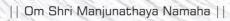


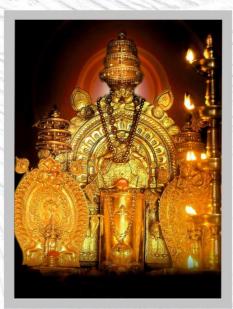
# Ordinance Governing M. S. OBSTETRICS AND GYNAECOLOGY Curriculum 2019-20

#### SHRI DHARMASTHALA MANJUNATHESHWARA UNIVERSITY

(A State Private University established under the Shri Dharmasthala Manjunatheshwara University Act No 19 of 2018 of Government of Karnataka and Notification No. ED 261 URC 2018 dated 19th December 2018)

Manjushree Nagar, Sattur, Dharwad - 580 009, Karnataka, India 6<sup>th</sup> Floor, Manjushree Block SDM Medical College Campus (2+91 836 2321127,2321126,2321125,2321124 ) sdmuniversity.edu.in sdmuo@sdmuniversity.edu.in ; registrar@sdmuniversity.edu.in





Shree Kshethra Dharmasthala

Edition Year : 2019-20

#### Shri Dharmasthala Manjunatheshwara University, Manjushree Nagar, Sattur, Dharwad - 580 009, Karnataka, India Phone: 0836-2321127

email: sdmuo@sdmuniversity.edu.in

#### Published by Registrar

Shri Dharmasthala Manjunatheshwara University
6" Floor, Manjushree Block SDM Medical College Campus Manjushree Nagar, Sattur, Dharwad - 580 009, Karnataka, India
(C) +91 836 2321127,2321126,2321125,2321124
Sdmuo@sdmuniversity.edu.in ; registrar@sdmuniversity.edu.in
(f) sdmuniversity.edu.in



# THE LOGO

Poojya Dr D. Veerendra Heggade, Hon'ble Chancellor of the University, while searching for an appropriate Logo for the University, saw a photograph picked from Temple Architecture showing Wings of a Bird, sculpted in Indian style and wanted it to be incorporated in the logo for the University, as the Wings symbolize 'Spreading of Knowledge beyond Boundaries'. Further it was felt that the Central theme of the logo should be 'Rudra' (The Linga) with three wings on each side. In this way, the logo of the University was conceptualized.

Hence:

- 1. The central part represents Rudra who Demolishes Darkness.
- 2. The Three **horizontal lines on The Linga** stand for Samyak Darshan (Right Belief), Samyak Gyan (Right Knowledge) and Samyak Charitra (Right Conduct).
- 3. The Wings symbolize spreading of Knowledge across the boundaries.
- 4. Base line **"Truth Liberates"** highlights the Purpose of Education: to liberate oneself unconditionally. It shows that it is not discipline, nor knowledge nor the efforts to freedom that liberate but Truth is what liberates you from all your conditioning and ignorance.

The overall significance of Shri Dharmasthala Manjunatheshwara University's Logo is:

Darkness of ignorance is destroyed by the flow of knowledge to bring Liberty to everyone, by realizing the truth. And, it should spread globally without the boundaries as hindrance.



# VISION

Shri Dharmasthala Manjunatheshwara University will set the highest standards of teaching and learning by awakening the intelligence of the students and nurturing the creativity hidden in them by creating an environment where the ancient wisdom blends with modern science, to transform them into whole human beings to face the challenges.

# MISSION

- To ensure that the journey of education is inspiring, pleasant and enjoyable.
- Attract the best of teachers and students.
- Achieve high principles of trust, love and spirituality in the students.
- Create a collaborative, diverse and exclusive community.
- Transform the student of today to be a leader of tomorrow and a better human being.
- Produce passionate teachers.
- Evolve innovative teaching techniques.
- Create a peaceful environment.
- > Prepare the student to face the social challenges.
- Create a University of which the Nation is proud of.
- Be an effective partner in Nation Building.
- Create an Eco-friendly University.
- Create a University based on the principles of beauty, love and justice.

||Om Shanti! Om Shanti! Om Shanti||



6<sup>th</sup> Floor, 'Manjushree' Building SDM Medical College Campus Sattur. Dharwad - 580009

0836 247 - 7510 / 7511 Fax: +918362461651 registrar@sdmuniversity.edu.in

Date: 24 - 04 - 2019

SDMU/Notif/28/2019

#### NOTIFICATION

#### Regulations and Curricula of Medical Postgraduate Degree Courses in Clinical Subjects - 2019

- Ref: 1. Minutes of the Board of Studies Medical PG held on 16 03 2019 (SDMU/BOS PG: 01/2019 dated 16-03-2019)
  - 2. Minutes of the 1st Joint Faculty Meeting held on 19-03-2019 (Letter No: SDMU/JF/M-01/85/2019; Dated: 19-03-2019)
  - 3. Minutes of the 1st Meeting of Academic Council held on 20-03-2019 (Letter No: SDMU/AC/M-01/93/2019; Dated: 21-03-2019)
  - 4. Minutes of the 2nd Meeting of BoM held on 22-03-2019 (Letter No: SDMU/BoM/M 02/94/2019; Dated:23-03-2019)

Ordinance: In exercise of the powers conferred under Statutes 1.1 (Powers - Section xii), 1.2 (Powers and Functions - Section vii), 1.4 (Powers and Functions - Sections ix & x), 1.5b (Powers and Functions -Sections b & c) of Shri Dharmasthala Manjunatheshwara University, the BoM is pleased to approve and notify the Ordinance governing Regulations and Curricula of the following Medical Postgraduate Degree/ Diploma Courses in Clinical Subjects - 2019:

SI No Course

SI No Course

- M.D. (General Medicine) 7 1 M. D. (Hospital Administration) 2 M. D. (Pediatrics) 8 M. S. (General Surgery) 3 M. D. (Dermatology) 9 M. S. (Ophthalmology) M. D. (Psychiatry) M. S. (Orthopedics) 10
- 5 M. D. (Anaesthesiology)
- 6 M. D. (Radio-Diagnosis)
- 11 M. S. (Otorhinolaryngology) 12 M. S. (Obstetrics & Gynecology)

Diploma

4

1 Diploma in Public Health

The ordinance shall be effective for the students joining the courses during 2019-20 and onwards.

1.20115

To: 1. The Principal, SDM College of Medical Sciences & Hospital.

2. Members of BoG, BoM & Academic Council, Shri Dharmasthala Manjunatheshwara University

Copy to: 1. The Vice-Chancellor, Shri Dharmasthala Manjunatheshwara University 2. The Controller of Examinations, Shri Dharmasthala Manjunatheshwara University

#### GUIDELINES FOR POSTGRADUATE TRAINING PROGRAMME FOR MS IN OBSTETRICS AND GYNAECOLOGY

#### I. Goals:

The goals of postgraduate education are to enable the medical graduates to become specialists who would provide high quality health care to the community and encourage research & training.

The purpose of MS Obstetrics and Gynaecology is to standardize Obstetrics & Gynaecology teaching at the postgraduate level and create competent Obstetricians and Gynaecologists with appropriate knowledge and skills.

## II. Learning objectives

## Programme objective

The aim of the MS course in Obstetrics and Gynaecology is to produce a competent Obstetrician and Gynaecologist who should be able to:

- A. Provide comprehensive care to pregnant women throughout pregnancy, labour and puerperium.
- B. Effectively manage complications of pregnancy, labour and puerperium.
- C. Provide basic and emergency care for the new born.
- D. Manage effectively all obstetrical and gynaecological emergencies and if necessary make appropriate referrals.
- E. Effectively manage and give quality care to women with gynaecological diseases including gynaecological cancers
- F. Provide health education regarding preventive measures and screening of gynaecological cancers.
- G. Conduct Obstetric Ultrasonography, Doppler studies, and Pelvic Ultrasonography. Evaluate the infertile couple, and have a thorough knowledge of Assisted Reproductive Techniques (ART) and the ethical and legal implications of ART.
- H. Counsel the couple about the various contraceptive methods and to help them to make the right choice.
- I. Provide comprehensive abortion services.

#### **III Duration of Study**

The period of training for obtaining the degree shall be three completed years including the period of examination.

Provided that in the case of students having a MCI/NMC recognised two year postgraduate diploma course in the same subject, the period of training, including the period of examination, shall be two years.

## IV. Subject specific competencies

#### ➤ Cognitive Domain

At the end of the MS Course in Obstetrics and Gynaecology, the student should have acquired knowledge in the following:

- a. Health issues of women in all phases of life adolescence, reproductive age and menopause.
- b. Knowledge and skills to practice Obstetrics and Gynaecology in the community at all levels of health system.
- c. Various sexual and reproductive health disorders.
- d. Interpretation of various imaging, studies, laboratory investigations and other diagnostic modalities in Obstetrics & Gynaecology.
- e. Paediatrics, Radiology, Anaesthesiology, Urology, Surgery and Pathology with reference to Obstetrics and Gynaecology.
- f. Genetics as applicable to Obstetrics and Gynaecology.
- g. Recent advances in Obstetrics and Gynaecology.
- h. National Health Programs and Policies.
- i. Communication skills and counselling.
- j. Accurate documentation and record keeping.
- k. Plan and execute research in the field of Obstetrics and Gynaecology.
- I. Teaching medical and paramedical professionals.
- m. Professional ethics.
- n. Medico legal issues such as MTP act, PCPNDT act and POCSO act.
- o. Confidentiality and the rights of the patient.

p. Use of information technology, audits and application of clinical standards, guidelines and protocols.

## > Affective domain

- a. Should be able to work as a part of a team, develop an attitude of co-operation with colleagues, and interact with the patient and the clinician or other colleagues to provide the best possible diagnosis or opinion and treatment.
- b. Always adopt ethical principles and maintain proper etiquette in dealing with patients, relatives and other health personnel and to respect the rights of the patient including the right to information and second opinion.
- c. Develop communication skills to word reports and professional opinion as well as to interact with patients, relatives, peers and paramedical staff, and for effective teaching.

#### > Psychomotor domain

Operative Skills in Obstetrics and Gynaecology

At the end of the course, the student should acquire following clinical & operative skills and be able to:

- a. Perform common major and minor surgical procedures and provide perioperative care.
- b. Surgical procedures should be done by Postgraduate students during training period: in graded manner - assisting, operating with senior person assisting and operating under supervision Operations observed/ assisted / done under supervision of a senior during PG training programme must be documented in the log book
- i. Procedures to be performed by the end of 1st year of training The Post graduate student should perform the following procedures independently under supervision of seniors:
  - 1. Conduct of Normal delivery (50)
  - 2. Episiotomy and its repair (50)
  - 3. Pap smear (50)
  - 4. Endometrial biopsy (20)
  - 5. D&C (10)

#### Assist seniors in performing the following procedures:

- 1. Instrumental delivery(20)
- 2. LSCS (50)
- 3. D&E (10)
- 4. Obstetric emergencies
- 5. Vaginal hysterectomy with pelvic floor repair(10)
- 6. Abdominal hysterectomy (10)
- 7. Non-descent vaginal hysterectomy (10)
- 8. Laparoscopic hysterectomy (5)
- 9. Tubectomy (10)
- 10. Laparoscopic sterilization (10)

#### ii. Procedures to be performed by the end of 2nd year of training The Post graduate student should perform the following procedures independently under supervision of seniors

- 1. Conduct of Normal delivery (50)
- 2. Episiotomy and its repair (50)
- 3. Pap smear (50)
- 4. Endometrial biopsy (20)
- 5. D& C (10)
- 6. Instrumental delivery(20)
- 7. LSCS (20)
- 8. D&E (10)
- 9. Vaginal hysterectomy with pelvic floor repair(2)
- 10. Abdominal hysterectomy (2)
- 11. Non-descent vaginal hysterectomy (2)
- 12. Tubectomy (5)
- 13. Laparoscopic sterilization (10)

## Assist seniors in performing the following procedures

- 1. Operative deliveries
- 2. Obstetric emergencies
- 3. Vaginal hysterectomy with pelvic floor repair(5)
- 4. Abdominal hysterectomy (5)
- 5. Non-descent vaginal hysterectomy (5)
- 6. Laparoscopic hysterectomy (5)
- 7. Tubectomy (5)
- 8. Laparoscopic sterilization (10)

#### iii. Procedures to be performed by the end of 3rd year of training The Post graduate student should perform the following procedures independently under supervision of seniors

- 1. Conduct of Normal delivery (50)
- 2. Episiotomy and its repair (50)
- 3. Pap smear (50)
- 4. Endometrial biopsy (20)
- 5. D& C (10)
- 6. Instrumental delivery(20)
- 7. LSCS (20)
- 8. D&E (10)
- 9. Vaginal hysterectomy with pelvic floor repair(3)
- 10. Abdominal hysterectomy (3)
- 11. Non-descent vaginal hysterectomy (3)
- 12. Tubectomy (5)
- 13. Laparoscopic sterilization (10)

# The Post graduate student should assist seniors in performing the following procedures

- 1. Operative deliveries
- 2. Vaginal hysterectomy with pelvic floor repair (10)
- 3. Abdominal hysterectomy (10)
- 4. Non-descent vaginal hysterectomy (10)
- 5. Laparoscopic hysterectomy (5)
- 6. Tubectomy (5)

- 7. Laparoscopic sterilization (10)
- 8. Obstetric emergencies

#### **Operations must be OBSERVED and/or ASSISTED when possible:**

- 1. ART procedures
- 2. Internal podalic version
- 3. Caesarean hysterectomy
- 4. Internal iliac artery ligation
- 5. Destructive obstetric operations
- 6. Tubal microsurgery
- 7. Radical operations for gynaecological malignancies
- 8. Repair of genital fistulae
- 9. Operations for incontinence
- 10. Advanced Endoscopic Procedures

## **Diagnostic Procedures**

- 1. Hysterosalpingography / Sonosalpingography
- 2. Obstetric Ultrasonography, Pelvic ultrasonography and Doppler studies (Postgraduate should perform at least 20 Obstetric ultrasonographies and 20 transvaginal sonographies each year)
- 3. Antepartum and intrapartum fetal surveillance.
- 4. Chorion villous sampling and Amniocentesis
- 5. Pap Smear
- 6. Colposcopy
- 7. Endoscopy Laparoscopy and Hysteroscopy.

## > Syllabus

## Course content:

- No limit can be fixed.
- No fixed number of topics can be prescribed as course contents.
- She/he is expected to know the subject in depth.
- Emphasis should be on the diseases/health problems most prevalent in this area.
- Knowledge of basic sciences and recent advances as applicable to his/her specialty should get high priority.

• Competence in surgical skills commensurate with the specialty (actual hands - on training) must be ensured.

#### Paper I

#### **Basic Science-1**

- 1. Normal and abnormal development structure and function (female and male) of Urogenital system and female breast.
  - Applied Anatomy of genito-urinary system, abdomen, pelvis, pelvic floor, anterior abdominal wall, upper thigh (inguinal ligament, inguinal canal, vulva, rectum and anal canal).
  - Physiology of spermatogenesis.
  - Endocrinology related to male and female reproduction (Neurotransmitters).
  - Anatomy and physiology of urinary and lower GI (Rectum / anal canal) tract.
  - Development, structure and function of placenta, umbilical cord and amniotic fluid.
  - Anatomical and physiological changes in female genital tract during pregnancy.
  - Anatomy of fetus, fetal growth and development, fetal physiology and fetal circulation.
  - Physiological and neuro-endocrinal changes during puberty, adolescence, menstruation, ovulation, fertilization, climacteric and menopause.
  - Biochemical and endocrine changes during pregnancy, including systemic changes in cardiovascular, hematological, renal, hepatic and other systems.
  - Biophysical and biochemical changes in uterus and cervix during pregnancy and labour.
  - Pharmacology of identified drugs used during pregnancy, labour, postpartum period in reference to their absorption, distribution, excretion, (hepatic) metabolism, transfer of the drugs across the placenta, effect of the drugs (used) on labor, on fetus, their excretion through breast milk.
  - Mechanism of action, excretion, metabolism of identified drugs used in the management of Gynaecological disorders.
  - Role of hormones in Obstetrics and Gynaecology.

- Markers in Obstetrics & Gynaecology Non-neoplastic and neoplastic diseases.
- Pathophysiology of ovaries, fallopian tubes, uterus, cervix, vagina and external genitalia in healthy and diseased conditions.
- Normal and abnormal pathology of placenta, umbilical cord, amniotic fluid and fetus.
- Normal and abnormal microbiology of genital tract. Bacterial, viral and parasitical Infections responsible for maternal, fetal and gynaecological disorders.
- Humoral and cellular immunology in Obstetrics & Gynaecology.
- Gametogenesis, fertilization, implantation and early development of embryo.
- Normal pregnancy, physiological changes during pregnancy, labour and
- puerperium.
- Immunology of pregnancy.
- Lactation.

#### 2. Medical Genetics

- Basic medical genetics including cytogenetics.
- Pattern of inheritance.
- Chromosomal abnormalities types, incidence, diagnosis, management and recurrence risk.
- General principles of Teratology.
- Screening, counselling and prevention of developmental abnormalities.
- Birth defects genetics, teratology and counselling.

#### Paper II Clinical Obstetrics and Neonatology Preconceptional and prenatal care

- Pre-conception counselling
- Prenatal care

#### **The Fetal Patient**

- Fetal imaging
- Amniotic fluid
- Teratology, teratogens and fetotoxic agents
- Prenatal diagnosis
- Fetal disorders
- Fetal Therapy
- Fetal Assessment

#### **Early Pregnancy complications**

- Abortion
- Ectopic pregnancy
- Gestational trophoblastic disease

#### Labour

- Physiology of labour
- Normal labour
- Abnormal labour
- Intrapartum assessment
- Obstetrical Analgesia and Anaesthesia
- Induction and Augmentation of labour

#### Delivery

- Vaginal Delivery
- Breech delivery
- Operative vaginal delivery
- Caesarean delivery and Peripartum Hysterectomy
- Prior Caesarean delivery

#### The New-born

- The newborn
- Diseases and injuries of the term newborn
- The preterm newborn
- Stillbirth

#### **The Puerperium**

- The Puerperium
- Puerperial Complications
- Contraception and Sterilisation

#### **Obstetrical complications**

- Hypertensive disorders
- Obstetrical Haemorrhage
- Preterm birth
- Post term pregnancy
- Fetal Growth disorders
- Multifetal pregnancy

#### Medical and Surgical complications

- General considerations and maternal evaluation
- Critical care and Trauma
- Obesity
- Cardiovascular disorders
- Chronic Hypertension
- Pulmonary disorders
- Thromboembolic disorders
- Renal and Urinary Tract disorders
- Gastrointestinal disorders
- Hepatic, Biliary and Pancreatic disorders
- Haematological disorders
- Diabetes mellitus
- Endocrine disorders
- Connective Tissue disorders

- Neurological disorders
- Psychiatric disorders
- Dermatological disorders
- Neoplastic disorders
- Infectious diseases
- Sexually Transmitted Infections
- Operative Obstetrics
- National health MCH programs, social obstetrics and vital statistics
- Recent Advances in Obstetrics

#### Paper III Clinical Gynaecology and Fertility Regulation and Urology

- Ectopic Pregnancy and Pregnancy of Unknown Location
- Gestational Trophoblastic Disease
- Breast Function and its Disorders
- Injuries
- Female Genital Mutilation
- Pelvic Organ Prolapse
- Other Displacements of the Uterus
- Torsion of Pelvic Organs
- Infections Including Sexually Transmitted Diseases
- Infections as they Affect Individual Organs
- Genital Tuberculosis
- Endometriosis and Chronic Pelvic Pain
- Polycystic Ovary Syndrome
- Hirsutism
- Epithelial Abnormalities of the Genital Tract
- Genital Cancers
- Tumours of the Vulva
- Tumours of the Vagina
- Tumours of the Cervix Uteri
- Tumours of the Corpus Uteri
- Adenomyosis
- Tumours of the Fallopian Tubes
- Tumours of the Pelvic Ligaments

- Tumours of the Ovary
- Chemotherapy in Gynaecological Malignancies
- Radiotherapy in Gynaecological Malignancies
- Immunotherapy in Obstetrics and Gynaecology
- Amenorrhoea, Hypomenorrhoea, and Oligomenorrhoea
- Abnormal and Excessive Uterine Bleeding
- Dysmenorrhoea
- Premenstrual Syndrome and Other Menstrual Phenomena
- Hormone Therapy in Gynaecology
- Vaginal Discharge
- Pruritus Vulvae and Vulvodynia
- Problems of Sex and Marriage
- Male and Female Infertility Overview
- Assisted Reproductive Technology
- Instruments in Gynaecological Procedures
- Ultrasound in Infertility
- Ultrasound in Menopause
- Robotic Surgery
- Endoscopic Surgery in Gynaecology
- Contraception
- Sterilisation and Termination of Pregnancy
- Urinary Incontinence
- Urinary Tract Infection
- Menopause
- Hysterectomy and its Aftermath
- Conditions of the Lower Intestinal Tract
- Preoperative and Postoperative Management
- Postoperative Complications
- Nutrition and Exercise in Women
- Applications of Laser in Gynaecology
- Genetics in Gynaecology

#### Paper IV

- Recent Advances
- All Recent advances in OBG
- Assisted Reproductive Techniques

- Stem cell therapy
- Robotic surgery
- Genetics
- Transplant surgery
- Professional Ethics and medico-legal issues
- Endoscopy
- Imaging techniques
- Vaccines and hormones

## **TEACHING AND LEARNING METHODS**

#### > Postgraduate Training

Teaching is imparted to the students through:

Ward rounds, case discussions, seminars, symposia, journal clubs, lectures, maternal morbidity/maternal mortality, perinatal mortality meetings, interand intra-departmental clinico-pathological meetings (including Radiodiagnosis, Radiotherapy, Anaesthesia and Neonatology & General surgery).

#### \*Note-Records of these are to be maintained by the department.

- The postgraduates are encouraged to attend and actively participate in CMEs and Conferences
- Maintenance of log book: Log books shall be checked and assessed periodically by the faculty members imparting the training.
- The postgraduates will write the dissertation following appropriate research methodology, ethical clearance and good clinical practice guidelines.
- The postgraduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.
- A postgraduate student would be required to present one poster, to present one paper at a national/state conference and to present one research paper which should be published/accepted for publication/sent for publication during the period of his/her postgraduate studies so as to make him/her eligible to appear at the postgraduate degree examination.
- Department shall encourage e-learning activities

#### **Practical and Clinical Training**

- Emphasis will be on self-learning, group discussions and case presentations.
- Students will be trained about proper history taking, clinical examination, advising / ordering relevant investigations, their interpretation and instituting medical / surgical management by posting students in OPD, specialty clinics, wards, operation theatres, labour room, family planning clinics and other departments like anaesthesiology, neonatology, radiology/ radiotherapy, surgery.
- Students should be able to perform and interpret ultrasonography in Obstetrics and Gynaecology, NST, Partogram

#### > Rotations:

Details of 3 years posting in the PG programme (6 terms of 6 months each) Each postgraduate should work in labour ward for 3 months every year

#### Allied postings should be done during the course: In the second year- 12weeks

- i. Neonatology 2 weeks
- ii. Anaesthesia- 2 weeks
- iii. Radiology- 2 weeks
- iv. General Surgery/Urology 2 weeks
- v. Oncology/Radiotherapy 4 weeks

#### In the third year-4 weeks

- i. Infertility -2weeks
- ii. Ultrasonography-2 weeks

All students should work in Skill Lab for a minimum of 10 hours per term.

#### Details of training in the subject during resident posting

The student should attend to the duties (Routine and emergency): Outpatient Department and special clinics, Inpatients Department, Operation Theatre, and Labour Room.

#### Writing clinical notes regularly and maintaining records.

**First term** - working under supervision of senior residents and teaching faculty.

**Second & third term**- Besides patient care in O.P.D., wards, casualty and labour room, carrying out minor operations under supervision and assisting in major operation.

**Fourth, fifth and sixth term** - Independent duties in management of patient including major operations under supervision of teaching faculty.

#### > ASSESSMENT

#### > FORMATIVE ASSESSMENT

Formative assessment will be continual and shall assess medical knowledge, patient care, procedural & academic skills, interpersonal skills, professionalism, self-directed learning and ability to practice in the system.

#### **General Principles**

Internal Assessment shall be frequent, cover all domains of learning and used to provide feedback to improve learning, it will also cover professionalism and communication skills.

Internal Assessment shall be conducted in theory and clinical examination.

The department shall conduct three tests, two of them will be annual tests, one at the end of first year and the other in the second year. The third test will be held three months prior to the final examination. The tests shall include written papers, practicals / clinicals and viva voce. Records and marks obtained in such tests will be maintained by the Head of the Department and sent to the University, when called for.

Quarterly assessment during the MS training shall be based on following educational activities:

- 1. Journal based / recent advances learning
- 2. Patient based /Laboratory or Skill based learning
- 3. Self-directed learning and teaching
- 4. Departmental and interdepartmental learning activities
- 5. External and Outreach Activities / CMEs

The student will be assessed periodically as per categories listed in postgraduate student appraisal form (Annexure I).

## > SUMMATIVE ASSESSMENT

The summative examination would be carried out as per the rules given in POSTGRADUATE MEDICAL EDUCATION REGULATIONS, 2000.

#### Postgraduate Examination shall be in three parts:

#### 1. Thesis

Every post graduate student shall carry out work on an assigned research project under the guidance of a recognised Post Graduate Teacher, the result of which shall be written up and submitted in the form of a Thesis. Work for writing the Thesis is aimed at contributing to the development of a spirit of enquiry, besides exposing the post graduate student to the techniques of research, critical analysis, acquaintance with the latest advances in medical science and the manner of identifying and consulting available literature.

Thesis shall be submitted at least six months before the Theory and Clinical / Practical examination. The thesis shall be examined by a minimum of three examiners; one internal and two external examiners, who shall not be the examiners for Theory and Clinical examination. A post graduate student shall be allowed to appear for the Theory and Practical/Clinical examination only after the acceptance of the Thesis by the examiners.

#### 2. Theory Examination:

The examination for MS (Obstetrics and Gynaecology) shall be held at the end of 3rd academic year. The examination shall be organised on the basis of 'Grading' or 'Marking system' to evaluate and to certify post graduate student's level of knowledge, skill and competence. Obtaining a minimum of 50% marks in 'Theory' as well as

'Practical' separately shall be mandatory for passing the examination as a whole.

There shall be four theory papers, as given below\*:

Paper I: Applied and Basic sciences.

Paper II: Obstetrics including Social Obstetrics and Neonatology.

**Paper III:** Gynaecology including Fertility Regulation and Urology

Paper IV: Recent Advances in Obstetrics & Gynaecology

\*Note-the topics assigned to the different papers are given as general guidelines. A strict division of the subject may not be possible. Some overlapping of topics is inevitable. Students should be prepared to answer the overlapping topics.

#### 3. Clinical/Practical & Oral/Viva Voce Examination shall be as given below:

- a. Obstetrics:
  - Clinical

Long Case: 1 case 75 marks Short Case: 1 case 25 marks

#### b. Gynaecology: Clinical

Long Case: 1 case 75marks Short Case: 1 case 25 marks

Viva includes:

- Instruments,
- Pathology Specimens
- Drugs
- Family Planning
- X-rays, Sonography , Partogram
- Histopatholgical slides.
- Dummy and Pelvis
- Pedagogy 20 marks
- Log Book 5 marks
- Dissertation 5 marks

Maximum marks for<br/>M.S. Obstetrics &<br/>GynecologyTheoryPracticalVivaGrand Total400200100700

70 Marks

✤ Recommended Reading:

Books (latest edition)

#### > Obstetrics

1. Williams Obstetrics

- 2. High Risk Pregnancy Management Options James
- 3. Ian Donald's Practical Obstetric Problems
- 4. Munro Kerr's Operative Obstetrics.
- 5. DeSweit's Medical disorders in Obstetric Practice
- 6. Arias' Practical Guide to High risk pregnancy and Delivery
- 7. Turnbull's Obstetrics
- 8. Holland & Brews Manual of Obstetrics.
- 9. Mudaliar and Menon's Clinical Obstetrics
- 10. DC Dutta's Text Book of Obstetrics

#### > Gynaecology

- 1. Williams Gynaecology
- 2. Novak's Gynaecology
- 3. Te Linde's Operative Gynaecology
- 4. Howkin's and Bourne Shaw's Text book Gynaecology
- 5. Clinical Gynaecological Endocrinology and Infertility Leon Speroff
- 6. Dewhurst's Text book of Obstetrics & Gynaecology for Postgraduates
- 7. Berek and Hacker's Gynaecologic Oncology
- 8. Jeffcoate's Principles of Gynaecology
- 9. DC Dutta's Text Book of Gynaecology
- 10. Shaw's Text Book of Operative Gynaecology
- 11. Bonney's Gynaecological Surgery
- 12. Infertility Manual Rao Kamini

#### Journals:

## Print Journals / E Journals

- 1. American Journal of Obstetrics and Gynaecology
- 2. Obstetrics and Gynaecology (Green Journal)
- 3. BJOG British Journal of Obstetrics & Gynaecology
- 4. International Journal of Obstetrics & Gynaecology
- 5. Obstetrics & Gynaecology Clinics of North America
- 6. Clinics in Perinatology
- 7. Donald School Journal of Ultrasound in Obstetrics and Gynaecology
- 8. Obstetrics and Gynaecology Today

#### \*\*\*\*\*\*\*\*\*\*\*

