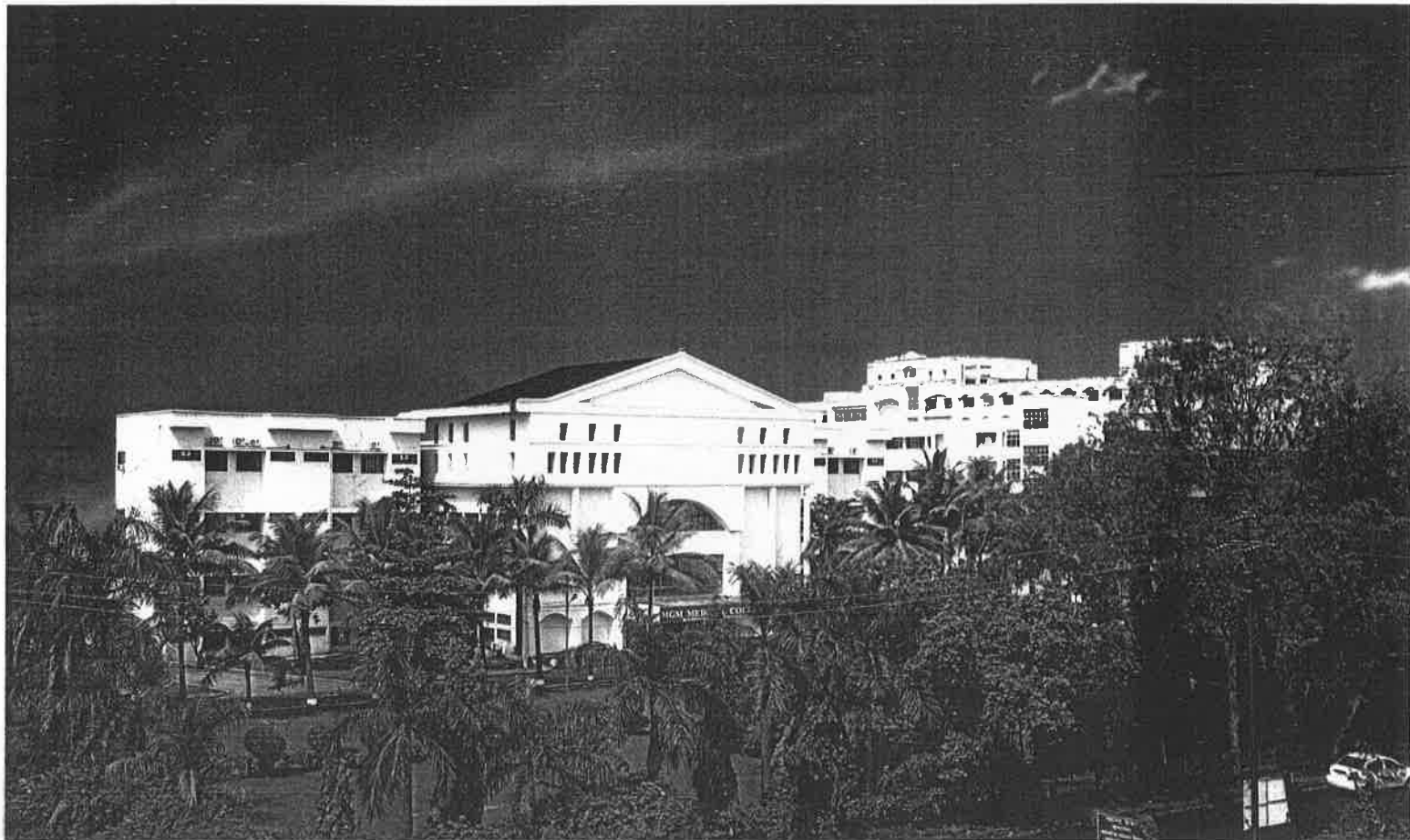


Curriculum for Diploma Obst. & Gynaec



IN PURSUIT OF EXCELLENCE

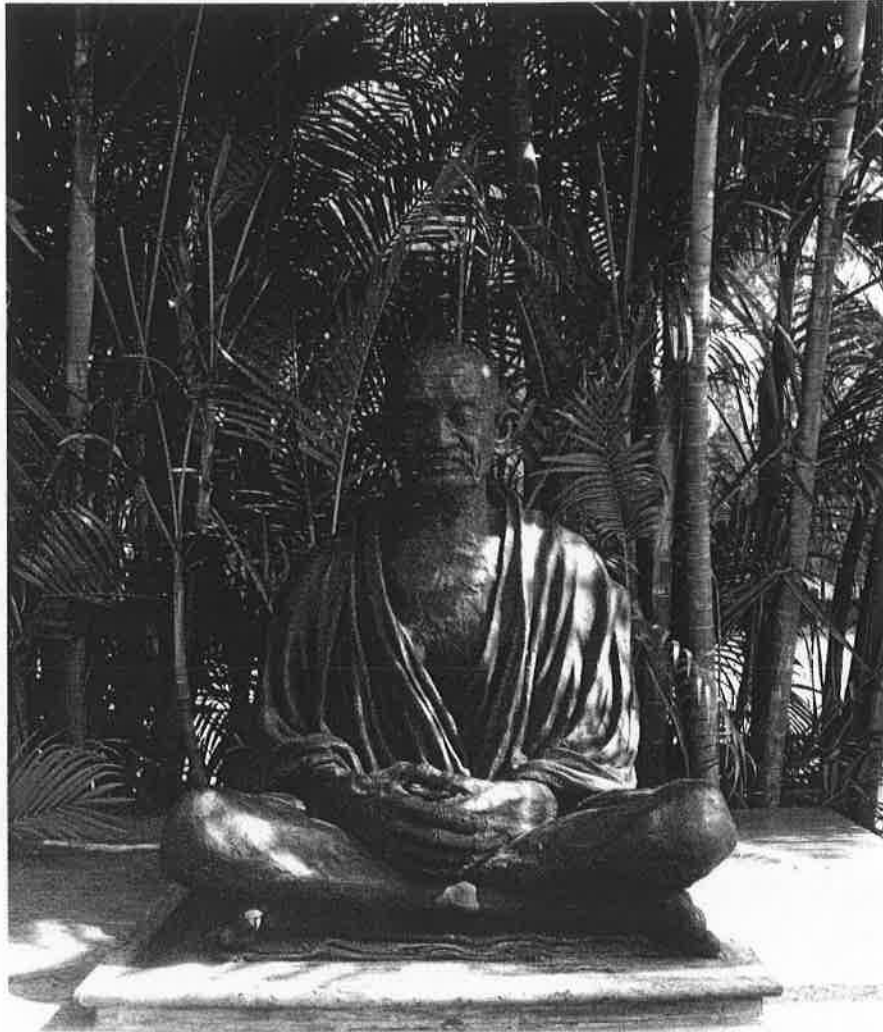


MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University Established u/s 3 of UGC Act, 1956)
Navi Mumbai - 410 209


[www. mgmuhs.com](http://www.mgmuhs.com)

INSPIRING MINDS



Mission

To improve quality of the life for individuals and community by promoting health, preventing and curing disease, advancing biomedical and clinical research and educating tomorrow's Physicians and Scientists.

Vision

By 2020 the MGM University of Health Sciences will rank one of the top private Medical Institution. This will be achieved through ground breaking **discoveries in basic sciences and clinical research** targeted to prevent and relieve human suffering, **excellence in Medical Education** of the next generation of academic clinicians and intrinsic scientists.

MGM University of Health Sciences will transform the **Education of** tomorrow's Physicians and Scientists conducting **Medical Research** to advance health and improving lives by providing world-class patient care.

Many see the 21st Century as the golden age of biomedical research. The MGM University of Health Sciences will position for leadership at the horizon of this new era to promote and stabilise stand human health with a standard of excellence.

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Chancellor's Message



It is my pleasure to welcome you to join constituent colleges of Mahatma Gandhi Mission's (MGM) University of Health Sciences, Navi Mumbai. I wish to avail this opportunity to apprise you and your parents about the academic excellence of the deemed university.

The MGM University of Health Sciences was established u/s 3 of UGC Act, 1956 vide HRD Notification No.F.9-21/2005-U.3(A) dated 30-8-2006. The MGM University is an outcome of untiring efforts of our educationists, professionals, social activists, technocrat, students and parents. The Mahatma Gandhi Mission Trust that manages the University of Health Sciences and over 40 institutions in Navi Mumbai, Aurangabad, Nanded, and Noida has the vision to empower the masses with the availability of state-of-the-art education. Most of our institutions have ISO certifications that further endorse our commitment to stringent quality standards. I am proud to state that we have succeeded in these accomplishments during our journey of the past 25 years.

I recollect the memories of struggle and determination when the MGM Trust established its two medical colleges, one each at Navi Mumbai and Aurangabad some twenty years ago. Both the medical colleges have grown into institutions imparting both undergraduate and postgraduate courses, and delivering quality health care to communities in their respective areas. While both colleges are engaged in their primary functions of teaching, patient care and research, they have

also excelled in their pursuit for advancement of science and in taking health services to communities through extension programmes. A shining example is the establishment of the Department of Infectious Diseases in 1993 in collaboration with the University of Texas-Houston, USA. This department has established the state-of-the-art clinical services and laboratories for research and care of infectious diseases and received the acclaim of Director General of ICMR when he stated "MGM is the first medical college in India to establish a separate department of infectious diseases. This is the need of the hour." The department has undertaken path-breaking research and shaped the course of our national control programmes on HIV/AIDS and tuberculosis. The original research of the constituent colleges has been acclaimed among the scientific world globally.

In an era of economic liberalization and the competition among varsities, both in and out of India, the task of grooming professionals who will compete with the best in the world, is tough. To aid our efforts to excel, MGM University of Health Sciences has the latest research facilities, a dedicated research faculty, as well as an array of distinguished visiting faculty members. The quiet ambience of our campuses, the well filled library with subscriptions to international and national journals, and the lush-green gardens add to our accomplishments.

Considering the manpower needs of

educational, industrial agricultural, and health sector to maintain their steady growth, several fresh M.Sc. courses have been launched. M.Sc. courses introduced at the University from the current academic year shall provide knowledge, skills and subsequent employability that are at par with the counterparts in India and abroad. The curricula of the courses have been designed by experts and peer-reviewed with an emphasis on the job requirements of educational institutions, industries, health care, and research institutions. These courses will empower the students to choose a career in a classroom, a research laboratory or an industry. I am happy that the university is ticking towards the pinnacle with the introduction of these value-added postgraduate courses in medical biotechnology, medical genetics and other basic sciences.

Finally, I wish to place on record my gratitude to the founder members, stake-holders, faculty, staff, students and their parents for providing the MGM Trust with your advice and support.

Once again, it is my pleasure to welcome you to join constituent colleges of MGM University of Health Sciences' at Navi Mumbai and Aurangabad.

Kamal Kishore Kadam
Chancellor



Dr R.D.Bapat
Vice Chancellor



Dr S.N.Kadam
Pro Vice Chancellor



Dr N.N.Kadam
Director (Examination)



Dr Ajit shroff
Dean (Aurangabad Campus)



Dr Z.G. Badade
Registrar



Dr G.S.Narshetty
Dean (Navi Mumbai Campus)

SYLLABUS FOR POST GRADUATE DIPLOMA IN OBST. &
GYNAECOLOGY
(D.G.O.)

A post graduate student acquires the knowledge of the pathophysiology of reproductive system and is able to manage the pathological states affecting it.

OBSTETRICS :

1. Basic sciences of Reproduction & Applied Anatomy of genitourinary system. abdomen, pelvis, pelvic floor, anterior abdominal wall, breast in obstetrics
 - * Reproductive Anatomy
 - * Gametogenesis fertilization, implantation & early development of human embryo.
 - * Fetal growth & development
 - * Birth defects, Genetics & teratology & counselling.
 - * Physiological changes during pregnancy.
 - * Endocrinology of pregnancy.
2. Normal pregnancy, labour & puerperium.
Breast feeding, baby friendly initiative
3. Early recognition and prompt management of pregnancy complications, - Hyperemesis gravidarum, abortions, ectopic pregnancy, hydatidiform mole, pre-eclampsia, eclampsia, antepartum hemorrhage, multiple pregnancy, polyhydramnios, Oligohydramnios & Prolonged pregnancy.
4. Management of pregnancies complicated by medical, surgical or gynaecological diseases, in consultation with the concerned specialties by team approach.
 - * Anemia, Heart disease, diabetes mellitus, liver disorders, Respiratory diseases, Renal diseases, Hypertensive disorders.
 - * Acute abdomen, Acute Appendicitis, Intestinal obstruction,
 - * Fibroids, Ovarian tumors, Carcinoma cervix, genital prolepses.
5. Infections in pregnancy.
Malaria, Toxoplasmosis, viral infections(Rubella, CMV, Hepatitis B, Herpes) syphilis and other sexually transmitted infections including HIV.
Parents to child transmission of HIV infection (PPTCT programme).
6. Evaluation of the fetal and maternal health in complicated pregnancy by making use of available diagnostic modalities and plan for safe delivery of the fetus while safeguarding the maternal health.
7. Prenatal diagnosis of fetal abnormalities and appropriate care.

8. Partographic monitoring of labour progress, early recognition of dysfunctional labour and appropriate interventions during labour including active management of labour.

9. Obstetrical analgesia and anesthesia.

10. Induction and augmentation of labour.

11. Management of abnormal labour : Abnormal pelvis and soft tissue abnormality in maternal passage, Malpresentation and Malpositions of fetus, abnormal uterine action, obstructed labour, cervical dystocia.

Third stage complications - PPH including surgical management, retained placenta, uterine inversion, post partum collapse, amniotic fluid embolism.

12. Abnormal puerperium, Puerperal sepsis
Thrombophlebitis, Mastitis, Puerperal venous sinus thrombosis, Psychosis.

13. National Health Programmes to improve the maternal and child health, social obstetrics and vital statistics.

14. Drugs used in obstetric practice including prostaglandins. *F.D.A. Classification*

15. Coagulation disorders in obstetrics, Blood and component therapy.

16. Operative obstetrics - decision making, technique, recognition and management of complications - C.S. instrumental delivery, obstetrics hysterectomy, history of destructive surgery. Manipulations-version, MRP etc.

17. Intensive care in obstetrics for critically ill patient. Fluid and electrolyte balance, volume status maintenance, protecting vital organ function.

18. Provision of safe abortion services - selection of case, techniques, and management of complications.

NEW BORN :

1. Care of newborn. care of preterm, S.G.A. neonates, infants of diabetes mother

2. Asphyxia & Neonatal resuscitation.

3. Neonatal sepsis - prevention, early detection & management.

4. Neonatal hyperbilirubinemia, investigation and management.

5. Birth trauma - prevention, early detection & management.

6. Detection of congenital malformations in new born and make timely referrals for surgical corrections.

7. Management of the common problems in neonatal period.

GYNAECOLOGY :

1. Physiology of menstruation, common menstrual disorders and their management. Medical & surgical.

2. Diagnosis and surgical management of clinical conditions related to congenital malformations of genital tract.

3. Chromosomal abnormalities and intersex.

4. Reproductive Endocrinology: Evaluation of primary and secondary amenorrhea, management of hyperprolactinemia, Hirsutism, chronic anovulation and PCOD.

5. Endometriosis and adenomyosis - medical and surgical management.

6. Infertility evaluation and management. Use of ovulation induction methods. Tubal microsurgery

7. Reproductive Tract Infections Sexually Transmitted Infections, HIV/AIDS: Prevention, Diagnosis and management.

8. Genital Tuberculosis.

9. Benign and malignant tumors of genital tract - Early diagnosis and management.

10. Principles and practice of oncology in gynaecology - chemotherapy, radiotherapy, palliative treatment.

11. Supports of pelvic organs, genital prolapse, surgical management of genital prolapse.

12. Common urological problems in gynaecology - SUI, voiding difficulties, VVF.

13. Management of menopause, prevention of complications, HRT, cancer screening - genital, breast.

14. Recent advances.

15. Newer diagnostic aids - USG, and other imaging techniques, endoscopies.

16. Hysteroscopy, laparoscopy - diagnostic, simple surgical procedures, including laparoscopic tubal occlusion, colposcopy.

17. Medico legal aspects, ethics, communications and counselling.

18. Operative gynaecology - Selection of case technique and management of complications of minor and major gynaecology procedures.

Abdominal and vaginal hysterectomy

Surgical procedures for genital prolapse

Surgical management of benign and malignant genital neoplasms.

FAMILY PLANNING :

1. Demography and population Dynamics.
2. Contraception - Temporary methods, Permanent methods. Legal issues
3. MTP Act and procedures of MTP in first & second trimester.
4. Emergency contraception.
5. Recent advances in contraceptive technology.

SCHEME OF THEORY EXAMINATION FOR D.G.O. EXAMINATION

Recommended Books

OBSTETRICS

SN	Must Read	Desirable to Read	Good to read
1	C.S.Dawn's Text book of Obstetrics and Neonatology	Medical Disorders in Pregnancy by De Swiet	Every thing available on net.
2	Ian Donald Practical obstetrics problema	Williams Text book of Obstetrics	
3	Arias, High Risk Pregnancy	Recent Advances in Obst/Gyn	FOGSI Books.
4	Operative Obstetrics by Munro-Kerr	Progress in OBGY, Studd	

GYNECOLOGY

SN	Must Read	Desirable to Read	Good to read
1	Novacs Gynecology Jeffcoat's Principle of GynaecologyGynecology	Reproductive Endocrinology by Speroff	Infertility by Insler
2	TeLindes Operative Gynecology		Every thing available on net
3	C.S.Down Textbook of gynecology and contraception	Gynecology by P.K.Devi	FOGSI Books.
4			

FAMILY PLANNING

SN	Must Read	Desirable to Read	Good to read
1	Family Planning Practices by SK Chaudhary	Reproductive endocrinology by Speroff	Dawns book on Contraception
			Every thing available on net

JOURNALS/ PERIODICALS;

SN	Must Read	Desirable to Read	Good to read
1	J. Obst. Gyn India	Clinic in Obst. & gynecology	Year books
2		North Americal clinic in ObGy	Annuals



**MGM UNIVERSITY OF HEALTH SCIENCES,
NAVI MUMBAI**

MARK LIST FOR PRACTICAL AND VIVA-VOCE EXAMINATION

Exam Centre: _____

Date of Examination: _____

EXAMINATION FOR: DIPLOMA IN OBST. & GYNECOLOGY

Sr. NO.	Heads	Total Marks
1	02 Obstetric cases i) Long Case-75 Marks ii) Short Case-25 Marks	100
2	02 Gynaec cases i) Long Case- 75 Marks ii) Short Case- 25 Marks	100
3	5 spots 10 marks each	50
4	Viva i) Obstetrics 25 Marks ii) Gynaec 25 Marks	50
Total		300 Marks

Seat No	1	2	3	4	Grand Total
	100 Marks	100 Marks	50 Marks	50 Marks	300 Marks

NAME OF EXAMINER	COLLEGE	SIGNATURE WITH DATE
1.		
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PG COURSES: - DIPLOMA

Sr. No.	Course	Subject Name	Paper No. & Topics
i)	D.C.H.	DIPLOMA PAEDIATRIC	IN I. Basic medical as applied to paediatrics. II. Neonatology, social and preventive Paediatric. III. Systemic disease in Paediatrics Respiratory cardiology, CVS, Neurology, Haematology, Nephrology, Rheumatology, Immunology, Gastroenterology, growth and development. Congenital & acquired disorder of Eye care, Nose, Throat and joints, Endocrine system and miscellaneous diseases.
ii)	D.A.	DIPLOMA IN ANAESTHESIOLOGY	I. Basic Sciences as related to Anaesthesia (History, Anatomy, Physiology, Pharmacology, Pathology, Physics, Instrument & Equipments, etc.) II. Theory & Practice of Anaesthesia III. Clinical Sciences like Medicine & Surgery related to Anaesthesia
iii)	D.G.O.	DIPLOMA IN OBST. & GYNAECOLOGY	I. Obstetrics including the diseases of newborn. II. Gynaecology, Gynaecological Pathology & Operative Gynaecology. III. Medical and surgical diseases complicating obstetrics & Gynaecology, social obstetrics & Gynaecology including M.CH. & F. W.
iv)	D. ORTHO	DIPLOMA ORTHOPAEDICS	IN I. Anatomy, Physiology and Pathology as applicable to Orthopaedics. II. Traumatology and general Surgery. III. General Orthopaedics
v)	D.O.	DIPLOMA OPHTHALMOLOGY	IN I. Anatomy, Physiology and Optics. II. Ophthalmic Medicine and surgery. III. Ophthalmology related to systemic diseases and new innovations and techniques in Ophthalmology.

IN PURSUIT OF EXCELLENCE

MGM DEEMED UNIVERSITY OF HEALTH SCIENCES

Constituent Colleges

Navi Mumbai

M.G.M. Medical College
M.G.M School of Biomedical Science
M.G.M School of Physiotherapy
M.G.M New Bombay College of Nursing
M.G.M College of Nursing

Aurangabad

M.G.M. Medical College
M.G.M School of Biomedical Science
M.G.M School of Physiotherapy
M.G.M College of Nursing



MAHATMA GANDHI MISSION



AURANGABAD

- MGM's Jawaharlal Nehru Engineering College
- MGM's Institute of Management
- MGM's Mother Teresa College of Nursing
- MGM's Mother Teresa Institute of Nursing Education
- MGM's College of Journalism & Media Science
- MGM's Medical Center & Research Institute
- MGM's College of Fine Arts
- MGM's Dr. D. Y. Pathnikar College of Comp. Sc. & Tech.
- MGM's Hospital & Research Center
- MGM's College of Agricultural Bio-Technology
- MGM's Dept. of Bio-Technology & Bio-informatics.
- MGM's Inst. of Hotel Management & Catering Tech.
- MGM's Institute of Indian & foreign Languages & Comm.
- MGM's College of Physiotherapy
- MGM's Hospital, Ajabnagar
- MGM's Sangeet Academy (Mahagami)
- MGM's Institute Naturopathy & Yoga
- MGM's Sports Club & Stadium
- MGM's Institute of Vocational Courses
- MGM's Horticulture
- MGM's Health Care Management
- MGM's Junior College of Education (Eng. & Mar.)
- MGM's Sanskar Vidyalaya (Pri. & Sec. - Mar.)
- MGM's Clover Dale School (Pri. & Sec. - Eng.)
- MGM's First Steps School (Pre-Primary - English)
- MGM's Sanskar Vidyalaya (Pre-Primary - Marathi)
- MGM's School of Biomedical Sciences

NAVI MUMBAI

- MGM's College of Engineering & Technology
- MGM's Institute of Management Studies & Research
- MGM's Dental College & Hospital
- MGM's College of Physiotherapy
- MGM's College of Media Science
- MGM's Institute of Research
- MGM's New Bombay Hospital, Vashi
- MGM's Hospital, CBD
- MGM's Hospital, Kamothe
- MGM's Hospital, Kalamboli
- MGM's Infotech & Research Centre
- MGM's Pre-Primary School (English & Marathi)
- MGM's Primary & Secondary School (Eng. & Mar.)
- MGM's Junior College Science
- MGM's Junior College of Vocational Courses
- MGM's Florence Nightingale Inst. Nursing Edu.
- MGM's College of Nursing
- MGM's College of Law

NANDED

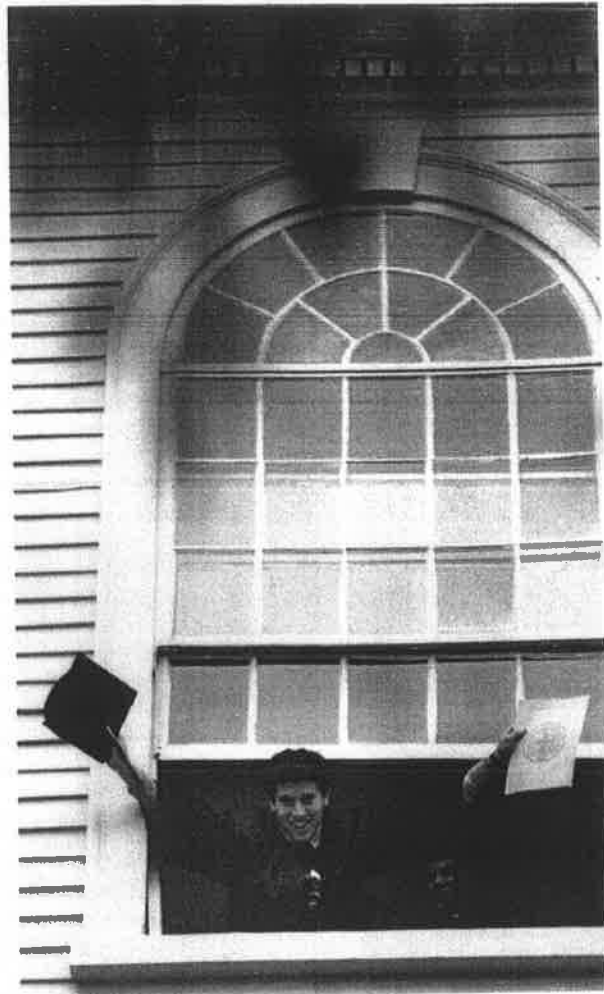
- MGM's College of Engineering
- MGM's College of Fine Arts
- MGM's College of Computer Science
- MGM's College of Journalism & Media Science
- MGM's Centre for Astronomy & Space Tech.
- MGM's College of Library & Information Science

PARBHANI

- MGM's College of Computer Science

NOIDA (U.P.)

- MGM's College of Engineering & Technology



MGM University of Health Sciences
(Education - Health Services - Research)
A Mission started, nurtured and Managed
by Professional Doctors, Scientists Engineers...



MGM INSTITUTE OF HEALTH SCIENCES
(Deemed University u/s 3 of UGC Act, 1956)



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E-mail : mgmuniversity@mgmuhs.com
Website: www.mgmuhs.com

DGO - New Curriculum

Resolution No. 1.3.10.1 of BOM-51/2017: Resolved to accept the new curriculum for MS OBGY. & DGO from Academic Year 2017-18 onwards. **Annexure-XV**

Curriculum for D.G.O.

New Curriculum

Annexure 3(d)

The infrastructure and faculty of the department of Obstetrics & Gynaecology will be as per MCI regulation.

1. Goal

The goal of DGO course in Obstetrics & Gynaecology is to produce a competent Obstetrician & Gynaecologist who:

- a) Recognizes the health needs of adolescents, females in reproductive age group & post menopausal females keeping with the principles of National Health Policy and professional ethics.
- b) Is competent to manage the pathological states related to reproductive system with knowledge of Anatomy, Physiology, Pharmacology & Pathophysiology.
- c) Is aware of contemporary advances & developments in the field of maternal health & other related issues.
- d) Is oriented to principles of research methodology.
- e) Has acquired skills in educating medical and paramedical professionals.

2. Objectives

- a) Provide quality maternal care in the diagnosis and management of Antenatal, Intra-natal & Post natal period of normal and abnormal pregnancy.

- b) Provide effective & adequate care to the obstetrical and early neonatal emergencies.
- c) Provide counselling & knowledge regarding family planning methods & perform medical termination of pregnancy.
- d) Organize & implement maternal components in the "National Health Programs".
- e) Develop adequate surgical skills to manage common Obstetrical & Gynaecological problems.
- f) Medical genetics – Elementary genetics as applicable to obstetrics.
- g) Gynaecological Endocrinology & Infertility knowledge.
- h) Benign & malignant Gynaecological disorder (Diagnosis & treatment).
- i) Operative procedures including Endoscopy (Diagnostic & therapeutic) & its related complications.
- j) Knowledge of interpretation of various laboratory investigations & other diagnostic modalities in Obstetrics & Gynaecology.
- k) Medical & Surgical problems and Anesthesiology related to Obstetrics & Gynaecology.
- l) Knowledge of essentials of Pediatric & Adolescent Gynaecology, Reproductive & Child Health, Family Welfare & Reproductive tract infections.
- m) Keep abreast with advances in the field of Obstetrics & Gynaecology.
- n) Facilitate learning of medical / nursing students, para medical health workers as a teacher trainer.
- o) Demonstrate empathy & humane approach towards patients and their families.
- p) Function as a productive member of a team engaged in health care, research & education.

3. Syllabus

3.1. Theory

Obstetrics :

- a) Gametogenesis fertilization, implantation and early development of embryo
- b) Normal Labour
- c) Anatomical and Physiological changes in female genital tract during pregnancy.
- d) Pharmacology of drugs used during pregnancy, Labour, Post-partum period.
- e) Development of placenta.
- f) Amniotic fluid.
- g) Anatomy of fetus, fetal growth & development, fetal physiology & circulation.
- h) Puerperium – Normal
- i) Malpresentation & malposition of labour
- j) Abnormal Puerperium
- k) CPD & its management
- l) Complications of 3rd stage of labour
- m) Hypertensive disorders in pregnancy

- n) Antepartum Hemorrhage
- o) PROM, Poly Hydramnios, OligoHydramnios
- p) Obstetrical Hemorrhage (includes Antenatal & postpartum)
- q) Medical disorders in pregnancy
- r) Emergency Obstetric Care (Intensive Obstetrics)
- s) Antepartum & intrapartum fetal monitoring.

Gynaecology:

- a) Normal and abnormal microbiology of genital tract & bacterial, viral & parasitic infections responsible for maternal, fetal & Gynae disorders.
- b) Endocrinology related to reproduction
- c) Physiology of menstruation, ovulation, fertilization & menopause.
- d) Methods of contraception.
- e) Fibroid uterus
- f) Colposcopy & vaginal and cervical cytology
- g) Endometrial Hyperplasia, DUB, Abnormal bleeding.
- h) Endometriosis, Adenomyosis
- i) Endocrine abnormalities, Menstrual abnormalities, Amenorrhoea, PCOD, Hirsutism, Hyperprolactinemia, Thyroid disorders.
- j) Laparoscopy & Hysteroscopy

- k) Ca Cervix
- l) Ca Endometrium
- m) Carcinoma Ovary
- n) Menopause
- o) Genital Fistulae / Urinary Incontinence
- p) Prolapse
- q) Contraception / Family Planning / Sterilization methods
- r) Endometriosis, Adenomyosis
- s) Infertility.
- t) IVF
- u) Vulval disorder

3.2. Practical

Obstetrics:

- a) Venepuncture
- b) Amniotomy
- c) Conduct of normal Vaginal delivery
- d) Episiotomy

- e) Ventouse delivery
- f) Forceps delivery
- g) Management of Genital tract injuries
- h) Exploration of Cervix
- i) Lower Segment Caesarean Section
- j) Manual Removal of Placenta
- k) Delivery of twins
- l) Management of shock
- m) Management of Postpartum hemorrhage
- n) Cervical Cerclage
- o) Non stress Test
- p) Suction Evacuation
- q) Dilatation & Evacuation
- r) Repair of complete perineal tear
- s) Repair of cervical tear
- t) Caesarean Hysterectomy
- u) Reposition of inversion uterus

Gynaecology:

- a) Pap Smear
- b) Wet smear examination
- c) Endometrial Biopsy
- d) Dilatation and Curettage/Fractional Curettege / Polypectomy
- e) Cervical Biopsy
- f) Cryo / Electrocautery of Cervix
- g) HysteroSalpingography
- h) Diagnostic Laparoscopy & Hysteroscopy
- i) Opening & closing of abdomen
- j) Operations for utero vaginal prolapse
- k) Operations for Ovarian tumors
- l) Operations for Ectopic pregnancy
- m) Vaginal hysterectomy
- n) Abdominal Hysterectomy
- o) Myomectomy
- p) Colposcopy
- q) Endoscopic surgery (Operative Laparoscopy & Hysteroscopy)

- r) Repair of genital fistulae
- s) Operations for Urinary incontinence
- t) Radical operations for gynaecological malignancies
- u) Intrauterine insemination
- v) Basic ultrasound / TVS
- w) Vulval Biopsy
- x) Incision & drainage

Family Planning

Intra Uterine Contraception Device Insertion / removal
Female sterilization (Open & Laparoscopic)
MTP

4. Teaching Programme

4.1 General Principles

- a) Acquisition of practical competencies being the keystone of postgraduate medical education, postgraduate training should be skills oriented.
- b) Learning in postgraduate program is essentially self-directed and primarily emanating from clinical, operative and academic work. The formal sessions are meant to supplement this core effort.

4.2 Teaching Sessions

- a) Clinical case discussions: PG Bed side & Teaching rounds

- b) Seminars / Journal Club
- c) Mortality meetings
- d) Interdepartmental Meetings : Pediatrics, Radiology
Others – Guest Lectures / Vertical Seminars / Central Stat Meets

4.3 Teaching Schedule

The Suggested departmental schedule is as follows:

- 1. Seminar / Symposium WEEKLY
- 2. Journal Club ONCE A MONTH
- 3. PG Case discussion / Bed Side teaching DURING ROUNDS WITH HOD OR SENIOR FACULTY
- 4. Interdepartmental meet which includes meet with other specialties viz. Medicine, Surgery, Pathology, Microbiology, Gastroenterology, Anaesthesia. ONCE A MONTH
- 5. Maternal/Perinatology meet with Pediatric department discussing any maternal/neonatal death and other topics of common interest. ONCE A MONTH
- 6. Grand round of the wards. ONCE A WEEK
- 7. Medical Ethics & Legal issues. AS & WHEN ORGANISED BY THE DEPARTMENT / COLLEGE

5. Postings

- a) Emphasis should be self-directed learning, group discussions, case presentations & practical hands on learning.
- b) Student should be trained about proper history taking, clinical examination, advising relevant investigations
- c) Their Interpretations and instituting medical surgical management by posting the candidates in OPD, specialty clinics, wards, operation theatres, labour room, family planning clinics & other departments like neonatology, radiology, anesthesia.
- d) The candidates must be trained to manage all emergency situations seen frequently.

PRACTICAL POSTING:

I. ROTATION :

A resident will be rotated between 3 units at MGM Kalamboli.

Posting in each unit will be for a period of 4 months each, per year for 2 years.

II. ALLIED POSTINGS :

A resident will be posted in allied subject as per HODs discretion during the second year for a period of 4 weeks.

SONOLOGY	2 weeks
NEONATOLOGY	2 weeks

III. **DUTIES :**

Call / Labor room / OT / Ward duties will be carried out by the resident as per respective units Call / Post call / OT days.

As ordered by the HOD / HOU.

IV. **Outreach camps:**

As & when organised.

A minimum of 12 each year.

V. **Regular attendance at scientific meetings organised by OBGY society.**

6. Assessment

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

6.1. General Principles

- a) The assessment is valid, objective, and reliable.
- b) It covers cognitive, psychomotor and affective domains.
- c) Formative, continuing and summative (final) assessment is also conducted.

6.2. 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.

6.3. 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.

Sr. No. Items Marks

1. Personal Attributes 20
2. Clinical Work 20
3. Academic activities 20
4. End of term theory examination 20
5. End of term practical examination 20

1. Personal attributes:

Behavior and Emotional Stability: Dependable, disciplined, dedicated, stable in emergency situations, shows positive approach.

Motivation and Initiative: Takes on responsibility, innovative, enterprising, does not shirk duties or leave any work pending.

Honesty and Integrity: Truthful, admits mistakes, does not cook up information, has ethical conduct, exhibits good moral values, loyal to the institution.

Interpersonal Skills and Leadership Quality: Has compassionate attitude towards patients and attendants, gets on well with colleagues and paramedical staff, is respectful to seniors, has good communication skills.

2. Clinical Work:

a) **Availability:** Punctual, available continuously on duty, responds promptly on calls and takes proper permission for leave.

b) **Diligence:** Dedicated, hardworking, does not shirk duties, leaves no work pending, does not sit idle, competent in clinical case work up and management.

c) **Academic ability:** Intelligent, shows sound knowledge and skills, participates adequately in academic activities, and performs well in oral presentation and departmental tests.

d) **Clinical Performance:** Proficient in clinical presentations and case discussion during rounds and OPD work up. Preparing Documents of the case history/examination and progress notes in the file (daily notes, round discussion, investigations and management) Skill of performing bed side procedures and handling emergencies.

3. Academic Activity: Performance during presentation at Journal club/ Seminar/ Case discussion/Stat meeting and other academic sessions. Proficiency in skills as mentioned in job responsibilities.

4. End of term theory examination:

Conducted at end of each term

5. End of term practical/oral examinations:

After 1 year 9 months

Marks for **personal attributes** and **clinical work** should be given annually by all the consultants under whom the resident was posted during the year. Average of the three years should be put as the final marks out of 20.

Marks for **academic activity** should be given by the all consultants who have attended the session presented by the resident.

The Internal assessment should be presented to the Board of examiners for due consideration at the time of Final Examinations.

6.4. Summative Assessment

- a) Ratio of marks in theory and practicals will be equal.
- b) The pass percentage will be 50%.
- c) Candidate will have to pass theory and practical examinations separately.

THEORY EXAMINATION :

PAPER 1

Obstetrics including the diseases of the new born.

PAPER 2

Gynaecology, Gynaecological pathology & Operative gynaecology.

PAPER 3

Medical & surgical diseases complicating obstetrics & Gynaecology.

CLINICAL PRACTICAL EXAMINATION:

1. Obstetrics: (100 marks)

long case 75 marks

short case 25 marks

2. Gynaecology: (100 marks)

long case 75 marks

short case 25 marks

3. Spots: (50 marks)

5 spots, 10 marks each

4. Viva: (50 marks)

Obstetrics 25 marks

Gynaecology 25 marks

TOTAL 300 marks

7. Job Responsibilities

7.1 OPD :

History & Work up of all cases and presentation to the consultants.

This includes all the special clinics including infertility, endocrinology, oncology, Menopause & adolescent clinic. Documentation in OPD Card, register completion and maintenance.

7.2 Minor Procedures:

Aseptic Dressings / Stitch removal / Pap smear collection / Colposcopy / Cryo Cautery / Electrocautery / HSG.

7.3 Family Planning:

Counselling for contraception / Sterilization / IUCD insertion / Removal.

7.4 Labour room / L- room Recovery:

- a) History & work up of all cases.
Examination of all patients and documentation in the files. Sending investigations & filing investigation forms.
- b) Performing NST, Maintaining partogram in labouring patients. Monitoring vitals, uterine contractions and fetal heart rate in labouring patients , conducting deliveries, Episiotomy stitching and neonatal resuscitation.
- c) I/V Line insertion, RT insertion, Catheterization, preparation of Oxytocin drip, instillation of misoprostol or Cerviprime for induction of labour.

- d) Management of sick patients including those with Eclampsia, Abruptio & PPH
Assessment & shifting of sick patients to ICUs.
- e) Preparation of discharge summary
Preparation of weekly, monthly and annual stat.

7.5 Post Partum & Gynae Ward / Recovery:

- a) Care of post partum patients. Advise to post partum patients regarding breast feeding, immunization of baby & contraceptive advise to mother.
- b) History and workup of all gynae cases, examination of all patients, sending investigations and filling forms. Pre operative assessment and preparation of all patients before surgery. Aseptic dressing, suture removal.

7.6 Operation Theatre:

- a) Performing minor procedures like D&C, MTP, Endometrial biopsy, Cervical biopsy, Cryo Cautery, Electro cautery etc.
- b) Assisting major procedures listed above.

8. Suggested Books:

OBSTETRICS:

Sn	Must Read	Desirable to Read	Good to Read
1	Williams Obstetrics	Medical disorder in pregnancy by Deswriet	Creasy & Resnik's Maternal Fetal medicine
2	Obstetrics by Ian Donald	Arias, High risk pregnancy	

GYNAECOLOGY:

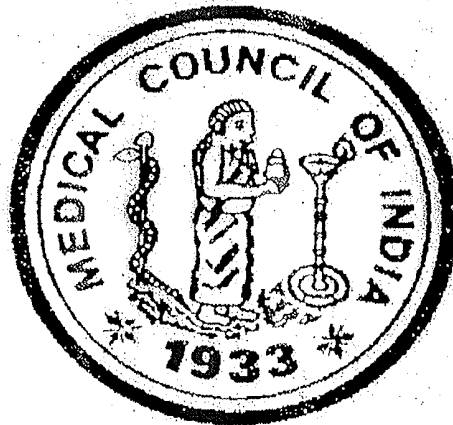
Sn	Must Read	Desirable to Read	Good to Read
1	Shaws textbook of gynaecology	Reproductive Endocrinology by Speroff	Bereks gynaecological oncology
2	Novacs Gynaecology	Telindes Operative Gynaecology	
3	Family Planning Practices by S K Chaudhary		

MCI Directive

1. AMENDED

3(e)

**MEDICAL COUNCIL OF INDIA
POSTGRADUATE MEDICAL EDUCATION
REGULATIONS, 2000**



(AMENDED UPTO JANUARY, 2017)

**MEDICAL COUNCIL OF INDIA
Pocket - 14, Sector 8, Dwarka,
NEW DELHI - 110 077**

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Website: <http://www.mciindia.org>

13.3 The Post Graduate students of the institutions which are located in various States / Union Territories shall be paid remuneration at par with the remuneration being paid to the Post Graduate students of State Government medical institutions / Central Government Medical Institutions, in the State/Union Territory in which the institution is located. Similar procedure shall be followed in the matter of grant of leave to Post Graduate students.

The above sub-clause 13.3 is substituted in terms of Gazette Notification published on 20.10.2008 and the same is as under:-

Clause 13.3

"The Post Graduate students undergoing Post Graduate Degree/Diploma/Super-Specialty course shall be paid stipend on par with the stipend being paid to the Post Graduate students of State Government Medical Institutions / Central Government Medical Institutions, in the State/Union Territory where the institution is located. Similarly, the matter of grant of leave to Post Graduate students shall be regulated as per the respective State Government rules."

- 13.4 (a) Every institution undertaking Post Graduate training programme shall set up an Academic cell or a curriculum committee, under the chairmanship of a senior faculty member, which shall work out the details of the training programme in each speciality in consultation with other department faculty staff and also coordinate and monitor the implementation of these training Programmes.
- (b) The training programmes shall be updated as and when required. The structured training programme shall be written up and strictly followed, to enable the examiners to determine the training undergone by the candidates and the Medical Council of India inspectors to assess the same at the time of inspection.
- (c) Post Graduate students shall maintain a record (log) book of the work carried out by them and the training programme undergone during the period of training including details of surgical operations assisted or done independently by M.S./M.Ch. candidates.
- (d) The record books shall be checked and assessed by the faculty members imparting the training.

The above sub-clause 13.4(d) is substituted in terms of Gazette Notification published on 20.10.2008 and the same is as under:-

Clause 13.4 (d)

"The Record (Log) Books shall be checked and assessed periodically by the faculty members imparting the training."

13.5 During the training for Degree / Diploma to be awarded in clinical disciplines, there shall be proper training in basic medical sciences related to the disciplines concerned; during the training for the degree to be awarded in basic medical sciences, there shall be training in applied aspects of the subject; and there shall be training in allied subjects related to the disciplines concerned. In all Post Graduate training programmes, both clinical and basic medical sciences, emphasis is to be laid on preventive and social aspects and

emergency care facilities for autopsies, biopsies, cytopsies, endoscopic and imaging etc. also be made available for training purposes. ²³

The above sub-clause 13.5 is substituted in terms of Gazette Notification published on 20.10.2008 and the same is as under:-

Clause 13.5

"During the training for award of Degree / Superspecialty/Diploma in clinical disciplines, there shall be proper training in Basic medical sciences related to the disciplines concerned; so also in the applied aspects of the subject; and allied subjects related to the disciplines concerned. In the Post Graduate training programmes including both Clinical and Basic medical sciences, emphasis has to be laid on Preventive and Social aspects. Emergency care, facilities for Autopsies, Biopsies, Cytopsies, Endoscopy and Imaging etc. shall also be made available for training purposes."

- 13.6 The Post Graduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.
- 13.7 Training in Medical Audit, Management, Health Economics, Health Information System, basics of statistics, exposure to human behaviour studies, knowledge of pharmaco - economics and introduction to non- linear mathematics shall be imparted to the Post Graduate students.
- 13.8 Implementation of the training programmes for the award of various Post Graduate degree and diplomas shall include the following:-
- (a) **Doctor of Medical (M.D.) / Master of surgery (M.S.)**
 - (i) **Basic Medical Sciences**

Lectures, Seminars, Journal Clubs, Group Discussions, Participation in laboratory and experimental work, and involvement in research studies in the concerned speciality and exposure to the applied aspects of the subject relevant to clinical specialities.
 - (ii) **Clinical disciplines**

In service training, with the students being given graded responsibility in the management and treatment of patients entrusted to their care; participation in Seminars, Journal clubs, Group Discussions, Clinical Meetings, Grand rounds, and Clinico - Pathological Conferences; practical training in Diagnosis and medical and Surgical treatment; training in the Basic Medical Sciences, as well as in allied clinical specialities.
 - (b) **Doctor of Medicine (D.M.) / Magister Chirurgiae (M.Ch.)**

The training programme shall be on the same pattern as for M.D. / M.S. in clinical disciplines; practical training including advanced Diagnostic, Therapeutic and Laboratory techniques, relevant to the subject of specialisation. For M.Ch. Candidates, there shall be participation in surgical operations.
 - (c) **Diplomas**

In - service training, with students being given graded clinical responsibility; Lectures, Seminars, Journal Clubs, Group Discussions and participation in

MUHS letter
on allied posting

Appendix 4



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

वणी रोड, म्हास्रुळ, नाशिक - ४२२ ००४

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E-mail: pgacademic@muhsnashik.com / Web: www.muhsnashik.com

Dr. S. H. Fugare

M. Sc., Ph. D.

Officiating Registrar

Ph.: 0253-2539199 / 2539239

No. MUHS/E-1/PG/ 797/2009.

Date: 08/06/2009

Circular

To,
The Dean/ Principal
All Medical Colleges,
affiliated to MUHS, Nashik

Sub :- Amendment in Allied Posting for MS (Obstetrics & Gynaecology) Course.

Ref :- 1) Academic Council Resolution No. 79/ 2009 dated 28/04/2009.

2) University Circular letter no. MUHS/PG/E-1/1246/08 dated 8/10/2008.

Sir/Madam,

With reference to the above cited subject, I am directed to state that the University had laid down Allied posting for MS (Obstetrics & Gynaecology) that was circulated to all affiliated Medical Colleges vide above cited letter no. 2. Consequently, it was brought to the notice of the University that there are variations in Allied posting laid down by the MCI & University.

Accordingly, the aforesaid matter, after due approval of Board of studies & Faculty of Medicine, has been reviewed by the Academic Council & it has decided to amend Allied posting for MS (Obstetrics & Gynaecology) course for 8 weeks, in accordance with MCI norms, which is stated as follows :

- i) Neonatology : 2 weeks
- ii) Anaesthesia : 2 weeks
- iii) Radiology : 2 weeks
- iv) Surgery : 2 weeks

In view of above, I am directed to request you kindly apprise about above amended guidelines to all concerned. Kindly note University Circular no. MUHS/PG/E-1/1246/08 dated 08/10/2008 hereby stands cancelled.

Yours faithfully

Sd/-
Officiating Registrar

Resolution No. 1.3.7.11 (i) of BOM-51/2017: Resolved that the following Bioethics topics in PG Curriculum are to be included for PG students of all specialization and a sensitization of these topics can be done during PG Induction programme:

- Concept of Autonomy
- Informed Consent
- Confidentiality
- Communication Skills
- Patient rights
- Withholding / Withdrawing life-saving treatment
- Palliative Care
- Issues related to Organ Transplantation
- Surgical Research and Surgical Innovation
- Hospital Ethics Committee
- Doctor-Patient relationship

All PG.
30 copies

Resolution No. 1.3.23 of BOM-51/2017: Resolved to implement a Structured Induction programme (07 days) for PG students. [Annexure-XLIV]



MGM INSTITUTE OF HEALTH SCIENCES
Navi Mumbai

Induction Program for newly admitted Postgraduate students

Day 1	<ul style="list-style-type: none"> • Address by Dean, Medical Suptd, Director (Academics) • Pre-test • Communication Skills • Universal Safety Precautions • Biomedical Waste Management • Infection Control Policy
Day 2	<ul style="list-style-type: none"> • Emergency services • Laboratory services • Blood Bank services • Medicolegal issues • Prescription writing • Adverse Drug Reaction • Handling surgical specimens
Day 3	<ul style="list-style-type: none"> • Principles of Ethics • Professionalism • Research Ethics • Informed Consent • Confidentiality • Doctor-Patient relationship
Day 4	<ul style="list-style-type: none"> • Research Methodology
Day 5	<ul style="list-style-type: none"> • Synopsis writing
Day 6	<ul style="list-style-type: none"> • Dissertation writing
Day 7	<ul style="list-style-type: none"> • Statistics
Day 7	<ul style="list-style-type: none"> • ATLS • Post-test

The Induction Program will be conducted in the first week of June.
Timing: 9.30 am to 3.30 pm

(Prof. Dr. Siddharth P. Dubhashi)
Director (Academics)

Resolution No. 4.5.4.2 of BOM-55/2018: Resolved to have 10 short notes out of 11 (10 marks each) in all the papers in university examination for PG courses including superspeciality. To be implemented from batch appearing in April/May 2019 examination onwards for MD/MS/Diploma and August/September 2019 examination onwards for superspeciality.

Resolution No. 4.13 of BOM-55/2018: Resolved as follows:-

- (i) Slow learners must be re-designated as potential learners.
- (ii) Students scoring less than 35% marks in a particular subjects/course in the 1st formative exam are to be listed as potential learners. These learners must be constantly encouraged to perform better with the help of various remedial measures.
- (iii) Students scoring more than 75% marks in a particular subjects/course in the 1st formative exam are to be listed as advanced learners. These learners must be constantly encouraged to participate in various scholarly activities.