Gynaecology & Obstetrics Study Guide & Clerkship book



MBBS Final Year

Faisalabad Medical University (FMU)
Faisalabad.

OBSTETRICS & GYNAECOLOGY

STUDY GUIDE & CLERKSHIP BOOK Student's Identity

	Photograpl	n	
Name:			
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Residence:			
Cell No			
inal Year Roll No			
Session:			

Message from Vice Chancellor

HEADS OF GYNAE DEPARTMENT

Prof. Dr. Sumera Tahir MBBS, MCPS, FCPS Head of Gynae Unit-I Allied Hospital, Faisalabad.



Prof. Dr. Robina Ali MBBS, MCPS, FCPS Head of Gynae Unit-II DHQ Hospital, Faisalabad.



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Department of Obstetrics & Gynaecology Faisalabad Medical University Faisalabad.

Vision

To be the leader for women's healthcare.

Mission

Our mission is to provide excellence, innovation and superior quality in the compassionate care of patients, in the training and mentoring of health professionals, and in the creation and sharing of knowledge in woman's health.

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SECTION 1

BASIC PROTOCOLS AND GUIDELINES

PROTOCOLS OF OBSTETRICS & GYNAECOLOGY ROTATION

(i) Dress Code:

- Students need to wear their O.T kits (Royal Blue in colour) during their residency period in Labour Room.
- No jewellary or valuable items to be carried
- Student should wear either back pack or across the body bags for their belonging. Department would not be responsible for the loss of any valuable item.

(ii) Personal Kit:

- White coat
- Stethoscope
- Hammer
- Measuring tape
- Wrist watch
- Pen torch

(iii) Cell Phones:

- Cell phone should be remained on silent mode.
- Students would not be allowed to use their cell phones during working hours.
- If any student found to be violating the would be fined.

(iv) Punctuality

Students must reach in time. There would be no relaxation for missing any class. There would be no remedial class.

(v) O.T Protocols

- Students should wear OT kit, mask, cap and disposable shoe covers.
- Students should observe silence in the OT and maintain discipline.
- Students are encouraged to ask questions after surgical procedure.

Assessment

At the end of Final Year MBBS, University examination will include a theory paper of 135 marks (MCQ and SEQs) and OSPE + Viva of 135 marks. Students have to pass in OSPE and Viva examination separately. Internal assessment of 30 marks will be calculated from following.

Attendance 30%
 10 compulsory clinical cases only in 10%
 Ward test (OSPE + Viva) final year 60%

Learning Outcomes

At the end of Gynae rotation Final Year Students will be able to:

- 1. Develop competence in Gyane & Obs history taking and physical examination.
- 2. Demonstrate knowledge of preconception care including the impact of genetics, medical conditions and environmental factors on maternal health and fetal development.
- 3. Antenatal care and pick up risk factors.
- 4. Demonstrate knowledge of intrapartum care (including APH, obstetric emergencies)
- 5. Demonstrate knowledge of postpartum care of the mother and newborn.
- 6. Manage common problems in obstetrics.
- 7. Describe and evaluate medical disorders in pregnancy.
- 8. Early pregnancy complications.
- 9. Describe menstrual cycle physiology, discuss puberty and menopause and explain normal and abnormal bleeding.
- 10. Describe the etiology and evaluation of infertility.
- 11. Develop a thorough understanding of contraception, including sterilization describe.

- 12. Demonstrate knowledge of common benign gynecological conditions.
- 13. Formulate a differential diagnosis of the acute abdomen and chronic pelvic pain.
- 14. Able to perform normal breast examination.
- 15. Demonstrate knowledge of perioperative care and familiarity with obstetrics and gynecological procedures.
- 16. Describe gynecological neoplasia including risk factors, signs and symptoms initial evaluation and treatment.
- 17. Differentiate between normal and abnormal labour and understand the factors leading to abnormal labour.
- 18. Lower and upper genital tract infection
- 19. Urogynaecology and pelvic flour injuries
- 20. Describe primary & secondary amenorrhea
- 21. Communicate effectively with the patient and her attendants.
- 22. Understand medical ethics and its application.

Required/Suggested Reading and Websites

- Ten teachers
- RCOG guidelines (NICE and greentop)
- http://almostadoctor.co.uk>browse

By the end of Gynae rotation, final year students would be able to identify the following instruments commonly used in Gynae Operation Theatre. List of instruments has been provided below:

Gynaecology Obstetrics	
Sims Speculum	Forcep's (Outlet)
Cusco's Speculum	Vacuum
Hegar Dilator	
Uterine sound	
Tenaculum	
Rubin's canuula	
Endosampler	
Hysteroscope	
Laparoscope	
Curette	

By the end of Gynae rotation, final year students will complete and submit 20 histories, 10 each from Obstetrics and Gynaecology. List of topics have been provided below and number of histories to be taken regarding each topic has been mentioned in front.

List of Obstetric topics	No. of histories to be taken	List of Gynaecological topics	No. of histories to be taken
 PIH / Preeclampsia GDM / Pre-GDMM Preterm labour Pre-PROM Multiple pregnancy Medical disorders in pregnancy (Cardiac/renal/inner disease) Placental abruption 	2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 Miscarriage / Molar pregnancy Ectopic pregnancy HMB due to fibroid Adnexal mass (Dermoid/TO mass) Ovarian malignancy Postmenopausal bleeding (Endometrial CA) UP prolapse HMB due to AUB Mullerian anomaly (primary 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Placenta previaIUGR		amenorrhea)Infertility (PCOS/Endometriosis)	

SECTION 2

FINAL YEAR CLERKSHIP

Note: At the end of Gynae rotation it is mandatory for the students to submit 10 common clinical cases 05 each of Obstetrics & Gynaecology as listed above.

History Format: Ca	ase 1 (Obstetrics)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
- Presenting Complaints: _		
- Obstetric History:		
- Gynaecological History:		
- History of present pregn	ancy/presenting illness:	
- Post medical/surgical his	story:	
- Family history:		
- Socio-economic history:		
General Physical Exam:		

• Pulse

- B.P
- Temp.
- Resp./Rate
- Pallor
- Jaundice
- Cyanosis
- Ankle edema
- Thyroid

Systemic Exam: Chest auscultation Heart sound **Abdominal Examination:** - SFH - Lie - FHR **Pelvic Examination: Obstetrics Examination Gynaecological Examination** - Inspection - Bishop score - P/s - P/V Diagnosis: Management Plan: _____ **History Format:** Case 2 (Obstetrics) Patient Name: _____ Reg. No. _____ Ward/Labour Room: ______ Age: _____ Bed No. _____ - Presenting Complaints: _____ - Obstetric History:

- Gynaecological History: _____

- History of present pregnancy/presenting illness:

- Post medical/surgical history: _____

Family history:		
Socio-economic history:		
General Physical Exam:		
• Pulse		
• B.P		
• Temp.		
Resp./Rate		
• Pallor		
Jaundice Grannia		
• Cyanosis		
Ankle edema Thomasida		
ThyroidSystemic Exam:		
Chest auscultation		
Heart sound		
Abdominal Examination:		
- SFH		
- Lie		
- FHR		
Pelvic Examination:		
Obstetrics Examination	-	gical Examination
· Bishop score	- Inspection	n
	- P/s	
	- P/V	
Diagnosis:		
Management Plan:		
History Format: Case 3 (Ob	ostetrics)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
Presenting Complaints:		

- Obst	etric History:
- Gyna	necological History:
- Histo	ory of present pregnancy/presenting illness:
- Post	medical/surgical history:
- Fam	ly history:
- Soci	o-economic history:
	ral Physical Exam:
•	Pulse
•	B.P
•	Temp.
•	Resp./Rate
•	Pallor
•	Jaundice .
•	Cyanosis
•	Ankle edema
•	Thyroid
Syste	nic Exam:
	Chest auscultation
. د ام ما ۸	Heart sound ninal Examination:
ADDO	ninal Examination: SFH
-	Lie
_	FHR

Gynaecological Examination

- Inspection
- P/s

Pelvic Examination:

- Bishop score

Obstetrics Examination

History Format: Case 4 (Obstetrics)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
- Presenting Complaints:		
- Obstetric History:		
- History of present pregnancy/	presenting illness:	
- Post medical/surgical history:		
- Family history:		
- Socio-economic history:		

Vard/Labour Room:		Bed No.
/ard/Labour Room:	Age:	
		Red No
atient Name:	Father Name:	Reg. No
listory Format: Case 5 (Ob	stetrics)	
Nanagement Plan:		
iagnosis:	- P/V	
	- P/s	
bstetrics Examination Bishop score	Gynaeco - Inspect	logical Examination ion
elvic Examination:	Cunacca	logical Evamination
- FHR		
- Lie		
bdominal Examination: - SFH		
Heart sound		
Chest auscultation		
ystemic Exam:		
Thyroid		
Ankle edema		
 Jaundice Cyanosis		
• Pallor		
Resp./Rate		
• Temp.		
• B.P		
• Pulse		

- Gynaecological History:

- History of present pregnancy/presenting illness:		
Thistory of present pregnancy, presenting inne	55	
- Post medical/surgical history:		
- Family history:		
- Socio-economic history:		
,		
General Physical Exam:		
Pulse		
• B.P		
• Temp.		
Resp./Rate		
Pallor		
 Jaundice 		
 Cyanosis 		
 Ankle edema 		
Thyroid		
Systemic Exam:		
Chest auscultation		
Heart sound		
Abdominal Examination:		
- SFH		
- Lie		
- FHR		
Pelvic Examination:		
Obstetrics Examination	Gynaecological Examination	
- Bishop score	- Inspection	
	- P/s	
	- P/V	
Diagnosis:		
Management Plans		
Management Plan:		

Ward/Labour Room:	Age:	Bed No	
- Presenting Complaints:			
- Obstetric History:			
- Gynaecological History:			
- History of present pregnancy/presen	ting illness:		
- Post medical/surgical history:			
- Family history:			
- Socio-economic history:			

General Physical Exam:

- Pulse
- B.P
- Temp.
- Resp./Rate
- Pallor
- Jaundice
- Cyanosis
- Ankle edema
- Thyroid

Systemic Exam:

Chest auscultation

Heart sound

Abdominal Examination:

- SFH
- Lie
- FHR

<u>Pelvic Examination:</u> Obstetrics Examination

Gynaecological Examination

- Bishop score

- Inspection

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Obstetric History: Gynaecological History:	
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Obstetric History: Gynaecological History:	
Gynaecological History:	
Gynaecological History:	
Gynaecological History:	
Gynaecological History:	
History of present pregnancy/presenting illness:	
History of present pregnancy/presenting illness:	
History of present pregnancy/presenting illness:	
Post medical/surgical history:	

- Family history:		
- Socio-economic history:		
General Physical Exam:		
PulseB.P		
• Temp.		
Resp./Rate		
• Pallor		
Jaundice		
Cyanosis		
Ankle edema		
Thyroid		
Systemic Exam:		
Chest auscultation		
Heart sound		
Abdominal Examination:		
- SFH		
- Lie		
- FHR		
Pelvic Examination: Obstetrics Examination	Gynaecole	ogical Examination
- Bishop score	- Inspection	_
District Secre	- P/s	
	- P/V	
Diagnosis:		
Management Plan:		
History Format: Case 3 (G	ynaecology)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
- Presenting Complaints:		

Obstetrics Examination Gynaecological Examination	- Obstetric History:	
- History of present pregnancy/presenting illness: - Post medical/surgical history: - Family history: - Socio-economic history: - Socio-economic history: - Pulse - B.P - Temp. - Resp./Rate - Pallor - Jaundice - Cyanosis - Ankle edema - Thyroid Systemic Exam: - Chest auscultation Heart sound Abdominal Examination: - SFH - Lie - FHR Pelvic Examination: Obstetrics Examination: Obstetrics Examination: Osynaecological Examination - Inspection - P/S		
- History of present pregnancy/presenting illness: - Post medical/surgical history: - Family history: - Socio-economic history: - Socio-economic history: - Pulse - B.P - Temp. - Resp./Rate - Pallor - Jaundice - Cyanosis - Ankle edema - Thyroid Systemic Exam: - Chest auscultation Heart sound Abdominal Examination: - SFH - Lie - FHR Pelvic Examination: Obstetrics Examination: Obstetrics Examination: Osynaecological Examination - Inspection - P/S		
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 Thyroid Systemic Exam: Chest auscultation Heart sound Abdominal Examination: SFH Lie FHR Pelvic Examination: Gynaecological Examination Inspection P/s 		
Systemic Exam: Chest auscultation Heart sound Abdominal Examination: SFH Lie FHR Pelvic Examination: Obstetrics Examination Bishop score Gynaecological Examination Inspection P/s		
Chest auscultation Heart sound Abdominal Examination: - SFH - Lie - FHR Pelvic Examination: Obstetrics Examination - Bishop score Gynaecological Examination - Inspection - P/s	•	
Heart sound Abdominal Examination: - SFH - Lie - FHR Pelvic Examination: Obstetrics Examination - Bishop score Gynaecological Examination - Inspection - P/s		
Abdominal Examination: - SFH - Lie - FHR Pelvic Examination: Obstetrics Examination - Bishop score Gynaecological Examination - Inspection - P/s		
- SFH - Lie - FHR Pelvic Examination: Obstetrics Examination - Bishop score Gynaecological Examination - Inspection - P/s		
- FHR Pelvic Examination: Obstetrics Examination - Bishop score - Inspection - P/s		
- FHR Pelvic Examination: Obstetrics Examination - Bishop score - Inspection - P/s		
Obstetrics Examination - Bishop score - Inspection - P/s		
Obstetrics Examination - Bishop score - Inspection - P/s	Pelvic Examination:	
- Bishop score - Inspection - P/s	Obstetrics Examination	Gynaecological Examination
	- Bishop score	- Inspection
- P/V		- P/s
		- P/V

Management Plan: _		
History Format:	Case 4 (Gynaecology)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
- Presenting Complain	nts:	
- Obstetric History: _		
- Gynaecological Histo	ory:	
- History of present p	pregnancy/presenting illness:	
- Post medical/surgical	al history:	
- Family history:		
- Socio-economic hist	tory:	

General Physical Exam:

• Pulse

- B.P Temp. • Resp./Rate • Pallor

 - Jaundice
 - Cyanosis
 - Ankle edema
 - Thyroid

Systemic Exam:

Chest auscultation

Heart sound

Abdominal Examination:

- SFH
- Lie
- FHR

- Bishop score

Pelvic Examination:

Obstetrics Examination

Gynaecological Examination

- Inspection

- P/s - P/V

Diagnosis:		
Nanagement Plan:		
<u>-listory Format:</u> Case 5 (G	ynaecology)	
Patient Name:	Father Name:	Reg. No
Ward/Labour Room:	Age:	Bed No
- Presenting Complaints:		
- Obstetric History:		
- Gynaecological History:		

- History of present pregnancy/presenting illness:					
- Post medical/surgical history:					
- Family history:					
- Socio-economic history:					
General Physical Exam:					
Pulse					
• B.P					
• Temp.					
 Resp./Rate 					
Pallor					
 Jaundice 					
 Cyanosis 					
 Ankle edema 					
Thyroid					
Systemic Exam:					
Chest auscultation					
Heart sound					
Abdominal Examination:					
- SFH					
- Lie					
- FHR					
Pelvic Examination:	Company of the Committee of the Committe				
Obstetrics Examination	Gynaecological Examination				
- Bishop score	- Inspection				
	- P/s				
Diagnosis	- P/V				
Diagnosis:					
Management Plan:					

OPD

Student will learn to evaluate **Obstetric patients:**

- Fill antenatal card
- Brief history of obstetric patient
- Obstetric abdominal examination
- Picking up risk factors
- Advising and interpreting the investigations
- Planning further follow up.

Sample of Antenatal Card

DEPARTM	
OBSTETRICS &	GYNECOLOGY
PROFESSOR DR. SUMERA TAHIR MCPS, FCPS	ASSOCIATE PROFESSOR DR. TASNIM TAHIRA MCPS, FCPS
ASSISTANT PROFESSOR DR. NOREEN BILAL FCPS	ASSISTANT PROFESSOR DR. SADIA SALEEM FCPS
NAME OF PATIENT	
EDUCATION	MARRIED FOR
HUSBAND'S NAME	JOB
ADDRESS	
L.M.P	E.D.D
F	FINAL E.D.D
MEDICAL / SURGICAL HISTORY	
FAMILY HISTORY	
1. DIABETES MELLITUS:	1. TUBERCULOSIS:
2. HYPERTENSION:	2. MULTIPLE PREGNANCY:
3. CONGENITAL ANOMALY:	3. MULTIPLE PREGNANCY:

Sr. No.	Year Of Birth	Booked/ Unbooked	Abortion/ Premature/ Term	Con Pregnancy/	pplication in Labour/ Puerperium	Mode of Delivery	Place of Birth	Child: Age Alive/Stillb Breast/Bot	irth/Perinatal I
								1	
		OBST	ETRICS	ULTRAS	DUND	In	vestigations	teDate	Date
	Da	te	1	Date	Date		BC Hb		

Date	Duration of Pregnancy	Height of Fundus	Lie and Presentation	F.H.S.	B.P.	Weight	Remarks	Signature of Doctor
	· · · · · · · · · · · · · · · · · · ·		+				Y	
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TREATMENT ADVISED
-

Student will learn to evaluate Gynaecological patients:

- History of Gynaecological patient
- Gynaecological examination
- Making a provisional diagnosis
- Advising and interpreting the investigations
- Planning further follow up.

HISTORY TAKING IN GYNAE OPD (TEMPLATE)

Patient Name:	Husband/Father Name:		
Date:			
Presenting complaint:			
Brief history:			
Provisional diagnosis:			
Treatment:			
Investigation:			
Previous NVD LSCS E&C LBB		History of - D.M - HTN - T.B - Cardiac problem	
Examination P/A P/S P/V		Caralac problem	

OPERATION THEATRE

- Student will learn the skill of:
 - o Getting wash-up
 - o Gowning and gloving
 - Cleaning and draping the patient
 - o Writing the post-operative notes
- Will assist as 2nd assistant
- Will be taught steps of surgery and expected intra and immediate post-op complications.

PROCEDURE NOTES

Date & Time:	Name:	
Operation/Delivery:		
Pre-Op Diagnosis		
Surgeon / Obstetrician:		
Anesthetist:		
Scrub Nurse:		
<u>Findings:</u>		
Procedure:		
Operative / Post Natal Orders Notes:		
Emergency/Labour Ward		

Stage-I

Student will learn how to:

- Monitor a laboring patient (including induction and augmentation of labour)
- Do and Interpret CTG
- Make partogram
- Access the Bishop score
- Assist vaginal delivery
- Do the tocolysis of preterm labour
- Manage obstetric shock
- Manage the patient of APH & PPH
- Manage the patient of early pregnancy complication including ectopic pregnancy.

Eclampsia Room

- Management of Hypertensive patient including:
 - Vital monitoring
 - Method of giving MgSO₄
 - How to control blood pressure
 - Send and interpret the investigations
 - o Reaching the diagnosis and planning the management

Recovery Room

- Students will learn how to monitor Post-operative and Postnatal patients including:
 - Vital record
 - Maintain input & output chart
 - Document heavy vaginal bleeding
 - o Maintain treatment sheet
 - Monitor blood transfusion/blood transfusion reaction
- Care of Newborn
- Council for breast feeding

Ward

Students will learn and participate in

- Helping their seniors in carrying out the round orders
- Care of Post-op and postnatal patients
- Cord care of newborn and note any subjective complaint
- Wound care of patient
- Counseling for breast feeding and contraception
- How to calculate and inject dose of Insulin according to blood sugar levels
- Maintaining input & output chart
- Interpreting the investigations
- Making discharge slip

Admission Area

Students will learn to:

- Write history / exam / diagnosis / planning management and triaging of patients
- Send the baseline and specific investigations
- Do booking CTG
- Monitor latent phase of labour

MUST TO KNOW TOPICS

Obstetrics

Sr. No.	Topics
1	Obstetrics history and examination
2	Antenatal care
3	Normal fetal development and growth
4	Assessment of fetal wellbeing
5	Prenatal diagnosis
6	Antenatal obstetric complications
7	Multiple pregnancy
8	Preterm labour
9	Hypertensive disorders of pregnancy
10	Medical complications of pregnancy
11	Perinatal infections
12	Labour: normal and abnormal
13	Operative delivery
14	Obstetric emergencies
15	The puerperium

Gynaecology

Sr. No.	Topics
1	The development and anatomy of the female sexual organs and pelvis
2	Gynaecological history, examination and investigations
3	Hormonal control of the menstrual cycle and hormonal disorders
4	Disorders of menstrual bleeding
5	Implantation and early pregnancy
6	Contraception and abortion
7	Subfertility
8	The menopause and post reproductive health
9	Genitourinary problems
10	Urogynaecology and pelvic floor problems
11	Benign conditions of the ovary and pelvis
12	Benign conditions of the uterus, cervix and endometrium
13	Benign conditions of the vulva and vagina, psychosexual disorders and
	female genital mutilation
14	Malignant disease of the ovary
15	Malignant disease of the uterus
16	Premalignant and malignant disease of the lower genital tract
17	Gynaecological surgery and therapeutics

SECTION 3

INTERNAL ASSESSMENT

Team Base Learning (TBL) evaluation

Sr. #	Date	Topic	Attendance	Tutors Sign
1				
2				
3				
4				
5				

Gynae/Obs O.T. procedures evaluation

Sr. #	Name of the procedure	Observed	Assisted	Tutors Sign
1				-
2				
3				
4				
5				
6				
7				
8				
9				
10				

Normal / Operative vaginal delivery evaluation

Sr.#	Date	Name of the procedure	Observed	Assisted	Tutors Sign
1					
2					
3					
4					
5					

Attendance and Performance evaluation

Sr. #	Date	Cases	Indoor/Outdoor/ Operation Theatre	Tutors Sign
1				
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3				
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Internal Assessment	Marks distribution	Marks Obtained
Histories submitted (20 histories)	05	
Rotation Attendance	05	
Ward Test (OSPE + Viva)	10	
TBL Attended (5 marks for each TBL)	05	
Gynae/Obs O.T. procedures assisted/observed Vaginal delivery assisted/observed	05	
Total marks	30	

Final Year Incharge

Head of Department