



B.L.D.E. UNIVERSITY

[Declared as Deemed-to-be-University u/s 3 of UGC Act, 1956 vide Government of India Notification No. F.9-37/2007-U.3(A)]

The Constituent College

SHRI. B. M. PATIL MEDICAL COLLEGE, HOSPITAL AND RESEARCH CENTRE VIJAYAPURA

Department of Obstetrics and Gynecology Board of studies

Meeting of Board of studies was conducted on 07-04-2016, following members were present.

1. Dr.P.B.Jaju	Prof. & HOD	Chairman
2. Dr.Mrs.Aruna.S.N	Asst.Prof.	Secretary
3. Dr.M.B.Bellad	Professor	External Member
4. Dr.S.R.Mudanur	Professor	Member
5. Dr.V.R.Gobbur	Professor	Member
6. Dr.Mrs.Manpreet.Kaur	Professor	Member
7. Dr.Mrs.S.R.Bidri	Professor	Member
8. Dr.Mrs.Neelamma.Patil	Assoc.Prof	Member
9. Dr.Mrs.Girija.Hanjagi	Assoc.Prof.	Member

Dr.P.B.Jaju, Chairman of BOS, welcomed all the members. All members reviewed the curriculum of Allied courses (Pediatrics, Radiology and Anesthesia).

Dr.M.B.Bellad, External Member, suggested to start New certificate course of 6 Weeks duration in Ultrasonography and one year Fellowship course in Maternal fetal medicine. He recommended USG Books of Donald school of publications. He opined that infrastructure facility should be adequate for better functioning of OBG dept. He suggested few Topics for research like Hypothyroidism in pre eclamptic toxemia, Urinary injuries during Hysterectomy & Post-Hysterectomy followup. He recommended I.U.J.A Journal for publication.

High Dependency unit(HDU)- Min. 3 beds, Eclampsia room- min 3 beds and obstetrics casualty should be functioning separately in Labour room complex with proper maintenance of records. Ventilator is not required. Defibrillator must be functioning in labour room O.T. Cervical biopsy, VIA, Insertion of Cu.T, removal of Cu.T and Colposcopy are Day care procedures which should be done in minor O.T of OPD Premises.

Dr.M.B.Bellad reviewed the changes made in UG and P.G. Curriculum. He suggested some changes in PG curriculum in Drills of skill Lab. He told about shock Index.

Shock Index = Heart Rate

Systolic B.P

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Normal is < 0.9

0.9-1.6 needs intervention

>1.6 is serious matter

He told about the study in JNMC The study is on increased obstetric mishaps like, Abortion, preterm labour, PET & increased ICT during pregnancy if the pregnancy occurs within 6 months of cohabitation.

Question papers and results of UG & PG exam were read and all members appreciated the best results and marks scored by the student.

M.S Result: 3 appeared 3 passed (100%)

MBBS-OBG Result

Students appeared 82

Passed 71(87%)

Dr.M.B.Bellad suggested to prepare blue print of questions. Questions should be from the areas of must to know – 60%, Good to Know – 20% and Nice to know 20% so that maximum number of students should answer.

He suggested to call External examiners from Govt. medical colleges of other states especially for P.G. Exam. He also told few names

He advised to present statistics every month in departmental meeting so that Improvement can be made. Each staff member should contribute for the development of department. Good quality research and publications in Indexed Journals are required for over all development of the Dept. He wished the KSOGA state level conference to be a grand success.

Dr.S.R.Mudanur proposed vote of thanks.

P.B. Sajjan

Prof and HOD

DR. P. B. JAJU.

Prof. & Head
Dept. of O.B.G.

B.L.D.E University's
Shri B.M.Patil Medical College
Hospital & Research Centre,
VIJAYAPUR.

[Signature]
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UG Curriculum 2016:

Existing factors	Changes to be brought about (Revised part)
<p>Didactic clinic lectures 140 hrs</p> <p>P.S.As per MCI didactic lectures should not be more than 1/3 total teaching hrs</p>	<p>1. 40 hrs of didactic lectures introduced.</p> <p>2. 20 hrs of integrated teaching added.</p> <p>10hrs in 8th term</p> <p>10hrs in 9th term</p> <p>3. 20 hrs of small group discussion & problem based teaching</p> <p>10hrs in 8th term</p> <p>10hrs in 9th term</p> <p>Topic on medical ethics added</p>
Clinics posting	<p>a) Basic clinical skills to be taught in skills lab for 3rd & 4th term students.</p> <p>b) Structured teaching programme (Topics to taught in each term in clinics is listed)</p> <p>c) Beds allotted to students & they are made in changes of the patients</p> <p>d) once a week grand rounds for UG students.</p> <p>e) Assessment cards introduced for each clinical posting to keep watch on what the student has learnt.</p>
Labour posting	<p>a) Labour room posting for 8th term student made more organised.</p> <p>b) student should conduct, 10 cases of labours under adequate supervision & assist in 10 other cases (Acc to MCI)</p> <p>c) A Completion certificate labour room posting introduced (ACC to MCI)</p>
<p>Didactic lectures</p> <p>Tutorials</p> <p>seminars Integrated teaching (Part of seminars)</p>	<p>a) Separate integrated teaching hrs allotted</p> <p>b) Small group discussion & problem based learning introduced</p> <p>c) skill lab teaching for 3rd & 4th term students</p> <p>d) structured teaching in clinic.</p>
<p>Ward leaving test after each clinical posting</p> <p>2. 2 theory test at the end of 8th term conducted</p> <p>3. Preliminary exams conducted</p>	<p>1. OSCE introduced for ward leaving tests.</p> <p>2. Assessment cards for each clinical postings & labour room postings.</p>



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M.S.OBG Course- Changes Made 2016

Existing factors	Changes to be brought about (Revised part)
The postgraduate course M.S. (Obstetrics & Gynaecology) should enable a medical graduate to become a competent specialist, acquire knowledge and skills in educational technology for teaching medical, dental and health sciences and conduct research in bio-medical science.	To be able to practice Obstetrics & Gynaecology - -with adequate competency and skills with sound knowledge. -in an ethical manner, with empathy. -To continue to update with recent advances. -To be able to be a team leader in executing the national health policies.
Who shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy; Who shall be aware of the contemporary advances and developments in Obstetrics & Gynaecology	1. Who shall have mastered most of the competencies that are required to be practised at the secondary and tertiary levels of the health care delivery system; 2. Who shall have acquired a spirit of scientific inquiry and is oriented to the principles of research methodology and epidemiology; and 3. Who shall have acquired the basic skills in teaching of the medical and paramedical professionals. 4. Continue to evince keen interest in continuing Obstetrics & Gynaecology education irrespective of whether he is in a teaching institution or is a practicing surgeon. a) The objectives will also be considered under the sub headings <ul style="list-style-type: none"> • Knowledge (cognitive domain) • Skills (Psycho motor domain) • Human values, Ethical practice & Communication abilities (Affecter domain)
<p>Basic Sciences</p> <p>i. Normal and abnormal development of the male and female genitals and female breast.</p> <p>ii. Anatomy of fetus, fetal growth and development, tract fetal physiology and fetal circulation.</p> <p>iii. Physiology and neuroendocrine changes during, adolescence, puberty, menstruation, ovulation, fertilization, climacteric and menopause.</p> <p>iv. Markers in Obstetrics and Gynaecology, Non-neoplastic and</p>	<p>Basic Sciences</p> <p>Physiology</p> <p>i. Physiology and neuroendocrine changes during adolescence, puberty, menstruation, ovulation, fertilization, climacteric and menopause.</p> <p>ii. Markers in Obstetrics and Gynaecology, Non-neoplastic and Neoplastic diseases.</p> <p>iii. Physiological changes in cardio vascular system, urinary system & reproductive system during pregnancy.</p>

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<i>Neoplastic diseases.</i>	<i>Neoplastic diseases.</i>
<u>Surgical skill</u> Tubectomy – Minilap Laparoscopic sterilization <u>Surgical Skill Minor Operation</u> <u>Major Operations</u>	<u>Labour skill</u> Tubectomy – (Deleted) Minilap (Deleted) Laparoscopic sterilization (Deleted) <u>Surgical skill Minor operation</u> Cryosurgery (added) Major Operations Diagnostic Laparoscopy Operative laphysteroscopy Tubectomy MiniLap Laparoscopic sterilization 1. Theory classes: Every week on Thursday between 8am to 9am 2. Group Discussion: will be conducted every week. Each P.G student should participate and give the opinion on the topic concerned. 3. Integrated teaching programme: One horizontal/vertical integrated teaching programme will be conducted every third month. 4. P.G.Panel discussion will be conducted every 4 th month. 5. Ethical meeting will be conducted every 3 months. 6. Role plays will be conducted 3 times in one year for demonstration of empathic and communication skills. 7. Micro teaching exercise every month which will help in pedagogy in the final exam <u>Formative assessment</u> will be done by each staff every month for each P.G by using model overall assessment sheet. Eligibility criteria for appearing in University examination will be a. 80% attendance in each year b. Log Book – Completed and regularly assessed by faculty and HOD. C. Formative assessment
	OSCE Micro teaching by PGs Internal Assessment Attendance Log Book
	1. 5 Questions of 10 marks each (Total=50) 2. 10 questions of 5 marks each (Total= 50)

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Changes made in Tabular form for DGO Course

Sl.No	Content	Existing	Changes made
1	Goals	The postgraduate course M.S. (Obstetrics & Gynaecology) should enable a medical graduate to become a competent specialist, acquire knowledge and skills in educational technology for teaching medical, dental and health sciences and conduct research in bio-medical science.	To practice Obstetrics & Gynaecology with adequate competency and skills with sound knowledge. He/She should Practice obstetrics & Gynaecology in ethical manner with empathy. He/She should Continue to update with recent advances. He/She should Act as team leader in executing the national health policies.
2	Objectives	Who shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy; Who shall be aware of the contemporary advances and developments in	1. Who shall have mastered most of the competencies, that are required to be practiced at the secondary and the tertiary levels of the health care delivery system; 2. Who shall have acquired a spirit of scientific inquiry and is oriented to the principles of research methodology and epidemiology; and 3. Who shall have acquired the basic skills in teaching of the medical and paramedical professionals. 4. Continue to evince keen interest in continuing Obstetrics & Gynaecology education irrespective of whether he is in a teaching institution or is a practicing surgeon.

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		Obstetrics & Gynaecology	<p>a)The objectives will also be considered under the sub headings</p> <ul style="list-style-type: none"> • Knowledge (cognitive domain) • Skills(Psycho motor domain) • Human values, Ethical practice & Communication abilities(Affector domain)
3	Course content	<p>Basic Sciences</p> <p>v. <i>Normal and abnormal development of the male and female genitals and female breast.</i></p> <p>vi. <i>Anatomy of fetus, fetal growth and development , tract fetal physiology and fetal circulation.</i></p> <p>vii. <i>Physiology and neuroendocrine changes during, adolescence , puberty, menstruation, ovulation, fertilization, climacteric and menopause.</i></p>	<p>Basic Sciences</p> <p>Physiology</p> <p>iv. <i>Physiology and neuroendocrine changes during adolescence, puberty, menstruation, ovulation, fertilization, climacteric and menopause.</i></p> <p>v. <i>Markers in Obstetrics and Gynaecology, Non-neoplastic and Neoplastic diseases.</i></p> <p>vi. <i>Physiological changes in cardio vascular system,urinary system & reproductive system during pregnancy.</i></p>

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		viii. <i>Markers in Obstetrics and Gynaecology, Non-neoplastic and Neoplastic diseases.</i>	
4	Teaching – learning methods	Obstetrics	<u>Obstetrics-Theory</u> Newer Topics 1.Chikanagunya fever in pregnancy 2.Dengue fever in pregnancy 3.Zika virus in pregnancy 4.DIPSI Protocols & guide lines 5.Biomedical waste management 6.Bioethics 7.Newer drugs & effect on pregnancy Like antiepileptics & antihypertensives 8.legal practices of PC-PNDT ACT, MTP & Tubectomy <u>Obstetrics – Clinical</u> Skill Lab: i. Internal Iliac artery ligation ii. Hemostatic sutures iii. Pelvitrainer session iv. DRILLS -PPH,-Eclampsia,-Shoulder Dystocia,- Cardiomyopathy,Haemorrhagic shock,DIC,- Post op hemoperitoneum,-Diabetic keto acidosis,Pulmonary embolism
		<u>Surgical skill</u> Tubectomy – Minilap Laparoscopic sterilization <u>Surgical Skill</u> <u>Minor Operation</u>	<u>Labour skill</u> Tubectomy – (Deleted) Minilap (Deleted) Laparoscopic sterilization (Deleted) <u>Surgical skill Minor operation</u> Cryosurgery (added) Major Operations

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	<u>Major Operations</u>	<p>Diagnostic Laproscopy & Operative laprohysteroscopy Tubectomy MiniLap Laposcopic sterilization</p> <p>2. Theory classes: Every week on Thursday between 8am to 9am</p> <p>1. Group Discussion: will be conducted every week. Each P.G student should participate and give the opinion on the topic concerned.</p> <p>2. Integrated teaching programme: One horizontal/vertical integrated teaching programme will be conducted every month.</p> <p>3. P.G.Pannel discussion will be conducted every 4th month.</p> <p>4. Ethical meeting will be conducted every 3 months.</p> <p>5. Role play will be conducted 3 times in one year for Empathy, sympathy and communication skil</p> <p>Internal assessment will be done by each staff every month for each P.G by using model overall assessment sheet. Eligibility criteria for appearing university examination will be</p> <p>a. 80% attendance in each year b. Log Book c. Internal assessment</p>
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