotor, Communication affective attitudes) are enclosed in annexure 1.

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Course

Curriculum will be delivered as per following schedule:

Table 1: Phase-II (Second Professional) Teaching Hours

| Subject | Lectures (hours) | Small Group Learning (Tutorials, Seminars, Integrated Learning) (hours) | Clinical Postings (hours) * | Self-Directed Learning (hours) | Total (hours) |
|--|------------------|---|-----------------------------|--------------------------------|---------------|
| Anatomy | 80 | 138 | - | 12 | 230 |
| Pharmacology | 80 | 138 | - | 12 | 230 |
| Microbiology | 70 | 110 | - | 10 | 190 |
| Community & Public Health | 20 | 30 | - | 10 | 60 |
| Principles of Medicine and Toxicology | 15 | 30 | - | 5 | 50 |
| Clinical Subjects | 75** | - | 540*** | - | 615 |
| Workshop, Fitness, Communication Module - AETC/OKI | - | 29 | - | 8 | 37 |
| Professional & Curricular Activities (CPA) | - | - | - | 28 | 28 |
| Total | - | - | - | - | 1440 |

* At least 3 hours of clinical instruction each week must be allotted to training in clinical and procedural skill laboratories. Hours may be distributed weekly or as a block in each posting based on institutional logistics.


** 25 hours each for Medicine, Surgery and Gynaecology & Obstetrics.

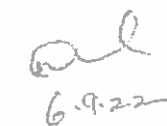
***The clinical postings in the second professional shall be 15 hours per week (3 hrs per day from Monday to Friday).

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Table 2: Phase-III (Third Professional) Part 1 Teaching Hours

| Subjects | Teaching Hours | Integrated Seminars / Integrated Teaching (hours) | Self Directed Learning (hours) | Total Hours |
|---|----------------|---|--------------------------------|-------------|
| General Medicine | 25 | 35 | 5 | 65 |
| General Surgery | 25 | 35 | 5 | 65 |
| Obstetrics and Gynecology | 25 | 35 | 5 | 65 |
| Pediatrics | 20 | 30 | 5 | 55 |
| Orthopedics | 15 | 20 | 5 | 40 |
| Forensic Medicine and Toxicology | 25 | 45 | 5 | 75 |
| Community Medicine | 40 | 40 | 5 | 105 |
| Dermatology | 30 | 5 | 5 | 40 |
| Psychiatry | 25 | 10 | 5 | 40 |
| Respiratory Medicine | 10 | 8 | 2 | 20 |
| Otorhinolaryngology | 25 | 40 | 5 | 70 |
| Ophthalmology | 30 | 60 | 10 | 100 |
| Radiodiagnosis and Radiotherapy | 10 | 8 | 2 | 20 |
| Anesthesiology | 8 | 10 | 2 | 20 |
| Clinical Postings* | - | - | - | 186 |
| Aetiology, Ethics & Communication Module (AETCOM) | - | 15 | 10 | 25 |
| Total | 303 | 401 | 66 | 770 |

*The clinical postings in the third professional part I shall be 18 hours per week (3 hrs per day from Monday to Saturday).

Table 3: Phase-III (Third Professional) Part 2 Teaching Hours

| Subjects | Teaching Hours | Integrated Seminars / Integrated Teaching (hours) | Self Directed Learning (hours) | Total Hours |
|--|----------------|---|--------------------------------|-------------|
| General Medicine | 70 | 125 | 15 | 210 |
| General Surgery | 70 | 125 | 15 | 210 |
| Obstetrics and Gynecology | 70 | 125 | 15 | 210 |
| Pediatrics | 30 | 35 | 10 | 65 |
| Orthopedics | 20 | 25 | 5 | 50 |
| Clinical Postings** | - | - | - | 192 |
| Aetiology, Ethics & Communication Module (AETCOM)*** | 25 | - | 16 | 41 |
| Reserves | - | - | - | 200 |
| Total | 250 | 310 | 61 | 621 |

* 25% of allotted time of third professional shall be utilized for integrated learning with pre and para-clinical subjects and shall be assessed during the clinical subjects examination. This allotted time will be utilized as integrated teaching by para-clinical subjects with clinical subjects (as Clinical Pathology, Clinical Pharmacology and Clinical Microbiology).

** The clinical postings in the third professional part II shall be 18 hours per week (3 hrs per day from Monday to Saturday).

*** Hours from clinical postings can also be used for AETCOM modules.

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Table 4: Clinical Postings

| Subject | Period of Training in weeks | | | Total |
|-----------------------------------|-----------------------------|----------|--------------------------------|-------|
| | Phase I | Phase II | Phase III | |
| General Medicine | 4 | 4 | 8+3 (regular clinical posting) | 15 |
| General Surgery | 4 | 4 | 8+4 | 20 |
| Obstetrics & Gynecology | 4 | 4 | 8+2 | 20 |
| Pediatrics | 3 | 4 | 4 | 11 |
| Community Medicine | 4 | 0 | - | 4 |
| Orthopedics including Trauma | 2 | 4 | 2 | 8 |
| Otorhinolaryngology | 4 | 4 | - | 8 |
| Ophthalmology | 4 | 4 | - | 8 |
| Respiratory Medicine | 2 | 2 | - | 4 |
| Psychiatry | 2 | 2 | - | 4 |
| Radiology | 2 | 1 | - | 3 |
| Dermatology Venereology & Leprosy | 2 | 2 | 2 | 6 |
| Dentistry & Anaesthesia | - | 2 | - | 2 |
| Casualty | - | 2 | - | 2 |
| | 36 | 42 | 48 | 126 |

* In four of the eight weeks of electives, regular clinical postings shall be accommodated. Clinical postings may be adjusted within the time framework. Obstetrics & Gynecology posting includes maternity training and family welfare (including Family Planning).

Integration: The teaching should be aligned and integrated horizontally and vertically in order to provide comprehensive care for women in their reproductive years and beyond, based on a sound knowledge of structure, functions and disease and their clinical, social, emotional, psychological correlates in the context of national health priorities. At least 20% of the teaching should be integrated.

The details of competencies to be covered in different phases are given in Annexure 1.

Teaching Learning Methods

- Didactic Lectures
 - Phase 2: 25 hrs
 - Phase 3 Part 1: 25 hrs
 - Phase 3 Part 2: 70 hours
- Small Group Teaching will include tutorials, seminars, Skill Lab training
 - Phase 3 Part 1: 35 hrs
 - Phase 3 Part 2: 125 hours

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Clinical Posting

Phase 2:

- 3 weeks clinical posting in the wards/OPD & OT (3hr per day for 5 days a week)
- 1 week posting in Family Planning (3hr per day for 5 days a week)

Phase 3 Part 1:

- 2 weeks clinical posting in the wards/OPD & OT 3hr per day for 6days a week)
- 2 weeks clinical posting in the Labour Room (3hr per day for 6days a week)

Phase 3 Part 2:

Total 12 weeks of clinical posting

- 2 weeks posting in Labour room
- 1 week posting in Family Planning
- 9 weeks clinical posting in the wards/OPD & OT

Students are encouraged to follow their patients in labour rooms in the evening to fulfil the certifiable competencies.

Self Directed Learning

Phase 3 Part 1: 05 hours

Phase 3 part 2: 15 hours

Assessment

Attendance

1. Attendance of UG students should be 75% in theory and 80% in clinical posting for each phase (Phase II, III part 1 & 2) independently, as eligibility to appear for the examination.
2. Learners who do not have at least 75% attendance in the electives will not be eligible for the Third Professional - Part II examination.

Formative Assessment:

Students will maintain log book for day to day activity. Log books (including required skill certifications) will be given grades in internal assessment. The records will be assessed for completeness, accuracy, authenticity and timely submission. (There should be separate marks for any creativity regarding reporting of observed cases).

Internal Assessment:

1. There will be one theory examination in Phase 2, One in Phase 3 part 1 and one in Phase 3 part 2. An end of posting clinical assessment (ward leaving) will be conducted for each clinical posting in each professional year. This will be conducted as viva-voce, OSCE, Long Obstetric case & Short Gynae case.
2. Assessment of Phase II & III will be independent and contribute proportionally to final internal assessment.

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3. At the end of completion of course and before the university examination, sent up examination (both theory and practical) will be held as per university examination pattern.
4. Log books (including required skill certifications) will be given grades in internal assessment. 10% marks in final internal assessment will be contributed by Log book assessment.
5. Learners 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.
6. Internal assessment marks will reflect as a separate head of passing at the summative examination.
7. The results of the internal assessment will be displayed on the notice board within 1-2 weeks of the test.
8. The remedial measures will be taken for students who are either not able to score qualifying marks or have missed on some assessments due to any reasons.
9. There is one certifiable competency in the Obstetrics & Gynaecology. Learners must have completed the certifiable competency in Phase 3 of training and completed the log book appropriately to be eligible for appearing at the final university examination.
10. A learner will be allowed to appear in final part II exam when he / she completed Elective posting satisfactorily.

Table 5: Distribution of internal assessment marks across phases

| Phase | Theory | Practical/ Clinical |
|----------------|--------|---------------------|
| Phase 2 | 20 | 20 |
| Phase 3 Part 1 | 40 | 40 |
| Phase 3 Part 2 | 60 | 60 |
| Sent Up | 60 | 60 |
| Log Book | 20 | 20 |
| Total | 200 | 200 |

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Summative Assessment (University examination)

University examinations will be designed with a view to ascertain whether the candidate has acquired the necessary knowledge, minimal level of skills, ethical and professional values with clear concepts of the fundamentals which are necessary for him/her to function effectively and appropriately as a physician of first contact.

Assessment shall be carried out on an objective basis to the extent possible. Nature of questions will include different types such as structured essays (Long Answer Questions - LAQ), Short Answers Questions (SAQ) and objective type questions (e.g. Multiple Choice Questions - MCQ). Marks for each part should be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks.

As OBGY has two sets of papers, so the learner must secure at least 40% marks in each of the papers with minimum 50% of marks in aggregate (both papers together) to pass.

Practical/clinical examinations will be conducted in the hospital wards. The objective will be to assess proficiency and skills to conduct experiments, interpret data and form logical conclusion. Clinical cases kept in the examination will have common conditions that the learner may encounter as a physician of first contact in the community.

Emphasis will be on candidate's capability to elicit history, demonstrate physical signs, write a case record, analyze the case and develop a management plan.

Viva/oral examination will be designed to assess approach to patient management, emergencies, attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data, X-rays, identification of specimens, NST / CTG, etc.

There will be one main examination in an academic year and a supplementary will be held in 90 days after the declaration of the results of the main examination.

A learner will not be entitled to graduate after 10 years of his/her joining of the first part of the MBBS course.

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University Examinations will be held in Third Professional Part 2 (Final exam). Marks distribution is explained in the following table (Table 2) for all the subject

Table 6: University Examination Marks for OBGY

| Phase of Course | Written Theory Total | Practicals Orals/ Clinicals | Pass Criteria |
|-------------------------------------|-------------------------|-----------------------------------|--|
| Third Professional Part - II | | | Internal Assessment: 50% combined in theory and practical (not less than 40% in each) for eligibility for appearing for University Examinations |
| Obstetrics & Gynaecology - 2 papers | 200 | 200 | University Examination Mandatory 50% marks separately in theory and practical (practical = practical/clinical + viva) |

Criteria for passing in a subject:

A candidate should obtain 50% marks in University conducted examination separately in Theory and Practical (practical includes: practical/ clinical and viva voce) in order to be declared as passed.

Suggested Reading:

- Holland & Brews Manual of Obstetrics. 4th Edition (2016). Publisher: Elsevier
- DC Dutta's Textbook of Obstetrics 9th Edition (2017). Author Hiralal Konar. Publisher: Jaypee Brothers Medical Publishers
- Howkins & Bourne Shaw's Textbook Of Gynaecology 17th Edition. Publisher: Elsevier India
- DC Dutta's Textbook of Gynaecology 8th Edition (2020). Author Hiralal Konar. Publisher: Jaypee Brothers Medical Publishers

Reference Books

- Williams Obstetrics, 26th Edition (2022). Publisher: McGraw Hill Education
- Berek & Novak's Gynecology SAE (2021). Publisher: Wolters Kluwer

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OBGY Competencies with Specific Learning Objectives

| ABBS Phase | NUMBER | COMPETENCY | DOMAIN LEVEL | Core | SUGGESTED TEACHING LEARNING | SUGGESTED ASSESSMENT METHOD | No for certification | Vertical Integration | Horizon tal |
|-----------------|--------|---|---|------|-----------------------------------|----------------------------------|----------------------|----------------------|--------------------------------|
| | | Topic: Demographic and Vital Statistics | Number of competencies: (03) | | | | | | |
| | | Define and discuss birth rate, maternal mortality and morbidity | K | Y | Lectures, small group discussion | short notes | | | Community medicine |
| Phase 2 | OG1.1a | Define birth rate, maternal mortality rate and morbidity including Near Miss Mortality. | K | Y | Lecture | written | | | |
| | OG1.1b | Enumerate factors affecting birth rate | K | Y | Lecture | written | | | |
| | OG1.1c | Enumerate various factors contributing to maternal mortality | K | Y | Lecture | written | | | |
| | OG1.1d | The five Near Miss Mortality and criteria for defining near miss | K | Y | Lecture | written | | | |
| Phase 3, Part 2 | OG1.1e | Discuss various steps to decrease maternal morbidity and mortality | K | Y | Small Group Discussion | Written viva | | | |
| | OG1.2 | Define and discuss perinatal mortality and morbidity including perinatal and neonatal mortality at | K | Y | Lectures, small group discussions | short notes | | | Community medicine |
| Phase 2 | OG1.2a | Define perinatal death, neonatal death, perinatal mortality rate, neonatal mortality rate | K | Y | Lecture | Short notes | | | |
| | OG1.2b | Classify perinatal mortality | K | Y | Lecture | Short notes | | | |
| | OG1.2c | Discuss methods to reduce perinatal and neonatal mortality | K | Y | Lecture | Short notes | | | |
| | | OG1.3 | Define and discuss stillbirth and abortion | K | Y | Lecture, small group discussions | Short notes | | |
| Phase 3, part 1 | OG1.3a | Define stillbirth | K | Y | Self | Short notes | | | |
| | OG1.3b | Classify stillbirth | K | Y | Lecture | Short notes | | | |
| Phase 3, part 1 | OG1.3c | Explain the cause of still birth | K | Y | Lecture | Short notes | | | pathology |
| | OG1.3d | Manage a pregnancy following still birth | K | Y | Lecture | Short notes | | | |
| Phase 2 | OG1.3e | Define abortion | K | Y | Lecture | Short notes | | | |
| | OG1.3f | Discuss the types of abortions | K | Y | Lecture | Short notes | | | |
| Phase 3, part 2 | OG1.3g | Discuss causes of recurrent abortion | K | Y | Lecture | Long answer | | | Forensic Medicine & Toxicology |
| | OG1.3h | Describe workup and management of recurrent abortion | K | Y | SGD | Long answer | | | |
| | | Topic: Anatomy of the female reproductive tract (Basic anatomy and embryology) | Number of competencies: (01) | | | | | | |
| Phase 2 | OG2.1 | Describe and discuss the development and anatomy of the female reproductive tract, relationship to other pelvic organs, applied anatomy as related to Obstetrics and Gynaecology | K | Y | Lecture, small group discussion | Theory, Skill station | | | Human Anatomy |
| Phase 2 | OG2.1a | Discuss the embryological development of female genital tract | K | Y | Lecture | Theory | | | |
| | OG2.1b | Describe the normal anatomy of female genital tract | K | Y | Lecture | Theory | | | |
| Phase 2 | OG2.1c | Explain the relationship of reproductive organs with other pelvic organs | K | Y | Lecture | Theory | | | |
| | OG2.1d | Enumerate common developmental defects encountered in obstetric and gynecology | A | Y | Lecture | Theory | | | |
| Phase 2 | OG2.1e | Discuss approach of laceration and discuss their respective role in preventing prolapse | K | Y | Lecture | Theory | | | |
| | OG2.1f | Discuss the applied anatomy of the female reproductive organs | K | Y | Lecture | Theory | | | |
| | | Topic: Physiology of conception | Number of competencies: (01) | | | | | | |
| | | Describe the physiology of ovulation, menstruation, fertilization, implantation and gametogenesis. | K | Y | Lecture/Seminar | Theory | | | Human Anatomy |

| | | | | | | | |
|---|---------|--|-----|----|---|--------------------------------------|---------------|
| Phase 2 | OC33 Ia | Describe the process of oviductogenesis, ovulation | K | K | Lecture | Theory | |
| Phase 2 | OC33 Ib | Describe the formation and function of corpus luteum | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Ic | Describe the physiology of menstruation | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Id | Discuss the changes in uterine endometrium during menstrual cycle and correlation with the ovarian cycle | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Ie | Enumerate the hypothalamic, pituitary, and ovarian hormones involved in menstrual cycle, their secretion during it | K | K | Lecture | Theory | |
| Phase 2 | OC33 If | Discuss Hypothalamic pituitary and ovarian axis and hormonal changes regulating menstrual cycle | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Jc | Describe the physiology of fertilization | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Jb | Describe the physiology of implantation | K | KH | Lecture | Theory | |
| Phase 2 | OC33 Ji | Describe male and female gametogenesis | K | KH | Lecture | Theory | |
| Topic: Development of the fetus and the placenta Number of competencies:(01) | | | | | | | |
| Phase 2 | OC41 | Describe and discuss the basic embryology of fetus, factors influencing fetal growth and development | K | K | Lecture, small group discuss | Theory | Human Anatomy |
| Phase 2 | OC41 Ia | Describe the anatomy of placenta | K | K | Lecture | Theory | |
| Phase 2 | OC41 Ib | Describe the development of placenta | K | K | Lecture | Theory | |
| Phase 2 | OC41 Ic | Describe the various functions of placenta | K | K | Lecture | Theory | |
| Phase 2 | OC41 Id | Describe the embryological development of fetus | K | K | Lecture | Theory | |
| Phase 2 | OC41 Ie | Discuss the factors contributing to fetal growth & development | K | K | Lecture | Theory | |
| Phase 2 | OC41 If | Describe teratogenesis | K | K | Lecture | Theory | |
| Phase 2 | OC41 Jg | Illustrate the role of various teratogens in fetal anomalies | K | K | Lecture | Theory | |
| Topic: Preconception counselling Number of competencies:(02) Number of procedures that require certification:(NHL) | | | | | | | |
| Phase 3, part 2 | OC51 | Describe, discuss and identify pre existing medical disorders and discuss their management/discuss evidence based intrapartum care | K/S | SH | Lecture, bedside clinics | Theory/clinical assessment | |
| Phase 3 part 2 | OC 5.1a | Define periconceptional counselling | K | K | Lecture | Theory | |
| Phase 3 part 2 | OC 5.1b | Enumerate the preexisting medical conditions for preconceptional counselling | K | K | Lecture | Theory | |
| Phase 3 part 2 | OC 5.1c | Discuss the optimum periconceptional counselling for medical disorders | K | K | Lecture | Theory | |
| Phase 3 part 2 | OC 5.1d | Demonstrate preconceptional counselling in simulation | S | SH | Bed side clinics | clinical assessment | |
| Phase 3 part 2 | OC 5.1e | Discuss the timing of delivery and intrapartum management of each medical condition | K | K | Lecture | Theory | |
| Phase 3 part 2 | OC5.2 | Refer/line maternal high risk factors and verify immunisation status | K/S | SH | Lecture, bedside clinics | Theory/clinical assessment | |
| Phase 3 part 2 | OC 5.2a | Evaluate medical, surgical, psychiatric, family and personal history for identification of high risk factor | S | SH | bedside clinics | clinical assessment | |
| Phase 3 part 2 | OC 5.2b | Demonstrate identification of maternal high risk factors in periconceptional counselling in simulation | K | SH | bedside clinics | clinical assessment | |
| Phase 3, part 2 | OC 5.2c | Implement the vaccinations required prior to pregnancy and their schedule | K | K | Lecture | clinical assessment | |
| Topic: Diagnosis of pregnancy Number of competencies:(01) Number of procedures that require certification:(NHL) | | | | | | | |
| Phase 2 | OC61 | Describe, discuss and demonstrate clinical features of pregnancy, derive and discuss its differential diagnosis, elaborate principles underlying and interpret pregnancy tests | S | SH | Lecture, small group discussions, bedside | Theory/clinical assessment/viva voce | |
| Phase 2 | OC61a | Define the duration of normal pregnancy and different trimester of pregnancy | K | K | DOAP | Viva | |
| Phase 2 | OC61b | Describe symptoms of pregnancy in three trimesters | K/S | KH | DOAP BEDSIDE | Viva CA | |
| Phase 2 | OC61c | Enumerate various signs of first, second and third trimester of pregnancy | K/S | KH | DOAP BEDSIDE | Viva CA | |
| Phase 2 | OC61d | Demonstrate history taking and examination of patient to diagnose pregnancy | K | K | DOAP | Viva | |
| Phase 2 | OC61e | Discuss the differential diagnosis of pregnancy | K | K | DOAP | Viva | |

| Phase 2 | OC6.1f | Enumerate the diagnostic tests for detection and diagnosis of pregnancy as per period of gestation | K | K | DOAP | Viva | |
|--|--------|--|-----|----|---|-------------------------------------|------------|
| Phase 2 | OC6.1g | Explain the principles underlying pregnancy tests | K | K | | | |
| Topic: Maternal changes in pregnancy. Number of competencies:(6). Number of procedures that require certification:(Nil). | | | | | | | |
| Phase 2 | OC7.1 | Describe and discuss changes in genital tract cardiovascular system, respiratory, haematology, renal | K | KH | LEC 11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40,41,42,43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78,79,80,81,82,83,84,85,86,87,88,89,90,91,92,93,94,95,96,97,98,99,100,101,102,103,104,105,106,107,108,109,110,111,112,113,114,115,116,117,118,119,120,121,122,123,124,125,126,127,128,129,130,131,132,133,134,135,136,137,138,139,140,141,142,143,144,145,146,147,148,149,150,151,152,153,154,155,156,157,158,159,160,161,162,163,164,165,166,167,168,169,170,171,172,173,174,175,176,177,178,179,180,181,182,183,184,185,186,187,188,189,190,191,192,193,194,195,196,197,198,199,200,201,202,203,204,205,206,207,208,209,210,211,212,213,214,215,216,217,218,219,220,221,222,223,224,225,226,227,228,229,230,231,232,233,234,235,236,237,238,239,240,241,242,243,244,245,246,247,248,249,250,251,252,253,254,255,256,257,258,259,260,261,262,263,264,265,266,267,268,269,270,271,272,273,274,275,276,277,278,279,280,281,282,283,284,285,286,287,288,289,290,291,292,293,294,295,296,297,298,299,300,301,302,303,304,305,306,307,308,309,310,311,312,313,314,315,316,317,318,319,320,321,322,323,324,325,326,327,328,329,330,331,332,333,334,335,336,337,338,339,340,341,342,343,344,345,346,347,348,349,350,351,352,353,354,355,356,357,358,359,360,361,362,363,364,365,366,367,368,369,370,371,372,373,374,375,376,377,378,379,380,381,382,383,384,385,386,387,388,389,390,391,392,393,394,395,396,397,398,399,400,401,402,403,404,405,406,407,408,409,410,411,412,413,414,415,416,417,418,419,420,421,422,423,424,425,426,427,428,429,430,431,432,433,434,435,436,437,438,439,440,441,442,443,444,445,446,447,448,449,450,451,452,453,454,455,456,457,458,459,460,461,462,463,464,465,466,467,468,469,470,471,472,473,474,475,476,477,478,479,480,481,482,483,484,485,486,487,488,489,490,491,492,493,494,495,496,497,498,499,500,501,502,503,504,505,506,507,508,509,510,511,512,513,514,515,516,517,518,519,520,521,522,523,524,525,526,527,528,529,530,531,532,533,534,535,536,537,538,539,540,541,542,543,544,545,546,547,548,549,550,551,552,553,554,555,556,557,558,559,560,561,562,563,564,565,566,567,568,569,570,571,572,573,574,575,576,577,578,579,580,581,582,583,584,585,586,587,588,589,590,591,592,593,594,595,596,597,598,599,600,601,602,603,604,605,606,607,608,609,610,611,612,613,614,615,616,617,618,619,620,621,622,623,624,625,626,627,628,629,630,631,632,633,634,635,636,637,638,639,640,641,642,643,644,645,646,647,648,649,650,651,652,653,654,655,656,657,658,659,660,661,662,663,664,665,666,667,668,669,670,671,672,673,674,675,676,677,678,679,680,681,682,683,684,685,686,687,688,689,690,691,692,693,694,695,696,697,698,699,700,701,702,703,704,705,706,707,708,709,710,711,712,713,714,715,716,717,718,719,720,721,722,723,724,725,726,727,728,729,730,731,732,733,734,735,736,737,738,739,740,741,742,743,744,745,746,747,748,749,750,751,752,753,754,755,756,757,758,759,760,761,762,763,764,765,766,767,768,769,770,771,772,773,774,775,776,777,778,779,780,781,782,783,784,785,786,787,788,789,790,791,792,793,794,795,796,797,798,799,800,801,802,803,804,805,806,807,808,809,810,811,812,813,814,815,816,817,818,819,820,821,822,823,824,825,826,827,828,829,830,831,832,833,834,835,836,837,838,839,840,841,842,843,844,845,846,847,848,849,850,851,852,853,854,855,856,857,858,859,860,861,862,863,864,865,866,867,868,869,870,871,872,873,874,875,876,877,878,879,880,881,882,883,884,885,886,887,888,889,890,891,892,893,894,895,896,897,898,899,900,901,902,903,904,905,906,907,908,909,910,911,912,913,914,915,916,917,918,919,920,921,922,923,924,925,926,927,928,929,930,931,932,933,934,935,936,937,938,939,940,941,942,943,944,945,946,947,948,949,950,951,952,953,954,955,956,957,958,959,960,961,962,963,964,965,966,967,968,969,970,971,972,973,974,975,976,977,978,979,980,981,982,983,984,985,986,987,988,989,990,991,992,993,994,995,996,997,998,999,1000 | Theory | Physiology |
| Phase 2 | OC7.1a | Describe the changes occurring in renal tract and breast in pregnancy. | K | K | Lecture | Theory | |
| Phase 2 | OC7.1b | Describe the changes occurring in cardiovascular system in pregnancy and their relation to fetal CVS pathology. | K | KH | Lecture | Theory | |
| Phase 2 | OC7.1c | Describe the changes in respiratory system in pregnancy. | K | KH | Lecture | Theory | |
| Phase 2 | OC7.1d | Enumerate changes in haematological parameters in pregnancy. | K | KH | Lecture | Theory | |
| Phase 2 | OC7.1e | Discuss changes in renal system in pregnancy. | K | KH | Lecture | Theory | |
| Phase 2 | OC7.1f | Describe changes in gastrointestinal system in pregnancy, and its correlation with common complaints during pregnancy. | K | KH | Lecture | Theory | |
| Phase 2 | OC7.1g | Differentiate physiological changes of pregnancy from pathological changes. | K | KH | Lecture | Theory | |
| Topic: Antenatal care. Number of competencies :(8). Number of | | | | | | | |
| Phase 2 | OG8.1 | Enumerate, describe and discuss the objectives of antenatal care, assessment of period of gestation, screening for high risk factors, | K | KH | Small group discussions, bedside clinic, DOAP | written/viva voice/skill assessment | |
| Phase 2 | OG8.1a | Enumerate the objectives of antenatal care | K | KH | Lecture | written/viva | |
| Phase 2 | OG8.1b | Enumerate the components of antenatal care | K | KH | Lecture | written/viva | |
| Phase 2 | OG8.1c | Discuss the objectives of antenatal care | K | KH | Small group discussion | Skill assessment | |
| Phase 2 | OG8.1d | Demonstrate the calculation of period of gestation of an antenatal woman through history, obstetric examination | K | SH | Lecture, small group | written/viva | |
| Phase 2 | OG8.1e | Discuss screening for high risk factors in pregnancy | K | KH | Small group discussion, bedside clinic, DOAP | written/viva voice/skill assessment | |
| Phase 2 | OG8.2 | Identify, document and present an obstetric history including menstrual history, previous obstetric history, comorbid conditions, past medical history and surgical history | K/S | SH | Small group discussion, bedside clinic, DOAP | written/viva voice/skill assessment | |
| Phase 2 | OG8.2a | Demonstrate how to write obstetric formula, calculate LMP, LDD, DOI | S | SH | DOAP session | Skill assessment | |
| Phase 2 | OG8.2b | Discuss the trimester wise history | K | SH | DOAP | Viva VOICE | |
| Phase 3, part 1 | OG8.2c | Present obstetric history, past history, and personal history including calculation of embryos, and protein | S | SH | DOAP session | Viva Voice | |
| Phase 3, part 1 | OG8.2d | Perform obstetric history taking with past and family history taking | K | SH | Bed side clinics | Skill assessment | |
| Topic: Demonstrate, document and perform an obstetrical examination including general and abdominal examination and clinical monitoring of maternal and fetal well being. | | | | | | | |
| Phase 2 | OG8.3 | Describe, demonstrate, document and perform an obstetrical examination including general and abdominal examination and clinical monitoring of maternal and fetal well being. | K/S | SH | Bedside clinic, DOAP session | Skill assessment | |
| Phase 2 | OG8.3a | Perform general physical systemic examination on a pregnant woman simulation | S | SH | DOAP | Skill assessment | |
| Phase 2 | OG8.3b | Perform all obstetric grips | S | SH | DOAP | Skill assessment | |
| Phase 2 | OG8.3c | Evaluate maternal condition by taking pulse, blood pressure, pallor, Discharge, per vagina, peral oedema | S | SH | DOAP | Skill assessment | |
| Phase 2 | OG8.3d | Auxiliary IHS | S | SH | DOAP | Skill assessment | |
| Phase 2 | OG8.4 | Describe and demonstrate the clinical monitoring of maternal and fetal well being. | K/S | SH | Bedside clinic, DOAP, small group discussion | Skill assessment viva voice | |
| Phase 3, part 2 | OG8.4a | Demonstrate how to take BP, Pulse Rate, Resp Rate, Temp, pallor, Discharge per vagina, peral oedema | S | SH | DOAP session | Skill assessment | |
| Phase 3, part 2 | OG8.4b | Measure weight, height, BMI, Urine, abs sugar | S | SH | DOAP session | Skill assessment | |
| Phase 3, part 2 | OG8.4c | Show how to counsel for DM | S | SH | DOAP session | Skill assessment | |
| Phase 3, part 2 | OG8.4d | Show how to examine the CVS and RS and interpret normal and abnormal findings | K/S | SH | DOAP | Skill assessment | |
| Phase 3, part 2 | OG8.4e | Perform NST | S | SH | DOAP | Skill assessment | |
| Topic: Describe and demonstrate pelvic assessment in a model | | | | | | | |
| Phase 2 | OG8.5 | Describe and demonstrate pelvic assessment in a model | K/S | SH | DOAP session | Skill assessment | |
| Phase 2 | OG8.5a | Demonstrate the bony landmarks of the boundary of true pelvis | S | SH | Lecture | Skill assessment | |
| Phase 2 | OG8.5b | Describe the obstetric significance of the plane of least pelvic dimensions | S | SH | Lecture | Skill assessment | |
| Phase 3, part 1 | OG8.5c | Demonstrate the assessment of diagonal conjugate on the bony pelvis | S | SH | DOAP | Skill assessment | |
| Phase 3, part 1 | OG8.5d | Demonstrate the procedure of pelvic assessment on a model of bony pelvis | S | SH | DOAP | Skill assessment | |
| Phase 3, part 1 | OG8.5e | Describe and demonstrate the anatomical and obstetric pelvic axis on a model of bony pelvis | S | SH | DOAP | Skill assessment | |
| Phase 3, part 2 | OG8.5f | Interpret the clinical importance of each parameter | K/S | SH | Small group discussion | Skill assessment | |

| Phase | Code | Assess and counsel the patient in a simulated environment regarding appropriate nutrition in pregnancy | K/S | SH | Y | DOAP session, bedside clinic | Skill assessment |
|---|---------|--|-----|------|---|---------------------------------|-------------------|
| Phase 2 | OC8 6 | Assess and counsel the patient in a simulated environment regarding appropriate nutrition in pregnancy | | | | | |
| Phase 2 | OC8 6a | Describe nutritional requirements in normal low risk pregnancy | K | KH | Y | Lecture | Written viva voce |
| Phase 2 | OC8 6b | Assessment of nutritional deficiencies in pregnant women | S | SH | Y | DOAP session, bedside clinic | Written viva voce |
| Phase 2 | OC8 6c | Discuss correlation of nutritional deficiencies and adverse pregnancy outcome | K | KH | Y | DOAP session, bedside clinic | Skill Assessment |
| Phase 2 | OC8 6d | Make a dietary plan for a low risk pregnant woman | S | SH | Y | Bed side clinics | Skill Assessment |
| Phase 2 | OC8 6e | Counsel the low risk pregnant woman for appropriate nutrition | S | SH | Y | DOAP session, bedside clinic | Skill Assessment |
| Phase 2 | OC8 6f | Take & document dietary history of a pregnant woman | S | SH | Y | DOAP session, bedside clinic | Skill Assessment |
| Phase 2 | OC8 7 | Enumerate the indications for and types of vaccination in pregnancy. | K | KH | Y | Lecture, small group | Written viva voce |
| Phase 2 | OC8 7a | Enumerate the indications for vaccination in pregnancy | K | KH | Y | Lecture | Theory |
| Phase 2 | OC8 7b | Enumerate the types and routes of vaccines | K | KH | Y | Small group | Theory |
| Phase 2 | OC8 7c | Enumerate vaccines contraindicated in pregnancy | K | KH | Y | DOAP session, bedside clinic | Theory/ Viva voce |
| Phase 2 | OC8 8 | Enumerate the indications and describe the investigations including the use of ultrasound in the initial assessment and monitoring in pregnancy | K | KH | Y | Lecture, small group discussion | Written viva voce |
| Phase 2 | OC8 8a | Enumerate the investigations to be done at the first visit in pregnancy | K | KH | Y | Lecture | Theory |
| Phase 2 | OC8 8b | Describe all the maternal investigations their technique and normal values | K | KH | Y | Lecture | Theory |
| Phase 2 | OC8 8c | Enumerate the indications of antenatal investigations in all trimesters of pregnancy | K | KH | Y | Small group discussion | Theory/ Viva voce |
| Phase 2 | OC8 8d | Describe the indications for use of ultrasound in pregnancy | K | KH | Y | Small group discussion | Theory/ Viva voce |
| Phase 2 | OC8 8e | Describe various features of pregnancy in ultrasound and tests for monitoring of early pregnancy | K | KH | Y | DOAP session, bedside clinic | Theory |
| Topic: Complications in early pregnancy Number of competencies:(05) | | | | | | | |
| Phase 2 | OC9 1 | Classify, define and discuss the aetiology and management of abortions including threatened, incomplete, inevitable, missed and septic. | K | KH | Y | Lecture, small group discuss | Written viva voce |
| Phase 2 | OC9 1a | Classify and define various types of abortion | K | KH | Y | Lecture | Theory |
| Phase 2 | OC9 1b | Enumerate the causes of first and second trimester abortions (maternal and fetal factors). Also define recurrent m | K | KH | Y | Lecture, Small group discussion | Theory/ Viva voce |
| Phase 2 | OC9 1c | Discuss the aetiology of abortions (threatened, incomplete, inevitable, missed and septic | K | KH | Y | DOAP session | Theory/ Viva voce |
| Phase 2 | OC9 1d | Describe the management of abortion (medical, incomplete, inevitable, missed and septic) | K | KH | Y | DOAP session | Theory/ Viva voce |
| Phase 2 | OC9 1e | Enumerate various complications related to abortions and also post abortifacient | K | KH | Y | DOAP session | Theory/ Viva voce |
| Phase 2 | OC9 2 | Describe the steps and observe/ assist in the performance of an MTP evacuation. | S | SH | Y | DOAP session, bedside | Viva voce |
| Phase 3 part 1 | OC9 2 a | Describe the steps of MTP evacuation. | K | KH | Y | bedside clinic | Viva voce |
| Phase 3 part 1 | OC9 2 b | Enumerate the risks and complications of MTP evacuation. | K | KH | Y | bedside clinic | Viva voce |
| Phase 3 part 2 | OC9 2 c | Obtain informed consent before doing MTP evacuation. | S | SH | Y | DOAP | VIVA VOCE |
| Phase 3 part 2 | OC9 2 d | Discuss the methods available for pre-abortion cervical dilatation | K | KH | Y | Bedside clinic | VIVA VOCE |
| Phase 3 part 2 | OC9 2 e | Observe 5 MTP evacuation procedures | S | SH | Y | DOAP session | VIVA VOCE |
| Phase 3 part 2 | OC9 2 f | Assess in 2 MTP Procedures | S | KHSH | Y | DOAP session | VIVA VOCE |
| Phase 3 part 2 | OC9 2 f | List the follow up advice at the time of discharge. | S | SH | Y | Bedside clinic | VIVA VOCE |
| Phase 2 | OC9 3 | Discuss the aetiology, clinical features, differential diagnosis of acute abdomen in early pregnancy (with a focus on ectopic pregnancy) and enumerate the principles of medical and surgical management | K | KH | Y | Lecture, small group discuss | Written viva voce |
| Phase 2 | OC9 3a | Enumerate the symptoms and signs of ectopic pregnancy and its initial assessment. | K | KH | Y | Lecture | Theory |
| Phase 2 | OC9 3b | Diagnosis of viable, intrauterine pregnancy, and ectopic pregnancy. | K | KH | Y | Lecture | Theory |
| Phase 2 | OC9 3c | Discuss the differential of acute abdomen in pregnancy. | K | KH | Y | Lecture | Theory |
| Phase 2 | OC9 3d | Enumerate causes and sites of ectopic pregnancies | K | KH | Y | DOAP session | Theory/ Viva voce |
| Phase 3 part 1 | OC9 3e | Describe the management of ectopic pregnancy (expectant, medical, surgical) and also follow up | K | KH | Y | DOAP session | Theory/ Viva voce |

| | | Discuss the clinical features, laboratory investigations, ultrasonography, differential diagnosis, principles of management and follow up of gestational trophoblastic neoplasms | K | KH | Y | Lecture, Small group discussion | Written/ Viva voce | Radiodiagn |
|-----------------|----------|--|---|----|---|--|--|------------|
| Phase 3, part 1 | OC9.4 | Discuss the clinical presentation of a case of gestational trophoblastic neoplasia (GTN) | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC9.4 a | Describe the clinical presentation of a case of gestational trophoblastic neoplasia (GTN) | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC9.4 b | Discuss the diagnostic work up of a woman with suspected GTN | K | KH | Y | Small group discussion | Written | |
| Phase 3, part 1 | OC9.4 c | Discuss the differential diagnosis of a woman with GTN | K | KH | Y | Small group discussion | Written | |
| Phase 3, part 2 | OC9.4 d | Describe the risk scoring for GTD | K | KH | Y | Small group discussion | Viva voce | |
| Phase 3, part 2 | OC9.4 e | Describe the principles of management of GTN | K | KH | Y | Small group discussion | Written | |
| Phase 3, part 2 | OC9.4 f | Discuss the follow up protocol for GTN | K | KH | Y | Small group discussion | Written | |
| | OC9.5 | Describe the etiology, impact on maternal and fetal health and principles of management of hyperemesis gravidarum | K | KH | Y | Lecture, Small group discussion | Written/ Viva voce | |
| Phase 3, part 1 | OC9.5 a | Describe the etiology of hyperemesis gravidarum (HG) | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC9.5 b | Discuss the fetal/maternal complications of hyperemesis gravidarum | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC9.5 c | Describe the clinical features and important parameters to be monitored in a woman with HG | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC9.5 d | Describe the principles of management of HG | K | KH | Y | Lecture | Written | |
| | | Topic: Antepartum haemorrhage | Number of procedure require certification:(02) | | | | | |
| | OC10.1 | Define, classify and describe the aetiology, pathogenesis, clinical features, ultrasonography, differential diagnosis and management of antepartum haemorrhage in pregnancy | K | KH | Y | Lecture, Small group discussion, Bedside clinics | | |
| Phase 3, part 1 | OC10.1 a | Define and classify the aetiology of antepartum haemorrhage in pregnancy | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC10.1 b | Discuss the clinical features and management of placenta previa | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC10.1 c | Discuss the clinical features and management of abruptio placentae | K | KH | Y | Lecture | Written | |
| Phase 3, part 1 | OC10.1 d | Enumerate the fetal/maternal risks and complications of APH | K | KH | Y | SGD | viva voce | |
| Phase 3, part 1 | OC10.1 e | Discuss the work up of a woman with APH | K | KH | Y | Bedside clinics | viva voce | |
| Phase 3, part 1 | OC10.1 f | Describe the management protocol of a woman with APH | K | KH | Y | Bedside clinics | viva voce | |
| | OC10.2 | Enumerate the indications and describe the appropriate use of blood and blood products, their complications and management. | K | KH | Y | Lecture, Small group discussion | | Pathology |
| Phase 3, Part 2 | OC10.2 a | Describe the classification of haemorrhagic shock | K | KH | Y | Lecture | Written | |
| Phase 3, Part 1 | OC10.2 b | Enumerate the steps to be taken before starting a blood transfusion | K | KH | Y | SGD | viva voce | |
| Phase 3, Part 1 | OC10.2 c | Discuss clinical features of a blood transfusion reaction | K | KH | Y | SGD | viva voce | |
| Phase 3, Part 2 | OC10.2 d | Describe the diagnostic work up of a woman with suspected blood transfusion reaction | K | KH | Y | SGD | Written | |
| Phase 3, part 2 | OC10.2 e | List the risks and complications of a blood transfusion reaction | K | KH | Y | SGD | viva voce | |
| Phase 3, part 2 | OC10.2 f | Describe the management of a blood transfusion reaction | K | KH | Y | Lecture | Written | |
| | | Topic: Multiple pregnancies | Number of procedure require certification:(01) | | | | | |
| | OC11.1 | Describe the etiology, clinical features, diagnosis and investigations, complications, principles of management of multiple pregnancies | K | KH | Y | Lecture, Small group discussion, Bedside clinics | Theory (formal assessment/ Viva voce) | |
| Phase 3, Part 2 | OC11.1 a | Describe the etiology of multiple pregnancies | K | KH | Y | Lecture | Bed side clinics | |
| Phase 3, Part 2 | OC11.1 b | Enumerate the clinical features and diagnosis of multiple pregnancies | K | KH | Y | SGD | Clinical assessment (formal assessment) | |
| Phase 3, Part 2 | OC11.1 c | Enumerate the investigations for multiple pregnancies | K | KH | Y | Bed side clinics | Clinical assessment (formal assessment) | |
| Phase 3, Part 2 | OC11.1 d | Discuss the ultrasonic features of twin pregnancy and how will you determine the zygosity | K | KH | Y | Lecture | Written | |
| Phase 3, Part 2 | OC11.1 e | Discuss the foetal/maternal complications of multiple pregnancy | K | KH | Y | Bed side clinics | viva voce | |
| Phase 3, Part 2 | OC11.1 f | Discuss the important principles for antenatal management of a twin pregnancy | K | KH | Y | Lecture | Theory | |
| Phase 3, Part 2 | OC11.1 g | Discuss the intrapartum management and complications of twin pregnancy | K | KH | Y | SGD | viva voce | |

| Phase 3, part 2 | OC11.1b | Describe the complications of monozygotic twin | | K | KII | Y | Lecture | Clinical assessment/ Viva voce/ OSC/ | |
|-----------------|---------------|---|--|---|-----|--|--|---------------------------------------|---------------|
| | | | Topic: Medical Disorders in pregnancy | | | Number of procedure require certifications(NIL) | | | |
| | OG12.1 | Define, classify and describe the etiology and pathophysiology, early detection, investigations; principles of management of hypertensive disorders of pregnancy and eclampsia, complications of eclampsia. | Number of competencies(06) | K | KII | Y | Lecture, Small group discussion, Bedside clinics | Written/Clinical assessment/Viva voce | General Med |
| Phase 3, part 1 | OG12.1.a | Define and classify hypertensive disorders in pregnancy. | | K | KII | Y | Lecture | written | |
| Phase 3, part 1 | OG12.1.b | List aetiological agents of hypertensive disorders of pregnancy. | | K | KII | Y | Lecture | written | |
| Phase 3, part 1 | OG12.1.c | Enumerate methods for early detection of preeclampsia. | | K | KII | Y | Lecture | written | |
| Phase 3, part 1 | OG12.1.d | Discuss the investigations and their relevance in hypertension in pregnancy. | | K | KII | Y | Small group discussion | Clinical assessment | |
| Phase 3, part 1 | OG12.1.e | Discuss the management of hypertensive disorders of pregnancy. | | K | KII | Y | SGD | Clinical assessment | |
| Phase 3, part 2 | OG12.1f | Define eclampsia and its differential diagnosis. | | K | KII | Y | Lecture | written | |
| Phase 3, part 2 | OG12.1g | List the investigations and their relevance in eclampsia. | | K | KII | Y | SGD | Clinical assessment | |
| Phase 3, part 2 | OG12.1h | Enumerate complications of eclampsia. | | K | KII | Y | SGD | Clinical assessment | |
| | OG12.2 | Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anaemia in pregnancy. | | K | KII | Y | Lecture, Small group discussion, Bedside clinics | Written/Clinical assessment/Viva voce | General Med |
| Phase 3, part 1 | OG12.2.a | Define and classify anaemia in pregnancy. | | K | KII | Y | Lecture | written/viva voce | |
| Phase 3, part 1 | OG12.2.b | Discuss its aetiology, pathogenesis and Diagnosis. | | K | KII | Y | Lecture | written | |
| Phase 3, part 1 | OG12.2.c | Enumerate investigations of anaemia during pregnancy. | | K | KII | Y | Small group discussion, SGD | Written/Viva voce | |
| Phase 3, part 1 | OG12.2.d | Describe the management of anaemia during pregnancy and labor. | | K | KII | Y | Lecture | Viva voce | |
| Phase 3, part 1 | OG12.2.e | Discuss maternal and fetal complications of anaemia in pregnancy. | | K | KII | Y | Lecture | Written/Viva | |
| | OG12.3 | Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus, and the management during pregnancy and labor, and complications of diabetes in pregnancy. | | K | KII | Y | Lecture, Small group discussion, Bedside clinics | Written/Skill assessment/Viva voce | General Med |
| Phase 3, part 1 | OG12.3.a | Define diabetes in pregnancy and List screening methods for gestational diabetes mellitus. | | K | KII | Y | Lecture/SGD | Written/Viva voce | |
| Phase 3, part 1 | OG12.3.b | Discuss classification aetio-pathogenesis of Diabetes in pregnancy. | | K | KII | Y | Lecture | Written | |
| Phase 3, part 1 | OG12.3.c | Discuss Clinical features and diagnosis of diabetes in pregnancy. | | K | KII | Y | Lecture | written | |
| Phase 3, part 1 | OG12.3.d | Discuss investigations to be done in pregnant woman with diabetes in pregnancy. | | K | KII | Y | Lecture/SGD | Written/Viva voce | |
| Phase 3, part 2 | OG12.3.e | Describe management during pregnancy and labor of diabetes in pregnancy. | | K | KII | Y | SGD | Viva voce | |
| Phase 3, part 2 | OG12.3.f | Enumerate maternal and fetal complications of diabetes in pregnancy. | | K | KII | Y | Lecture/SGD | written/viva voce | |
| | OG12.4 | Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of heart disease in pregnancy. | | K | KII | Y | Lecture, Small group discussion, Bedside clinics | Written/Skill assessment/Viva voce | General Med |
| Phase 3, Part 2 | OG12.4.a | Define and classify heart disease in pregnancy. Discuss their aetio-pathogenesis. | | K | KII | Y | Lecture | Written | |
| Phase 3, Part 2 | OG12.4.b | Discuss the aetio-pathogenesis of heart disease in pregnancy. | | K | KII | Y | Lecture | Written | |
| Phase 3, Part 2 | OG12.4.c | Enumerate various methods and investigations for diagnosis of heart disease in pregnancy. | | K | KII | Y | SGD | Viva voce | |
| Phase 3, Part 2 | OG12.4.d | Discuss adverse effects on mother and fetus. | | K | KII | Y | SGD | VIVA voce | |
| Phase 3, Part 2 | OG12.4.e | Discuss management during pregnancy and labor. | | K | KII | Y | Bed side discussion | VIVA VOICE | |
| Phase 3, Part 2 | OG12.4.f | Enumerate complications of heart disease in pregnancy and labor. | | K | KII | Y | Bed side discussion | VIVA VOICE | |
| Phase 3, Part 2 | OG12.5 | Describe the clinical features, detection, effect of pregnancy on the disease and impact of the disease on pregnancy, complications and management of urinary tract infections in pregnancy. | | K | KII | Y | Lecture, Small group discussion, Bedside clinics | Written/Viva voce/ Skill assessment | General Med/c |

| | OG13.2 | Define, describe the causes, pathophysiology, diagnosis, investigations and management of preterm labor, PROM and postulated pregnancy. | K/S | K/H | Y | Lecture, Small group discussion, Bedside clinics | Theory/ OSCE/ Clinical ASSESSMEN/ Viva | |
|----------------|---------|--|-----|-----|---|--|--|---------------|
| Phase 3-part 2 | OG13.2a | Define Preterm labour , PROM. Enumerate the causes of preterm labour and factors predisposing to it | K | KH | Y | Lecture | written | |
| Phase 3-part 2 | OG13.2b | Discuss the pathophysiology of preterm labour | K | KH | Y | bedside clinics | Written | |
| Phase 3-part 2 | OG13.2c | Analyse the ultrasound image of cervix. | K | SH | Y | group discussion | viva | |
| Phase 3-part 2 | OG13.2d | List the clinical features suggestive of PTL and PROM | K | KH | Y | group discussion | written | |
| Phase 3-part 2 | OG13.2e | Enumerate the fetal complications of prematurity. | K | KH | Y | group discussion | written | |
| Phase 3-part 2 | OG13.2f | Define PROM. Enumerate the causes of PROM, and factors predisposing | K | KH | Y | SCD | VIVA/VOC/E | |
| Phase 3-part 2 | OG13.2g | Enumerate the investigations to be advised in PROM | K | KH | Y | Bedside clinics | viva VOC/E | |
| Phase 3-part 2 | OG13.2h | Discuss the monitoring in a case of PROM | K | KH | Y | SCD | viva VOC/E | |
| Phase 3-part 2 | OG13.2i | Define Postdated pregnancy | K | KH | Y | Lecture | written | |
| Phase 3-part 2 | OG13.2j | Enumerate the causes of Postdated pregnancy. | K | KH | Y | Lecture | written | |
| Phase 3-part 2 | OG13.2k | Monitoring of Postdated pregnancy | K | KH | Y | SCD | Viva Voice | |
| Phase 3-part 2 | OG13.3 | Observe/ assist in the performance of an artificial rupture of membranes | S | SH | Y | DOAP session, Bedside | Skill assessment | |
| Phase 3-part 2 | OG13.3a | Enumerate the indications of ARM | S | KH | Y | Bedside clinics | clinical assessment | |
| Phase 3-part 2 | OG13.3b | Enumerate the complications of ARM and their management | S | KH | Y | Bedside clinics | clinical assessment | |
| Phase 3-part 2 | OG13.3c | Explain how to perform ARM | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4 | Demonstrate the stages of normal labor in a simulated environment mannequin and counsel on me | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4a | Define the stages of labour . Demonstrate the mechanism of normal labour on dummy and pelvis | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4b | Explain the cervical changes in the first stage of labour | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4c | List the prerequisites before Pelvic examination on simulation | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4d | Explain the methods of safe abortion | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.4e | Demonstrate the pre and post abortion counselling | S | SH | Y | DOAP session | Skill assessment | |
| Phase 3-part 2 | OG13.5 | Observe and assist the conduct of a normal vaginal delivery | S | P | Y | DOAP session | Log book | |
| Phase 3-part 2 | OG13.5a | Observe and assist the conduct of a normal vaginal delivery in labour room | S | P | Y | DOAP session | Skill assessment | 10 |
| Phase 3-part 2 | OG14 | Topic: Abnormal Lie and Presentation; Maternal Pelvis Number of competencies:(04) Number of procedure require (certification):(Nil) | | | | | | |
| Phase 3-part 2 | OG14.1 | Enumerate and discuss the diameters of maternal pelvis and types | K | KH | Y | Lecture, Small group discussion, DOAP | Written/ Viva voce/ Skill assessment | Human Anatomy |
| Phase 3-part 2 | OG14.1a | Enumerate and describe the diameters of female pelvis in relation to inlet, midpelvis and outlet of pelvis | K | KH | Y | Session Bedside clinics | Written/ Viva voce/ Skill assessment | |
| Phase 3-part 2 | OG14.1b | Enumerate and discuss different types of maternal pelvis | K | KH | Y | Lecture/ Small group discussion/ Viva voce/ Skill assessment | Written/ Viva voce/ Skill assessment | |
| Phase 3-part 2 | OG14.2 | Discuss the mechanism of normal labor, Define and describe obstructed labor, its clinical features; prevention; and management | K | KH | Y | Lecture, Small group discussion, DOAP | Written/ Viva voce/ Skill assessment | |
| Phase 3-part 2 | OG14.2a | Enumerate the causes of obstructed labour | K | KH | Y | Small group discussion/ Bedside/ Viva voce/ Bedside | Written/ Viva voce/ Skill assessment | |
| Phase 3-part 2 | OG14.2b | Describe the mechanism of normal labour | K | KH | Y | Lecture/ Small group | Written/ Viva voce | |
| Phase 3-part 2 | OG14.2c | Describe the mechanism of obstructed labour | K | KH | Y | Lecture/ Small group | Written/ Viva voce | |
| Phase 3-part 2 | OG14.2d | Define obstructed labour | K | KH | Y | Lecture/ Small group | Written/ Viva voce | |
| Phase 3-part 2 | OG14.2e | Discuss the clinical features of obstructed labour | K | KH | Y | Lecture/ Small group | Written/ Viva voce | |
| Phase 3-part 2 | OG14.2f | Describe the prevention and management of obstructed labour | K | KH | Y | Lecture/ Small group | Written/ Viva voce | |

| Phase 3, part 2 | OG14.1 | Describe and discuss rupture uterus, causes, diagnosis and management | k | KH | Y | Lecture, small group discussions, DOAP session, bedside clinic | written/skill assessment |
|---|---------|--|---|----|---|--|-----------------------------|
| Phase 3, part 2 | OG14.1a | Enumerate the factors predisposing to rupture uterus | k | KH | Y | Lecture | Written |
| Phase 3, part 2 | OG14.1b | Enumerate the causes of rupture uterus | k | KH | Y | Lecture | Written |
| Phase 3, part 2 | OG14.1c | Explain the clinical features of rupture uterus and examination findings of rupture uterus | k | KH | Y | Lecture | Viva VOCE |
| Phase 3, part 2 | OG14.1d | Discuss the management of rupture uterus | k | KH | Y | Small group discussion | Written |
| Phase 3, part 2 | OG14.1 | Describe and discuss the classification, diagnosis, management of abnormal labor | k | KH | Y | Lecture, small group discussion DOAP session, Bedside Clinic | written/skill assessment |
| Phase 3, part 2 | OG14.1a | Define and demonstrate transverse lie | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1b | Define and demonstrate abnormal presentations (breach including types of breach, brow, face, compound) | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1c | Define and demonstrate occipito posterior position | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1d | Discuss diagnosis of abnormal lie or presentation | k | KH | Y | Bedside Clinic | Viva |
| Phase 3, part 2 | OG14.1e | Discuss mechanism of labour in transverse lie | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1f | Discuss mechanism of labour in brow & face presentation | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1g | Discuss mechanism of labour in occipito posterior position | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1h | Discuss Breach delivery, Spontaneous assisted and breach extraction. Discuss contraindications and pre | k | KH | Y | Small group discussion | Viva |
| Phase 3, part 2 | OG14.1i | Discuss the management of transverse lie, brow, face presentation as well as occipito posterior position | k | KH | Y | Small group discussion | Viva |
| Topic: Operative obstetrics Number of competencies: (02) | | | | | | | |
| Phase 3, part 2 | OG15.1 | Enumerate and describe the indications and steps of common obstetric procedures, technique and ca | S | KH | Y | Lecture, small group discussions, seminars | written/skill assessment |
| Phase 3, part 2 | OG15.1a | Describe various episiotomies | k | K | Y | Small group discussion | Short notes |
| Phase 3, part 2 | OG15.1b | List indications of episiotomy | k | K | Y | Small group discussion | Short notes |
| Phase 3, part 2 | OG15.1c | Describe the steps of mediolateral episiotomy | S | KH | Y | DOAP session | W/ voice, Skill assessment |
| Phase 3, part 2 | OG15.1d | Enumerate the complications of episiotomy | k | K | Y | Small group discussion | Short notes |
| Phase 3, part 2 | OG15.1e | Enumerate the indications and contraindications of ventros application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1f | Enumerate the pre-requisites of ventros application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1g | Describe the procedure of Vacuum extraction | S | KH | Y | DOAP session | Viva voice/Skill assessment |
| Phase 3, part 2 | OG15.1h | Enumerate the complications of vacuum extraction | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1i | List the indications of low forceps application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1j | Enumerate the pre-requisites of forceps application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1k | Describe the steps of low forceps application | S | KH | Y | DOAP session | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1l | Enumerate the complications of low forceps application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1m | Discuss the advantages/Disadvantages of ventros over forceps application | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1n | Describe the types of Cesarean section and advantages of lower segment Cesarean section | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1o | Describe the steps of LSCS | S | KH | Y | DOAP session | Viva voice |
| Phase 3, part 2 | OG15.1p | List the complications of LSCS | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1q | Describe the steps of assisted breech delivery | S | KH | Y | DOAP session | Skill assessment |
| Phase 3, part 2 | OG15.1r | Describe the indications and contraindications of external cephalic version | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1s | Describe the indications and contraindications of cervical cerclage | k | K | Y | Small group discussion | Viva voice/Short notes |
| Phase 3, part 2 | OG15.1t | List the complications of cervical cerclage | S | KH | Y | Small group discussion | Viva voice |
| Phase 3, part 2 | OG15.1u | Enumerate the steps of Mc Donald's operation | S | KH | Y | DOAP session | Skill assessment |
| Phase 3, part 2 | OG15.2 | Observe and assist in the performance of an episiotomy and demonstrate the correct suturing techn | S | SH | Y | DOAP session, bedside clinic | Skill assessment |

| Phase 3, part 1 | OG 15.2a | Observe and assist in the performance of an episiotomy. | S | SH | Y | DDPA session | Skill assessment |
|--|----------|---|--|----|---|--|------------------------------------|
| Phase 3, part 1 | OG 15.2b | Demonstrate the correct suturing technique of episiotomy in a simulated environment | S | KH | Y | DDPA session | Skill assessment |
| Phase 3, part 1 | OG 15.2c | Observe the steps of lower segment Caesarean section | S | KH | Y | DDPA session | Skill assessment |
| Phase 3, part 1 | OG 15.2d | Observe assist in forceps delivery. | S | KH | Y | DDPA session | Skill assessment |
| Phase 3, part 1 | OG 15.2e | Observe assist in vacuum extraction. | S | KH | Y | DDPA session | Skill assessment |
| Phase 3, part 1 | OG 15.2f | Observe assist in breech delivery. Observe the various manoeuvres. | S | KH | Y | DDPA session | Skill assessment |
| Topic: Complications of the third stage | | | Number of procedure require certification:(NIL) | | | | |
| Phase 3, part 2 | OG 16.1 | Enumerate and discuss causes, prevention, diagnosis, management, appropriate use of blood and | K | KH | Y | Lecture, small group discussion, bedside | written/skill assessment |
| Phase 2 | OG 16.1a | Enumerate the types of PPH (Acute, traumatic). | K | KH | Y | Lecture | written assessment |
| Phase 2 | OG 16.1b | Discuss active management of third stage of labour | K | KH | Y | Lecture | written assessment |
| Phase 2 | OG 16.1c | Discuss the causes of PPH and predisposing factors | K | KH | Y | Lecture | written assessment |
| Phase 2 | OG 16.1d | Discuss how to make diagnosis of PPH | K | KH | Y | Lecture | written assessment |
| Phase 3, part 1 | OG 16.1e | Discuss PPH (1st) | K | KH | Y | Lecture | written assessment |
| Phase 3, part 1 | OG 16.1f | Discuss PPH (2nd) | K | KH | Y | Lecture | written assessment |
| Phase 3, part 2 | OG 16.1g | Discuss surgical management of PPH including stepwise desaturation in detail | K | KH | Y | Lecture | written assessment |
| Phase 3, part 2 | OG 16.1h | Discuss use of blood and blood products in PPH | K | KH | Y | Lecture | written assessment |
| Phase 3, part 2 | OG 16.2 | Describe and discuss uterine inversion- causes, prevention, diagnosis and management | K | KH | Y | Lecture, small group discussion, bedside | written/viva voce |
| Phase 3, part 2 | OG 16.2a | Define uterine inversion | K | KH | Y | Lecture, small group discuss | written |
| Phase 3, part 2 | OG 16.2b | Enumerate cause of uterine inversion | K | KH | Y | Lecture, small group discuss | written |
| Phase 3, part 2 | OG 16.2c | Classify uterine inversion | K | KH | Y | Lecture, small group discuss | written |
| Phase 3, part 2 | OG 16.2d | Discuss diagnosis of uterine inversion based on clinical features | K | KH | Y | Lecture, small group discuss | viva voce |
| Phase 3, part 2 | OG 16.2e | Discuss the various preventive strategies for uterine inversion | K | KH | Y | Bedside clinics | viva voce |
| Phase 3, part 2 | OG 16.2f | Discuss various management options in a case with uterine inversion | K | KH | Y | Bedside clinics | viva voce |
| Phase 3, part 2 | OG 16.3 | Describe and discuss causes, clinical features, diagnosis, investigations, monitoring of fetal well be | K/S | KH | Y | Lecture, small group discussion, bedside | written/skill assessment/viva voce |
| Phase 3, part 2 | OG 16.3a | Define Fetal Growth Restriction. Enumerate the causes of IGR and its clinical features. | K | KH | Y | discussions, bedside | assessment/viva voce |
| Phase 3, part 2 | OG 16.3b | Discuss the clinical diagnosis and investigations in IGR | K | KH | Y | Lecture | written |
| Phase 3, part 2 | OG 16.3c | interpretation | K | KH | Y | Bedside clinic | viva voce |
| Phase 3, part 2 | OG 16.3d | Discuss principles of management in I GR | K | KH | Y | Lecture | written |
| Phase 3, part 2 | OG 16.3e | Discuss prevention of I GR and pre-conception counselling. | K | KH | Y | Lecture | written |
| Topic: Lactation | | | Number of procedure require certification:(NIL) | | | | |
| Phase 2 | OG 17.1 | Describe and discuss the physiology of lactation | K | KH | Y | Lecture, small group discussion | Written/viva voce |
| Phase 2 | OG 17.1a | Describe the physiology of lactation | K | KH | Y | Lecture | Written Viva |
| Phase 2 | OG 17.1b | Enumerate galactagogues and lactation suppression | K | KH | Y | Lecture | Written Viva |
| Phase 2 | OG 17.2 | Enumerate in a simulated environment, care of the breast, appropriate use of the technique of breast feed | S/A/C | SH | Y | DDPA session | Skill assessment |
| Phase 2 | OG 17.2a | Discuss the importance and advantages of breast feeding. | K | KH | Y | Lecture | written |
| Phase 3, part 2 | OG 17.2b | Discuss care of the breast | K | KH | Y | SGD | viva voce |
| Phase 3, part 2 | OG 17.2c | Demonstrate the correct technique of breast feeding in simulation | S | SH | Y | DDPA session | Skill assessment |
| Phase 3, part 2 | OG 17.3 | Describe and discuss the clinical features, diagnosis and management of mastitis and breast abscess | K | KH | Y | Lecture, small group discussion | written/viva voce |

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|-----------------|---------|---|---|-------|----|---|--|-------------------------------|--|--------------------|
| Phase 3, part 2 | 0617.3a | Describe the clinical features of mastitis and breast abscess | | K | KH | Y | Lecture/Small group discussion | Written Viva | | |
| Phase 3, part 2 | 0617.3b | Discuss the diagnosis and management of mastitis and breast abscess | | K | KH | Y | Small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.1 | Topic: Care of the newborn Number of competencies:004 | Number of procedure require certification(NL) | K | KH | Y | Lecture/small group discussion | Written Viva voce | | Pediatrics |
| Phase 3, part 2 | 0618.1a | Describe and discuss the assessment of maturity of the newborn, diagnosis of birth asphyxia, principles | | K | KH | Y | Lecture/small group discussion | Written Viva voce | | Pediatrics |
| Phase 3, part 2 | 0618.1b | Describe, & discuss assessment of maturity of newborn | | K | KH | Y | Small group discussion, | Written Viva Voce | | |
| Phase 3, part 2 | 0618.1b | Diagnose birth asphyxia | | S | SH | Y | DOAP session | Skill assessment | | |
| Phase 3, part 2 | 0618.1c | Enumerate the principles of resuscitation | | K | KH | Y | Small group discussion, | Written Viva Voce | | |
| Phase 3, part 2 | 0618.1d | Discuss common problems encountered during neonatal resuscitation | | K | KH | Y | Small group discussion, | Written Viva Voce | | |
| Phase 3, part 2 | 0618.2 | Demonstrate the steps of neonatal resuscitation in a simulated environment | | S | SH | Y | DOAP session | Skill assessment | | Pediatrics |
| Phase 3, part 2 | 0618.2a | Enumerate steps of neonatal resuscitation | | K | KH | Y | DOAP session | Skill assessment | | |
| Phase 3, part 2 | 0618.2b | Demonstrate the steps of neonatal resuscitation in a simulated environment | | S | SH | Y | DOAP session | Skill assessment | | |
| Phase 3, part 2 | 0618.3 | Describe and discuss the diagnosis of birth asphyxia | | K | KH | Y | Lecture/small group discussion | Written Viva voce | | Pediatrics |
| Phase 3, part 2 | 0618.3a | Define birth asphyxia | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.3a | Enumerate causes of birth asphyxia | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.3b | Discuss the diagnosis of birth asphyxia | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.4 | Describe the principles of resuscitation of the newborn and enumerate the common problems | | K | KH | Y | Lecture/small group discussion | Written Viva voce | | Pediatrics |
| Phase 3, part 2 | 0618.4a | Describe the principles of resuscitation of the newborn | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.4b | Enumerate the steps of resuscitation | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 3, part 2 | 0618.4c | Enumerate common problems encountered during neonatal resuscitation | | K | KH | Y | Lecture/small group discussion | Written Viva | | |
| Phase 2 | 0619.1 | Topic: Normal and abnormal puerperium Number of competencies:004 | Number of procedure require certification(NL) | K | KH | Y | Lecture/small group discussion/Include | Written Viva/skill assessment | | |
| Phase 2 | 0619.1a | Describe and discuss the physiology of puerperium, its complications, diagnosis and management; counseling for contraception, puerperal sterilization | | K | KH | Y | Lecture | Written | | |
| Phase 2 | 0619.1b | Define puerperium and discuss the physiological changes that occur during puerperium | | K | KH | Y | Lecture/Small group | Written Viva | | |
| Phase 3, Part 2 | 0619.1c | Describe the complications of puerperium and their diagnosis and management | | K | KH | Y | Lecture/Small group | Viva voce | | |
| Phase 3, Part 2 | 0619.1d | Enumerate methods for postpartum contraception, their indications & contraindications | | S | SH | Y | DOAP | Clinical Assessment | | |
| Phase 3, Part 2 | 0619.1e | Counsel regarding contraception in lactating and non-lactating mothers and puerperal sterilization | | K | KH | Y | Small Group Discussion | Viva voce | | |
| Phase 3, Part 2 | 0619.1e | Enumerate postnatal advice to be given to postpartum patient | | K | KH | Y | Small Group Discussion | Viva voce | | |
| Phase 2 | 0619.2 | Counsel in a simulated environment, contraception and puerperal sterilization | | S/A/C | SH | Y | DOAP Session | Skill assessment | | Community Medicine |
| Phase 2 | 0619.2a | List postpartum contraceptive choices | | K | KH | Y | Small Group Discussion | Viva voce | | |
| Phase 3, Part 2 | 0619.2b | Counsel in a simulated environment, regarding choice of contraception in lactating and non-lactating m | | S/A/C | SH | Y | DOAP session | Skill assessment | | |
| Phase 3, Part 2 | 0619.3 | Observe/ assist in the performance of tubal ligation | | S | KH | Y | DOAP session, Intraoperative | Skill assessment | | |
| Phase 3, Part 2 | 0619.3a | Discuss the indication, timing, method, indication and contra indication of post partum sterilization | | S | KH | Y | DOAP session | Skill assessment | | |
| Phase 3, Part 2 | 0619.3b | Describe the steps of Postpartum Tubal ligation | | S | KH | Y | DOAP session | Skill assessment | | |
| Phase 3, Part 2 | 0619.3c | Observe/ assist in the performance of postpartum tubal ligation | | S | KH | Y | DOAP session | Skill assessment | | |
| Phase 3, Part 2 | 0619.4 | Enumerate the indications for, describe the steps in and insert and remove an intrauterine device in a simulated environment | | S | SH | Y | DOAP Session | Skill assessment | | |

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|-----------------|---------|---|--|--|------|---|---|------------------------------------|--------------------|
| Phase 2 | 0619-3a | Enumerate the indications for use of intrauterine device and the timing of insertion in puerperium | | K | KH | Y | Small group discussion | Viva | |
| Phase 3 part 2 | 0619-4b | Describe the steps to insert and remove an intrauterine device in a simulated environment | | S | SH | Y | DOAP session | Skill assessment | |
| | | Topic: Medical termination of pregnancy Number of competencies:(03) | | Number of procedure require certification:(NIL) | | | | | |
| Phase 2 | 0620-1 | Enumerate the indications and describe and discuss the legal aspects, indications, methods for first and second trimester MTP; | | K | KH | Y | Lecture/ small group discussion | written/viva voce/skill assessment | Forensic Medicine |
| Phase 2 | 0620-1a | Enumerate the indications of first and second trimester MTP | | K | KH | Y | Lecture | Written | |
| Phase 2 | 0620-1b | Describe the methods for first trimester MTP, Medical and Surgical methods | | K | KH | Y | Lecture | written/viva voce/skill assessment | |
| Phase 2 | 0620-1c | Describe the methods for second trimester MTP, Medical and Surgical methods | | K | KH | Y | Lecture | Written/ Viva | |
| Phase 2 | 0620-1d | Describe MTP Act & its amendments & Discuss the legal aspects of first and second trimester MTP | | K | KH | Y | Lecture/ Small group discussion | Written/ Viva | |
| Phase 3, Part 2 | 0620-1d | Describe the complications and management of complications of Medical Termination of Pregnancy | | K | KH | Y | Lecture/ Small group discussion | Written/ Viva | |
| | | In a simulated environment administer informed consent to a person wishing to undergo Medical Termination of Pregnancy | | S/A/C | SH | Y | DOAP | Skill assessment | Forensic Medicine |
| Phase 2 | 0620-2a | Offer the woman different methods for first trimester and second trimester MTP | | C | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| Phase 2 | 0620-2b | Inform the women about the risks and complications of the procedure | | C | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| Phase 3 part 2 | 0620-2c | Take consent in the language the women understands | | A | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| Phase 3 part 2 | 0620-2d | Ensure that the consent is voluntary | | A | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| Phase 3 part 2 | 0620-2e | Ensure that the consent is being taken for the correct indications the place of MTP is legal, approved and if pre-qualified | | K | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| Phase 3 part 2 | 0620-2f | Administer informed consent to a woman wishing to undergo first trimester MTP in a simulated environment pre-qualified | | S | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| | | Administer informed consent to a woman wishing to undergo second trimester MTP in a simulated environment pre-qualified | | S | SH | Y | DOAP session/ bedside ethics | KH assessment/viva voce | |
| | | Discuss Pre-conception and Pre-Natal Diagnostic Techniques (PC & PNDT) Act 1994 & its amendments | | K | K/KH | Y | Lecture/ small group discussion | KH assessment/viva voce | Forensic Medicine |
| Phase 3 Part 2 | 0620-3a | Discuss Pre-conception and Pre-Natal Diagnostic Techniques (PC & PNDT) Act 1994 & its amendments | | K | KH | Y | Lecture | | |
| | | Topic: Contraception Number of competencies:(02) | | Number of procedure require certification:(NIL) | | | | | |
| | | Describe and discuss the temporary and permanent methods of contraception, indications, technique and complications; selection of patients, side effects and failure rate including OCS, male contraception, emergency contraception and IUCD | | K | KH | Y | Lecture, small group discussion, bedside ethics | written/viva voce/skill assessment | Community Medicine |
| Phase 2 | 0621-1a | Enumerate the temporary and permanent methods of contraception | | K | KH | Y | Lecture | Written/ Viva voce | |
| Phase 2 | 0621-1b | Describe the selection of patients as per WHO Medical Eligibility criteria before giving contraceptive options | | K | KH | Y | Lecture | Viva voce/ Skill | |
| Phase 2 | 0621-1c | Describe the failure rates of different contraceptive methods | | K | KH | Y | Lecture | Viva Voce | Community |
| Phase 2 | 0621-1d | Enumerate methods available under national Family Welfare program | | K | KH | Y | Lecture | Written/ Viva voce | |
| Phase 2 | 0621-1e | Describe the advantages/disadvantages, failure rate and mechanism of male barrier contraceptive | | K | KH | Y | Lecture/ Small group discussion | Written/ Viva voce | |
| Phase 2 | 0621-1f | Enumerate and describe the natural methods of contraception | | K | KH | Y | Lecture/ Small group discussion | written/viva voce | |
| Phase 3, Part 1 | 0621-1g | Describe the various types of IUDs, their mechanism of action, indications, contraindications | | K | KH | Y | Lecture/ Small group discussion | written/viva voce | |
| Phase 2 | 0621-1h | Classify hormonal methods of contraception | | K | KH | Y | Lecture/ Small group discussion | written/viva voce | |
| Phase 2 | 0621-1i | Describe the classification and mechanism of action of combined OC, PS, contra-indications, failure rate, side effects | | K | KH | Y | Lecture/ Small group discussion | written/viva voce | |

| Phase | Code | Describe the method of prescriptions, combined OR P, and management of a missing pill | K | KH | Y | Lecture, Small group | Skill Assessment |
|-----------------|---------|---|---|------|---|---|-------------------------------------|
| Phase 3, Part 1 | OG21.1f | Enumerate Progestin only contraceptive methods, their advantages, mechanism of action, contraindications, & define Long Acting Reversible Contraceptive Methods (LARCs) and their advantages. | K | KH | Y | Lecture/Small group | Written/Viva voce |
| Phase 3, Part 1 | OG21.1f | Describe the advantages and limitations of action, contraindications, mechanism of action, and advantages of intra-uterine devices (IUD) and their advantages. | K | KH | Y | Lecture/Small group | Written/Viva voce |
| Phase 3, Part 1 | OG21.1m | Describe the advantages and limitations of action, contraindications, mechanism of action, and advantages of subdermal implants. | K | KH | Y | Lecture/Small group | Written/Viva voce |
| Phase 3, Part 2 | OG21.1n | Discuss various methods of female sterilization, MTC criteria, selection criteria as per COI, procedure, advantages, and disadvantages. | K | KH | Y | Lecture/Small group | Written/Viva voce |
| Phase 3, Part 2 | OG21.1o | Discuss Male Contraception | K | KH | Y | Lecture/Small group | Written/Viva voce |
| Phase 3, Part 2 | OG21.1p | Describe the indications, regimens, mechanism of action, side effects and failure rates of emergency contraception | K | KH | Y | Lecture, Small group | Written/Viva voce |
| Phase 2 | OG21.2 | Describe & discuss PPIUCD programme | K | K/KH | Y | Lecture, small group discussion | Written/Viva voce |
| Phase 2 | OG21.2a | Describe PPIUCD and Post-aboral IUCD programme | K | K | Y | Lecture | Written |
| Phase 2 | OG21.2b | Enumerate the various timings of post-partum IUCD insertion/post-implantation, intra-cervical and without | K | KH | Y | Small group discussion | Viva voce |
| Phase 2 | OG21.2c | Describe the advantages and limitations of PPIUCD | K | KH | Y | Small group discussion | Viva voce |
| Phase 2 | OG21.2d | Describe the MEC and technique of PPIUCD insertion | K | KH | Y | Small group discussion | Viva voce |
| Phase 2 | OG21.2e | Describe the MEC, timing and technique of Post-aboral insertion | K | KH | Y | Small group discussion | Viva voce |
| Phase 2 | OG21.2f | Describe the management of potential problems and follow up care | K | KH | Y | Small group discussion | Viva voce |
| | | Topic: Vaginal discharge | | | | Number of procedure require certification:(NH) | |
| Phase 3, part 1 | OG22.1 | Describe the clinical characteristics of physiological vaginal discharge. | K | KH | Y | Lecture | Theory |
| Phase 3, part 1 | OG22.1a | Differentiate between physiological and pathological vaginal discharge | K | KH | Y | Lecture | theory |
| Phase 3, part 1 | OG22.1b | Describe the clinical characteristics of physiological vaginal discharge | K | KH | Y | Lecture | theory |
| Phase 3, part 1 | OG22.2 | Describe and discuss the etiology (with special emphasis on Candida, T. vaginalis, bacterial vaginosis, characteristics, clinical diagnosis, investigations, essential diagnosis, management of | K | KH | Y | Lecture, bedside clinics | Written/viva voce/ skill assessment |
| Phase 3, part 1 | OG22.2a | Describe the etiology (with special emphasis on Candida, T. vaginalis, bacterial vaginosis), | K | KH | Y | Lecture | Written/Viva Voce |
| Phase 3, part 1 | OG22.2b | Discuss the characteristics, clinical diagnosis, investigations of pathological vaginal discharge | K | KH | Y | Bedside Clinics, Small | Viva Voce/ Skill |
| Phase 3, part 1 | OG22.2c | Discuss the genital hygiene | K | KH | Y | Bedside Clinics, Small | Viva Voce |
| Phase 3, part 1 | OG22.2d | Discuss the management of common causes of vaginal discharge and the syndromic management | K | KH | Y | Bedside Clinics, Small | Viva Voce |
| | | Topic: Normal and abnormal puberty | | | | Number of procedure require certification:(NH) | |
| Phase 3, part 1 | OG23.1 | Describe and discuss the physiology of puberty, features of abnormal, common problems and their | K | KH | Y | discussion, Bedside | written/viva voce |
| Phase 3, Part 1 | OG23.1a | Describe the physiology and endocrinology of puberty. | K | KH | Y | Lecture | Written/Viva Voce |
| Phase 3, Part 1 | OG23.1b | Enumerate the biological sequential events observed during puberty. | K | KH | Y | Small group discussion | Written/Viva Voce |
| Phase 3, Part 2 | OG23.1c | Describe Tanner staging of female secondary sexual characters. | S | SH | Y | Bedside clinics | Viva Voce |
| Phase 3, Part 2 | OG23.1d | Describe features of abnormal puberty | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 2 | OG23.1e | Discuss Common problems of puberty and their management | K | KH | Y | Bedside Clinics, Small Group Discussions | Written/Viva Voce |
| Phase 3, Part 2 | OG23.1f | List the causes, investigations and management of puberty menarche. | K | KH | Y | Bedside Clinics, Small Group Discussions | Written/Viva Voce |
| Phase 3, Part 2 | OG23.2 | Enumerate the causes of delayed puberty. Describe the investigation and management of common causes | K | KH | Y | Lecture, small group discussion | written/viva voce |
| Phase 3, Part 2 | OG23.2a | Enumerate the causes of delayed puberty | K | KH | Y | Lecture | Written/Viva voce |

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|-----------------|---------|---|------------------------------------|---|----|---|--|-------------------|--|
| Phase 3, Part 2 | OG23.2b | Describe the investigation for delayed puberty | | K | KH | Y | Small Group Discussion | Written Viva voce | |
| Phase 3, Part 2 | OG23.2c | Discuss the management of common causes of delayed puberty | | K | KH | Y | Small Group Discussion | Written Viva voce | |
| Phase 3, Part 2 | OG23.3 | Enumerate the causes of precocious puberty | | K | K | N | Lecture, small group discussion | written/viva voce | |
| Phase 3, Part 2 | OG23.3a | Define precocious puberty. | | K | K | N | Lecture, small group discussion | written/viva voce | |
| Phase 3, Part 2 | OG23.3b | Enumerate the causes of precocious puberty. | | K | K | N | Lecture, small group discussion | written/viva voce | |
| | | Topic: Abnormal uterine bleeding | Number of competencies:(01) | | | | Number of procedure require certification:(Nil) | | |
| | OG24.1 | Define, classify and discuss abnormal uterine bleeding, its aetiology, clinical features, investigations, diagnosis and management | | K | KH | Y | Lecture,small group discussion | written/viva voce | |
| Phase 3, Part 1 | OG24.1a | Define Abnormal uterine bleeding | | K | KH | Y | Lecture | Written | |
| Phase 3, Part 1 | OG24.1b | Enumerate common causes of AUB in different age groups | | K | KH | Y | Lecture | Written | |
| Phase 3, Part 1 | OG24.1c | Discuss AUB classification (PALM-COEN) | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 1 | OG24.1d | Discuss clinical features of different causes of AUB | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG24.1e | Discuss investigations, diagnosis of AUB | | K | KH | Y | Lecture, Small Group Discussion | Written Viva Voce | |
| Phase 3, Part 2 | OG24.1f | Discuss management of AUB | | K | KH | Y | Lecture, Small Group Discussion | Written/Viva Voce | |
| Phase 3, Part 2 | OG24.2 | Describe and discuss the etopathogenesis, clinical features, investigation and implications on health and fertility and management of endometriosis and adenomyosis | | K | KH | Y | Lecture, small group discussion | Written/Viva Voce | |
| Phase 3, Part 2 | OG24.2a | Describe & Discuss the etopathogenesis of endometriosis and adenomyosis | | K | KH | Y | Lecture | Written/Viva Voce | |
| Phase 3, Part 2 | OG24.2b | Describe clinical features of Endometriosis & Adenomyosis | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG24.2c | Enumerate investigation of Adenomyosis & Endometriosis | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG24.2d | Discuss implications of endometriosis & adenomyosis on health and fertility | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG24.2e | Discuss management of endometriosis and adenomyosis | | K | KH | Y | Small Group Discussion | Viva Voce | |
| | | Topic: Amenorrhoea | Number of competencies:(01) | | | | | | |
| | | Number of procedure require certification:(Nil) | | | | | | | |
| | OG25.1 | Describe and discuss the causes of primary and secondary amenorrhoea, its investigation and the principles of management | | K | KH | Y | Lecture,smallgroup discussion | written/viva voce | |
| Phase 3, Part 2 | OG25.1a | Define Primary amenorrhoea | | K | KH | Y | Lecture | Written Viva Voce | |
| Phase 3, Part 2 | OG25.1b | Enumerate common causes of Primary amenorrhoea | | K | KH | Y | Lecture | Written/Viva Voce | |
| Phase 3, Part 2 | OG25.1c | Describe clinical features of common causes of primary amenorrhoea | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG25.1d | Describe & discuss investigation in a case of Primary amenorrhoea. | | K | KH | Y | Lecture | Written/Viva Voce | |
| Phase 3, Part 2 | OG25.1e | Plan the management of common causes of Primary amenorrhoea. | | K | KH | Y | Small Group Discussion | Viva Voce | |
| Phase 3, Part 2 | OG25.1f | Define Secondary amenorrhoea. | | K | KH | Y | Lecture | Written/Viva Voce | |
| Phase 3, Part 2 | OG25.1g | Enumerate common causes of secondary amenorrhoea | | K | KH | Y | Lecture | Written/Viva Voce | |

| Phase 3, Part 2 | OG25.1b | Identify clinical features of common causes of Secondary anaemias | K | KH | Y | Small Group Discussion | Viva Voce |
|--------------------------------------|----------|---|---|----|---|--------------------------------|---|
| Phase 3, Part 2 | OG25.1a | Choose investigations in a case of Secondary anaemias | K | KH | Y | Lecture | Written Viva Voce |
| Phase 3, Part 2 | OG25.1c | Plan the management of common causes of Secondary anaemias | K | KH | Y | Small Group Discussion | Viva Voce |
| Topic: Genital injuries and fistulae | | | Number of procedure require certification:(NIL) | | | | |
| Number of competencies:(02) | | | Number of procedure require certification:(NIL) | | | | |
| Phase 3, Part 2 | OG26.1 | Describe and discuss the etiology, clinical features, investigation and implications on health and fertility and management of endometriosis and adenomyosis | K/S | KH | Y | Lecture,small group discussion | written/viva voce |
| Phase 3, Part 2 | OG26.2 | Complicacy same as OG 24.2 above | | | | | |
| Phase 3, Part 2 | OG26.2 | Describe the causes, prevention, clinical features, principles of management of genital injuries and fistulae | K | KH | N | Lecture,small group discussion | written/viva voce |
| Phase 3, Part 2 | OG 26.2a | Identify commonly encountered injuries to penial tract in subacute and postobstetrical practice | K | KH | N | Lecture | written viva voce |
| Phase 3, Part 2 | OG 26.2b | Enumerate the causes of perineal tear | K | KH | N | Lecture,small group | written viva voce |
| Phase 3, Part 2 | OG 26.2c | Classify perineal tears on the basis of severity | K | KH | N | Lecture,small group | written/viva voce |
| Phase 3, Part 2 | OG 26.2d | Describe the clinical features of perineal tear | K | KH | N | Lecture,small group | written/viva voce |
| Phase 3, Part 2 | OG 26.2e | Discuss the ways to prevent genital injuries | K | KH | N | Lecture,small group discussion | written viva voce |
| Phase 3, Part 2 | OG 26.2f | Describe and discuss the principles of management of genital injuries | K | KH | N | Lecture,small group discussion | written viva voce |
| Phase 3, Part 2 | OG 26.2g | Counsel the patient after surgery regarding immediate care and management in future pregnancies | K | KH | N | Lecture,small group discussion | written viva voce |
| Phase 3, Part 2 | OG 26.2h | Define vesico-vaginal and rectovaginal fistulae | K | KH | N | Lecture,small group discussion | written viva voce |
| Phase 3, Part 2 | OG 26.2i | Classify vesico-vaginal fistulae on anatomical bases | K | KH | N | Lecture,small group | written viva voce |
| Phase 3, Part 2 | OG 26.2j | Describe the clinical features in a case of vesico-vaginal and rectovaginal fistula | K | KH | N | Lecture,small group | written/viva voce |
| Phase 3, Part 2 | OG 26.2k | Describe the principles for management of a case of vesico-vaginal and rectovaginal fistula | K | KH | N | Lecture,small group | written/viva voce |
| Topic: Genital infections | | | Number of procedure require certification:(NIL) | | | | |
| Number of competencies:(04) | | | Number of procedure require certification:(NIL) | | | | |
| Phase 3, Part 2 | OG27.1 | Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of sexually transmitted infections | K | KH | Y | Lecture,small group discussion | written/viva voce |
| Phase 3, Part 2 | OG27.1a | Describe the etiology and pathogenesis of sexually transmitted infections | K | KH | Y | Lecture,small group | written/viva voce |
| Phase 3, Part 2 | OG27.1b | Discuss clinical features, differential diagnosis of sexually transmitted infections | K | KH | Y | Lecture | written/viva voce |
| Phase 3, Part 2 | OG27.1c | Discuss the investigations for sexually transmitted infections | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 2 | OG27.1d | Discuss the management of sexually transmitted infections | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 2 | OG27.1e | Discuss the long term implications of sexually transmitted infections | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 1 | OG27.2 | Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of genital tuberculosis | K | KH | Y | | written/viva voce |
| Phase 3, Part 1 | OG27.2a | Discuss the etiology and pathogenesis of genital tuberculosis | K | KH | Y | Lecture | Written Viva Voce |
| Phase 3, Part 1 | OG27.2b | Discuss clinical features, differential diagnosis of Genital TB | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 1 | OG27.2c | Discuss the investigations in diagnosis genital Tuberculosis | K | KH | Y | Lecture, Small group | Written Viva Voce |
| Phase 3, Part 1 | OG27.2d | Discuss management of Genital TB | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 1 | OG27.2e | Describe the complications and long term sequelae of genital Tuberculosis | K | KH | Y | Small group discussion | Viva Voce |
| Phase 3, Part 1 | OG27.3 | Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of HIV | K | KH | Y | Lecture,small group discussion | written/viva voce |
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|-----------------|---------|--|------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| Phase 3, Part 2 | OG27.3a | Describe and discuss the etiology and pathogenesis of HIV | | | | | | | | | | | | | Written: Viva Voice |
| Phase 3, Part 2 | OG27.3b | Describe the clinical presentation and HIV related gynaecological problems and differential diagnosis | | | | | | | | | | | | | Viva Voice |
| Phase 3, Part 2 | OG27.3c | Discusses investigations for HIV | | | | | | | | | | | | | Viva Voice |
| Phase 3, Part 2 | OG27.3d | Discuss the management and long term implications of HIV | | | | | | | | | | | | | Viva Voice |
| Phase 3, Part 2 | OG27.3e | Discuss the importance of Contraception and counseling in HIV | | | | | | | | | | | | | Viva Voice |
| | OG27.4 | Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of Pelvic Inflammatory Disease | | | | | | | | | | | | | written:viva voce |
| Phase 3, Part 2 | OG27.4a | Define Pelvic Inflammatory Disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4b | Discuss the etiology of Pelvic Inflammatory Disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4c | Describe the pathology of Pelvic Inflammatory disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4d | Describe the clinical features of Pelvic Inflammatory Disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4e | Discuss the differential diagnosis of Pelvic Inflammatory Disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4f | Discuss the investigations and management of Pelvic Inflammatory disease | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, Part 2 | OG27.4g | Discuss the long term sequelae of chronic Pelvic Inflammatory Disease | | | | | | | | | | | | | Written:Viva Voice |
| | | Topic: Infertility | Number of competencies:(04) | | | | | | | | | | | | Number of procedure require certification:(N/E) |
| | OG28.1 | Describe and discuss the common causes, pathogenesis, clinical features, differential diagnosis; investigations; principles of management of infertility - methods of tubal patency, ovulation induction, assisted reproductive techniques | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 1 | OG28.1a | Define, classify and discuss the prevalence of infertility. | | | | | | | | | | | | | Written Viva Voice |
| Phase 3, part 1 | OG28.1b | Describe the common causes & pathogenesis of infertility | | | | | | | | | | | | | Written Viva Voice |
| Phase 3, part 1 | OG28.1c | Discuss the causes of male & female infertility | | | | | | | | | | | | | Written Viva Voice |
| Phase 3, part 1 | OG28.1d | Discuss the investigations of infertility | | | | | | | | | | | | | Written:Viva Voice |
| Phase 3, part 2 | OG28.1e | Discuss the firm tips of management of infertility | | | | | | | | | | | | | Viva Voice |
| Phase 3, part 2 | OG28.1f | Describe and discuss the methods of testing for tubal patency | | | | | | | | | | | | | Written Viva Voice |
| Phase 3, part 2 | OG28.1g | Describe and discuss the methods of testing for ovulation | | | | | | | | | | | | | Written Viva Voice |
| Phase 3, part 2 | OG28.1h | Discuss the indications and methods of ovulation induction | | | | | | | | | | | | | Viva Voice |
| Phase 3, part 2 | OG28.1i | Enumerate and discuss various assisted reproductive techniques | | | | | | | | | | | | | Viva Voice |
| Phase 3, part 2 | OG28.2 | Enumerate the assessment and restoration of tubal patency | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.2a | Enumerate and describe the methods for assessment of tubal patency | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.2b | Enumerate various procedures for restoration of tubal patency | | | | | | | | | | | | | Viva voce |
| Phase 3, part 2 | OG28.2c | Enumerate various procedures for restoration of tubal patency | | | | | | | | | | | | | Written |
| Phase 3, part 2 | OG28.2d | Discuss the various tuboplasty operations | | | | | | | | | | | | | Viva voce |
| Phase 3, part 2 | OG28.3 | Describe the principles of ovulation induction | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.3a | Enumerate and discuss the indications of ovulation induction | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.3b | Enumerate and discuss various drugs used for ovulation induction | | | | | | | | | | | | | Written |
| Phase 3, part 2 | OG28.3c | Discuss the monitoring during ovulation induction | | | | | | | | | | | | | Written |
| Phase 3, part 2 | OG28.3d | Enumerate the complications of ovulation induction | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.3e | Discuss the role of ovarian stimulation | | | | | | | | | | | | | written:viva voce |
| Phase 3, part 2 | OG28.4 | Enumerate the various Assisted Reproduction Techniques | | | | | | | | | | | | | written:viva voce |

| Phase 3, Part 2 | 0631.1e | Discuss the preventive aspects of prolapse of uterus | K/C | K/II | Y | Small Group Discussion, | Viva Voice |
|-----------------|---------|---|--|------|---|---|---------------------------------------|
| | | Topic: Menopause | Number of procedure require certification:(NH) | | | | |
| | | Describe and discuss the physiology of menopause, symptoms, prevention, management and the role of hormone replacement therapy. | K | K/II | Y | all Group Discussion, IIe | Written/ Viva Voice/ Skill Assessment |
| Phase 3, part 1 | 0632.1a | Describe the physiology of menopause. | K | K/II | Y | Lecture | Theory, Viva Voice |
| Phase 3, part 2 | 0632.1b | Describe the symptoms and prevention of menopause | K | K/II | Y | Small Group Discussion, | Theory, Viva Voice |
| Phase 3, Part 2 | 0632.1c | Discuss the Management of menopausal symptoms and the role of hormone replacement therapy. | K | K/II | Y | Small Group Discussion, | Theory, Viva Voice |
| Phase 3, Part 2 | 0632.2 | Enumerate the causes of postmenopausal bleeding and describe its management | K | K/II | Y | all Group Discussion, IIe | Written/ Viva Voice/ |
| Phase 3, Part 2 | 0632.2a | Enumerate the causes of postmenopausal bleeding | K | K/II | Y | Lecture | Theory |
| Phase 3, Part 2 | 0632.2b | Enumerate & Discuss the investigations for postmenopausal bleeding | K | K/II | Y | Small Group Discussion, | Viva voice/ Theory |
| Phase 3, Part 2 | 0632.2c | Describe the management of Postmenopausal Bleeding | K | K/II | Y | Small Group Discussion, | Viva voice/ Theory |
| | | Topic: Benign, Pre-malignant (CIN) and Malignant Lesions of the cervix | Number of competencies:(04) | | | | |
| | | Classify, describe and discuss the etiology, pathology, clinical features, differential diagnosis, inve | K/S | K/II | Y | Lecture, Small group discussion, Bedside ethics | Written/ Viva voice/ Skill assessment |
| Phase 3 part 1 | 0633.1a | Enumerate the risk factors and causes of cervical cancer | K | K/II | Y | Lecture | written |
| Phase 3 part 2 | 0633.1b | Classify the histopathologic types of cervical cancer | K | K | Y | Lecture | written |
| Phase 3 part 1 | 0633.1c | Describe the latest FIGO staging of Cervical Cancer | K | K/II | Y | Lecture | written |
| Phase 3 part 1 | 0633.1d | Describe the signs & symptoms of cervical cancer | K | K/II | Y | Small Group Discussion | Viva voice |
| Phase 3 part 2 | 0633.1e | Discuss the differential diagnosis of Cervical cancer | K | K/II | Y | Small Group Discussion | Viva voice |
| Phase 3 part 2 | 0633.1f | Write the investigations required for diagnosis and work-up for management of cervical cancer | K | K/II | Y | Bedside clinic | Viva voice |
| | | Describe the principles of management including surgery and radiotherapy of Benign, Pre-malignant (CIN) and Malignant Lesions of the Cervix | K | K/II | Y | Lecture, Small group discussion, Bedside ethics | Written/ Viva voice/ Skill assessment |
| | | General sup | | | | | |
| Phase 3 Part 1 | 0633.2a | Classify benign, pre-malignant and malignant lesions of cervix | K | K | Y | Lecture | Written/ Viva Voice |
| Phase 3 Part 1 | 0633.2b | Describe the development of CIN from transformation zone and its progression to invasive cancer. | K | K/II | Y | Lecture | Written/ Viva Voice |
| Phase 3 Part 2 | 0633.2c | Discuss the management of benign lesions of cervix. | K | K/II | Y | Lecture | Written/ Viva voice/ |
| Phase 3 Part 2 | 0633.2d | Discuss the evaluation of abnormal PAP smear | K | K/II | Y | Small group discussion | Viva Voice |
| Phase 3 Part 2 | 0633.2e | Discuss the various treatments of CIN, CIN2 and CIN3 in terms of ablative and excisional methods. | K | K/II | Y | Small group discussion | Written/ Viva voice |
| Phase 3 Part 2 | 0633.2f | Describe the stage wise treatment plan of cervical cancer according to the new FIGO staging. | K | K/II | Y | lecture, bedside-ethic | Written/ Viva voice |
| Phase 3 Part 2 | 0633.2g | Enumerate the advantages and disadvantages of surgery and radiotherapy over each other | K | K/II | Y | lecture, bedside-ethic | Written/ Viva voice |
| Phase 3 Part 2 | 0633.2h | Enumerate the components of radical hysterectomy | K | K/II | Y | Lecture | Written/ Viva voice |
| Phase 3 Part 2 | 0633.2i | Describe the basic principles and techniques of radiotherapy. | K | K/II | Y | Lecture | Written/ Viva voice |
| | | Describe and demonstrate the screening for cervical cancer in a simulated environment | K/S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0633.3a | Describe the protocols for cervical cancer screening as per national and international guidelines | K | K/II | Y | Lecture | Written/ Viva voice |
| Phase 3 part 1 | 0633.3b | Describe the methods of VIA, VII, I, & Pap Smear | K | K/II | Y | Lecture, Small group discuss | Written/ Viva voice/ |
| Phase 3 part 1 | 0633.3c | Describe the prerequisites for taking a pap smear. | K | SH | Y | Small group discussion | Skill assessment |
| Phase 3 part 1 | 0633.3d | Enumerate the steps of taking Pap Smear | K | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0633.3e | Demonstrate the method of taking pap smear in a simulated environment | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0633.3f | Demonstrate performance of VIA, VII, I in a simulated environment | S | SH | Y | DOAP Session | Skill Assessment |
| Phase 3 part 2 | 0633.3g | Interpret the result of VIA, VII, I | K | SH | Y | DOAP Session | Skill Assessment |

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|-----------------|----------|---|-----|----|---|-----------------|------------------------------------|
| Phase 3, Part 2 | 06335.2a | Based on history and examination reach a provisional diagnosis | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.2b | Make differential diagnosis from history and examination | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.2c | Logically eliminate the unlikely diagnosis to reach the correct one | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.2d | Make list of all the investigations which should be performed for final diagnosis | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | 06335.3 | Recognize situations which call for urgent or early treatment of secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment | K/S | SH | Y | Bedside clinics | Clinical assessment or via a voice |
| Phase 3, Part 2 | 06335.3a | Enumerate clinical situations in a pregnant woman that require urgent emergency treatment | A | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3b | Enumerate clinical situations in a psychological patient that require urgent emergency treatment | K | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3c | Enumerate acute symptoms requiring emergency treatment in an obstetric patient | K | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3d | Describe clinical findings of an acute emergency in an obstetric patient | K | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3e | Describe emergency treatment of common obstetric emergencies using appropriate written notes | K | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3f | Discuss the concept of first aid including airway, breathing, circulation and supportive care | S | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.3g | Discuss the concept of emergency obstetric care giving emergency treatment, written notes | S | SH | Y | Bedside clinics | Clinical assessment/ Via |
| Phase 3, Part 2 | 06335.4 | Demonstrate interpersonal and communication skills fitting a physician in order to discuss illness and its outcome with patient and family | A/C | SH | Y | Bedside clinics | Clinical assessment/ via voice |
| Phase 2 | 06335.4a | Demonstrate how to start conversation with a patient and her family | A | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.4b | Demonstrate greeting the patient, introducing yourself to the patient and her family | A | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.4c | Demonstrate ability to establish rapport with the patient and her family while discussing illness | A | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.4d | Communicate all the details of illness along with documented facts | C | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.4e | Discuss the possible outcomes to the patient and her family in a language to make them understand | C | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.4f | Encourage patient and family to ask their queries and express their fears and anxieties | A | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3, Part 2 | 06335.4g | Demonstrate steps to break a bad news in an empathetic manner | C | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.5 | Determine gestational age, EDD and obstetric formula | K/S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.5a | Determine the gestational age & EDD from LMP | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.5b | Discuss the role of ultrasound in dating pregnancy | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.5c | Determine gestational age & EDD in the absence of reliable LMP dates | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.5d | Write an obstetric formula for a pregnant woman | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 2 | 06335.6 | Demonstrate ethical behaviour in all aspects of medical practice | A/C | SH | Y | Bedside Clinics | Clinical assessment or via a voice |
| Phase 2 | 06335.6a | Discuss principles of ethical behaviour in medical practice | K | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | 06335.6b | Demonstrate to be respectful and not to be judgemental during interactions with the patients | C | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | 06335.6c | Demonstrate respecting autonomy of the patient in her management | A | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | 06335.6d | Demonstrate ethical behaviour during examination of a female patient | A | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 2 | 06335.7 | Obtain informed consent for any examination or procedure | S | SH | Y | Bedside Clinics | Clinical assessment or via a voice |
| Phase 2 | 06335.7a | Discuss the components of informed consent | S | SH | Y | Bedside Clinics | Clinical assessment/ Via |
| Phase 2 | 06335.7b | Discuss the eligibility criteria for giving consent in the context of Obstetrics & Gynaecology | S | SH | Y | Bedside Clinics | Clinical assessment/ Via |
| Phase 2 | 06335.7c | Select appropriate consent form for different procedures in Obstetrics & Gynaecology | S | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 2 | 06335.7d | Demonstrate taking consent for examination of a female patient | S | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3 part 2 | 06335.7e | Demonstrate taking consent for a procedure in a simulated environment | S | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3 part 2 | 06335.7f | Demonstrate the documentation of informed consent | C | SH | Y | Bedside Clinics | Clinical assessment |

| Phase | OC Code | Task Description | S | SH | V | Bedside | Clinical assessment or viva voce |
|----------------|----------|---|---|----|---|------------------------|----------------------------------|
| Phase 3 Part 2 | OG35.8 | Write a complete case record with all necessary details | S | SH | V | Bedside | Clinical assessment or viva voce |
| Phase 3 Part 2 | OG35.8a | Write a complete case record including history, examination, investigations, differential diagnosis and provisional diagnosis | S | SH | V | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | OG35.9 | Write a proper discharge summary with all relevant information | S | SH | V | Bedside | Clinical assessment |
| Phase 3 Part 2 | OG35.9a | Write a proper discharge summary with all relevant information including diagnosis, treatment given, and | S | SH | V | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | OG35.9b | Write all the relevant investigations on the discharge card | S | SH | V | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | OG35.9c | Write proper patient instructions with follow up schedule in legible writing with appropriate signature | S | SH | V | Bedside Clinics | Clinical assessment |
| Phase 3 Part 2 | OG35.10 | Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details | S | SH | V | Bedside-clinics | Clinical assessment or viva voce |
| Phase 3 Part 2 | OG35.10a | Write a proper referral including diagnosis, reason for referral, Case summary, investigations and treatment | S | SH | V | Bedside Clinics | viva voce |
| Phase 3 | OG35.11 | Demonstrate the correct use of appropriate universal precautions for self protection against HIV | S | SH | V | DOAP session | Skill assessment |
| Phase 2 | OG35.11a | Enumerate the components of the universal precautions | K | KH | V | Small group discussion | Short notes/ viva |
| Phase 2 | OG35.11b | Enumerate about the body fluids for which universal precautions need to be used | K | KH | V | Small group discussion | Short notes/ viva |
| Phase 2 | OG35.11c | Enumerate appropriate personal protective equipment | K | KH | V | Small group discussion | Short notes/ viva |
| Phase 2 | OG35.11d | Demonstrate correct method of hand washing | S | SH | V | DOAP session | Skill assessment |
| Phase 2 | OG35.11e | Demonstrate wearing of gown and gloves correctly before a procedure | S | SH | V | DOAP session | Skill assessment |
| Phase 2 | OG35.11f | Demonstrate the disposal of used needles, syringes and sharps | S | SH | V | DOAP session | Skill assessment |
| Phase 2 | OG35.11g | Discuss the biomedical waste disposal | S | SH | V | DOAP session | Skill assessment |
| Phase 2 | OG35.11h | Demonstrate appropriate technique for safe sharps injury and/or contamination - student perform and | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12 | Obtain a pap smear in a simulated environment | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12a | Select patient for pap smear testing | S | SH | V | Small Group discussion | Viva Voce |
| Phase 3 part 2 | OG35.12b | Counsel a patient before Pap Smear | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12c | Identify correct instruments for testing | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12d | Enumerate correct steps of pap smear | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12e | Observe Pap Smear procedures in OPD | S | SH | V | Observe in OPD | Log book |
| Phase 3 part 2 | OG35.12f | Demonstrate taking a pap smear correctly in simulated environment | S | SH | V | DOAP session | Skill assessment |
| Phase 3 part 2 | OG35.12g | Discuss the errors while taking a pap smear and how to prevent them | S | SH | V | Small Group discussion | Viva Voce |
| Phase 3 Part 1 | OG35.13 | Demonstrate the correct technique to perform Artificial rupture of membranes in a simulated/supervised environment | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.13a | Describe ARM as a method of induction labour and its indication | S | SH | V | Small group discussion | Skill assessment |
| Phase 3 Part 1 | OG35.13b | Enumerate prerequisites before ARM | S | SH | V | Small group discussion | Skill assessment |
| Phase 3 Part 1 | OG35.13c | Identify correct instruments for ARM | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.13d | Enumerate correct steps of ARM | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.13e | Enumerate important complications associated with artificial rupture of membranes | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.13f | Observe ARM in labour room | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.13g | Demonstrate the correct technique to perform ARM in a simulated environment | S | SH | V | DOAP session | Log book Skill assessment |
| Phase 3 Part 1 | OG35.14 | Demonstrate the correct technique to perform and suture episiotomy in a simulated/supervised environment | S | SH | V | DOAP session | Skill assessment |
| Phase 3 Part 1 | OG35.14a | Enumerate the indications of episiotomy | K | KH | V | Small Group Discussion | Viva Voce |

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| Phase 3 part 1 | 0635.14b | Enumerate various types of episiotomy and discuss their advantages / disadvantages | K | K/I | Y | Small Group Discussion | Viva Voice |
| Phase 3 part 1 | 0635.14c | Describe tissue layers cut during the procedure | K | K/I | Y | DOAP Session | Viva Voice |
| Phase 3 part 1 | 0635.14d | Describe the right time in stage of labour when episiotomy is to be given | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0635.14e | Identify correct instruments and suture material for episiotomy | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0635.14f | Enumerate correct steps of episiotomy - done on episiotomy suture model | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 1 | 0635.14g | Observe Episiotomy suturing in labour room | S | SH | Y | DOAP Session | Log book |
| Phase 3 part 1 | 0635.14h | Demonstrate correct technique to perform and suture episiotomy in a simulated environment | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.15 | Demonstrate the correct technique of insertion and removal of an IUD in a simulated/supervised environment | S | SH | Y | DOAP session | Skill assessment |
| Phase 3 part 2 | 0635.15a | Enumerate various types of intrauterine devices / contraceptive devices as well as their advantages | K | K/I | Y | Small Group Discussion | Viva Voice |
| Phase 3 part 2 | 0635.15b | Enumerate prerequisites before IUD placement | K | K/I | Y | Small Group Discussion | Viva Voice |
| Phase 3 part 2 | 0635.15c | Identify correct instruments for IUD insertion and postpartum IUD insertion | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.15d | Enumerate correct steps of IUD insertion | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.15e | Discuss the most insertion counselling of patients | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.15f | Describe the steps of removal of IUD and advise thereafter | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.15g | Demonstrate correct technique IUCD insertion in simulated environment observe insertion and removal of IUD during family planning testing | S | SH | Y | Bed side Clinic | Log Book |
| Phase 3 part 2 | 0635.16 | Diagnose and provide emergency management of antepartum and postpartum hemorrhage in a simulated / guided environment | K/S | SH | Y | DOAP session | Skill assessment |
| Phase 3 part 2 | 0635.16a | List the causes of antepartum hemorrhage | K | K | Y | Lecture | Written |
| Phase 3 part 2 | 0635.16b | Discuss the clinical features and investigations needed to diagnose a case of APH | K | K/I | Y | Small Group Discussion | Written |
| Phase 3 part 2 | 0635.16c | Enumerate the differentiating features between placenta previa and abruption placental | K | K/I | Y | Small Group Discussion | Skill assessment |
| Phase 3 part 2 | 0635.16d | Diagnose a case of APH and its likely cause in a simulated environment | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.16e | Discuss assessment of degree/severity of hemorrhagic shock | S | SH | Y | DOAP Session | Skill assessment |
| Phase 3 part 2 | 0635.16f | Enumerate blood products and its replacement in accordance to severity of shock | K | K/I | Y | Small Group Discussion | Skill assessment |
| Phase 3 part 2 | 0635.16g | Describe step wise general supportive management of any kind of obstetric hemorrhage | S | SH | Y | DOAP Session | Viva Voice |
| Phase 3 part 2 | 0635.16h | Demonstrate emergency management for a case of APH in a simulated environment | S | SH | Y | DOAP Session | Log Book |
| Phase 3 part 2 | 0635.16i | List the causes of Postpartum hemorrhage | K | K | Y | Lecture | Written |
| Phase 3 part 2 | 0635.16j | Discuss differentiating between atonic and traumatic PPH | K | K | Y | Lecture | Written |
| Phase 3 part 2 | 0635.16k | Diagnose a case of PPH and its likely causes in a simulated environment | S | SH | Y | DOAP Session | Log Book |
| Phase 3 part 2 | 0635.16l | Describe the stepwise approach for management of PPH | S | SH | Y | Small Group Discussion | Viva Voice |
| Phase 3 part 2 | 0635.16m | Demonstrate emergency management for a case of PPH in a simulated environment | S | SH | Y | DOAP Session | Log Book |
| Phase 2 | 0635.17 | Demonstrate the correct technique of urinary catheterization in a simulated/ supervised environment | S | SH | Y | DOAP session | Skill assessment |
| Phase 2 | 0635.17a | Enumerate the indications of urinary catheterization | K | K/I | Y | Small group discussions | Viva Voice |
| Phase 2 | 0635.17b | Identify different types of urinary catheters and their indications | S | SH | Y | Bedside clinics | Skill assessment |
| Phase 2 | 0635.17c | Enumerate steps of insertion of Foley's catheter | S | SH | Y | DOAP | Skill assessment |
| Phase 2 | 0635.17d | Demonstrate supervised insertion of Foley's catheter during unit ward postings/ elective OT | S | SH | Y | DOAP | Skill assessment |
| Topic: Obstetrics & Gynecological skills-II | | | | | | | |
| Number of competencies:(03) | | | | | | | |
| Phase 3, part 2 | 0636.1 | Plan and institute a line of treatment which is need based/least effective and appropriate for common conditions taking into consideration (a) patient (b) diverse (c) socio economic status (d) institutional/center/accept guidelines. | K/S | SH | Y | Bedside clinics/small group discussions | Clinical assessment's via voice |
| Phase 3, part 2 | 0636.1a | Describe various gynaecological conditions where different treatment options need to be tailored according to need and cost effective approach | K | SH | Y | small group discussions | viva voice |
| Phase 3, part 2 | 0636.1b | Plan and institute an appropriate line of treatment for a case of PID which is tailored according to the patient, her socio economic status and institutional guidelines | S | SH | Y | Bedside Clinics | Clinical assessment |
| Phase 3, part 2 | 0636.1c | Plan and institute an appropriate line of management for a case of recurrent pregnancy loss | | | | | |
| Phase 3, part 2 | 0636.1d | Plan and institute an appropriate line of management for a case of anovulatory pregnancy | | | | | |

| Phase 3, part 2 | OG36.2 | Organize antenatal, postnatal, well baby and family welfare clinics | K/S | K/H | Y | Bedside clinics | Clinical assessment/viva voce |
|---|---------|---|---------|-----|---|--|-------------------------------|
| Phase 3 Part 1 | OG36.2a | Enumerate the services offered at antenatal, postnatal, well baby and family welfare clinics | K | K/H | Y | Bedside Clinics | Viva Voce |
| Phase 3 Part 2 | OG36.2b | Discuss the establishment of antenatal clinic after observing the institutional antenatal clinic | K | K/H | Y | Bedside Clinics | Viva Voce |
| Phase 3 Part 2 | OG36.2c | Discuss the establishment of postnatal clinic after observing the institutional antenatal clinic | K | K/H | Y | Bedside Clinics | Viva Voce |
| Phase 3 Part 2 | OG36.2d | Discuss the establishment of well baby clinic after observing the institutional antenatal clinic | K | K/H | Y | Bedside Clinics | Viva Voce |
| Phase 3 Part 2 | OG36.2e | Discuss the establishment of family welfare clinic after observing the institutional antenatal clinic | K | K/H | Y | Bedside Clinics | Viva Voce |
| Phase 3 Part 2 | OG36.3 | Demonstrate the correct technique of punch biopsy of cervix in a simulated supervised environment | S | SH | Y | Bedside clinics | Clinical assessment/viva voce |
| Phase 3 Part 2 | OG36.3a | Enumerate indications of punch biopsy of cervix and proper site for biopsy | K | K/H | Y | Small Group Discussion | Viva Voce |
| Phase 3 Part 2 | OG36.3b | Discuss different methods to select the proper site for cervical biopsy | S | SH | Y | Bedside clinics | Viva Voce |
| Phase 3 Part 2 | OG36.3c | Identify correct instrument for punch biopsy | S | SH | Y | Bedside clinics | Viva Voce |
| Phase 3 Part 2 | OG36.3d | Describe the steps of cervical punch biopsy procedure | S | SH | Y | Bedside clinics | Viva Voce |
| Phase 3 Part 2 | OG36.3e | Correct in woman for a cervical biopsy procedure and take consent | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OG36.3f | Observe punch biopsy procedure | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | OG36.3g | Demonstrate the correct technique of punch biopsy from appropriate site in a simulated environment | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OG36.3h | Discuss the implications of procedure and their management | K | K/H | Y | Bedside clinics | Viva Voce |
| Phase 3 Part 2 | OG36.3i | Describe the post op instructions after cervical biopsy procedure | K | SH | Y | Bedside clinics | Clinical assessment |
| Topic: Obstetrics & Gynecological Skills-III | | | | | | | |
| Number of competencies:87 | | | | | | | |
| Phase 3 Part 2 | OG37.1 | Observe and assist in the performance of a Cesarean Section | K/S/A/C | SH | Y | Bedside clinics, small group discussions | Log book |
| Phase 3 Part 2 | OG37.1a | Classify different types of cesarean sections | K | K | Y | small group discussions | Viva Voce |
| Phase 3 Part 2 | OG37.1b | Describe the steps of cesarean section | K | SH | Y | Bedside clinics | Viva Voce |
| Phase 3 Part 2 | OG37.1c | Identify the instruments used for cesarean section | K | SH | Y | Bedside clinics | Clinical Assessment |
| Phase 3 Part 2 | OG37.1d | Prepare scrub for the major surgery | A | SH | Y | Bedside clinics | Clinical Assessment |
| Phase 3 Part 2 | OG37.1e | Identify the lower uterine segment, uterovesical fold of peritoneum, bladder, and adnexal structures | K | SH | Y | Bedside clinics | Clinical Assessment |
| Phase 3 Part 2 | OG37.1f | Observe the cesarean section | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | OG37.1g | Take well informed consent for cesarean section | C | SH | Y | Bedside clinics | Clinical Assessment |
| Phase 3 Part 2 | OG37.2 | Observe and assist in the performance of Laparotomy | K/S/A/C | SH | Y | Bedside clinics, small group discussion | Clinical assessment/viva voce |
| Phase 3 Part 2 | OG37.2a | Describe the anatomy of anterior abdominal wall | K | SH | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OG37.2b | Classify and describe the different types of abdominal incisions | K | SH | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OG37.2c | Describe the steps of laparotomy | K | SH | Y | small group discussion | Clinical assessment |
| Phase 3 Part 2 | OG37.2d | Identify the instruments used for laparotomy | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OG37.2e | Identify the abdominal and pelvic structures seen on laparotomy | K | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OG37.2f | Observe the laparotomy | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | OG37.2g | Take well informed consent for laparotomy | C | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OG37.3 | Observe and assist in the performance of Hysterectomy Abdominal/Vaginal | K/S/A/C | SH | Y | Bedside clinics, small group discussions | Clinical assessment/viva voce |
| Phase 3 Part 2 | OG37.3a | Identify the instruments used for Hysterectomy | K | SH | Y | Bedside clinics | viva voce |
| Phase 3 Part 2 | OG37.3b | Describe the steps of abdominal Hysterectomy | K | SH | Y | small group discussions | viva voce |
| Phase 3 Part 2 | OG37.3c | Describe the steps of vaginal Hysterectomy | K | SH | Y | small group discussions | viva voce |
| Phase 3 Part 2 | OG37.3d | Prepare scrub for the major surgery | A | SH | Y | small group discussions | Clinical assessment |
| Phase 3 Part 2 | OG37.3e | Observe the Abdominal Hysterectomy | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | OG37.3f | Observe the vaginal hysterectomy | S | SH | Y | Bedside clinics | Log Book |

| Phase 3 Part 2 | 0637.3d | Take well informed consent for abdominal vaginal hysterectomy | C | SH | Y | Bedside clinics | Clinical assessment |
|--|---------|---|---------|----|---|--|-------------------------------|
| Phase 3 Part 2 | 0637.4 | Observe and assist in the performance of Dilatation & Curettage (D&C) | K/S/A/C | SH | Y | Bedside clinics, small group discussions | Clinical assessment via voice |
| Phase 3 Part 2 | 0637.4a | Enumerate the indications of Dilatation & Curettage | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.4b | Describe the steps of Dilatation & Curettage | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.4c | Identify the instruments used for D&C | K | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | 0637.4d | Observe the performance of D&C | S | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | 0637.4e | Take well informed consent for D&C | C | SH | Y | Bedside clinics | |
| Phase 3 Part 2 | 0637.5 | Observe and assist in the performance of Endometrial Aspiration-Endocervical Curettage (EAC) | K/S/A/C | SH | Y | Bedside clinics, small group discussions | via voice |
| Phase 3 Part 2 | 0637.5a | Enumerate the indications of Endometrial Aspiration & Endocervical Curettage | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.5b | Enumerate different methods of Endometrial sampling & ECC | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.5c | Describe the steps of Endometrial Aspiration & ECC | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.5d | Identify the instruments used for EA-ECC | K | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | 0637.5e | Observe the performance of EA-ECC | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | 0637.6 | Observe and assist in the performance of Outlet Forceps Application, Vacuum and Breech Delivery | K/S/A/C | SH | Y | Bedside clinics, small group discussions | Logbook |
| Phase 3 Part 2 | 0637.6a | Identify the blades of Outlet Forceps | K | SH | Y | Bedside clinics | Viva Voice |
| Phase 3 Part 2 | 0637.6b | Enumerate the prerequisites for outlet forceps delivery | K | SH | Y | small group discussions | Viva Voice |
| Phase 3 Part 2 | 0637.6c | Describe the steps of Outlet Forceps Delivery | K | SH | Y | small group discussions | Viva Voice |
| Phase 3 Part 2 | 0637.6d | Observe the Outlet Forceps Delivery | S | SH | Y | Bedside clinics | Logbook |
| Phase 3 Part 2 | 0637.6e | Identify the instruments for Vacuum Delivery | K | SH | Y | Bedside Clinics | Viva Voice |
| Phase 3 Part 2 | 0637.6f | Describe the steps of Vacuum Delivery | K | SH | Y | small group discussions | Viva Voice |
| Phase 3 Part 2 | 0637.6g | Observe the Vacuum Delivery | S | SH | Y | Bedside clinics | Logbook |
| Phase 3 Part 2 | 0637.6h | Describe the steps of Vaginal Assisted Breech Delivery | K | SH | Y | small group discussions | Viva Voice |
| Phase 3 Part 2 | 0637.7 | Observe and assist in the performance of MIP in the first trimester and Evacuation of Incomplete abortion | K/S/A/C | SH | Y | Bedside clinics, small group discussions | Clinical assessment via voice |
| Phase 3 Part 2 | 0637.7a | Enumerate the indications of MIP as per MPP Law | K | KH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.7b | Describe the steps of first trimester MIP by Suction Evacuation | K | KH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.7c | Identify the instruments used for Suction Evacuation | S | SH | Y | Bedside clinics | via voice |
| Phase 3 Part 2 | 0637.7d | Describe components of manual Vacuum Aspirator and method of use | K | SH | Y | small group discussions | via voice |
| Phase 3 Part 2 | 0637.7e | Describe all parts of form C & Take well informed consent for MIP on Form C | C | SH | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | 0637.7f | Observe first trimester MIPs | S | SH | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | 0637.7g | Observe the evacuation for incomplete abortion | S | SH | Y | Bedside clinics | Log Book |
| Topic: Should Observe Number of competencies:(04) Number of procedures that require certification: (NH) | | | | | | | |
| Phase 3 part 2 | 0638.1 | Laparoscopy | K/S/A/C | KH | Y | Bedside clinic, small group discussion | clinical assessment via voice |
| Phase 3 Part 2 | 0638.1a | Identify the instruments used for laparoscopy | S | SH | Y | Bed side clinics | via voice |
| Phase 3 Part 2 | 0638.1b | Describe the steps of laparoscopy | K | KH | Y | Bed side clinics | via voice |
| Phase 3 Part 2 | 0638.1c | Identify the pelvic structures and their relationship on laparoscopy | K | KH | Y | Bed side clinics | via voice |
| Phase 3 Part 2 | 0638.1d | Enumerate the complications of laparoscopy & preventive measures | K | KH | Y | small group discussion | via voice |
| Phase 3 Part 2 | 0638.1e | Observe laparoscopy procedure in OT | S | S | Y | Bed side clinics | Log Book |

| Phase 3 part 2 | OC 38 2 | Hysteroscopy | K/S/A/C | K/H | Y | Bedside clinics, small group discussions | Clinical assessment/viva voce |
|----------------|----------|--|---------|-----|---|--|-------------------------------|
| Phase 3 Part 2 | OC 38 2a | Identify the instruments used for hysteroscopy | S | S/H | Y | Bed side clinics | viva voce |
| Phase 3 Part 2 | OC 38 2b | Describe the steps of hysteroscopy | K | K/H | Y | Bed side clinics | viva voce |
| Phase 3 Part 2 | OC 38 2c | Identify the structures seen on hysteroscopy | K | K/H | Y | Bed side clinic | viva voce |
| Phase 3 Part 2 | OC 38 2d | Enumerate the complications of hysteroscopy and pre-culture measures | K | K/H | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OC 38 2e | Observe hysteroscopy procedure in OT | S | S | Y | Bed side clinics | Log Book |
| Phase 3 part 2 | OC 38 3 | Lap Sterilization | K/S/A/C | K/H | Y | Bedside clinics, small group discussion | clinical assessment/viva voce |
| Phase 3 Part 2 | OC 38 3a | Classify different types of ligation procedures | K | K/H | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OC 38 3b | Enumerate the eligibility criteria for ligation as per Indian Guidelines | K | K/H | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OC 38 3c | Describe the steps of lap ligation | K | K/H | Y | small group discussion | viva voce |
| Phase 3 Part 2 | OC 38 3d | Identify the instruments used for lap ligation | S | S/H | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OC 38 3e | Enumerate the preoperative, intra steps and post operative care for lap ligation | K | K/H | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OC 38 3f | Take well informed consent for lap ligation on the appropriate form | C | K/H | Y | Bedside clinics | Clinical assessment |
| Phase 3 Part 2 | OC 38 3g | Observe laparoscopic sterilization procedure in OT | S | S | Y | Bedside clinics | Log Book |
| Phase 3 Part 2 | OC 38 4 | Assess the need for and issue proper medical certificates to patients for various purposes | K/S/A/C | K/H | Y | Bedside clinics, small group discussion | Clinical assessment/viva voce |
| Phase 3 Part 2 | OC 38 4a | Enumerate various conditions in Fxine and obstetries requiring medical certificate | K | K/H | Y | small group discussion | clinical assessment |
| Phase 3 Part 2 | OC 38 4b | Describe important components of medical certificate | K | K/H | Y | small group discussion | clinical assessment |
| Phase 3 Part 2 | OC 38 4c | Issue proper medical certificate | K | K/H | Y | Bedside clinic | clinical assessment |

Obstetrics and Gynaecology- MBBS Final Prof -Part II University of Delhi

Template for Theory examinations paper (CBME)

There shall be Two theory papers with topic-wise distribution as per the syllabus approved by FMS, University of Delhi. Each paper of 100 marks to be as per the following template.

Table-1: Template of Theory paper-1 of 100 marks(Obstetrics including Social Obstetrics & Neonatology)

| Part | Type of question | Number of question | Marks per question | Total Marks | Total time 180(min) |
|------|------------------|--------------------|--------------------|-------------|---------------------|
| A | MCQ | 20 | 01 | 20 | |
| B | LAQ | 02 | 15 | 30 | |
| C | SAQ | 05 | 05 | 25 | |
| D | SAQ* | 05 | 05 | 25 | |

• One SAQ of the part D will be from AETCOM module.
One SAQ will be from social obstetrics, and Neonatology each

Table-II: Template of Theory paper- II of 100 marks (Gynaecology & Family Planning)

| Part | Type of question | Number of question | Marks per question | Total Marks | Total time 180(min) |
|------|------------------|--------------------|--------------------|-------------|---------------------|
| A | MCQ | 20 | 01 | 20 | |
| B | LAQ | 02 | 15 | 30 | |
| C | SAQ | 05 | 05 | 25 | |
| D | SAQ* | 05 | 05 | 25 | |

• One SAQ of the part D will be from AETCOM module.
Two SAQ will be from Family Planning

Notes regarding the template for Theory examination paper

- Each of the theory papers will be of 100 marks each.
- Duration of paper will be 3 hours (including maximum 20 minutes for the MCQ paper).
- Part A (MCQs) is to be attempted on the provided question paper itself.
- All the other parts are to be answered in separate answer-sheets.
- Part A question paper is to be detached and returned back after 20 minutes of the start of the examination.
- Learner is to write his/ her roll number on the top on both the MCQ question paper and the LAQ, SAQ question paper immediately on receipt of the paper.
- Only blue/black ink is to be used for attempting the paper including the MCQ section. Use of pencil is only allowed for diagram/graphs.

Ar
30/1/23

30/1/23

Rashi
30-1-23

Khu
30.1.23

ASUVEPS
30.1.23

30/1/23

Kiran
30/1/23

30.1.23

30/1/23

30/1/23

30/1/23

MCQ:

- Each of the 20 questions will be of single best answer type, where the learner is to indicate the single correct or best answer among the four given options.
- The MCQs can include question on 'match the correct option'. clinical scenario etc but options to be worded as choosing single correct best answer.
- Each question will have a stem of the question followed by four choices labelled A, B, C and D.
- At the end of each MCQ a square box will be provided where the learner is to indicate his/her answer by writing a single option (among A,B,C,D) within the square box..
- An option once indicated within the box is not allowed to be changed. Any scratching, scribing, overwriting or change of the indicated choice within the box, will be as a wrong response.
- One mark will be awarded for each correctly answered MCQ.
- There will be no negative marking.

Note on Long Answer Questions (LAQ)

- Each LAQ is to be framed with objective smaller sub parts, indicating clearly marks for each sub part.
- Each LAQ to preferably be divided into 2-4 sub parts.
- All the sub-parts within one LAQ to preferably be linked by theme or topic, they should not be unrelated to each other.

Note on Short Answer Question (SAQ)

- The SAQ can comprise of questions on writing short notes on specific topics, differences between two terms, drawing a schematic diagram etc.
- One SAQ within part D of each of the two theory papers will be from AETCOM topics.

Template for Practical/ Clinical Examination (Obstetrics & Gynecology)

Alin
30/1/23
Rosh
2-1-23

al
20.1.23
hwi/20.1.23

ASurvey
30.1.23

Kumar
30/1/23

Dink
30/1/23

nr
30/1/23
Deepthi
30/1/23

ce

devi
30/1/23

Template for Practical/ Clinical Examination (Obstetrics & Gynecology)

Max Marks 200

| | Description | Marks |
|--------------------------|--|---------|
| Long Case (Obstetrics) | History | 15 |
| | Examination | 15 |
| | Discussion | 20 |
| | AETCOM | 10 |
| Short Case (Gynaecology) | Diagnosis | 10 |
| | Discussion | 20 |
| OSCE* | 10 stations NST, Partograph, Instruments, Specimens, Ultrasound, HSG films, Drugs, Contraceptives & MTP, AETCOM | 10x5=50 |
| Obstetric Viva | Dummy & Pelvis | 30 |
| | Labour, Drugs | |
| | Instrumental Deliveries | |
| | Surgical Procedures | |
| Gynecology Viva | Instruments & Gynae Specimens | 20 |
| | Surgical Procedures | |
| Family Planning Viva | MTP & Contraception | 10 |

*10 OSCE Stations carrying 5 marks each

Alm
30/1/23

ben
30/1/23

Rashi
30-1-23

Deepan
30/1/23

Dub
30/1/23

nd
30/1/23

@smita
30.1.23

hu
30-1-23

Kaan
30/1/23

Asuvel
30.1.23

cel
30/1/23