WEST BENGAL UNIVERSITY OF HEALTH SCIENCES

Department of Obstetrics & Gynaecology

Name of the Institution

ITEM CARD IN OBSTETRICS & GYNAECOLOGY			
Name of the Student	:		
Roll No.	:		
Registration No.	:		
Session			
Assessment Score	:		
Remarks	:		
COMPLETE /INCOM	IPLETE		

Signature
Head of the Department

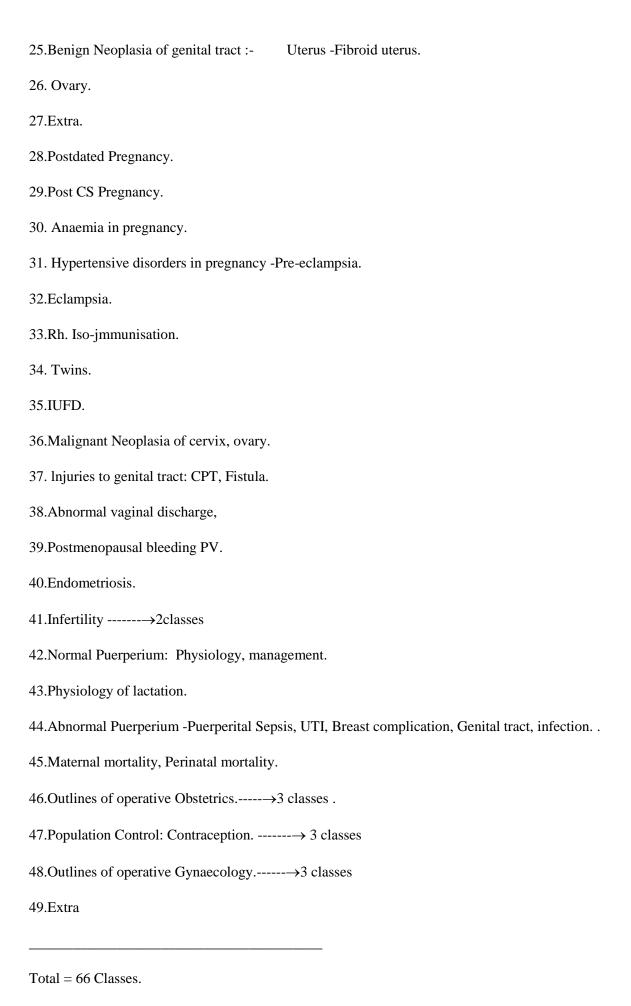
3RD SEMESTER	Internal Assessment –2 ¹ / ₂ Marks			Marks
ITEM	DATE	TOTAL MARKS	MARKS OBTAINED	EXAMINER
2 Weeks				
1 Diagnosis of Pregnancy				
2. Fetal skull and maternal pelvis				
3. Antenatal Care				
4. History taking and Gynaecological Examination				
5. Infections of the pelvic organs-				
4TH SEMESTER Internal Assessment -2 ¹ / ₂ Marks				
ITEM	DATE	TOTAL MARKS	MARKS OBTAINED	EXAMINER
4 Weeks- 1. Physiological changes in Pregnancy 2. Placenta 3. Haemorrhaga in early pregnancy (Abortion, H. Mole, Ectopic Pregnancy) 4. Menstrual abnormalities (Dysmenorrhoea, Menorrhagia, others) 5. Abnormal Vaginal discharge 6. Hypertensive disorders in pregnancy (PE/E) 7. Genital prolapse, retroversion 8. Infertility 9. Practical Gynaecology & Obstertrics	In	ternal Asse	ssment -5 Mark	S
ITEM	DATE	TOTAL MARKS	MARKS OBTAINED	EXAMINER
4 Weeks-				
Normal Labour -mechanism, Clinical Course of different stages. management.				
2. Normal Puerperium				
3. Haemorrhage in the late pregnancy4. Multiple Preg., post maturity IUD, Preterm labour.				
5. Benign Tumours of the uterus and ovary, Hydatidiform mole				
6. Endometriosis				
7. Practical Obstetrics and Gynaecology				

7TI	H SEMESTER	1	I	Internal	Assessment -5	Marks
ľ	ГЕМ	DATE	TOTA MARI		MARKS OBTAINED	EXAMINER.
4 Weeks-						
1. Rhesus isoimmuniz	aiton problems					
2. Malposition, Malpr Transverse Lie, Brow)						
3. Amenorrhoea						
4. Injuries, CPT, Fistu	lae					
5. Urinary Problems -i urine, incontinence pro						
6. Contraceptions						
7. Practical Obstetrics	•					
	H SEMESTER	T =			Assessment -5	
I	ГЕМ	DATE	TOTA MAR		MARKS OBTAINED	EXAMINER
4 Weeks-						
1. Complications of 3r	rd stage of labour					
2. Abnormal puerperio	um					
3. I. U. G. R.						
4. Partography						
5. Prolonged labour, Obstructed labour						
6. Puberty -Physiology and abnormality						
7. Menopause						
8. Pre-malignant lesio	ns of the genital organs					
9. Practical Obstetrics & Gynaecology						
	SEMESTER	mom + x = z = =			ssessment - 20	
ITEM	DATE	TOTAL MAI	TOTAL MARKS MARI OBTA		KS AINED	EXAMINER
6 Weeks:						
Revision Classes						

MBBS OBSTETRICS & GYNAECOLOGY CURRICULUM

TOPICS FOR LECTURE CLASSES

- 1. Anatomy of female genital tract. }----- 2 classes
- 2. Support of the uterus and displacement of uterus. 2 classes
- 3. Physiology of normal menstruation.
- 4. Fundamentals of Reproduction -Ovulation.
- 5. Fertilisation, Implantation, Growth of fetus.
- 6. Placenta and its function: Amniotic fluids: formation and function.
- 7. Maternal Physiology in pregnancy.
- 8. Diagnosis of pregnancy.
- 9. Antenatal Care -Management of normal pregnancy, maternal nutrition, common complications of pregnancy and management.
- 10. Puberty, Menopause, Physiology.
- 11. Haemorrhage in first trimester of pregnancy Abortions.
- 12. Ectopic Pregnancy.
- 13. Trophoblastic diseases.
- 14. Haemorrhage in late trimester -Placenta previa.
- 15. Abruptio placenta.
- I6.Normal labour: Physiology.
- 17. Mechanism, management of different stages.
- 18.Partograph.
- 19.Induction of labour, Augmentation of labour.
- 20 .Abnormal labour: Prolonged labour, Obstructed labour, complication of 3 rd stage of labour. .
- 21. Abnormal presentation -Breech, Occipito -Posterior Transverse lie.
- 22. Abnormal menstruations -including amenorrhoea.
- 23. Abnormsl rnrndtrustiond -including amenorrhoea.
- 24.Pelvic infections -STD, HIV -Syndromic approach.



Revision ---34 classes.

Seminars (Total:8) on

- 1. Hypertensive disorders in Pregnancy (PIH, PE & Eclampsia).
- 2. APH.
- 3. PPH
- 4. Induction and Augmentation of Labour.

Family Planning: 1. Different methods of MTP,

2. IUD and Tubectomy.

Gynaecology: 1. Fibroid Uterus.

2. Ovarian Tumour

Demonstration classes:

- 1) Foetus & Maternal Pelvis -4 classes.
- a) Foetal Skull & Maternal Pelvis.
- b) Mechanism of normal Labour.
- c) Mechanism of Labour in breech presentation.
- d) Mechanism of Labour in occipito posterior position.

Instruments: Instruments used in Obstetrics -2 classes.

- 1. Instruments used in D/E and Tubectomy.
- 2. Obstetrics Forceps.

Gynae. Instruments: Instruments used in Laparotomy D/C, HSG: Retractors & speculum = 2 classes

Specimen: Obstetrics- 4 classes: 1) Ectopic Pregnancy in Fallopian Tube.

- 2) Normal & Abnormal placenta.
- 3) Rupture Uterus.
- 4) Hydatidiform mole.

Gynaecology- 4 classes.: a) Fibroid Uterus.

- b) Ovarian Tumour.
- c) Fibroid Polyp.

d) Ca. Cervix

GYANECOLOGY & OBSTERICS

Theo = 80		Oral = 30	Practical = 50	Int. Assessment = 40
Paper-I	Paper-II			
Obstetrics &	Gynaecology, FW &	Notes = 5	One Long case =	Continuous
Social Obstetrics	Demography		30	Assessment= 20
		Record of		
		Delivery cases)	One Short Case =	Final Assessment
			20	=20
		Oral = 25		
Total = 200				

Modules of Questions & Distribution of marks in each paper:

- Two broad questions. The questions are compulsory. All the questions will be structured. One of the two will be a problem followed by necessary questions. = 2x10=20
- Two short Notes out of three $(5 \times 2) = 10$
- 3 Two Questions out of four $(5 \times 2) = 10$

These questions will be on the basis of, give reasons, justify, critically evaluate.

PRACTICAL EXAMINATION = 50

- 1. One long case = 30
- 2. One Short case = 20
- 3. Oral = 30
 - a) Instrument, Operation (only outline) and steps of minor operations = 6 Specimen = 4
 - b) X-Ray (only in Gynaecology Table) & USG films (Only reading) = 5 Problems and recent advances = 5
 - c) Delivery Notes = 5, Obstetrics maneuvers = 5

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Gynaecology & Obstetrics

Paper -I (Obstetrics & Social Obstetrics)

Total Marks = 40

Answer all the questions.

- 1. Define Preterm Labour. Enumerate the causes of Preterm Labour. How can you arrest Pretern Labour? Mention the place of Caesarean section in Preterm Labour. 1+3+4+2=10
- 2. A primigravadia aged 24 years has attended the Emergency with the history of amenorrhoea for 8 months and bleeding P/V. What are the possible causes? How will you manage the case? Mention the maternal complications in case of Accidental haemorrhage.

2+5+3=10

3. Write any two of the short notes

(5 X 2 = 10)

- a) .Puerperal Sepsis.
- b) Maternal and Child Health Care.
- c) Investigations in case of Intra Uterine fetal death.
- 4. Answer any two questions

 $(5 \times 2 = 10).$

- a) Magnesium Sulphate is the drug of choice in Eclampsia -Justify.
- b) Exclusive breast-feeding should be encouraged -Give reasons.
- c) Iron should be given to all antenatal mothers -Justify.
- d) Introduction of Partogram has reduced the incidence of prolonged labour and caesarean section -critically evaluate the statement.

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Gynaecology & Obstetrics

Paper -II. (Gynaecology)

Total Marks = 40

Answer all the questions:

1. A 40-years old Woman presents with the complaint of post-coital bleeding.

Speculum examination reveals an ulcer on the posterior lip of cervix. Discuss the differential diagnosis. What are the investigations you will do to arrive at a diagnosis? Outline the management if the condition is diagnosed as stage IB carcinoma cervix.

2+3+5=10

2. Define Menorrhagia? Enumerate the common causes of Menorrhagia? What are the common investigations done to arrive at a diagnosis? What is the medical management of Dysfunctional uterine bleeding?

1+2+3+4=10

3. Write any two of the short Notes

 $(5 \times 2 = 10)$

- a) Complications of benign ovarian tumours.
- b) Emergency contraception.
- c) Complications of laparoscopy.
- 4. Answer any two questions

 $(5 \times 2 = 10)$

- a) "Combined Oral Contraceptive is the ideal method of contraception for a newly married woman". Justify the statement.
- b) "The scope of therapeutic success in the management of primary amenorrhoea is very limited " critically evaluate.
- c) "Staging of Ovarian Cancer is essentially a Surgico-Pathological one". Give reasons.
- d) "Tubal patency tests are best performed in the post menstrual period". Give reasons.