

# Republic of Yemen

## Ministry of Higher Education & Scientific Research

### 21 SEPTEMBER UNIVERSITY of MEDICALS & APPLIED SCIENCES



## Faculty of Medicine

### Bachelor Program of Medicine and Surgery

## Course Specification of Obstetrics & Gynecology Block I Block Code. (A21P411)

(1<sup>st</sup> Course)

2022/2023



T4: This Template is Developed and Approved by CAQA-Yemen, 2023

| Prepared by:      | Reviewed by:         | Head of department    | Quality Unit:            | Dean of Medicine Faculty | Center of Development and Quality Assurance Dean |
|-------------------|----------------------|-----------------------|--------------------------|--------------------------|--|
| Dr. Amal AL-asoli | Dr. Salwa Al-Ghomeri | Dr. Muneerah Al-fayik | Dr. Fadhl Shujaa Al-deen | Dr. Salwa Al-Ghomeri     |  |

## I. General Information:

|     |  |  |                      |                  |                         |          |
|-----|--|--|----------------------|------------------|-------------------------|----------|
| 1.  | Course Title:                                    | <b>Obstetrics &amp; Gynecology Block I</b><br><b>(1<sup>st</sup> Course)</b> |                      |                  |                         |          |
| 2.  | Block Code:                                      | A21P411  |                      |                  |                         |          |
| 3.  | Credit Hours:                                    | Credit Hours   | Theory Contact Hours |                  | Practical Contact Hours |          |
|     |  |  | Lecture              | Tutorial/Seminar | Lab                     | Clinical |
|     |  | 4  | 2                    | --               |                         | 6        |
| 4.  | Level/ Semester at which this Course is offered: | 4 <sup>th</sup> Level / 1 <sup>st</sup> Semester                             |                      |                  |                         |          |
| 5.  | Pre –Requisite (if any):                         | All systems  |                      |                  |                         |          |
| 6.  | Co –Requisite (if any):                          | None   |                      |                  |                         |          |
| 7.  | Program (s) in which the Course is Offered:      | Bachelor of Medicine and surgery   |                      |                  |                         |          |
| 8.  | Language of Teaching the Course:                 | English  |                      |                  |                         |          |
| 9.  | Location of Teaching the Course:                 | Faculty of Medicine  |                      |                  |                         |          |
| 10. | Prepared by:                                     | <b>DR. Amal AL-asoli</b>   |                      |                  |                         |          |
| 11. | Date and Number of Approval by Council:          | 2023   |                      |                  |                         |          |

## II. Course Description:

The course is the first course of Obstetrics & Gynecology which spans 4 courses over 2 years. It will provide to students of knowledge and skills on Obstetric and covers topics in obstetrics involves medical history and examination, Antenatal care, Normal fetal development and growth, Assessment of fetal wellbeing, Prenatal diagnosis, Antenatal obstetric complications, Multiple pregnancy, Preterm labour, Hypertensive disorders of pregnancy and Medical complications of

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pregnancy also focuses on the practical application on assessment, diagnosing and treating cases during pregnancy.

| III. Course Intended Learning Outcomes (CILOs) :<br>Upon successful completion of the course, students will be able to: |   | Referenced PILOs            |    |  |
|---|---|-----------------------------|----|--|
| <b>A. Knowledge and Understanding:</b>  |   | <b>*I, P<br/>or<br/>M/A</b> |    |  |
| a1  | Describe the normal physiology of pregnancy and labor   | I                           | A1 | Describe the general and basic sciences related to human body structure and functions with emphasis on normal and abnormal conditions.   |
| a2  | Identify the etiology, pathogenesis, clinical manifestation, diagnosis , differential diagnosis and complication of different Obstetrics and Gynecology problem | p                           | A3 | Explain the pathological and pathogenesis changes in various diseases, and their etiological triggers including genetic, developmental, infectious, metabolic, endocrinal, autoimmune, neoplastic, traumatic, degenerative and occupational factors. |
| <b>B. Intellectual Skills:</b>  |   |                             |    |  |
| b1  | Distinguish between physiological and pathological performance of body cells.   | p                           | B1 | Compare between normal and abnormal conditions and predict the appropriate treatment or intervention.  |
| b2  | Analyze data obtained from medical history, physical examination and Para clinical investigations to reach a final diagnosis and plan the management of         | P                           | B2 | Analyze and interpret the finding from history, clinical examination and investigations to propose a diagnosis and develop a shared  |

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|  | patients with common Obstetric and Gynecology problems.   |   |    | management plan for common acute, chronic and urgent physical and mental health presentations.  |
| <b>C. Professional and Practical Skills:</b> |   |   |    |   |
| c1   | Perform patient centered history taking, physical examination and investigations for Obstetrics and Gynecology conditions                                 | M | C1 | Perform complete clinical examination and precise investigations to reach the final diagnosis.  |
| c2   | Apply common laboratory procedures, investigations, and basic interventions that are necessary in relevant Obstetrics and Gynecology conditions.          | A | C3 | Carry out routine medical procedure and demonstrate the ability of using common medical tools required for diagnosis and management with highly qualified competency. |
| <b>D. Transferable Skills:</b>               |   |   |    |   |
| d1   | Communicate clearly and effectively with patients, their families, health care professionals and the community through verbal, written or digital methods | P | D1 | Communicate with professionals, patients, their families and the community through verbal, written and other non-verbal means.  |
| d2   | Act independently or collaboratively as a member of teamwork and communicate effectively with others.   | P | D2 | Work individually or in a team and develop lifelong learning using up to date technology that help in understanding the diseases and its control and prevention.      |

\* I= Introduced, P=Practiced or M/A= Mastered/Advanced

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**(A) Alignment of Course Intended Learning Outcomes (Knowledge and Understanding) to Teaching Strategies and Assessment Methods:**

| Course Intended Learning Outcomes   | Teaching Strategies   | Assessment Strategies  |
|---|---|--|
| a1<br>Describe the normal physiology of pregnancy and labor   | <ul style="list-style-type: none"> <li>▪ Interactive lectures</li> <li>▪ Discussion</li> <li>▪ Office hours</li> <li>▪ Self-learning</li> </ul>                         | <ul style="list-style-type: none"> <li>▪ Quizzes</li> <li>▪ Final Theoretical Exam</li> </ul>                                |
| a2<br>Identify the etiology, pathogenesis, clinical manifestation, diagnosis , differential diagnosis and complication of different Obstetrics and Gynecology problem | <ul style="list-style-type: none"> <li>▪ Interactive lectures</li> <li>▪ Discussion</li> <li>▪ Case studies</li> <li>▪ Office hours</li> <li>▪ Self learning</li> </ul> | <ul style="list-style-type: none"> <li>▪ Quizzes</li> <li>▪ Final Theoretical Exam</li> <li>▪ Final clinical exam</li> </ul> |

**(B) Alignment of Course Intended Learning Outcomes (Intellectual Skills) to Teaching Strategies and Assessment Methods:**

| Course Intended Learning Outcomes  | Teaching Strategies  | Assessment Strategies  |
|--|--|--|
| b1<br>Distinguish between physiological and pathological performance of body cells.  | <ul style="list-style-type: none"> <li>▪ Interactive lectures</li> <li>▪ Seminars</li> <li>▪ Discussion</li> <li>▪ Case studies</li> </ul> | <ul style="list-style-type: none"> <li>▪ Final Theoretical Exam</li> <li>▪ Final clinical exam</li> <li>▪ Oral discussion</li> </ul> |
| b2<br>Analyze data obtained from medical history, physical examination and Para clinical investigations to reach a final diagnosis and plan the management of patients with common Obstetrics and Gynecology problems. | <ul style="list-style-type: none"> <li>▪ Interactive lectures</li> <li>▪ Seminars</li> <li>▪ Discussion</li> <li>▪ Case studies</li> </ul> | <ul style="list-style-type: none"> <li>▪ Final Theoretical Exam</li> <li>▪ Final clinical exam</li> <li>▪ Oral discussion</li> </ul> |

**(C) Alignment of Course Intended Learning Outcomes (Professional and Practical Skills) to Teaching Strategies and Assessment Methods:**

| Course Intended Learning Outcomes                       | Teaching Strategies  | Assessment Strategies   |
|---|--|---|
| c1<br>Perform patient centered history taking, physical | <ul style="list-style-type: none"> <li>▪ Training</li> <li>▪ Case studies</li> </ul> | <ul style="list-style-type: none"> <li>▪ Final clinical exam</li> <li>▪ OSCE</li> </ul> |

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|  |   |   |   |
|--|---|---|---|
|  | examination and investigations for Obstetrics and Gynecology conditions   |   |   |
| c2   | Apply common laboratory procedures, investigations, and basic interventions that are necessary in relevant Obstetrics and Gynecology conditions.          | <ul style="list-style-type: none"> <li>▪ Training</li> <li>▪ Case studies</li> </ul>  | <ul style="list-style-type: none"> <li>▪ Final clinical exam</li> <li>▪ OSCE</li> </ul>                     |
| <b>(D) Alignment of Course Intended Learning Outcomes (Transferable Skills) to Teaching Strategies and Assessment Methods:</b> |   |   |   |
|  | <b>Course Intended Learning Outcomes</b>  | <b>Teaching Strategies</b>  | <b>Assessment Strategies</b>  |
| d1   | Communicate clearly and effectively with patients, their families, health care professionals and the community through verbal, written or digital methods | <ul style="list-style-type: none"> <li>▪ Seminars</li> <li>▪ Discussion</li> <li>▪ Case studies</li> <li>▪ Self-learning</li> </ul> | <ul style="list-style-type: none"> <li>▪ Oral discussion</li> <li>▪ Homework</li> <li>▪ Teamwork</li> </ul> |
| d2   | Act independently or collaboratively as a member of teamwork and communicate effectively with others.   | <ul style="list-style-type: none"> <li>▪ Seminars</li> <li>▪ Discussion</li> <li>▪ Case studies</li> <li>▪ Self-learning</li> </ul> | <ul style="list-style-type: none"> <li>▪ Oral discussion</li> <li>▪ Homework</li> <li>▪ Teamwork</li> </ul> |

#### IV. Course Contents:

##### A. Theoretical Aspect:

| No. | Units/Topics List  | Sub Topics List  | Number of Weeks   | Contact Hours | Learning Outcomes (CILOs) |
|-----|--|--|-------------------|---------------|---------------------------|
| 1   | <ul style="list-style-type: none"> <li>- Medical ethics in obstetrics</li> <li>- Anatomy of the female pelvis and fetal skull</li> </ul> | <ul style="list-style-type: none"> <li>• A systematic approach to ethical problems</li> <li>• The basis of ethical conflict in maternal-fetal medicine</li> <li>• Issues of justice relating to access to obstetric care</li> <li>• Ethical issues raised by induced abortion</li> </ul> | 1 <sup>st</sup> W | 2hr           | a1,d1 , d2                |

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|---|--|--|--|-----|--------------|
|   |  | <ul style="list-style-type: none"> <li>Revision of Anatomy of female Abdomen and Pelvis.</li> <li>Physiological changes in anatomy to gravid Uterus and surroundings.</li> </ul>   |  |     |              |
| 2 | <p>Physiology of reproduction conception ,implantation and embryology</p> <p>Physiology of pregnancy</p> | <ul style="list-style-type: none"> <li>Revision of oogenesis and spermatogenesis.</li> <li>Revision of reproductive conception</li> <li>Revision of implantation and embryogenesis</li> <li>Terms and definitions related to pregnancy.</li> <li>Diagnosis and dating of pregnancy.</li> <li>Effect of pregnancy on various body systems.</li> </ul>   |  | 2hr | a1           |
| 3 | <p>Normal fetal development and growth</p> <p>Antenatal fetal imaging and assessment of fetal growth</p> | <ul style="list-style-type: none"> <li>Describe the normal fetal development and growth during intrauterine life .</li> <li>Small for Gestational Age (SGA): Causes, diagnosis and follow up, and management.</li> <li>Large for gestational age and Fetal Macrosomia: risk factors, screening and diagnosis, and management.</li> <li>Role of ultrasound in diagnosis of pregnancy , and uses of first trimester US at assessment of fetal growth .</li> <li>Routine second trimester screening – assessing gestational age , fetal anatomy , fetal growth abnormality</li> </ul> |  | 2hr | a1           |
| 4 | Antenatal care   | <ul style="list-style-type: none"> <li>To list the goals of good antenatal care</li> <li>To diagnose pregnancy</li> <li>To know what history should be taken and examination done at the first visit.</li> <li>Determine the duration of pregnancy.</li> <li>To list and assess the result of the side-room and screening tests needed at the first fist .</li> </ul>  |  | 2hr | a1,a2,b1, b2 |

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|   |                              |   |                   |     |              |
|---|------------------------------|---|-------------------|-----|--------------|
|   |                              | <ul style="list-style-type: none"> <li>To identify low , intermediate , high risk pregnancies</li> <li>Plan and provide antenatal care that is problem oriented .</li> <li>To list the specific complications to look for at 28,34 , and 41 weeks</li> <li>To provide health information during antenatal visits</li> </ul>   |                   |     |              |
| 5 | Prenatal diagnosis           | <ul style="list-style-type: none"> <li>Concept and importance of Prenatal Screening.</li> <li>Screening for genetic diseases: Cystic Fibrosis, Sickle-Cell Disease, Tay-Sachs Disease, Thalassaemia.</li> <li>Major features of Chromosomal abnormalities: Down Syndrome, Trisomy 18, Trisomy 13, Turner Syndrome and Klinefelter Syndrome.</li> <li>Fetal congenital anomalies: Neural Tube Defects, Potter Syndrome, and Cardiac defects.</li> <li>Prenatal screening methods according to trimesters.</li> <li>Prenatal diagnosis</li> </ul> |                   | 2hr | a1,a2,b1     |
| 6 | Disorders of placentation    | <ul style="list-style-type: none"> <li>To define placenta , and describe it's gross features.</li> <li>To identify it's embryonic origin , anatomical sites and shape.</li> <li>To describe it's surfaces , and enumerate it's physiological function .</li> <li>To list the abnormalities of placenta regarding shape , size , site of insertion , and premature separation , tumors .</li> </ul>  | 2 <sup>nd</sup> W | 2hr | a1,a2,b1, b2 |
| 7 | Disorders of early pregnancy | <ul style="list-style-type: none"> <li>Miscarriages :</li> <li>Differential diagnosis of first-trimester bleeding.</li> <li>Spontaneous Abortion: Related definitions, causes and diagnosis of 1st and 2nd trimester abortions.</li> <li>Clinical differentiation of incomplete and threatened</li> </ul>   |                   | 2hr | a2,b1,b2     |

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|----|---|---|-------------------|-----|----------|
|    |   | <ul style="list-style-type: none"> <li>abortion.</li> <li>definition of recurrent abortion</li> <li>signs of missed abortion</li> <li>complications of spontaneous abortion</li> <li>causes and complications of septic abortion</li> </ul>   |                   |     |          |
| 8  | Disorders of early pregnancy                          | <ul style="list-style-type: none"> <li>ectopic pregnancy :</li> <li>Enumerate Differential diagnosis of first-trimester bleeding.</li> <li>Mention Risk factors predisposing patients to ectopic pregnancy</li> <li>symptoms and physical findings suggestive of ectopic pregnancy</li> <li>methods used to confirm the diagnosis of ectopic pregnancy</li> <li>treatment options.</li> </ul> |                   | 2hr | a2,b1,b2 |
| 9  | Disorders of early pregnancy                          | <ul style="list-style-type: none"> <li>Gestational trophoblastic diseases :</li> <li>Benign gestational trophoblastic disease (complete &amp; partial molar pregnancies)</li> <li>Malignant gestational trophoblastic disease: persistent/invasive moles, choriocarcinoma &amp; (PSTT) placental site trophoblastic tumors.</li> </ul>  |                   | 2hr | a2,b1,b2 |
| 10 | Second trimester abortion & habitual abortion         | <ul style="list-style-type: none"> <li>Incompetent Cervix: Definition, Risk factors, diagnosis and various modalities of management.</li> <li>Recurrent Pregnancy Loss: Pathogenesis, step-wise approach to diagnosis and treatment.</li> </ul>   |                   | 2hr | a2,b1,b2 |
| 11 | Amniotic fluid abnormalities<br>Antepartum hemorrhage | <ul style="list-style-type: none"> <li>Polyhydramnios: causes, implications, diagnosis, and management</li> <li>Oligohydramnios: causes, implications, diagnosis, and management</li> <li>Differential diagnosis; obstetric vs. non obstetric causes.</li> <li>Placenta Previa: Types, risk factors, presentation, diagnosis</li> </ul>   | 3 <sup>rd</sup> W | 4hr | a2,b1,b2 |

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|--|---------------------------------------|--|-------------------|-------------|
|  |                                       | <ul style="list-style-type: none"> <li>and treatment.</li> <li>Placental Abruption: Pathogenesis, clinical features, evaluation and treatment.</li> <li>complications of placenta previa and abruption placentae .</li> </ul>  |                   |             |
| 12   | Hypertensive disorders with pregnancy | <ul style="list-style-type: none"> <li>Overview of hypertensive states of pregnancy.</li> <li>Criteria for diagnosis of Gestational HTN, Preeclampsia and Eclampsia.</li> <li>Maternal and fetal complications of Preeclampsia.</li> <li>Management of Preeclampsia according to gestational age.</li> <li>Management of Eclampsia.</li> <li>Chronic HTN in pregnancy.</li> </ul>  | 2hr               | a2,b1,b2    |
| 13   | IUGR and IUFD                         | <ul style="list-style-type: none"> <li>Small for Gestational Age (SGA): Causes, diagnosis and follow up, and management.</li> <li>Large for gestational age and Fetal Macrosomia: risk factors, screening and diagnosis, and.</li> <li>Fetal demise</li> <li>Mention differential diagnosis of the causes of fetal death in each trimester</li> <li>symptoms, physical findings, and diagnostic methods to confirm the diagnosis of IUFD.</li> <li>Management of a patient with fetal death</li> <li>Emotional reactions and their effect on management</li> <li>Maternal complications of fetal death, including disseminated intravascular coagulation.</li> </ul> | 2hr               | a2,b1,b2    |
| 14   | Rh- is immunization                   | <ul style="list-style-type: none"> <li>Listing causes of immune and nonimmune hydrops fetalis.</li> <li>Approach to the unsensitized Rh negative patient.</li> <li>Approach to the sensitized Rh negative patient.</li> <li>Indications for RhoGAM.</li> <li>Ultrasound follow up of fetal anemia, and determination of severity..</li> </ul>  | 2hr               | a2,b1,b2    |
| 16   | <b>Final Theoretical Exam</b>         |  | 7 <sup>th</sup> W | 2hr         |
| <b>• Number of Weeks /and Units Per Semester</b> |                                       |  | <b>3W</b>         | <b>32hr</b> |

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### B. Case Studies and Practical Aspect:

| No. | Tasks/ Experiments  | Week Due          | Contact Hours | Learning Outcomes (CILOs) |
|-----|---|-------------------|---------------|---------------------------|
| 1   | Perform History taking for Obstetric diseases   | 1 <sup>st</sup> W | 6hr           | b2,c1,d1,d2               |
| 2   | Perform general clinical examination ( exam. Ethics , objectives .. ) and vital signs measurements            |                   | 6hr           | a2,b1,c1,d1,d2            |
| 3   | Perform abdominal obstetric and pelvic examination  |                   | 6hr           | c1,d1,d2                  |
| 4   | Perform estimation of gestation dating by LMP and abdominal exam.   |                   | 6hr           | c1,d1,d2                  |
| 5   | Perform of anti-natal care , booking and follow up visits   |                   | 6hr           | c1,c2,d1,d2               |
| 6   | Participate in maternal and fetal wellbeing assessment  | 2 <sup>nd</sup> W | 6hr           | c1,c2,d1,d2               |
| 7   | Evaluation skills for high risk pregnancy and abnormal pregnancy  |                   | 6hr           | c1,c2,d1,d2               |
| 8   | Perform history taking , examination for patient with early pregnancy bleeding and formulate therapeutic plan |                   | 6hr           | b2,c1,c2,d1,d2            |
| 9   | Perform history taking , examination for patient with habitual abortion and formulate therapeutic plan        |                   | 6hr           | b2,c1,c2,d1,d2            |
| 10  | Perform history taking , examination for patient with amniotic fluid disorder and formulate therapeutic plan  |                   | 6hr           | b2,c1,c2,d1,d2            |
| 11  | Perform history taking , examination for patient with antepartum bleeding and formulate therapeutic plan      | 3 <sup>rd</sup> W | 6hr           | b2,c1,c2,d1,d2            |
| 12  | Perform history taking , examination for patient with pre-eclampsia and formulate therapeutic plan            |                   | 6hr           | b2,c1,c2,d1,d2            |
| 13  | Perform history taking , examination for patient with eclampsia and formulate therapeutic plan                |                   | 6hr           | b2,c1,c2,d1,d2            |

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|  |  |                   |             |                      |
|--|--|-------------------|-------------|----------------------|
| 14   | Perform history taking , examination for patient with IUGR and IUFD and formulate therapeutic plan |                   | 6hr         | a2,b1,c1,c2,d1,d2    |
| 15   | ▪ Final clinical exam  | 7 <sup>th</sup> W | 3hr         | a2,b1,b2,c1,c2,d1,d2 |
| <b>Number of Weeks /and Units Per Semester</b> |  | <b>3 W</b>        | <b>92hr</b> |                      |

### V. Teaching Strategies of the Course:

Lectures  
Training  
Case studies  
Discussion  
Self Learning

### VI. Assessment Methods of the Course:

Homework & teamwork  
Quiz  
Final clinical exam  
Final Theoretical Exam  
Oral Desiccation  
OSCE

### VIII. Schedule of Assessment Tasks for Students During the Semester:

| No. | Assessment Method          | Week Due          | Mark | Proportion of Final Assessment | Aligned Course Learning Outcomes |
|-----|----------------------------|-------------------|------|--------------------------------|----------------------------------|
| 1   | Quizzes & Homework         | 1 <sup>st</sup> W | 10   | 10%                            | a1,a2,d1, d2                     |
| 2   | Teamwork & Oral Discussion | 2 <sup>nd</sup> W | 10   | 10%                            | d1, d2                           |

|                   |                      |                       |                          |                          |  |
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| No.          | Assessment Method              | Week Due          | Mark       | Proportion of Final Assessment | Aligned Course Learning Outcomes |
|--------------|--------------------------------|-------------------|------------|--------------------------------|----------------------------------|
| 3            | Final clinical exam            | 7 <sup>th</sup> W | 30         | 30%                            | a2,b1,b2,c1,c2,d1,d2             |
| 4            | Final Theoretical Exam or OSCE |                   | 50         | 50%                            | a1,a2,b1,b2,c1,c2                |
| <b>Total</b> |                                |                   | <b>100</b> | <b>100%</b>                    |                                  |

### IX. Learning Resources:

#### 1- Required Textbook(s):

- 1- Louise C. Kenny, Jenny E. Myers- 2017- Obstetric by Ten teachers – 20<sup>th</sup> - - CRC Press
- 2- Notes guidelines and self-study written by staff members

#### 2- Essential References:

- 3- 1- Kevin Hanretty -2009 - Illustrated Obstetrics and Gynecology – 7<sup>th</sup> - - Churchill Livingstone

#### 3- Electronic Materials and Web Sites etc.:

##### Websites:

- 1- The Visible Body Learn Site  
<https://www.visiblebody.com/learn/nervous>
- 2- Medical news today  
<https://www.medicalnewstoday.com/articles/307076>

### X. Course Policies: (Based on the Uniform Students' By law (2007)

|   |   |
|---|---|
| 1 | <b>Class Attendance:</b><br>Class Attendance is mandatory. A student is considered absent and shall be banned from taking the final exam if his/her absence exceeds 25% of total classes. |
| 2 | <b>Tardiness:</b><br>A student will be considered late if he/she is not in class after 10 minutes of the start time of class.   |
| 3 | <b>Exam Attendance/Punctuality:</b><br>No student shall be allowed to the exam hall after 30 minutes of the start time, and shall not   |

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|-------------------|----------------------|-----------------------|--------------------------|--------------------------|--|
| Prepared by:      | Reviewed by:         | Head of department    | Quality Unit:            | Dean of Medicine Faculty | Center of Development and Quality Assurance Dean |
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|   |  |
|---|--|
|   | leave the hall before half of the exam time has passed.  |
| 4 | <b>Assignments &amp; Projects:</b><br>Assignments and projects must be submitted on time. Students who delay their assignments or projects shall lose the mark allocated for the same.   |
| 5 | <b>Cheating:</b><br>Cheating is an act of fraud that results in the cancelation of the student's exam or assignment. If it takes place in a final exam, the penalties stipulated for in the Uniform Students' Bylaw (2007) shall apply.  |
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| 7 | <b>Other policies:</b><br>The University official regulations in force will be strictly observed and students shall comply with all rules and regulations of the examination set by the Department, Faculty and University Administration.                                     |

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## Faculty of Medicine

### Bachelor Program of Medicine and Surgery

# Course Plan (Syllabus) of Obstetrics & Gynecology Block I Block Code. (A21P411) (1<sup>st</sup> Course)

| I. Information about Faculty Member Responsible for the Course: |        |              |     |     |     |     |     |
|---|--------|--------------|-----|-----|-----|-----|-----|
| Name of Faculty Member:   |        | Office Hours |     |     |     |     |     |
| Location & Telephone No.:                                       | -----  |              |     |     |     |     |     |
| E-mail:   | --@--- | SAT          | SUN | MON | TUE | WED | THU |

2023

|                   |                      |                       |                          |                          |  |
|-------------------|----------------------|-----------------------|--------------------------|--------------------------|--|
| Prepared by:      | Reviewed by:         | Head of department    | Quality Unit:            | Dean of Medicine Faculty | Center of Development and Quality Assurance Dean |
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## II. Course Identification and General Information:

|   |   |                             |                              |                                |                 |
|---|---|-----------------------------|------------------------------|--------------------------------|-----------------|
| <b>Course Title:</b>                                    | <b>Obstetrics &amp; Gynecology Block I<br/>(1st Course)</b> |                             |                              |                                |                 |
| <b>Block Code:</b>                                      | A21P411   |                             |                              |                                |                 |
| <b>Credit Hours:</b>                                    | <b>Credit Hours</b>   | <b>Theory Contact Hours</b> |                              | <b>Practical Contact Hours</b> | <b>Clinical</b> |
|   |   | <b>Lecture</b>              | <b>Tutorial/S<br/>eminar</b> | <b>Lab</b>                     |                 |
|   | 4   | 2                           | --                           | 6                              |                 |
| <b>Level/ Semester at which this Course is offered:</b> | 4th Level / 1st Semester                                    |                             |                              |                                |                 |
| <b>Pre –Requisite (if any):</b>                         | All systems   |                             |                              |                                |                 |
| <b>Co –Requisite (if any):</b>                          | None  |                             |                              |                                |                 |
| <b>Program (s) in which the Course is Offered:</b>      | Bachelor of Medicine and surgery                            |                             |                              |                                |                 |
| <b>Language of Teaching the Course:</b>                 | English   |                             |                              |                                |                 |
| <b>Location of Teaching the Course:</b>                 | Faculty of Medicine   |                             |                              |                                |                 |
| <b>Prepared by:</b>                                     | DR. Amal AL-asoli   |                             |                              |                                |                 |
| <b>11 Date and Number of Approval by Council:</b>       | 2023  |                             |                              |                                |                 |

## III. Course Description:

The course is the first course of Obstetrics & Gynecology which spans 4 courses over 2 years. It will provide to students of knowledge and skills on Obstetric and covers topics in obstetrics involves medical history and examination, Antenatal care, Normal fetal development and growth,

|                     |                      |                           |                           |                                 |   |
|---------------------|----------------------|---------------------------|---------------------------|---------------------------------|---|
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Assessment of fetal wellbeing, Prenatal diagnosis, Antenatal obstetric complications, Multiple pregnancy, Preterm labour, Hypertensive disorders of pregnancy and Medical complications of pregnancy also focuses on the practical application on assessment, diagnosing and treating cases during pregnancy.

#### IV. Course Intended Learning Outcomes (CILOs) :

Upon successful completion of the Course, student will be able to:

|  |   |
|--|---|
| <b>A. Knowledge and Understanding:</b>       |   |
| a1   | Describe the normal physiology of pregnancy and labor   |
| a2   | Identify the etiology, pathogenesis, clinical manifestation, diagnosis , differential diagnosis and complication of different Obstetrics and Gynecology problem   |
| <b>B. Intellectual Skills:</b>               |   |
| b1   | Distinguish between physiological and pathological performance of body cells.   |
| b2   | Analyze data obtained from medical history, physical examination and Para clinical investigations to reach a final diagnosis and plan the management of patients with common Obstetric and Gynecology problems. |
| <b>C. Professional and Practical Skills:</b> |   |
| c1   | Perform patient centered history taking, physical examination and investigations for Obstetrics and Gynecology conditions   |
| c2   | Apply common laboratory procedures, investigations, and basic interventions that are necessary in relevant Obstetrics and Gynecology conditions.  |
| <b>D. Transferable Skills:</b>               |   |
| d1   | Communicate clearly and effectively with patients, their families, health care professionals and the community through verbal, written or digital methods   |
| d2   | Act independently or collaboratively as a member of teamwork and communicate effectively with others.   |

#### IV. Course Contents:

##### A. Theoretical Aspect:

|                   |                      |                       |                           |                          |  |
|-------------------|----------------------|-----------------------|---------------------------|--------------------------|--|
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| No. | Units/Topics List  | Sub Topics List  | Number of Weeks   | Contact Hours |
|-----|--|--|-------------------|---------------|
| 1   | - Medical ethics in obstetrics<br>- Anatomy of the female pelvis and fetal skull                 | <ul style="list-style-type: none"> <li>A systematic approach to ethical problems</li> <li>The basis of ethical conflict in maternal-fetal medicine</li> <li>Issues of justice relating to access to obstetric care</li> <li>Ethical issues raised by induced abortion</li> <li>Revision of Anatomy of female Abdomen and Pelvis.</li> <li>Physiological changes in anatomy to gravid Uterus and surroundings.</li> </ul>   | 1 <sup>st</sup> W | 2hr           |
| 2   | Physiology of reproduction<br>conception ,implantation and embryology<br>Physiology of pregnancy | <ul style="list-style-type: none"> <li>Revision of oogenesis and spermatogenesis.</li> <li>Revision of reproductive conception</li> <li>Revision of implantation and embryogenesis</li> <li>Terms and definitions related to pregnancy.</li> <li>Diagnosis and dating of pregnancy.</li> <li>Effect of pregnancy on various body systems.</li> </ul>   |                   | 2hr           |
| 3   | Normal fetal development and growth<br>Antenatal fetal imaging and assessment of fetal growth    | <ul style="list-style-type: none"> <li>Describe the normal fetal development and growth during intrauterine life .</li> <li>Small for Gestational Age (SGA): Causes, diagnosis and follow up, and management.</li> <li>Large for gestational age and Fetal Macrosomia: risk factors, screening and diagnosis, and management.</li> <li>Role of ultrasound in diagnosis of pregnancy , and uses of first trimester US at assessment of fetal growth .</li> <li>Routine second trimester screening – assessing gestational age , fetal anatomy , fetal growth abnormality</li> </ul> |                   | 2hr           |
| 4   | Antenatal care   | <ul style="list-style-type: none"> <li>To list the goals of good antenatal care</li> <li>To diagnose pregnancy</li> <li>To know what history should be taken and examination done at the first visit.</li> </ul>   |                   | 2hr           |

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|   |                              |   |                   |     |
|---|------------------------------|---|-------------------|-----|
|   |                              | <ul style="list-style-type: none"> <li>Determine the duration of pregnancy.</li> <li>To list and assess the result of the side-room and screening tests needed at the first fist .</li> <li>To identify low , intermediate , high risk pregnancies</li> <li>Plan and provide antenatal care that is problem oriented .</li> <li>To list the specific complications to look for at 28,34 , and 41 weeks</li> <li>To provide heath information during antenatal visits</li> </ul>   |                   |     |
| 5 | Prenatal diagnosis           | <ul style="list-style-type: none"> <li>Concept and importance of Prenatal Screening.</li> <li>Screening for genetic diseases: Cystic Fibrosis, Sickle-Cell Disease, Tay-Sachs Disease, Thalassaemia.</li> <li>Major features of Chromosomal abnormalities: Down Syndrome, Trisomy 18, Trisomy 13, Turner Syndrome and Klinefelter Syndrome.</li> <li>Fetal congenital anomalies: Neural Tube Defects, Potter Syndrome, and Cardiac defects.</li> <li>Prenatal screening methods according to trimesters.</li> <li>Prenatal diagnosis</li> </ul> |                   | 2hr |
| 6 | Disorders of placentation    | <ul style="list-style-type: none"> <li>To define placenta , and describe it's gross features.</li> <li>To identify it's embryonic origin , anatomical sites and shape.</li> <li>To describe it's surfaces , and enumerate it's physiological function .</li> <li>To list the abnormalities of placenta regarding shape , size , site of insertion , and premature separation , tumors .</li> </ul>  | 2 <sup>nd</sup> W | 2hr |
| 7 | Disorders of early pregnancy | <ul style="list-style-type: none"> <li>Miscarriages :</li> <li>Differential diagnosis of first-trimester bleeding.</li> <li>Spontaneous Abortion: Related definitions, causes and diagnosis of 1st and 2nd trimester abortions.</li> <li>Clinical differentiation of incomplete and threatened abortion.</li> <li>definition of recurrent abortion</li> <li>signs of missed abortion</li> </ul>   |                   | 2hr |

|                   |                      |                       |                           |                          |  |
|-------------------|----------------------|-----------------------|---------------------------|--------------------------|--|
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|    |   |  |                   |     |
|----|---|--|-------------------|-----|
|    |   | <ul style="list-style-type: none"> <li>• complications of spontaneous abortion</li> <li>• causes and complications of septic abortion</li> </ul>   |                   |     |
| 8  | Disorders of early pregnancy                          | <ul style="list-style-type: none"> <li>• ectopic pregnancy :</li> <li>• Enumerate Differential diagnosis of first-trimester bleeding.</li> <li>• Mention Risk factors predisposing patients to ectopic pregnancy</li> <li>• symptoms and physical findings suggestive of ectopic pregnancy</li> <li>• methods used to confirm the diagnosis of ectopic pregnancy</li> <li>• treatment options.</li> </ul>  |                   | 2hr |
| 9  | Disorders of early pregnancy                          | <ul style="list-style-type: none"> <li>• Gestational trophoblastic diseases :</li> <li>• Benign gestational trophoblastic disease (complete &amp; partial molar pregnancies)</li> <li>• Malignant gestational trophoblastic disease: persistent/invasive moles, choriocarcinoma &amp; (PSTT) placental site trophoblastic tumors.</li> </ul>   |                   | 2hr |
| 10 | Second trimester abortion & habitual abortion         | <ul style="list-style-type: none"> <li>• Incompetent Cervix: Definition, Risk factors, diagnosis and various modalities of management.</li> <li>• Recurrent Pregnancy Loss: Pathogenesis, step-wise approach to diagnosis and treatment.</li> </ul>  |                   | 2hr |
| 11 | Amniotic fluid abnormalities<br>Antepartum hemorrhage | <ul style="list-style-type: none"> <li>• Polyhydramnios: causes, implications, diagnosis, and management</li> <li>• Oligohydramnios: causes, implications, diagnosis, and management</li> <li>• Differential diagnosis; obstetric vs. non obstetric causes.</li> <li>• Placenta Previa: Types, risk factors, presentation, diagnosis and treatment.</li> <li>• Placental Abruption: Pathogenesis, clinical features, evaluation and treatment.</li> <li>• complications of placenta previa and abruptio placentae .</li> </ul> | 3 <sup>rd</sup> W | 4hr |
| 12 | Hypertensive disorders with pregnancy                 | <ul style="list-style-type: none"> <li>• Overview of hypertensive states of pregnancy.</li> <li>• Criteria for diagnosis of Gestational HTN, Preeclampsia and Eclampsia.</li> <li>• Maternal and fetal complications of Preeclampsia.</li> </ul>   |                   | 2hr |

|                   |                      |                       |                          |                          |  |
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|   |                               |  |                   |      |
|---|-------------------------------|--|-------------------|------|
|   |                               | <ul style="list-style-type: none"> <li>Management of Preeclampsia according to gestational age.</li> <li>Management of Eclampsia.</li> <li>Chronic HTN in pregnancy.</li> </ul>  |                   |      |
| 13  | IUGR and IUFD                 | <ul style="list-style-type: none"> <li>Small for Gestational Age (SGA): Causes, diagnosis and follow up, and management.</li> <li>Large for gestational age and Fetal Macrosomia: risk factors, screening and diagnosis, and.</li> <li>Fetal demise</li> <li>Mention differential diagnosis of the causes of fetal death in each trimester</li> <li>symptoms, physical findings, and diagnostic methods to confirm the diagnosis of IUFD.</li> <li>Management of a patient with fetal death</li> <li>Emotional reactions and their effect on management</li> <li>Maternal complications of fetal death, including disseminated intravascular coagulation.</li> </ul> |                   | 2hr  |
| 14  | Rh- is immunization           | <ul style="list-style-type: none"> <li>Listing causes of immune and nonimmune hydrops fetalis.</li> <li>Approach to the unsensitized Rh negative patient.</li> <li>Approach to the sensitized Rh negative patient.</li> <li>Indications for RhoGAM.</li> <li>Ultrasound follow up of fetal anemia, and determination of severity..</li> </ul>  |                   | 2hr  |
| 16  | <b>Final Theoretical Exam</b> |  | 7 <sup>th</sup> W | 2hr  |
| <ul style="list-style-type: none"> <li>Number of Weeks /and Units Per Semester</li> </ul> |                               |  | 3W                | 32hr |

### B. Case Studies and Practical Aspect:

| No. | Tasks/ Experiments   | Week Due          | Contact Hours |
|-----|--|-------------------|---------------|
| 1   | Perform History taking for Obstetric diseases  | 1 <sup>st</sup> W | 6hr           |
| 2   | Perform general clinical examination ( exam. Ethics , objectives .. ) and vital signs measurements |                   | 6hr           |

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| No.  | Tasks/ Experiments  | Week Due          | Contact Hours |
|--|---|-------------------|---------------|
| 3  | Perform abdominal obstetric and pelvic examination  |                   | 6hr           |
| 4  | Perform estimation of gestation dating by LMP and abdominal exam.   |                   | 6hr           |
| 5  | Perform of anti-natal care , booking and follow up visits   |                   | 6hr           |
| 6  | Participate in maternal and fetal wellbeing assessment  |                   | 6hr           |
| 7  | Evaluation skills for high risk pregnancy and abnormal pregnancy  |                   | 6hr           |
| 8  | Perform history taking , examination for patient with early pregnancy bleeding and formulate therapeutic plan | 2 <sup>nd</sup> W | 6hr           |
| 9  | Perform history taking , examination for patient with habitual abortion and formulate therapeutic plan        |                   | 6hr           |
| 10   | Perform history taking , examination for patient with amniotic fluid disorder and formulate therapeutic plan  |                   | 6hr           |
| 11   | Perform history taking , examination for patient with antepartum bleeding and formulate therapeutic plan      |                   | 6hr           |
| 12   | Perform history taking , examination for patient with pre-eclampsia and formulate therapeutic plan            | 3 <sup>rd</sup> W | 6hr           |
| 13   | Perform history taking , examination for patient with eclampsia and formulate therapeutic plan                |                   | 6hr           |
| 14   | Perform history taking , examination for patient with IUGR and IUFD and formulate therapeutic plan            |                   | 6hr           |
| 15   | ▪ Final clinical exam   | 7 <sup>th</sup> W | 2hr           |
| <b>Number of Weeks /and Units Per Semester</b> |   | <b>3W</b>         | <b>92hr</b>   |

## V. Teaching Strategies of the Course:

Lectures  
Training  
Case studies  
Discussion

|                   |                      |                       |                           |                          |  |
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Self-Learning

## VI. Assessment Methods of the Course:

Homework & teamwork  
Quiz  
Final clinical exam  
Final Theoretical Exam  
Oral Desiccation  
OSCE

## VIII. Schedule of Assessment Tasks for Students During the Semester:

| No.   | Assessment Method              | Week Due          | Mark | Proportion of Final Assessment |
|-------|--------------------------------|-------------------|------|--------------------------------|
| 1     | Quizzes & Homework             | 1 <sup>st</sup> W | 10   | 10%                            |
| 2     | Teamwork & Oral Desiccation    | 2 <sup>nd</sup> W | 10   | 10%                            |
| 3     | Final clinical exam            | 7 <sup>th</sup> W | 30   | 30%                            |
| 4     | Final Theoretical Exam or OSCE |                   | 50   | 50%                            |
| Total |                                |                   | 100  | 100%                           |

## IX. Learning Resources:

### 1- Required Textbook(s):

- 1- Louise C. Kenny, Jenny E. Myers- 2017- Obstetric by Ten teachers – 20<sup>th</sup> - - CRC Press
- 2- Notes guidelines and self-study written by staff members

### 2- Essential References:

- 1- Kevin Hanretty -2009 - Illustrated Obstetrics and Gynecology – 7<sup>th</sup> - - Churchill Livingstone

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### 3- Electronic Materials and Web Sites etc.:

#### Websites:

3- The Visible Body Learn Site

<https://www.visiblebody.com/learn/nervous>

4- Medical news today

<https://www.medicalnewstoday.com/articles/307076>

## XI. Course Policies: (Based on the Uniform Students' Bylaw (2007))

|   |   |
|---|---|
|   | <b>Class Attendance:</b>  |
| 1 | Class Attendance is mandatory. A student is considered absent and shall be banned from taking the final exam if his/her absence exceeds 25% of total classes.   |
|   | <b>Tardiness:</b>   |
| 2 | A student will be considered late if he/she is not in class after 10 minutes of the start time of class.  |
|   | <b>Exam Attendance/Punctuality:</b>   |
| 3 | No student shall be allowed to the exam hall after 30 minutes of the start time, and shall not leave the hall before half of the exam time has passed.  |
|   | <b>Assignments &amp; Projects:</b>  |
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|   | <b>Other policies:</b>  |
| 7 | The University official regulations in force will be strictly observed and students shall comply with all rules and regulations of the examination set by the Department, Faculty and University Administration.                          |

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