

**T.C.**

**ISTANBUL MEDIPOL UNIVERSITY**

**INTERNATIONAL SCHOOL OF MEDICINE**



**OBSTETRICS AND GYNECOLOGY CLERKSHIP GUIDE**

**2021 - 2022**

**OBSTETRICS AND GYNECOLOGY CLERKSHIP GUIDE**

**CLERKSHIP DESCRIPTION**

Obstetrics and Gynecology Phase IV: Students will be given a total of 40 hours of theoretical courses during the semester. Students will be allowed to observe and participate to all examinations, implementations in the outpatient clinic, maternity ward, and operating room. Attendance and participation in practical studies and clinical training are mandatory during the clerkship. To take the final exam, it is mandatory to attend at least 80% of the theoretical courses. Students with more absenteeism are not taken to the exam due to the regulation.

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| **Education Period** | Year IV |
| **Clerkship Duration** | 5 weeks |
| **Training Place** | Medipol Mega University Hospital |
| **Instructors** | • Prof. Dr. Huriye Ayşe Parlakgümüs• Assoc. Prof. Dr. Başak Kaya • Dr. Emine Zeynep Yılmaz  |
| **The Head Instructor** | • Prof. Dr. Huriye Ayşe Parlakgümüs |

**THE AIM OF THE OBSTETRICS AND GYNECOLOGY CLERKSHIP**

To teach theoretical information about normal and abnormal pregnancy follow-up, normal and abnormal birth patterns, pregnancy-related complications, their diagnosis, and treatment approaches; benign and malign diseases of the female genital system; diagnosis and treatment approaches of these; physiological and pathological conditions of the menstrual cycle; types of diagnosis and treatment of infertility; about screening, diagnosis and treatment of contraception and gynecological malignancies.

**Learning Methods:**

* Theoretical Course (Online- Face to Face)
* Case-Based Presentations
* Presentations
* Clinical training/Outpatient clinic/Operating Room/Labor Room Training
* Practical Training on Mannequin

**THE LEARNING OBJECTIVES OF OBSTETRICS AND GYNECOLOGY CLERKSHIP**

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| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Ectopic pregnancies  | Recognizes the disease. | 1 |
| Sorts differential diagnoses. |
| Selects the patients to be referred to the obstetrics and gynecology department. |
| Describes possible locations and symptoms. |
| Describes the implantation mechanism. |
| Recalls beta hCG physiology. |
| Choses imaging methods for diagnosis. |
| Knows treatment and its alternatives. |
| Remembers the possibility of recurrence. |
| Pelvic Infections  | Knows the definition, etiology, risk factors and diagnostic methods. | 1 |
| Defines short- and long-term sequelae. |
| Knows diagnostic criteria. |
| Knows treatment options. |
| Knows the hospitalization criteria. |
| Diagnosis and Treatment of Premature Rupture of the Membranes | Describes premature birth. | 1 |
| Lists risk factors. |
| Knows maternal and fetal infection. |
| Evaluates fetal well-being. |
| Determines the time of birth. |
| Sorts treatment options. |
| Knows criteria for starting tocolysis treatment. |
| Urinary incontinence | Defines urinary incontinence. | 1 |
| Knows the types of urinary incontinence. |
| Lists complaints related urinary incontinence. |
| Knows the management of urinary incontinence. |
| Multiple Pregnancies  | Knows the incidence of multiple pregnancies. | 1 |
| Lists the risk factors for multiple pregnancies. |
| Knows the differences of monozygotic and dizygotic pregnancies. |
| Knows that the zygosity is determined by first trimester ultrasound.  |
| Defines the maternal and fetal risks of multiple pregnancies and knows the precautions to be taken. |
| Knows that multiple pregnancies should be referred to secondary or tertiary hospitals.  |
| Obstetric history taking, Examination and Diagnostic Methods | Can obtain obstetric history. | 1 |
| Can perform routine obstetric examination. |
| Knows about basic diagnostic methods. |
| Endometrial Hyperplasia | Recalls the anatomy and histology of the uterus. | 1 |
| Identifies endometrial pathologies. |
| Knows the etiology and signs and symptoms of endometrial hyperplasia. |
| Knows about the diagnostic methods and treatment options of the disease. |
| Pre-malignant Diseases of Cervix, Vulva, Vagina,  | Lists precancerous lesions of the cervix, vagina, and vulva. | 1 |
| Can make differential diagnosis. |
| Knows the risk factors. |
| Remembers pathogenesis of pre-malignant lesions. |
| Selects patients who have suspicious lesions need to be referred to the obstetrics and gynecology department. |
| Shows the necessity/importance of pap-smear test in cancer screening and knows how to make it. |
| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Etiology, Diagnosis and Treatment of Cervical Cancer  | Knows the prevalence, risk factors, differential diagnosis. | 1 |
| Describes the signs and symptoms and types of cervical cancer. |
| Knows the dissemination ways and stages of cervical cancer.  |
| Knows the instruments and imaging methods used in the diagnosis. |
| Recalls the related terms and statistics on disease survival. |
| Explains the treatment methods.  |
| Selects the patients to be referred to the obstetrics and gynecology department. |
| Obstetric Anatomy and Normal Birth 1,2 | Recalls the structure of the female pelvis (bones, muscles, vessels). | 2 |
| Describes functional anatomy of the internal and external genital organs. |
| Knows the diameters and constrictions of bony pelvis. |
| Describes the labor.  |
| Knows the phases of labor.  |
| Defines the stages of childbirth. |
| Knows normal and abnormal fetal presentations. |
| Knows normal and abnormal fetal presentations. (Leopold Maneuvers). |
| Knows pelvic constriction.  |
| Knows clinical pelvimetry.  |
| Knows the early signs of delivery.  |
| Describes the cardinal movements of the fetal head. |
| Intrapartum Fetal Evaluation and NST  | Knows the methods of fetal monitoring during labor. | 1 |
| Knows the purpose of intrapartum fetal monitoring. |
| Recognizes the parameters that are essential in NST evaluation. |
| Knows how to interpret NST. |
| Knows the management of fetal distress and supine hypotensive syndrome. |
| Diabetes Mellitus (DM) and Pregnancy | Knows the prevalence of gestational DM (GDM) and DM in pregnancy.  | 1 |
| Knows that all pregnant women should be screened for DM by fasting blood glucose at the first visit. |
| Knows that Type 1 DM patients should be given prenatal counseling and knows the optimal levels of HBA1c for healthy pregnancy. |
| Identifies hiMS-risk pregnant women for GDM. Is aware of the need for screening of GDM in the first trimester. |
| Knows that all low-risk pregnant women should be screened for GDM between 24 – 28 weeks.  |
| Knows which patients should be referred to the secondary or tertiary level hospitals. |
| Recurrent Pregnancy Losses (RPL) | Describes recurrent pregnancy loss (miscarriage/abortion). | 1 |
| Knows the etiology of RPL. |
| Knows the prognosis of RPL. |
| Termination of Pregnancy  | Knows the situations in which pregnancy should be terminated and legal issues related to termination.  | 1 |
| Knows the viability limit.  |
| Knows how fetal anomalies are diagnosed. Knows what abnormalities are severe and not compatible with life. |
| Puerperium and Related Diseases  | Knows the definition of puerperium. | 1 |
| Recalls the physiology of puerperium and lactation.  |
| Knows postpartum complications and treatment of them.  |
| Can provide care for puerperium. |
| Can give counselling for contraception. |
| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Post-term pregnancy and Perinatal Mortality | Can define post-term pregnancy and knows the prevalence of it.  | 1 |
| Knows the etiology. |
| Calculates the correct day of pregnancy by using the last menstrual date. |
| Knows the risks of post-term pregnancy.  |
| Knows management of post-term pregnancy. |
| Defines Bishop scoring. |
| Knows the diagnostic criteria for post maturity syndrome. |
| Family planning  | Explains the importance of family planning methods, traditional methods, and recommends modern methods. | 1 |
| Provides counselling for family planning. |
| Can list the side effects and possible risks of modern methods. |
| Can recommend methods suitable for the age of the patient, the number of children. |
| Discusses permanent and temporary methods. |
| Explains the family planning methods for male and female. |
| Remembers the non-contraceptive benefits of hormonal contraceptives. |
| Breech Delivery | Knows the frequency of breech delivery.  | 1 |
| Identifies the types of breech delivery and risk factors. |
| Can count the risks of breech delivery.  |
| When providing primary health care, can evaluate women with breech presentation that should be referred to an obstetrician. |
| Germ Cell Tumors  | Knows that ovarian germ cell tumors are more common in young women, diagnosed at early stages and has favorable prognosis.  | 1 |
| Knows the types of germ cell tumors arising from totipotent cells, signs and symptoms of germ cell tumors, diagnostic methods and markers used in germ cell tumors.  |
| Can make differential diagnosis of dysgerminomas and teratomas from other tumors. |
| Knows that the treatment consists of surgery and chemotheraPQ primarily. |
| Physiology of Reproduction and Menstruation  | Recalls physiology of menstrual cycle. | 1 |
| Can make differential diagnoses of menstrual cycle disorders. |
| Recalls embryological development. |
| Pregnancy Periods and Prenatal Evaluation | Defines trimesters. | 1 |
| Knows the tests to be performed during pregnancy. |
| Interprets the effects of preexisting diseases on pregnancy. |
| Endometriosis  | Discusses the pathogenesis of endometriosis. | 1 |
| Knows the symptoms of endometriosis and pre-diagnosis. |
| Selects the patient to be referred to the gynecologist.  |
| Situs and Presentation Abnormalities  | Defines normal fetal situs, presentation, position, and abnormal habitus. | 1 |
| Defines the terms abnormal fetal situs, malposition, malpresentation, abnormal habitus. |
| Lists the etiologies of abnormal presentations.  |
| Explains the complications that can develop in abnormal presentations. |
| Explains the findings of vaginal exam of cord presentation and describes that it is an emergency situation. |
| Defines the management and follow-up of situs and presentation anomalies. |

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| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Etiology and management of Pelvic Pain  | Identifies the patient who comes with pelvic pain. | 1 |
| Lists laboratory tests for pelvic pain  |
| Lists the causes of acute pelvic pain. |
| Knows the differential diagnosis of acute pelvic pain.  |
| Explains the diagnosis and management of ectopic pregnancy. |
| Knows diagnostic modalities used to diagnose ectopic pregnancy. |
| Can offer a management plan to ovarian torsion. |
| Knows the diagnosis and management of pelvic inflammatory disease.  |
| Menopause | Describes the mechanism of ovum formation and oocyte aging.  | 1 |
| Knows the physiology and stages of menopause. |
| Lists menopausal symptoms. |
| Lists the laboratory tests which is required for the differential diagnosis. |
| Knows the hormonal treatment of menopausal symptoms. |
| Describes the diagnosis and treatment of osteoporosis. |
| Knows urogenital aging and the effects of hormones on urogenital aging. |
| Drug Use in Pregnancy  | Lists the categories of commonly used drugs during pregnancy.Provides information about teratogenicity. | 1 |
| Lists the drugs that are contraindicated for pregnant women. Describes the hiMS-risk pregnancies regarding gestational weeks. |
| Knows how to search for the pregnancy risk categories of drugs. |
| Lists the deformities caused by commonly used teratogen drugs. DES, thalidomide, coumadin, phenytoin, etc.) |
| Evaluation of Fetal Well-Being  | Defines the well-being of the fetus. | 1 |
| Lists antenatal fetal well-being tests. |
| Refers to the situations in which the tests are used. |
| Knows how these tests are used for the management of labor.  |
| Screening tests and invasive diagnostic methods during pregnancy | Defines the purpose of prenatal diagnosis. | 1 |
| Lists screening tests during pregnancy, and the gestational weeks of these tests and biochemical markers used in these tests.  |
| Knows invasive methods used for prenatal diagnosis. |
| Screening Tests and Invasive Diagnostic Methods in Pregnancy  | Defines prenatal diagnosis purposes. | 1 |
| Identifies screening tests during pregnancy, knows in which gestational weeks the tests should be applied and sorts biochemical markers. |
| Determines prenatal diagnosis invasive methods. |
| Classification and Diagnosis of Obstetric Emergencies  | Differentiates the emergencies in obstetrics. | 1 |
| Lists the basic life support techniques. |
| Rh incompatibility | Defines Rh incompatibility and recalls its pathophysiological mechanism. | 1 |
| States that all pregnant women should be screened for blood group.  |
| Knows that anti-D should be given against Rh incompatibility within the first 72 hours in cases such as bleeding during pregnancy, miscarriage, and delivery. |
| Lists the laboratory tests and critical values of these tests for pregnant women with Rh incompatibility.  |
| Makes plan to refer the patient to the secondary of tertiary health care when the results of tests are within the critical values. |
| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Approach to Adnexal Masses  | Makes the definition of adnexa as concept, knows the origins of adnexal masses and lists the most common adnexal masses. | 1 |
| Knows the criteria for benign and malignant ovarian masses, diagnostic methods used for adnexal masses, diagnosis, and surgical treatment. |
| Knows that mortality is hiMS if adnexal masses are at an advanced stage. |
| IUGR | Measures the distance of symphysis pubis to fundus at the first level health care. | 1 |
| Lists the reasons that may cause the increase and decrease of the distance between symphysis pubis and fundus and refers to the secondary health care when necessary.  |
| Identifies hiMS-risk patients for IUGR. |
| Recalls that diseases that cause hiMS maternal morbidity and mortality, such as IUGR and preeclampsia, can be seen at the same time.  |
| Benign Diseases of the Uterus | Knows the prevalence of myoma uteri. | 1 |
| Knows the location of myomas.  |
| Knows the diagnosis and management of uterine myomas.  |
| Knows the difference between leiomyosarcoma and myoma. |
| Recalls that myomas can cause infertility and increase the amount of menstrual bleeding and lists the reasons.  |
| Describes the diagnosis and treatment of endometrial polyps. |
| Describes the diagnosis and treatment of adenomyosis. |
| Endometrial Cancer | Lists the frequency, age at diagnosis, symptoms, and risk factors for endometrial cancer. | 1 |
| Lists estrogen-dependent and estrogen-independent types of endometrial cancer. |
| Knows the methods used in differential diagnosis in postmenopausal bleeding. |
| Defines precancerous lesions and treatments for precancerous lesions of endometrium. |
| Has knowledge about endometrial cancer staging. |
| Knows the factors that affect survival. |
| Classification and Diagnosis of Gestational Trophoblastic Diseases | Describes gestational trophoblastic diseases (GTD). | 1 |
| Lists the diagnostic criteria of GTD. |
| Can list clinical and laboratory findings of GTD. |
| Classifies GTD. |
| Knows that in the presence of GTD, pregnant woman should be referred to secondary or tertiary health care institutions |
| Vulvar-Vaginal Cancers  | Knows the frequency, etiology, risk factors, age group, signs, and symptoms of vulvar and vaginal cancer. | 1 |
| Has knowledge that progression of precancerous lesions is possible.  |
| Knows that persistent vulvar itching refractory to treatment is an indication of vulvoscoPQ. |
| Lists histopathological types. |
| Knows the staging, treatment, and prognosis. |
| Refers to the vulva's Paget disease as an in-situ adeno cancer. |
| Remembers that vaginal cancer can also be seen in childhood. |
| Can differentiate between vaginal adenosis and adenocancer. |
| Postmenopausal Bleeding | Defines menopause. | 1 |
| Lists the etiology of bleeding during menopause. |
| Lists symptoms and diagnostic methods. |
| Lists their treatment. |

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| **Course Name** | **Learning Objective of the Theoretical / Practical part of the Course** | **Duration (hour)** |
| Amenorrhea | Can classify amenorrhea. | 1 |
| Knows the management of the patient with menstrual delay. |
| Lists diagnostic tests and selects the proper one. |
| Pelvic Organ Prolapse | Describes pelvic organ prolapse. | 1 |
| Classifies pelvic organ prolapse. |
| Lists the complaints related to pelvic organ prolapse.  |
| Knows the treatment of pelvic organ prolapse. |
| Gynecological Emergencies 1,2 | Knows the differential diagnosis of gynecological emergencies. | 2 |
| Describes the diseases related to gynecological emergencies. |
| Predicts the management and treatment of gynecological emergencies. |
| Provides differential diagnosis of gynecological emergencies in patients admitted to the emergency room. |
| Identifies gynecological emergencies. |
| Knows management and treatment of gynecological emergencies. |
| Gynecological Examination and Diagnostic Methods | Performs gynecological examination. | 1 |
| Selects the proper tests according to the complaint. |
| Can take history.  |
| Can make breast examination.  |
| Can make pap-smear test. |
| Defines dilation and curettage and types of dilation and curettage.  |
| Knows for what biopsy is done.  |
| Defines the types of biopsies. |
| Abnormal Uterine Bleeding | Can list the etiology of abnormal uterine bleeding in different age groups. | 1 |
| Knows the meaning of Palm-COEIN acronym. |
| Can give information about the examinations to be performed to determine the cause of abnormal uterine bleeding. |
| Lists the basic treatment methods given in different etiologies. |
| Epithelial Ovarian Cancer and Fallopian Tube Cancers | Remembers the histopathological classification of ovarian cancers. | 1 |
| Defines borderline ovarian cancer. |
| Lists the factors which increase and decrease the risk for ovarian cancer. |
| Lists its signs and symptoms and diagnostic methods. |
| Can offer a treatment plan. |
| Remembers that the approach to tubal cancer and epithelial ovarian cancer are similar. |

**RELATED LEARNING OBJECTIVES WITH PROGRAM QUALIFICATIONS AND KEY ROLES**

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| **CLERKSHIP LEARNING OBJECTIVE** | **RELATED PROGRAM QUALIFICATIONS** | **BASIC ROLE** | **TEPDAD\* GENERAL MEDICINE SKILLS** |
| **R1-Medical Doctor R2-Team Employee****R3-Communicater****R4-Leader****R5-Health Advocate****R6-Scientist****R7-Professional** | **MS1- Analytical and Critical Thinking****MS2-Clinical Inquiry-Reasoning** **MS3-Problem Solving****MS4-Accessing and Using Information****MS5-Lifelong Learning****MS6-Communication and Teamwork** |
| Remembers anatomy, physiology, histology related to obstetrics and gynecology. | PQ1 | R1 |   |
| Creating a differential diagnosis list with using effective communication for anamnesis, physical examination, and tests. | PQ1, PQ6, PQ11, PQ14 | R1, R3, R7,  | MS1, MS2, MS3, MS6 |
| Explains the physiology, causes and symptoms of urogynecological system and relations with other systems. | PQ1, PQ2 | R1, R7 | MS1, MS2, MS3 |
| Explains and interprets the common clinical, laboratory and pathological findings of gynecological and obstetric diseases. | PQ1, PQ2, PQ14 | R1, R7 | MS1, MS2, MS3, |
| Explains the general epidemiological characteristics and preventive medicine practices related to sexually transmitted diseases. | PQ1, PQ3, PQ14 | R1, R5 | MS4, MS5 |
| Explains and implements preventions to reduce the prevalence of gynecological and obstetric diseases in society. | PQ1, PQ3, PQ14 | R1, R3, R5 | MS4, MS5 |
| Considers gynecological diseases such as endometriosis, myoma uteri, prolapse uteri or gynecological cancers, as well as obstetric diseases such as placenta previa, gestational diabetes, Rh incompatibility, preeclampsia, or recurrent pregnancy loss, as a preliminary diagnosis with the findings of physical examination and refers it to related specialist. | PQ1, PQ2, PQ5, PQ6 | R1 | MS1, MS2, MS3 |
| **CLERKSHIP LEARNING OBJECTIVE** | **RELATED PROGRAM QUALIFICATIONS** | **BASIC ROLE** | **TEPDAD GENERAL MEDICAL SKILLS** |
| **R1-Medical Doctor R2-Team Employee****R3-Communicater****R4-Leader****R5-Health Advocate****R6-Scientist****R7-Professional** | **MS1- Analytical and Critical Thinking****MS2-Clinical Inquiry-Reasoning** **MS3-Problem Solving****MS4-Accessing and Using Information****MS5-Lifelong Learning****MS6-Communication and Teamwork** |
| Explains the criteria for further examination and referral of gynecological and obstetric diseases. | PQ1, PQ2, PQ5, PQ6, PQ7, PQ14 | R1, R7 | MS6 |
| Describes labor and the stages of vaginal labor, recognizes complications. | PQ1, PQ2, PQ5, PQ6, PQ7, PQ14 | R1, R5, R7 | MS1, MS2, MS3, MS6 |
| Learns early diagnosis of some gynecological cancers and refers to the related advanced centers. | PQ1, PQ2, PQ5, PQ6, PQ7, PQ14 | R1, R5, R7 | MS1, MS2, MS3, MS6 |
| Diagnose and follow-up menopausal problems. | PQ1, PQ2, PQ5, PQ6, PQ7, PQ14 | R1, R5, R7 | MS1, MS2, MS3, MS6 |
| Lists effective contraception methods, informs the patient, and supports patient for the proper method. | PQ1, PQ2, PQ5, PQ6, PQ7, PQ14 | R1, R5, R7 | MS1, MS2, MS3, MS6 |
| Explains the preventions to reduce the risk factors and frequency of sexually transmitted diseases and provides counseling service. | PQ3, PQ4, PQ8, PQ14 | R1, R5 | MS4, MS6 |
| Provides the necessary information and counseling on the use of cigarettes, drugs, and alcohol during pregnancy to the society. | PQ3, PQ8, PQ12, PQ14 | R4, R5 | MS4, MS6 |
| Performs the treatment of certain gynecological system diseases, such as acute vaginitis, which has prescribed, or follows-up the normal pregnancy at the primary level. | PQ1, PQ6, PQ7 | R1, R3, R7 | MS2, MS6 |
| Performs urogynecological system examination. | PQ1, PQ6, PQ7 | R1, R3, R7 | MS2, MS6 |
| Performs blood pressure measuring, vaginal examination during labor, diagnosing cervical opening, taking cervical smear. | PQ1, PQ6, PQ7 | R1, R7 | MS2, MS6 |
| Manages normal labor on the mannequin. | PQ1, PQ6, PQ7 | R1, R7 | MS2, MS6 |
| **CLERKSHIP LEARNING OBJECTIVE** | **RELATED PROGRAM QUALIFICATIONS** | **BASIC ROLE** | **TEPDAD GENERAL MEDICAL SKILLS** |
| **R1-Medical Doctor R2-Team Employee****R3-Communicater****R4-Leader****R5-Health Advocate****R6-Scientist****R7-Professional** | **MS1- Analytical and Critical Thinking****MS2-Clinical Inquiry-Reasoning** **MS3-Problem Solving****MS4-Accessing and Using Information****MS5-Lifelong Learning****MS6-Communication and Teamwork** |
| Diagnoses vaginitis, cystitis, abnormal uterine bleeding and sexually transmitted diseases with physical examination and appropriate diagnostic tests and plans treatment within the scope of rational drug use principles. | PQ1, PQ2, PQ3, PQ6, PQ7, PQ11, PQ14, PQ18 | R1, R5, R7 | MS1, MS2, MS3, MS6 |
| Uses diagnostic methods step by step from simple to complex. | PQ1, PQ2, PQ7, PQ8, PQ18 | R1, R5, R7 | MS1, MS2, MS3 |
| Applies the principles of rational drug use. | PQ1, PQ2, PQ3, PQ7, PQ8, PQ18 | R1, R5, R7 | MS1, MS2, MS3 |
| Communicates effectively in writing and verbally with patients, their relatives, and colleagues. | PQ14 | R1, R3, R7 | MS6 |
| Explains the principles to be considered when providing community counseling services. | PQ4, PQ12, PQ13, PQ14, PQ15, PQ16, PQ17 | R1, R2, R4, R5, R7 | MS6 |
| Cares of human and patient’s riMSts providing medical services and adopts the principles of protection of personal data. | PQ18, PQ19 | R1, R3, R7 | MS6 |
| Explains legal responsibilities in cases of organ loss, such as hysterectomy and oophorectomy. | PQ11, PQ14, PQ18 | R1, R7 | MS6 |
| During providence of family medicine, recognizes and reports mandatory diseases at the primary level. | PQ11, PQ14, PQ18 | R1, R3, R6 | MS4, MS5 |

**CORE EDUCATION PROGRAM TABLE FOR WOMEN'S DISEASES AND MATERNITY** **CLERKSHIP**

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| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **ABDOMINAL DISTENTION** | Pelvic Mass | 1. Ectopic Pregnancies2. Pelvic Infections3. Pelvic Pain Etiology and Approach4. Approach to Adnexal Masses5. Gynecological Emergencies 1,26. Gynecological Examination Procedures and Diagnostic Methods  | PR DT | Written-Oral |
| **ORAL LESIONS** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **AMENORRHEA** | Polycystic Ovary Syndrome | 1. Hirsutisms and Hyperandrogenism2. Abnormal Uterine Bleeding3. Chronic anovulation, PCOS4. Amenorrhea | PR F | Written-Oral |
| **AMENORRHEA** | Endometriosis | 1. Endometriosis2. Pelvic Pain Etiology and Approach3. Approach to Adnexal Masses 4. Gynecological Emergencies 1,2 | PR D E | Written-Oral |
| **AMENORRHEA** | Ectopic Pregnancy | 1. Ectopic Pregnancies 2. Obstetric Anamnesis, Examination and Diagnosis Methods3. Classification and Diagnosis of Obstetric Emergencies  | DT F P  | Written-Oral |
| **ANXIETY** | Premenstrual Syndrome | Premenstrual Syndrome and Dysmenorrhea | DT P | Written-Oral |
| **FEVER** | Urinary Tract Infections | 1. Pelvic Infections2. Diagnosis and Treatment of Premature Rupture of the Membranes 3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **MENTAL STATUS CHANGES** | Eclampsia, Preeclampsia, HELLP Syndrome | Hypertensive Diseases of Pregnancy  | D E | Written-Oral |
| **NAUSEA, VOMITING** | Urinary Tract Infections | 1. Pelvic Infections 2. Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **NAUSEA, VOMITING** | Hyperemesis Gravidarum | 1.Cycle and Menstruation2.Obstetric Emergencies3.Maternal Physiology and Endocrinology | DT F P | Written-Oral |
| **DYSMENORRHEA** | Genital Infections | Pelvic Infections  | D P | Written-Oral |
| **DYSMENORRHEA** | Polycystic Ovary Syndrome | 1. Hirsutism and Hyperandrogenism2. Abnormal Uterine Bleeding3. Chronic Anovulation, PCOS4. Amenorrhea | PR F | Written-Oral |
| **DYSMENORRHEA** | Endometriosis | 1. Endometriosis2. Pelvic Pain Etiology and Approach3. Approach to Adnexal Masses 4. Gynecological Emergencies 1,2 | PR E D | Written-Oral |
| **DYSMENORRHEA** | Pelvic Mass | 1. Ectopic Pregnancies2. Pelvic Infections3. Pelvic Pain Etiology and Approach4. Approach to Adnexal Masses5. Gynecological Emergencies 1,26. Gynecological Examination Procedures and Diagnostic Methods  | PR DT | Written-Oral |
| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **DYSURIA** | Urinary Tract Infections | 1. Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P  | Written-Oral |
| **DYSURIA** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **DYSURIA** | Genital Infections | Pelvic Infections  | D P  | Written-Oral |
| **ENURESIS** | Urinary Tract Infections | 1. Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **GENITAL LESION** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **GENITAL LESION** | Genital Infections | Pelvic Infections  | D P | Written-Oral |
| **HEMATURIA** | Urinary Tract Infections | 1.Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3.Urinary Incontinence 4.Classification and Diagnosis of Obstetric Emergencies5.Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7.Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **HYPERTENSION** | Eclampsia, Preeclampsia, HELLP Syndrome | Hypertensive Diseases of Pregnancy  | D E | Written-Oral |
| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **HIRSUTISM** | Polycystic Ovary Syndrome | 1. Hirsutisms and Hyperandrogenism2. Abnormal Uterine Bleeding3. Chronic Anovulation, PCOS4. Amenorrhea | PR F | Written-Oral |
| **URINARY RETENTION** | Cervical Cancer | 1. Premalignant Diseases of Cervix, Vulva and Vagina2. Cervical Cancer Etiology, Diagnosis and Treatment 3. Screening of Genital Cancers and Tumor Markers  | PR D P | Written-Oral |
| **INFERTILITY (Male, Female)** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **INFERTILITY (Male, Female)** | Genital Infections | Pelvic Infections  | DP | Written-Oral |
| **INFERTILITY (Male, Female)** | Polycystic Ovary Syndrome | 1. Hirsutisms and Hyperandrogenism2. Abnormal Uterine Bleeding3. Chronic Anovulation, PCOS4. Amenorrhea | DR F | Written-Oral |
| **INFERTILITY (Male, Female)** | Endometriosis | 1. Endometriosis2. Pelvic Pain Etiology and Approach3. Approach to Adnexal Masses 4. Gynecological Emergencies 1,2 | PR D E | Written-Oral |
| **ABDOMINAL PAIN** | Premenstrual Syndrome | Premenstrual Syndrome and Dysmenorrhea | DT P | Written-Oral |
| **ABDOMINAL PAIN** | Urinary Tract Infections | 1. Pelvic Infections 2. Early Membrane Rupture Diagnosis and Treatment 3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P  | Written-Oral |
| **ABDOMINAL PAIN** | Ectopic Pregnancy | 1. Ectopic Pregnancies 2. Obstetric Anamnesis, Examination and Diagnosis Methods3. Classification and Diagnosis of Obstetric Emergencies  | DT F P | Written-Oral |
| **SEIZURES** | Eclampsia, Preeclampsia, HELLP Syndrome | Hypertensive Diseases of Pregnancy  | D E | Written-Oral |
| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **EDEMA** | Eclampsia, Preeclampsia, HELLP Syndrome | Hypertensive Diseases of Pregnancy  | D E | Written-Oral |
| **PELVIC PAIN** | Premenstrual Syndrome | Premenstrual Syndrome and Dysmenorrhea | DT P | Written-Oral |
| **PELVIC PAIN** | Urinary Tract Infections | 1. Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **POLLAKIURIA / NOCTURIA** | Urinary Tract Infections | 1. Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies,5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **HAIR LOSS** | Polycystic Ovary Syndrome | 1. Hirsutism and Hyperandrogenism2. Abnormal Uterine Bleeding3. Chronic Anovulation, PCOS4. Amenorrhea | DT P | Written-Oral |
| **URETHRAL DISCHARGE** | Urinary Tract Infections | 1. Pelvic Infections 2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary Incontinence 4. Classification and Diagnosis of Obstetric Emergencies,5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment 7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **URETHRAL DISCHARGE** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **URETHRAL DISCHARGE** | Genital Infections | Pelvic Infections  | D P | Written-Oral |
| **SYMPTOMS/CONDITIONS** | **CORE DISEASES / CLINICAL PROBLEMS** | **NAME OF THE PHASE 4 LECTURE** | **LEVEL OF LEARNING** | **MEASUREMENT-ASSESSMENT** |
| **URINARY INCONTINANCE** | Urinary Tract Infections | 1. Pelvic Infections2. Diagnosis and Treatment of Premature Rupture of the Membranes3. Urinary incontinence. 4. Classification and diagnosis of obstetric emergencies. 5. Chronic Anovulation, PCOS6. Preterm Labor Diagnosis and Treatment7. Gynecological Emergencies 1,2 | DT P | Written-Oral |
| **URINARY INCONTINENCE** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **URINARY INCONTINENCE** | Genital Infections | Pelvic Infections  | DT P | Written-Oral |
| **VAGINAL DISCHARGE** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **VAGINAL DISCHARGE** | Genital Infections | Pelvic Infections  | DT P | Written-Oral |
| **VAGINAL DISCHARGE** | Cervical Cancer | 1. Premalignant Diseases of Cervix, Vulva and Vagina2. Cervical Cancer Etiology, Diagnosis and Treatment 3. Screening of Genital Cancers and Tumor Markers | D P | Written-Oral |
| **VAGINAL BLEEDING (Postpartum in Pregnancy, Postmenopausal, Others)** | Sexually Transmitted Infections | Pelvic Infections  | DT P | Written-Oral |
| **VAGINAL BLEEDING (Postpartum in Pregnancy, Postmenopausal, Others)** | Genital Infections | Pelvic Infections  | DT P | Written-Oral |
| **VAGINAL BLEEDING (Postpartum in Pregnancy, Postmenopausal, Others)** | Cervical Cancer | 1. Premalignant Diseases of Cervix, Vulva and Vagina2. Cervical Cancer Etiology, Diagnosis and Treatment 3. Screening of Genital Cancers and Tumor Markers | D P | Written-Oral |
| **VAGINAL BLEEDING (Postpartum in Pregnancy, Postmenopausal, Others)** | Ectopic Pregnancy | 1. Ectopic Pregnancies 2. Obstetric Anamnesis, Examination and Diagnosis Methods3. Classification and Diagnosis of Obstetric Emergencies  | DT P F | Written-Oral |
| **VAGINAL BLEEDING (Postpartum in Pregnancy, Postmenopausal, Others)** | Miscarriage | 1. Obstetric Anamnesis, Examination and Diagnosis Methods2. Miscarriage; Etiology Diagnosis and Treatment 3. Classification and Diagnosis of Obstetric Emergencies | DT | Written-Oral |

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| **LEVEL OF LEARNING**  | **EXPLANATION** |
| **E** | Can recognize any emergency and administer emergency treatment; refer to the specialist if necessary |
| **PR** | Can establish diagnosis and implement essential initial procedures & refer to the specialist |
| **D** | Can establish the diagnosis and have knowledge about the treatment; implement essential initial procedures & refer to the specialist |
| **DT** | Can establish the diagnosis and treat the disease/condition |
| **F** | Can provide a long-term follow-up and management of the disease/condition in primary care setting  |
| **P** | Can apply preventive [appropriate one(s) of primary, secondary, and tertiary] measures |

**Fundamental Practices of Medicine in Obstetrics and Gynecology Clerkship**

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| **PRACTICE** | **NAME OF PRACTICE** | **NAME OF THE PHASE IV LECTURE** | **LEVEL OF LEARNING** |
| **OBTAINING HISTORY**  | Obtaining a general and problem-oriented history  | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **OBTAINING HISTORY** | Assessing mental state | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Forensic case examination | Gynecological Examination Procedures and diagnostic methods  | 1 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Abdominal examination | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Pregnancy examination | Obstetric anamnesis, examination, and diagnosis methods  | 3 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Evaluation of general medical condition and vital signs | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Gynecological examination | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Breast and axillar examination | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **GENERAL AND PROBLEM-ORIENTED PHYSICAL EXAMINATION** | Urological examination | Gynecological Examination Procedures and diagnostic methods  | 3 |
| **LABORATORY TESTS AND OTHER RELATED PROCEDURES** | To be able to examine and evaluate vaginal discharge sample (urogenital infection screening, preparation, and care of fresh preparations) | Gynecological Examination Procedures and diagnostic methods  | 3 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Being able to care for the mother after childbirth | Puerperium and diseases | 3 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Hand washing | + | 4 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES**  | Making and repairing episiotomy  | Obstetric anatomy and normal labor 1-2  | 2 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Following pregnancy and postpartum period | 1. Pregnancy periods and prenatal evaluation 2. Obstetric anatomy and normal labor 1-2 3. Puerperium and diseases | 3 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Ability to placement of a urine catheter | + | 3 |
| **PRACTICE** | **NAME OF PRACTICE** | **NAME OF THE PHASE IV LECTURE** | **LEVEL OF LEARNING** |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Being able to management of labor | 1. Pregnancy periods and prenatal evaluation 2. Obstetric anatomy and normal labor 1-2  | 2 |
| **INVASIVE AND** **NON-INVASIVE PROCEDURES** | Taking vaginal and cervical samples | Gynecological Examination Procedures and diagnostic methods  | 3 |
| **PREVENTIVE AND COMMUNITY MEDICINE PRACTICES** | Contraception counseling | Contraception  | 4 |
| **PREVENTIVE AND COMMUNITY MEDICINE PRACTICES** | To be able to counsel breastfeeding methods | Puerperium and diseases  | 4 |
| **PREVENTIVE AND COMMUNITY MEDICINE PRACTICES** | Being able to teach a breast exam on patient’s own | Gynecological Examination Procedures and diagnostic methods  | 4 |
| **PREVENTIVE AND COMMUNITY MEDICINE PRACTICES** | To be able to counsel suitable contraception methods correctly and follow-up | Contraception  | 3 |

**Measurement-Assessment Methods of Obstetrics and Gynecology Clerkship**

At the end of each clerkship, for measurement and assessment, theoretical and practical exams will be organized according to the level of importance within the scope of CEP. At the end of the clerkship, theoretical exam (multiple choice questions) and practical exam (on the **mannequin**) will be held. The clerkship grade will be given by taking the average of both exams.

**CALCULATION OF CLERKSHIP SUCCESS RATING**

|  |  |
| --- | --- |
| **Exam Type** | **Percentage** |
| **Theoretical Exam (Multiple Choice questions)** | 50% |
| **Oral Exam**  | 40% |
| **Practical Exam (on the Mannequin)** | 10% |

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| **LECTURE** | PRACTICE |
| **Case-Based Learning** | Contraceptive Method Selection on a Patient Basis |
| Cervical Cancer Screening  |
| Approach to Adnexal Masses |
| Gynecological Emergencies and Acute Abdominal Pain |
| Non-Invasive and Invasive Antenatal Examinations |
| Intrapartum follow-up and Fetal monitoring |
| Postpartum patient follow-up |
| Obstetric emergencies |

**RECOMMENDED RESOURCES FOR OBSTETRICS AND GYNECOLOGY CLERKSHIP**

1. Williams Obstetrics, Nobel Medical Bookstores
2. Williams Gynecology, Third Edition by Barbara L. Hoffman, John O Schorge, Karen D Bradshaw, Lisa M. Halvorson, Joseph I. Schaffer, Marlene M. Corton
3. CURRENT Diagnosis & Treatment: Obstetrics & Gynecology, 11e Alan H. DeCherney, Lauren Nathan, Neri Laufer, Ashley S. Roman