



In the name of God, the Most Gracious, the Most Merciful

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INTRODUCTION

The objective of the Postgraduate Medical Institute is to promote the Postgraduate Medical Education amongst the doctors by designing postgraduate medical studies programs in Balochistan keeping in view the provincial needs.

To achieve this objective the Postgraduate Medical Institute has developed structured training programs for specialist to be utilized in the health care facilities of tertiary and secondary levels. Beside clinical sciences the institute is also running Postgraduate training programs in Basic Medical Sciences.

The Postgraduate Medical Institute, possesses all the relevant learning facilities like qualified and well trained faculty, teaching hospitals, libraries, lecture halls, clinocopathological conference halls, laboratories, audiovisual aids, internet access, etc.

The Postgraduate Medical Institute is affiliated with University of Balochistan. The format of the examination has been improved with more valid

objectives and reliable methods of assessment. To ensure the fairness and transparency the institute has introduced the use of assessment forms for scoring of all components of clinical and oral examination.

This booklet contains the information for the candidate of Diploma in Gynaecology & Obstetrics (DGO) regarding eligibility criteria for admission to the course details of training program, Syllabus, Objective of the training program and format of examination.

ELIGIBILITY CRITERIA FOR DGO COURSE:

Requirements for Admission in Gynaecology and obstetrics (DGO) course session 2013-15.

- MBBS or equivalent qualification registered with the PMDC.
- One year House job in a teaching hospital six months of which should preferably be in the specialty of Gynae & Obst.
- Only those doctors are eligible who are in the active service of Government of Balochistan for a minimum period of two years.
- Selection through entry test and selection committee approval.

TRAINING PROGRAM.

The duration of training program for Diploma in Gynaecology and Obstetrics (DGO) is two years. The rotation will be Six months in different Gynae units. The initial period of this duration the trainees are supposed to attend the formal lectures in the relevant basic sciences but simultaneously trainees start their clinical residency program. Which is specially designed for acquisition of knowledge, attitude and skills in the relevant field.

Following teaching modalities will be employed:

- Lectures
- Seminar Presentation and Journal Club Presentations
- Group Discussions
- Grand Rounds
- Clinico-pathological Conferences
- SEQ as assignments on the content areas
- Skill teaching in ICU, Operation theatres, emergency and ward settings
- Attend genetic clinics and rounds for at least one month.
- Self study, assignments and use of internet
- Bedside teaching rounds in ward
- OPD & Follow up clinics
- Long and short case presentations

This duration of two years is sub divided as follows:

1st Year

- 1) Basic Sciences lectures.
- 2) Rotation in different units of Gynae.
- 3) Indoor teaching in every clinical unit.

2nd Year

- 1) Clinical Residency Training in the unit of her own Supervisor.
- 2) Indoor Clinical Teaching will be scheduled and organized by every individual unit and be sent to Post Graduate Medical Institute, Quetta.

GENERAL INSTRUCTIONAL OBJECTIVES (GIO)

The training programme of Obstetrics & Gynaecology requires the due knowledge and clinical skill, therefore at the end of training in Obstetrics and Gynecology, trainee should be able to:

Knowledge:

- 1- Discuss principles of basic sciences applied to Obstetrics and Gynecology.
- 2- Discuss management of disorders of Obstetrics and Gynecology.
- 3- Become self directed life-long learner by utilizing clinical material, internet and library.

Skills:

- 1- Take a comprehensive and relevant history of a patient presenting with Obstetrics and Gynecological complaint.
- 2- Perform detailed physical examination methodically and technically.
- 3- Formulate a working diagnosis and consider relevant differential diagnosis.
- 4- Order a set of relevant investigations considering availability, cost effectiveness, side effects and implication for management.
- 5- Decide and implement suitable effective treatment.
- 6- Conducting the delivery at most appropriate time and by most appropriate method keeping in view the best interest of mother and child.
- 7- Practice proper procedures in operating theaters, Labour rooms, including gowning, gloving, use of various sutures, surgical principles and use of electro medical equipments.

- 8- Assists major surgery, and perform minor surgical procedures independently.
- 9- Dealing with complications.
- 10- Learn to deal emergency situations.
- 11- Learn proper patient referral system as required.
- 12- Learn follow up of patients indoor and outdoor departments.
- 13- Counsel the patients and relative in proper way in elective and emergency situation
- 14- Exhilarate emotional maturity, integrity, ethical values, professional approach and sense of responsibility in day-to-day activities.
- 15-Maintain a detailed and accurate documentation regarding patient management and procedure.

Procedure:

At the end of two years a trainee is expected to perform following procedures in dependently.

Basic Gynecological Procedures:

- Evacuation of products of conception.
- Diagnostic dilatation and curettage.
- Simple polypectomy and cervical biopsy.
- Marsupialization of Bartholin Cyst. Tubal Ligation (Mini laparotomy)
- Take swabs for Cytology.
- Insed IUCD.
- Laparotomy for ectopic pregnancy.

Basic Obstetrical Procedures:

- Monitoring of normal labour.
- Medical induction of Labour.
- Artificial rupture of membranes,
- Normal delivery.
- Episiotomy
- Twin delivery, breech delivery'.
- Vacuum extraction, forceps delivery
- Lower segment cesarean section.
- Manual removal of placenta.
- Cesarean Hysterectomy
- Resuscitation of newborn.
- Post partum Tubal Ligation.
- Venesection
- Obstetrical ultrasound.

SYLLABUS

PART-I SYLLABUS

A list of topics given in this syllabus is considered to be important for the candidate to know as a minimum requirement for her training programme.

Anatomy including development of

Female genital tract: vulva, vagina, uterus, fallopian tubes, ovaries, broad ligament, pelvic cellular tissues, pelvic musculature, pelvic blood vessels, lymphatic system, nerve supply. Bony pelvis: normal and abnormal. Foetal skull. Breast.

Physiology:

The student should have general knowledge of applied Physiology with particular emphasis on Physiology of menstruation, conception, pregnancy lactation, Nutrition and metabolism.

General Pathology:

Basic principles of inflammation, coagulation, thrombosis embolism, derangements of body fluids, neoplasia, deficiency diseases, anemia, hemorrhage, shock, bacterial, fungal, viral diseases. Infection control, septicemia and sexually transmitted disease.

Biochemistry

- Membrane biochemistry and signal transduction
- Gene expression and the synthesis of proteins
- Bioenergetics; fuel oxidation and the generation of ATP
- Enzymes and biologic catalysis
- Tissue metabolism
- Biochemistry of endocrine glands
- Biochemistry of the reproductive system .
- Biophysical and biochemical changes in uterus and cervix during pregnancy & labour.

- VITAMINS
- MINERALS
- METABOLISM
- CARBOHYDRATE

Pharmacology

- General Pharmacology
- Drugs related to reproductive system.
- Anticancer Drugs.
- Drugs used in pregnancy.

PART-II SYLLABUS

GYNAECOLOGY

- **Contraception**

- Offer sensible contraceptive choice to appropriate patients.
- Carry out correctly various contraceptive procedures
- Identify side effect and complications of contraception

- **Early Pregnancy Loss (EPL)**

- Manage and follow-up cases of EPL
- Manage recurrent Miscarriage
- Manage cases of Septic Abortions
- Refer cases of Hydatidiform Mole

- **Ectopic Pregnancy**

- Diagnose Ectopic Pregnancy
- Manage Ectopic Pregnancy Surgically
- Follow up conservative cases

- **Pelvic Infection / Sexually Transmitted Diseases (STD)**

- Manage cases of Acute Pelvic Inflammatory Disease (PID)

- Manage cases of Chronic PID
- Manage Cases of STD
- Manage all types of Vaginal Discharge
- Manage Vulval Pruritus
- **Abnormal Uterine Bleeding**
 - Diagnose patients with Dysfunctional Uterine Bleeding (DUB) by pertinent investigations
 - Manage patients with DUB medically
 - Offer Dilatation and Curettage (D&C) sparingly
 - Refer potential surgical cases
- **Infertility**
 - Investigative rationally couples with infertility
 - Mange couples with infertility at primary level
- **Utero Vaginal Proplapse(UVP)**
 - Evaluate UVP
 - Manage patients with UVP by consdrvative measures
 - Refer for potential surgical management
- **Gynecological Cancer**
 - Diagnose patients with Cervical, Endometrial, Ovarian & Vulval Cancer
 - Refer cancer patients to expert centre

- **Miscellaneous**

- Diagnose menopausal symptoms and signs
- Diagnose varieties of incontinence
- Diagnose uterine fibroids and refer
- Diagnose Adnexal Cysts, benign or malignant
- Perform pap smear
- Effectively counsel, protect, promote and advance Women's Rights to Sexual and Reproductive Health(WRSRH)
- Full range of commonly employed gynecologic diagnostic and surgical procedures, including imaging techniques.

OBSTETRICS

- **Antenatal Care**

- Book patients for confinement
- Plan frequency of antenatal visits
- Treat minor disorders of pregnancy
- Identify high risk pregnancy
- Identify cases of referral to specialized centres

- **Normal Labour and delivery**

- Care appropriately for first stage of labour

- Offer correct labour analgesia
- Monitor labour, identifying and managing clinical problems as and when they arise
- Conduct normal vaginal delivery
- Manage 3rd stage of labour effectively
- Identify cases for referral to specialized centres.
- Induce labour effectively and appropriately

- **Operative delivery**

For proper medical and ethical reasons

- a) Perform forceps ventouse delivery
- b) Perform emergency and elective caesarean section
- c) Perform breech delivery
- d) Identify complications of operative delivery
- e) Call for help judiciously

- **Neonatal Care**

Immediate care of the newborn; every trainee must have experience in resuscitation of the newborn in addition to the theoretical know hoe, including tracheal intubations; principles of general neonatal complication must be learned as well

- **Puerperium**

- Identify common clinical problems of puerperium.
- Manage post partum Haemorrhage (Primary and

secondary), puerperal fever and postpartum 'blues'.

- Manage breast feeding and identify problems in relation to it.

- **Preterm Labour / PROM**

- Identify preterm labour / PROM
- Manage preterm labour / PROM

- **Intrauterine Growth Retardation (IUGR)**

- Identify pregnancies with IUGR
- Manage IUGR Pregnancy and its complications

- **Twin Pregnancy**

- Monitor twin pregnancy
- Plan and implement labour / delivery appropriately
- Manage complications of pregnancy
- Refer higher order multiple pregnancy

- **Anaemia with Pregnancy**

- Identify and diagnose anaemia with pregnancy
- Manage pregnancies with anaemia

- **Hypertension with pregnancy**

- Manage pregnancies with hypertension
- Conduct appropriate delivery / labour
- Manage eclampsia

- **Diabetes with Pregnancy**

- Screen for diabetes mellitus in pregnancy
- Manage diabetic pregnancies
- Manage labour / delivery of diabetic pregnancy
- Seek medical advice

- **Fetal Congenital Anomalies**

- Seek expert advice
- Manage pregnancies complicated with congenital anomalies
- Offer rational follow-up

- **Intra Uterine Death (IUD)**

- Manage IUD Pregnancy
- Perform follow-up / subsequent advice

- **Placenta Previa and abruption**

- Diagnose ante-partum Haemorrhage (APH)
- Offer emergency management
- Manage all severities of APH

- **Malpresentations**

- Manage Malpresentations eg. Face, brow, shoulder, cord
- Manage breech presentations
- Perform external cephalic version

- **Emergency Obstetric Care (EmOC)**

- Practice Comprehensive emergency obstetric care

1. **Clinical Distribution**

Candidates of each unit will be further divided into 4 subgroups.

- I. Day Labour Room/O.T
- II. Night Labour Room/O.P.D
- III. Day Ward
- IV. Night Ward

2. **Skills to be learned in different rotations**

1- Ward Management

- I. Pre-Operative Care
- II. Post Operative Care
- III. Antenatal Care
- IV. Post Natal Care

2. O.P.D

- I. Gynaecology
- II. Obstetrics

3. Labour Room Skills

- Normal Deliveries
- Assisted Deliveries

100 Vacuum

II. Forceps

- Minor Procedures

101 Evacuations

II. Molar Pregnancy Evacuation

III. Retained Placenta

- Major Procedures

I. LSCS

4. Operation Theater

- Major Procedures
 - LSCS
 - Laparotomy (ectopic)
- Minor Procedures
 - Tubal Ligation
 - Diagnostic D&C
 - Therapeutic D&C

EXAMINATION / EVALUATION.

The Diploma in Gynae & Obstetrics Examination will comprise of two parts. The format of examination shall be as follows:-

Eligibility to appear in Part – I Examination

- (a) Application by the candidate recommended by the Supervisor.
- (b) Certificate by the Supervisor, countersigned by Dean PGMI that candidate has regularly attended at least 75% of the Basic Science Education Lectures Seminars, Practical, demonstrations of Part-I education.

Part I Examination:

At the end of 1st Calendar Year, the Part-I examination will comprise of Basic Sciences Education papers relevant to the specialty of Gynae & Obst of only theory MCQ types as under:

Paper I

Anatomy & Pharmacology 100 Marks

Paper II

Physiology, Pathology & Biochemistry 100 Marks

Total= 200 Marks

Eligibility to appear in Part – II Examination

1. The candidate has completed the prescribed period of training of the course.
2. The candidate has passed the Intermediate Evaluation (Part-I Examination).
3. Certificate by the Supervisor that the Log Book of candidate is complete in all aspects and is signed by the Co-Supervisor and the Supervisor. The original Log Book will be presented by the candidate during Practical / Oral examination.
4. The application form for Part-II examination with recommendation of the Supervisor.

2. Part II Examination:

At completion of training, papers will comprise of obstetrics & Gynae Examination, consist of theory (MCQ & Short Essay) & clinical assessment.

Theory Examination:

Paper-I:-

MCQ's 100 Questions(One Best Type Variety)100 Marks

Paper-II:-

Short Essay 10 Questions (Ten Marks Each) 100 Marks

Total = 200 Marks

LOG BOOK.

Log book should include adequate number of diagnostic and therapeutic procedures observed and performed the indications for the procedure, any complications and the interpretation of the results, routine and emergency management of patients, case presentations in CPCs, journal club meetings and literature review.

Log Book will have 5% weightage in final examination.

Proposed Format of Log Book is as follows:

Candidate's Name: _____

Roll No. _____

The above mentioned procedures shall be entered in the log book as per format

PROCEDURES PERFORMED

S #	Date	Name of Patient, Age, Sex & Admission No	Diagnosis	Procedure Performed	Supervisor's Signature

EMERGENCIES HANDLED

S #	Date	Name of Patient, Age, Sex & Admission No	Diagnosis	Procedure / Management	Supervisor's Signature

CASE PRESENTED

S #	Date	Name of Patient, Age, Sex & Admission No	Case Presented	Supervisor's Signature

SEMINAR / JOURNAL CLUB PRESENTATION

S #	Date	Topic	Supervisor's Signature

Evaluation Record

(Excellent, Good, Adequate, Inadequate, Poor)

At the end of the rotation, each faculty member will provide an evaluation of the clinical performance of the fellow.

S #	Date	Method of Evaluation (Oral, Practical, Theory)	Rating	Signature

- Log Book will be signed by the supervisor / Co- Supervisor regularly.
- Log Book completion is must before the candidate Final examination forms are signed.
- Log Book should be used in Practical / Clinical Examination at viva voice table or at TOCS cabin.

LEAVE.

The postgraduate students will be entitle to avail the leave as per S&GAD and postgraduate studies schedule, after the recommendation of their supervisor and approval of the Registrar PGMI, Quetta.

TRAINING SITES.

- Post Graduate Medical Institute Quetta.
- Bolan Medical Complex Hospital Quetta.
- Sandeman (Prov:) Teaching Hospital Quetta.

RECOMMENDED BOOKS.

1. Text Book of Obst./ Gynae by Dewhurts
2. Text Book of Operative Gynaecology by shaws
3. Text Book of Anatomy by R.J.Last
4. Robbins Pathology & Walter & Israel.
5. Recent advances and Progresses of Obst. /Gynae
6. local literature Published form time to time.
7. Ten Teachers obstetric.
8. Rashid Latif Gynaecology Text book.
9. Current Obstetrics & Gynae (Allan H.Decheney)
10. Shaw's Textbook of operative Gynaecology.
11. Longman Text book of Embryology.
12. Guyton Textbook of Physiology.
13. Walter & Isreal Textbook of General Pathology.

JOURNALS

1. British Journal of Obstetrics & Gynaecology.
2. Amercan Journal of obstetrics & Gyanecology.
3. Progress in Obstetrics and Gynaecology.
4. Recent Advances in obstetric and Gynaecology.

FACULTY MEMBERS

PROFESSORS.

- 1 Prof: Naila Ehsan
- 2 Prof: Tasneem Ashraf
- 3 Prof. Ayesha Siddiqa

ASSOCITE PROFESSOR.

- 1 Dr. Uzma
- 2 Dr. Mah Rukh Fatima
- 3 Dr. Najma Baloch
- 4 Dr. Iffat Jehan

ASSISTANT PROFESSOR

- 1 Dr. Zaib un Nisa
- 2 Dr. Roshana Saleem
- 3 Dr. Bilquees Ara
- 4 Dr. Maryam Shoaib
- 5 Dr. Shehla Sami
- 6 Dr. Gul e Lala Luni
- 7 Dr Yasmeen Jaffar
- 8 Dr. Farida Kakar
- 9 Dr. Sumera Hamza Nousherwani
- 10 Dr. Firdus Ara
- 11 Dr. Rehana Kamal
