

# SINGHANIA UNIVERSITY

## PG Curriculum Diploma in Gynecology & Obstetrics (PGDGO) DURATION = 1Year

### A. Theory examination:

#### Title Marks

Paper 1: Basic sciences as related to Obstetrics & Gynaecology	100
Paper 2: Principles and Practice of Obstetrics & Gynaecology diseases of new born babies	100
Paper 3: Recent Advances in Obstetrics & Gynaecology	100

**Total 300**

### B. Practical examination:

1. Long Case (1)	100
2. Short Cases(2) 50 marks each	100
3. Viva Voce	100

**Total 300**

## 1. Syllabus

### 1.1 Theory

#### – Obstetrics

- Gametogenesis fertilization, implantation and early development of embryo
- Normal Labour
- Anatomical and Physiological changes in female genital tract during pregnancy.
- Pharmacology of drugs used during pregnancy, Labour, Post-partum period.
- Development of placenta.
- Amniotic fluid.
- Anatomy of fetus, fetal growth & development, fetal physiology & circulation.
- Puerperium – Normal
- Malpresentation & malposition of labour
- Abnormal Puerperium
- CPD & its management
- Complications of 3<sup>rd</sup> stage of labour
- Hypertensive disorders in pregnancy
- Antepartum Hemorrhage
- PROM, Poly Hydramnios, Oligo Hydramnios
- Obstetrical Hemorrhage (includes Antenatal & postpartum)
- Hypertensive disorders of pregnancy
- Medical disorders in pregnancy

- \_ Emergency Obstetric Care (Intensive Obstetrics)
- \_ Antepartum & intrapartum fetal monitoring.
- \_ **Gynaecology**
- \_ Normal and abnormal microbiology of genital tract & bacterial, viral & parasitic infections responsible for maternal fetal & Gynae disorders.
- \_ Endocrinology related to reproduction
- \_ Physiology of menstruation, ovulation, fertilization & menopause.
- \_ Methods of contraception.
- \_ Fibroid uterus
- \_ Colposcopy & vaginal and cervical cytology
- \_ Endometrial Hyperphasia, DUB, Abnormal bleeding.
- \_ Endometriosis, Adenomyosis
- \_ Endocrine abnormalities, Menstrual abnormalities Amenorrhoea, PCOD, Hirsutism, Hyperprolactinemia, Thyroid disorders.
- \_ Laparoscopy & Hysteroscopy
- \_ Ca Cervix
- \_ Ca Endometrium
- \_ Carcinoma Ovary
- \_ Menopause
- \_ Genital Fistulae / Urinary Incontinence
- \_ Prolapse
- \_ Contraception / Family Planning / Sterilization methods
- \_ Endometriosis, Adenomyosis
- \_ Infertility.

## **1.2 Practical**

- \_ **Obstetrics**
- \_ Venepuncture
- \_ Amniotomy
- \_ Conduct of normal Vaginal delivery
- \_ Perineal infiltration & Pudendal block
- \_ Episiotomy
- \_ Ventouse delivery
- \_ Forceps delivery
- \_ Management of Genital tract injuries
- \_ Exploration of Cervix
- \_ Lower Segment Caesarean Section
- \_ Manual Removal of Placenta
- \_ Breech vaginal delivery
- \_ External Cephalic Version
- \_ Delivery of twins
- \_ Management of shock
- \_ Management of Postpartum hemorrhage
- \_ Cervical Cerclage
- \_ Amnio infusion
- \_ Instillation of extra amniotic & intra amniotic drugs
- \_ Non stress Test

- \_ Suction Evacuation
- \_ Dilatation & Evacuation
- \_ Repair of complete perineal tear
- \_ Repair of cervical tear
- \_ Caesarean Hysterectomy
- \_ Internal iliac ligation
- \_ Uterine & Ovarian Artery ligation
- \_ Destructive operations
- \_ Reposition of inversion uterus
- \_ Amnio centesis
- \_ **Gynaecology**
- \_ Pap Smear
- \_ Wet smear examination
- \_ Post Coital Test
- \_ Endometrial Biopsy
- \_ Endometrial Aspiration
- \_ Dilatation and Curettage/Fractional Curettage / Polypectomy
- \_ Cervical Biopsy
- \_ Cryo / Electrocautery of Cervix
- \_ Hystero Salpingography
- \_ Diagnostic Laparoscopy & Hysteroscopy
- \_ Opening & Closing of abdomen
- \_ Operations for utero vaginal prolapse
- \_ Operations for Ovarian tumors
- \_ Operations for Ectopic Pregnancy
- \_ Vaginal Hysterectomy
- \_ Abdominal Hysterectomy
- \_ Myomectomy
- \_ Colposcopy
- \_ Loop Electro Surgical Excision Procedure
- \_ Tuboplasties
- \_ Paracentesis
- \_ Culdocentesis
- \_ Endoscopic Surgery (Operative Laparoscopy & Hysteroscopy)
- \_ Repair of genital fistulae
- \_ Operations for Urinary incontinence
- \_ Radical operations for Gynaecological Malignancies
- \_ Vaginoplasty
- \_ Intrauterine insemination
- \_ Basic ultrasound / TVS
- \_ Hydrotubation
- \_ Vulval Biopsy
- \_ Incision & drainage
- \_ **FAMILY PLANNING**
- \_ Intra Uterine Contraception Device Insertion / removal
- \_ Female sterilization

- \_ Post Partum & Interval
- \_ Open & Laparoscopic
- \_ MTP
- \_ Male Sterilization

### **1.3 Clinical Skills**

By the end of the Postgraduation should be able to do:

- \_ Minor Procedures Like
  - Cu-T insertion
  - MTP, D&C, EB, Cx biopsy, Cryocautery, Drainage of pyometra, evacuations
- \_ Endoscopic Procedures Like
  - Diagnostic Laparoscopy, Hysteroscopy, Laparoscopic tubal ligation
- \_ Vaginal deliveries, assisted breech vaginal deliveries, Outlet & Mid cavity
  - Forceps application, Ventouse, Stitching of 3<sup>rd</sup> degree perineal tears.
- \_ L. S. C. S
  - \_ Laparotomy for ectopic pregnancy or Ovarian cysts
  - \_ Uncomplicated Total Abdominal Hysterectomies
  - \_ Vaginal Anterior and Posterior Repair

## **2. Teaching Programme**

### **2.1 General Principles**

Acquisition of practical competencies being the keystone of postgraduate medical education, postgraduate training should be skills oriented.

Learning in postgraduate program is essentially self-directed and primarily emanating from clinical and academic work. The formal sessions are meant to supplement this core effort.

### **2.2. Teaching Session:**

- \_ Clinical case discussions:
  - \*PG Bed side
  - \*Teaching rounds
- \_ Seminars / Journal Club
- \_ Statistical meetings: Weekly./ monthly
- \_ Mortality meetings
- \_ Interdepartmental Meetings : Pediatrics, Radiology
- \_ Others – Guest Lectures / Vertical Seminars / Central Stat Meets

### **2.3 Teaching Schedule:**

- Journal club Once a week
- Seminar/Syposium Once a week
- PG case discussion/Bed side teaching Once a week
- 1<sup>st</sup> Monthly Statistics & Intradepartment meet (with all the staff, incharge, residents & faculty)
- Once a month
- 2<sup>nd</sup> & 3<sup>rd</sup> Interdepartmental meet (Endocrinology, Medicine, Cardiology, Transfusion Medicine, Pathology, Microbiology, Gastroenterology, Anaesthesia) Once a week
- 4<sup>th</sup> Perinatology meet with department of Obstetrics and

Gynae including statistics discussing any neonatal death/topic

Once a week

Thesis meet to discuss thesis being done by the PG residents

Once a week

Grand round of the wards Once a week

Interdepartmental meet with the Radiology department Once a week

Grand round of the ward Once a week

Central session (CPC, guest lectures, integrated student seminars, grand round, sessions on basic sciences, biostatistics, research methodology, teaching methodology, health economics, medical ethics and legal issues).

Once a month

### **3. Assessment**

All the PG residents are assessed daily for their academic activities and also periodically.

#### **3.1. General principles**

- \_ The assessment is valid, objective, and reliable.
- \_ It covers cognitive, psychomotor and affective domains.
- \_ Formative, continuing and summative (final) assessment is also conducted. In addition, thesis is also assessed separately.

#### **3.2. Formative Assessment**

The formative assessment is continuous as well as periodical. The former is based on the feedback from the senior residents and the consultants concerned. Assessment is held periodically. Formative assessment will not count towards pass/fail at the end of the program, but will provide feedback to the candidate.

#### **3.3. Internal assessment**

The performance of the Postgraduate student during the training period should be monitored throughout the course and duly recorded in the log books as evidence of the ability and daily work of the student. Marks should be allotted out of 100 as followed.

### **4. Suggested Books and Journals**

#### **4.1 Books**

- \_ Holland and Brews Manual of Obst. 2<sup>nd</sup> Ed.
- \_ Williams Obstetrics 22<sup>nd</sup> ed.
- \_ Text book of Obstetrics by Dutta DC
- \_ Practical guide to High Risk Pregnancy and delivery 3<sup>rd</sup> ed. 2008 – Arias Fernando
- \_ Shaw's Text book of Gynaecology 14<sup>th</sup> ed. 2008
- \_ Novak's Gynaecology 14<sup>th</sup> ed. 2008
- \_ Jeffcoate's Principles of Gynaecology 7<sup>th</sup> ed.
- \_ Medical Disorders in Pregnancy by Barnes
- \_ Medical Disorders in Pregnancy by FOGSI

- \_ MunroKerr's Operative Obstetrics
- \_ Care of the Newborn 6<sup>th</sup> ed. Meharban Singh
- \_ Year book of Obst. & Gynae
- \_ Principles & Practice of Colposcopy by B. Shakuntala Baliga
- \_ Laparoscopy & Hysteroscopy by Sutton
- \_ Hormone replacement Therapy by White Head M.
  
- \_ Gynae & Obst. Procedures – Parulikar S.V.

## **9. Model Test Papers**

### **MODEL QUESTION PAPER**

#### **Diploma in Gynaecology & Obstetrics (PGDGO)**

##### **Paper-I**

##### **Basic sciences as related to Obstetrics & Gynaecology**

Max. Marks:100 Time: 3 hrs

- Attempt ALL questions**
- Answer each question & its parts in SEQUENTIAL ORDER**
- ALL questions carry equal marks**
- Illustrate your answer with SUITABLE DIAGRAMS**

1. Give an account of changes in fetal circulation immediately after the birth of baby.

2. What is etiological pathogenesis of Endometriosis and Discuss the

management of Endometriosis in an infertile woman.

3. Aims & Objectives of PNDT Act. Enumerate the clauses for 2<sup>nd</sup> trimester abortions.

4. What is the use of methotrexate in obstetrics & Gynaecology ?

5. Medical management of unruptured ectopic pregnancy

6. Pre menstrual syndrome

7. Uterine artery embolization

8. Causes of Coagulation failure during pregnancy

9. Clinical application of vaginal cytology in pregnancy

10. Describe the haematological changes during pregnancy

### **MODEL QUESTION PAPER**

#### **Diploma in Gynaecology & Obstetrics (PGDGO)**

##### **Paper-II**

##### **Principles & Practice of Obstetrics & Gynaecology & diseases of New born babies**

Max. Marks:100 Time: 3 hrs

- Attempt ALL questions**
- Answer each question & its parts in SEQUENTIAL ORDER**
- ALL questions carry equal marks**

**Illustrate your answer with SUITABLE DIAGRAMS**

1. How will you diagnose Gestational diabetes?
2. Outline the management of a Multigravida with Gestational diabetes with previous Macrosomic baby in labour room
3. Universal precautions
4. Surgical management of atonic PPH
5. Explain the medical and surgical measures for prevention of parent to Child transmission of HIV infection.
6. Neonatal jaundice
7. Rupture Uterus : its diagnosis and management
8. What are the criteria for the management of Residual trophoblastic disease. Discuss its management.
9. What are the causes of occipitoposterior position. Discuss its management in second stage
10. What are the indication of medical and surgical fetal therapy

**MODEL QUESTION PAPER**

**Diploma in Gynaecology & Obstetrics (PGDGO)**

**Paper-III**

**Recent advances in Obstetrics & Gynaecology**

Max. Marks:100 Time: 3 hrs

**Attempt ALL questions**

**Answer each question & its parts in SEQUENTIAL ORDER**

**ALL questions carry equal marks**

**Illustrate your answer with SUITABLE DIAGRAMS**

1. Give the methods for the prenatal diagnosis of commonly seen birth defects
2. How will you manage sexually transmitted diseases in a woman?
3. Enumerate sex cord tumours. How will you manage a 22<sup>nd</sup> year old girl presenting with such tumours.
4. Describe natural methods of contraception
5. Use of HCG levels as diagnostic tool
6. What are the components of effective communication
7. Discuss the management of post menopausal osteoporosis in 55 years old lady
8. Discuss recent advances in surgical and medical management of DUB
9. Discuss the use of misoprostol in labour induction and abortion
10. Give WHO criteria for semen analysis? How will you treat a 28 year old male with oligo terato astheno zoospermia ?