



OBSTETRICS GYNAECOLOGY



(OBG-418)

STUDY GUIDE

Department of Obstetrics and Gynecology
Faculty of Medicine
Sohag University

2024-2025

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With collaboration with
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Contents

Topic	Page
Basic information about the block	3
Block map	4
NARS competencies covered by the block	4
Professional information about the block	8
Block aims	8
Intended Learning Outcomes	8
A- Knowledge and understanding	8
C- Clinical Skills	9
D- Generic and transferrable skills	9
Structure of the block	11
Learning methods	15
Methods of Student Assessments	15
Block evaluation	16
Block contents	17
Lecture topics and their intended learning outcomes	17
Practical topics and their intended learning outcomes	21
Self directed learning and group discussion topics and their intended learning outcomes	24
Formative assessment	27
Blueprint	29
Lecture Outlines	34
Outlines of topics for self directed learning and group discussions	40
Block timetable	76
Subgroups rotation	

Basic Information about the Block

- **Program on which the course is given:** Bachelor of Medicine and Surgery (M.B. B.Ch.).
- **Elements (major or minor) of the program:** Undergraduate
- **Departments offering the course:** Obstetrics and Gynecology
- **Academic. year/level:** 4th year
- **Date of specification approval:** 2022 -2023, 2024.-2025
- **Title:** Gynecology & obstetrics
- **Code:** OBG-418
- **Credit points:** 18
- **Lectures:** 75 hours
- **Practical:** 113 hours
- **Case based discussions:** 82 hours **Student learning activities:** 144 hours. **Portfolio (66) 6.5 points**
- **Formative assessment (60) 2 points**
- **Total: 540 hours**

Block Map

The total hours of the final written exam	Total marks	Days/weeks	Points	Code	Responsible department	لوحة التقييمية Block	Year
5*2 paper Paper 1: 2.5 hours Paper 2: 2.5 hours	360	10 weeks 28 weeks	18	OBG-418	Gynecology & obstetrics أمراض النساء التوليد □	Gynecology & obstetrics أمراض النساء التوليد □	4th year

NARS competencies covered by the block

Clinical Rotations (Blocks)/ Competencies

The competency areas of the NARS- Medicine competency framework are

- 1- The graduate as a health care provider.
- 2- The graduate as a health promoter.
- 3- The graduate as a professional.
- 4- The graduate as a scholar and scientist.
- 5- The graduate as a member of the health team and a part of the health care system.
- 6- The graduate as a lifelong learner and researcher.

Upon completion of this course students should be able to:

NARS	Rotation	ILO Type
1.1. Take and record a structured, patient centered history.	Medicine	C
1.2. Adopt an empathic and holistic approach to the patients and their problems.		C
1.3. Assess the mental state of the patient.		C
1.4. Perform appropriately timed full physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive.		C
1.5. Prioritize issues to be addressed in a patient encounter.		A & C
1.6. Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.		A& C
1.7. Recognize and respond to the complexity, uncertainty and ambiguity inherent in medical practice.		D & C
1.8. Apply knowledge of the clinical and biomedical sciences relevant to the clinical problem at hand.		A
1.9. Retrieve, analyze, and evaluate relevant and current data from literature, using information technologies and library resources, in order to help solve a clinical problem based on evidence (EBM).		D & C
1.10. Integrate the results of history, physical and laboratory test findings into a meaningful diagnostic formulation.		A&C

1.11. Perform diagnostic and intervention procedureC2 in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances.		C
1.12. Adopt strategies and apply measures that promote patient safety.		C
1.13. Establish patient-centered management plans in partnership with the patient, his/her family and other health professionals as appropriate, using Evidence Based Medicine in management decisions.		A&C
1.14. Respect patients' rights and involve them and /or their families/carers in management decisions.		C & D
1.15. Provide the appropriate care in cases of emergency, including cardio-pulmonary resuscitation, immediate life support measures and basic first aid procedures.		A&C
1.16. Apply the appropriate pharmacological and non-pharmacological approaches to alleviate pain and provide palliative care for seriously ill people, aiming to relieve their suffering and improve their quality of life.		A&C
1.17. Contribute to the care of patients and their families at the end of life, including management of symptoms, practical issues of law and certification.		A&C
2.7 Provide care for specific groups including pregnant women, newborns and infants, adolescents and the elderly.		D & C
2.9 Adopt suitable measures for infection control.		A&C
3.1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, commitment, compassion, and respect.		D
3.2. Adhere to the professional standards and laws governing the practice, and abide by the national code of ethics issued by the Egyptian Medical Syndicate.		D & C
3.3. Respect the different cultural beliefs and values in the community they serve.		C
3.4. Treat all patients equally, and avoid stigmatizing any category regardless of their social, cultural, ethnic backgrounds, or their disabilities.		C & D
3.5. Ensure confidentiality and privacy of patients' information.		D
3.7. Recognize and manage conflicts of interest.		D
3.8. Refer patients to appropriate health facility at the appropriate stage.		A,D,C
3.9. Identify and report any unprofessional and unethical behaviors or physical or mental conditions related to himself, colleagues or any other person that might jeopardize patients' safety.		D
4.5 Identify various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of illness/disease and explain the ways in which they operate on the body (pathogenesis).		A
4.6 Describe altered structure and function of the body and its major organ systems that are seen in various diseases and conditions.		A
4.7 Describe drug actions: therapeutics and pharmacokinetics; side effects and interactions, including multiple treatments, long term conditions and non-prescribed medication; and effects on the population.		A
5.1 Recognize the important role played by other health care professions in patients' management.		C & D

5.2 Respect colleagues and other health care professionals and work cooperatively with them, negotiating overlapping and shared responsibilities and engaging in shared decision-making for effective patient management.		C & D
5.3 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports collaborative work.		C & D
5.4 Apply leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system.		C & D
5.5 Communicate effectively using a written health record, electronic medical record, or other digital technology.		C & D
5.6 Evaluate his/her work and that of others using constructive feedback.		D
5.7 Recognize own personal and professional limits and seek help from colleagues and supervisors when necessary.		C & D
5.9 Use health informatics to improve the quality of patient care.		D
5.10 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements.		D
5.12 Demonstrate accountability to patients, society, and the profession.		D
6.1 Regularly reflect on and assess his/her performance using various performance indicators and information sources.		D
6.2 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice		D
6.3 Identify opportunities and use various resources for learning.		D
6.4 Engage in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.		A- D
6.5 Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them.		A- D
6.6 Effectively manage learning time and resources and set priorities.		D
6.10 Summarize and present to professional and lay audiences the findings of relevant research and scholarly inquiry.		D

Professional Information

Block Aims

Overall Aims

1. This block aims to provide students with fundamental knowledge and clinical skills that enable him/her to detect, manage and/or refer to common and important obstetrics and gynecologic problems.
2. By the end of the blocks, the students will be able to take informative history, perform appropriately timed physical examination of patients appropriate to the age, gender, and clinical presentation of the patient while being culturally sensitive, do some clinical procedures and interpret important investigations related to obstetrics and gynecologic problems
3. By the end of the blocks, the students will be able counsel patients and their families about common obstetrics and gynecologic problems

Intended Learning Outcomes of the block:**A- Knowledge and understanding****Upon completion of the course students should be able to:**

- A1- Apply definition, etiology, pathogenesis, clinical features, complications, principles of prevention and management in common obstetrics and gynecologic problems.
- A2- Interpret differential diagnosis of common obstetrics and gynecologic problems presenting to doctors in primary health care setting, hospital and community, with emphasis on early manifestations of serious diseases (e.g., malignancy) and emergencies.
- A3- Correlate the risk factors , outcomes and treatment options of common clinical problems related to the field of obstetrics and gynecologic problems
- A4- Select the appropriate investigations and interpret their results taking into consideration cost/ effectiveness factors.
- A5- Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- A6- Construct appropriate management algorithm (both diagnostic and therapeutic) for patients with common obstetrics and gynecologic problems illness both acute and chronic.

C- Clinical skills***By the end of the course, students should be able to:***

- C1- Obtain and record informative history.
- C2-Examine the patients systematically appropriate to the reproductive age, and clinical presentation of the patient while being culturally sensitive.
- C3- Design and /or present a structured, patient centered history and an appropriately timed full physical examination of patients.
- C4- Show how perform basic gynecology and obstetrics procedures at level of primary health care.
- C5- Apply measures that promote patient safety.
- S6. Apply suitable measures for infection control when dealing with the patients and instruments.
- C7- Conduct patient-focused care while working with health care professionals.

D- Generic and transferable skills

- D1- Perform practice-based improvement activities using portfolio.

- D2- Practice effectively using a written health record, electronic medical record, or other digital technology
- D3- Display effective communication with patients, their families and community through proper verbal and written means, respecting their beliefs and level of education.
- D4- Display respect, compassion, and integrity; a responsiveness to the needs of patients and society.
- D5- Display a commitment to ethical principles including provision or withholding of clinical care, confidentiality of patient information, informed consent.
- D6- Work effectively with others as a member of team work by acting in small group.
- D7- Display adequate cooperation with his/her colleagues
- D8- Arrange the efforts required to accomplish the tasks in specified time.
- D9- Verify the use of sources of biomedical information to remain current with advances in knowledge and practice.
- D10- Share in the work efficiently in responsible manner keeping the Instruments and Equipment of the Department intact and clean.
- D11- Adhere to the basic ethical and medico-legal principles that should be applied in practice.
- D12- Describe his/her work and that of others using constructive feedback.
- D13- Present regular reflection on and assess his/her performance using various performance indicators and information sources.
- D14- Initiate a personal learning plan to enhance professional practice
- D15- Identify opportunities and use various resources for learning.
- D16- Integrate in inter-professional activities and collaborative learning to continuously improve personal practice and contribute to collective improvements in practice.
- D17- Organize learning time and resources and set priorities
- D18- Display accountability to patients, society, and the profession.

Structure of the block

<i>Week</i>	Lectures (list number)	Practical (list number)	PORTFLIO TASKS (NUMBER)	CASE BASED Discussions (NUMBER)	Formative Assessment (NUMBER)	Revisions and Exams	Total
1 st	3	9	1	6			
2 nd	3	9	2	6	1		
3 rd	3	9	2	6			
4 th	3	9	2	6	1		
5 th	3	9	3	6			
6 th	3	9	2	6	1		
7 th	3	9	4	6			
8 th	3	9	4	6	1		
9 th	3	9	3	6			
10 th	3	9	2	6	1		
11 th	3	0	3	0			
12 th	3	0	3	0	1		
13 th	3	0	3	0			
14 th	3	0	4	0	1		
15 th	3	0	2	0			
16 th	3	0	2	0	1		
17 th	3	0	2	0			
18 th	3	0	4	0	1		
19 th	3	0	3	0			
20 th	2	0	2	0	1		
21 st	2	0	2	0			
22 nd	2	0	2	0	1		
23 rd	2	0	2	0			
24 th	2	0	2	0	1		
25 th	2	0	2	0			
26 th	2	0	3	0	1		
27 th	2	0	3	0			
28 th	2	0	1	0	1		
	75	90		60			

As regard lecture , practical and case based discussion , Number = contact hours

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Obstetrics & Gynecology (OBG-418)

Week	Lectures (list number)	Practical (list number)	Portfolio tasks (number)	Case based discussions (number)	Formative assessment (number)	Revisions and Exams	
1 st	*Fertilization and early embryo development. *Development and function of placenta & fetoplacental unit, membranes dynamics of amniotic fluid. * Anatomy and embryology *Anatomy of fetal head & female pelvis	-Identification of the female pelvis and organs (Clinical illustrations and model)	1	-	-	-	
2 nd	*Maternal changes in pregnancy, diagnosis of pregnancy, antenatal care and risk management. *Teratogenic agent	-Clinical illustrations on placental abnormalities and Physiological changes during pregnancy	2	Pregnant woman with minor complaints during pregnancy	1	-	
3 rd	*Imaging in obstetrics & gynecology and prenatal diagnosis. *Multiple pregnancy	-Counselling for Preconception and antenatal care	2	Pregnant women in her preconception visit	-		
4 th	*Infections during pregnancy. *Surgical complications on pregnancy (appendicitis/ovarian tumors /fibroid /breast cancer). * Female genital mutilation.	-Obstetric history taking	2	Interpretation of routine investigations during pregnancy	1	-	

5 th	*Definitions related to labor, prodromal changes, and normal uterine action, stages of labor and mechanism of normal labor. *Management of normal labor and partogram	-Management Of the 3rd stage of labour -Visit to the labour ward whenever possible *Interpretation of the partograph	3	-Woman presented with 1ry postpartum hemorrhage	-	-	
6 th	*Complications of third stage of labor: Post-Partum hemorrhage, Retained Placenta, Obstetric shock and acute inversion of the uterus.	-Interpretation of the CTG (NST AND CST)	2	-Abnormal fetal heart rate tracing management	1	-	
7 th	* Normal menstruation, dysmenorrhea and PMS. *Amenorrhea	-Clinical illustrations -Menstrual history taking	4	-Female patient presented with 1ry/ 2ry amenorrhea -Female patient c/o menopausal symptoms	-	-	

8 th	* Puberty & menopause *Vulval diseases /cancer & vaginal cancers	-Gynecological examination (Inspection) -Clinical illustrations and images	4	-Woman presented with abnormal vaginal discharge -Woman presented with Vulval mass	1		
9 th	*Disease of uterine cervix * CIN and cervical cancer.	-Gynecological examination (palpation and Casco speculum examination) -Clinical illustrations and images	3	-Woman presented with contact bleeding			
10 th	* Hypertension with pregnancy * Vomiting in pregnancy	How to measure blood pressure in pregnant woman	2	-Pregnant woman with hypertensive disorder during pregnancy	1		
11 th	*Medical disorders during pregnancy 1 (Cardiac, thyroid, seizure, Diabetes, Renal)	-Obstetric history and examination (Model)	3	-Pregnant woman with DM during pregnancy -Pregnant woman with cardiac disease during pregnancy			
12 th	*Medical disorders during pregnancy 2 (Anemia, Cholestasis, Fatty liver, UTI, DVT, Thrombophilia)	-Obstetric history and examination (clinical case)	3	- Pregnant woman with Anemia during pregnancy - Pregnant woman with UTI during pregnancy	1		
13 th	*Abnormal labor Contracted pelvis and obstructed labor and abnormal uterine action * Breech delivery * Occipito-posterior delivery, face, brow and transverse malpresentations		3	-A case of abnormal progress of labour			

14 th	*Obstetric complications (Cervical insufficiency , Multiple pregnancy and Rh incompatibility) * Asphyxia, birth injuries and IUFD	-Obstetric examination -Clinical illustrations and images -Visit to the labor ward whenever possible	4	-A case of RPL due to cervical insufficiency - A case of multiple pregnancy	1		
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15 th	*Operative obstetrics *Induction of labor and operative vaginal delivery & episiotomy	-Identification of obstetric instruments -Clinical illustrations and videos	2	-			
16 ^h	*Sexually Transmitted Diseases * Genital infections and PID	-Clinical illustrations	2	-A case presented with STDs	1		
17 th	*Perinatal infections *Puerperal pyrexia and sepsis.	-Clinical case	2	-A pregnant woman with suspected TORCH Infection			
18 th	-Family planning	-Counselling for contraception use -Identification of different methods of contraception (models, images and illustrations)	4	-A case of requesting contraceptive method -A case presented with abnormal uterine bleeding with hormonal contraception	1		
19 th	-Family planning	-IUD insertion technique and counselling	3	-A case of missed IUD threads -A case with heavy bleeding with IUD			
20 th	*Bleeding in early pregnancy (abortion / molar pregnancy / ectopic pregnancy)	-Clinical illustrations and images	2	A case of bleeding in early pregnancy	1		
21 th	*Antepartum hemorrhage: placenta previa / accidental hemorrhage	-Obstetric history and examination (clinical case)	2	A case of pregnant woman with antepartum hemorrhage			
22 th	*Infertility and ART.	-HSG procedure and interpretation	2	A case of female patient presented with infertility	1		
23 th	*Ovulation disorders, hyperprolactinemia and PCO. *Hirsutism	-Clinical illustrations -Gynecology clinical case	2	A case of female patient with oligomenorrhea and Hirsutism			

Obstetrics & Gynecology (OBG-418)

24 th	* Endometrial hyperplasia & carcinoma and sarcoma. *Abnormal genital bleeding.	-Gynecology clinical case	2	A case of post menopausal bleeding	1		
25 th	*Ovarian tumors and fibroids. *Endometriosis & adenomyosis	Gynecology clinical case	2	A case of pelvi-abdominal mass			
26 th	*Perineal lacerations & fistula. *Urinary incontinence. *Genital prolapse & RVF	-Clinical illustrations and images	3	-A case of mass protruding from the vulva -A case of urinary incontinence	1		
27 th	Disproportionate fetal growth (IUGR) *PROM, prematurity, post maturity	-Obstetric history and examination (clinical case)	3	-A case of small for gestational age -A case of preterm labour			
28 th	*CS & maternal mortality *Gynecological procedures	-Clinical illustrations and Videos	1	--	1		

Learning Methods

- 1- Lectures for knowledge outcomes.
- 2- Practical (Bedside/skill lab) sessions to gain clinical skills
- 3-Case based discussion.
- 4-Group discussions (Case-based).

Methods of Student Assessment

1. Formative:

This is used to monitor student's learning to provide ongoing feedback that can be used by instructors to improve their teaching and by students to improve their learning. It's given biweekly and the answers are presented and discussed immediately with you after the assessment.

2. Summative

It is used to evaluate student's achievements at the end of an instructional unit. The grades tell whether the student achieved the learning goal or not.

The student's performance will be assessed according to the following:

Assessment task	Type of assessment	Proportion of total assessment	
		%	Marks
End block exam	In the form of Single answer (MCQs) At mid of the year.	20%	72 Marks
Portfolio	Attendance: 18 marks Formative exam: 9marks Case presentation: 9 marks	10%	36 Marks
Final written exam	75%(MCQs) and 25% short answer questions and modified short essay= 36 marks.	40%	144 Marks
OSCE Final	In the form of stations/ sheet on US pictures/ HSG/ Instruments/ Museum specimens/ Contraceptive methods.	30%	108 Marks
Total		100%	360

Block evaluation

- Students' results
- Students' feedback
- Tutors' feedback

Block Contents

Topics and Their Intended Learning Outcomes							
Topic	Subcompetencies A	Lectures Titles	Specified reference (Kaplan Chapter) OB_1	Week No.	Date		Contact Hours
Basic Principles of Gynecology	A.1,A2,A3, A4,A5,A6	Female Reproductive Anatomy Reproductive Basics Placental Hormones Physiologic Changes in Pregnancy Physiology of Lactation Embryology and Fetology Perinatal Statistics and Terminology Genetic Disorders	OB_1	1 st			3
				2 nd			3
	A.1,A2,A3, A4,A5,A6	Diagnosing Pregnancy Establishing Gestational Age Identifying Prenatal Risk Factors Normal Pregnancy Events Normal Pregnancy Complaints Safe and Unsafe Immunizations	OB_4	3 rd			3
				4 th			3
	A.1,A2,A3, A4,A5,A6	Obstetrical Ultrasound Invasive Procedures Prenatal Diagnostic Testing	OB_3	5 th			3
	A.1,A2,A3, A4,A5,A6	First Trimester Tests Second Trimester Tests Third-Trimester Tests	OB_5	6 th			3
Prenatal Management of the Normal Pregnancy	A.1,A2,A3, A4,A5,A6	Early Pregnancy Bleeding Induced Abortion Fetal Demise Ectopic Pregnancy	OB_2	1 st			3
				2 nd			3
Obstetric Procedures Laboratory	A.1,A2,A3, A4,A5,A6	Overview Nonstress Test Amniotic Fluid Assessment	OB_12	3 rd			3
				4 th			3
Prenatal Failed Pregnancy	A.1,A2,A3, A4,A5,A6						
Antepartum in Fetal	A.1,A2,A3, A4,A5,A6						

Pregnancy	Late Preterm	Disorders of the Vagina and Vulva	Perinatal Infections	Obstetric Complications	Obstetric Complications	Hypertensive Complications	
A.1,A2,A3, A4,A5,A6	Biophysical Profile (BPP) Contraction Stress Test Umbilical Artery Doppler Placenta previa Accidental hemorrhage Vasa previa	OB_6	7 th				3
	Vaginal Discharge Vulvar Diseases Sexually Transmitted Diseases Spectrum of Organisms STDs with Ulcers STDs without Ulcers Hepatitis B Virus (HBV) Human Immunodeficiency Virus (HIV)	GYN_3	8 th				3
	Nonsexually Transmitted Sexually Transmitted	OB_7	9 th				3
	Cervical Insufficiency Multiple Gestation Alloimmunization	OB_8	10 th				3
	Preterm Labor Premature Rupture of Membranes Post-term Pregnancy	OB_8	11 th				3
	Hypertension in Pregnancy Gestational Hypertension Preeclampsia Preeclampsia with Severe Features Eclampsia Chronic Hypertension with or without Superimposed Preeclampsia HELLP Syndrome	OB_9	12 th				3

Medical Complications in Pregnancy Disproportion at Fetal Orientation in Utero Intrapartum Fetal Monitoring Postpartum Issues	A.1,A2,A3,A4,A5,A6	Cardiac Disease Thyroid Disease Seizure Disorders Diabetes Anemia Liver Disease Urinary Tract Infections Thrombophilias Antiphospholipid Syndrome	OB_10	13 th			3
	A.1,A2,A3,A4,A5,A6	Intrauterine Growth Restriction Macrosomia	OB_11	14 th			3
	A.1,A2,A3,A4,A5,A6	Orientation in Utero Normal and Abnormal Labor Overview of Labor Stages of Labor Conduct of Normal Spontaneous Labor Abnormal Labor Obstetric Complications During Labor	OB_13 OB_14	15 th			3
	A.1,A2,A3,A4,A5,A6	Fetal Heart Rate Monitoring Intrapartum Fetal Heart Rate Monitoring Intrauterine Resuscitation Fetal pH Assessment Category III: Abnormal Tracings	OB_16	16 th			3
	A.1,A2,A3,A4,A5,A6	Postpartum Physiologic Issues Postpartum Contraception and Immunizations Postpartum Hemorrhage Postpartum Fever	OB_18	17 th			3
	A.1,A2,A3,A4,A5,A6	Menstrual Physiology Premenarchal Vaginal Bleeding Abnormal Vaginal Bleeding Primary Amenorrhea Secondary Amenorrhea	GYN_11	18 th			3

Hormonal Disorders	Pain	A.1,A2,A3, A4,A5,A6	Precocious Puberty Premenstrual Disorders Menopause	GYN_12	19 th			3
		A.1,A2,A3, A4,A5,A6	Pelvic Inflammatory Disease Primary Dysmenorrhea Secondary Dysmenorrhea	GYN_8	20 th			2
	Infertility	A.1,A2,A3, A4,A5,A6	Infertility Polycystic Ovarian Syndrome Hirsutism	GYN_12	21 th			2
	Disorders of the Cervix	A.1,A2,A3, A4,A5,A6	Cervical Lesions Cervical Neoplasia Müllerian Anomalies Enlarged Uterus Endometrial Neoplasia	GNY_4	22 th			2
	Pelvic Relaxation	A.1,A2,A3, A4,A5,A6	Pelvic Organ Prolapse Vaginal Prolapse Urinary Incontinence	GYN_2	23 th			2
	Disorders of the Ovaries and	A.1,A2,A3, A4,A5,A6	Physiologic Enlargement Prepubertal Pelvic Mass Premenopausal Pelvic Mass Painful Adnexal Mass Postmenopausal Pelvic Mass	GYN_5	24 th			2
	Gestational Trophoblastic	A.1,A2,A3, A4,A5,A6	Gestational Trophoblastic Neoplasia	GYN_6	25 th			2
		A.1,A2,A3, A4,A5,A6	Barrier-Spermicidal Methods Steroid Contraception Intrauterine Contraception Long-Acting Reversible Contraception Natural Family Planning—Periodic Abstinence Coitus Interruptus Vaginal Douche Lactation Sterilization	GYN_9	26 ^h			2

Operative Obstetrics Gynecologic procedures	A.1,A2,A3, A4,A5,A6	Operative Obstetrics Cesarean section Low forceps. Vacuum extractor Vaginal Birth After Cesarean (VBAC) External Cephalic Version	OB_17	27 th			2
	A.1,A2,A3, A4,A5,A6	Gynecologic US Pap smear Colposcopy LEEP Dilatation and curettage Vulvar biopsy. Hysteroscopy Laparoscopy. Hysterosalpingography.	GYN_1	28 th			2
28 topics							75 hrs

Skills and tasks and Their Intended Learning Outcomes

In addition to real patients and skills stated in the NARS should be learned either in practical or group discussion

No.	Sub-competencies C and D	Bedside/skill lab sessions and titles Practical	Weeks	Date		Hours
				from	to	
1.	C1, C2, C3, C4, C5, C7 D1-D18	-Identification of the female pelvis and organs (Clinical illustrations and model)	1 st			4
2.	C1, C2, C3, S4, C5, C7 D1-D18	-Clinical illustrations on placental abnormalities and Physiological changes during pregnancy	2 nd			4
3.	C1, C2, C3, C4, C5, C7 D1-D18	-Counselling for Preconception and antenatal care	3 rd			4
4.	C1, C2, C3, C4, C5, C7 D1-D18	-Obstetric history taking	4 th			4
5.	C1, C2, C3, S4, C5, C6, C7 D1-D18	-Management of the 3 rd stage of labour -Visit to the labour ward whenever possible *	5 th			4
6.	C1, C2, C3, C4, C5, C7 D1-D18	-Interpretation of the CTG (NST AND CST)	6 th			4
7.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical illustrations -Menstrual history taking	7 th			4
8.	C1, C2, C3, C4, C5, C6, C7 D1-D18	-Gynecological examination (Inspection) -Clinical illustrations and images	8 th			4

9.	C1, C2, C3, C4, C5, C6, C7 D1-D18	-Gynecological examination (palpation and Casco speculum examination) -Clinical illustrations and images	9 th			4
10.	C1, C2, C3, C4, C5, C7 D1-D18	How to measure blood pressure in pregnant woman	10 th			4
11.	C1, C2, C3, C4, C5, C7 G1- D18	-Obstetric history and examination (Model)	11 th			4
12.	C1, C2, C3, C4, C5, C7 D1-D18	-Obstetric history and examination (clinical case)	12 th			4
13.	C1, C2, C3, C4, C5, C7 D1-D18	-Interpretation of the partograph	13 th			4
14.	C1, C2, C3, C4, C5, C7 D1-D18	-Obstetric examination -Clinical illustrations and images -Visit to the labour ward whenever possible *	14 th			4
15.	C1, C2, C3, C4, C5, C7 D1-D18	-Identification of obstetric instruments -Clinical illustrations and videos	15 th			4
16.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical illustrations	16 th			4
17.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical case	17 th			4

Obstetrics & Gynecology (OBG-418)

18.	C1, C2, C3, C4, C5, C7 D1-D18	-Counselling for contraception use -Identification of different methods of contraception (models, images and illustrations)	18 th			4
19.	C1, C2, C3, S4, C5, C7 D1-D18	-IUD insertion technique and counselling	19 th			4
20.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical illustrations and images	20 th			4
21.	C1, C2, C3, C4, C5, C7 D1-D18	-Obstetric history and examination (clinical case)	21 th			4
22.	C1, C2, C3, C4, C5, C7 D1-D18	-HSG procedure and interpretation	22 th			4
23.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical illustrations -Gynecology clinical case	23 th			4
24.	C1, C2, C3, C4, C5, C7 D1-D18	-Gynecology clinical case	24 th			4
25.	C1, C2, C3, C4, C5, C7 D1-D18	-Gynecology clinical case	25 th			4
26.	C1, C2, C3, C4, C5, C7 D1- D18	-Clinical illustrations and images	26 ^h			4
27.	C1, C2, C3, C4, C5, C7 D1-D18	-Obstetric history and examination (clinical case)	27 th			4
28.	C1, C2, C3, C4, C5, C7 D1-D18	-Clinical illustrations and Videos	28 th			5
		Total				113

Self Directed Learning and Group Discussion (SDL & GD)

Cases scenario with 10 MCQs

No.	Subcomptancies A and D	Title of cases and reference	Weeks	Date		Hours
				from	to	
1.	A1-A6 D1-D18	Diagnosis of pregnancy and investigations in the first antenatal visit	1 st			3
2.	A1-A6 D1-D18	-Pregnant woman with minor complaints during pregnancy	2 nd			3
3.	A1-A6 D1-D18	-Pregnant women in her preconception visit	3 rd			3
4.	A1-A6 D1-D18	-Interpretation of routine investigations during pregnancy	4 th			3
5.	A1-A6 D1-D18	-Woman presented with 1ry postpartum hemorrhage	5 th			3
6.	A1-A6 D1-D18	-Abnormal fetal heart rate tracing management	6 th			3
7	A1-A6 D1-D18	-Female patient presented with 1ry/ 2ry amenorrhea -Female patient c/o menopausal symptoms	7 th			3
8	A1-A6 D1-D18	-Woman presented with abnormal vaginal discharge -Woman presented with Vulval mass	8 th			3
9	A1-A6 D1-D18	-Woman presented with contact bleeding	9 th			3
10	A1-A6 D1-D18	-Pregnant woman with hypertensive disorder during pregnancy	10 th			3
11	A1-A6 D1-D18	-Pregnant woman with DM during pregnancy -Pregnant woman with cardiac disease during pregnancy	11 th			3
12	A1-A6 D1-D18	- Pregnant woman with Anemia during pregnancy - Pregnant woman with UTI during pregnancy	12 th			3
13	A1-A6 D1-D18	-A case of RPL due to cervical insufficiency - A case of multiple pregnancy	13 th			3
14	A1-A6 D1-D18	A case presented with STDs	14 th			3
15	A1-A6 D1-D18	-A case presented with STDs	15 th			3

16	A1-A6 D1-D18	-A pregnant woman with suspected TORCH infection	16 th			3
17	A1-A6 D1-D18	-A case of requesting contraceptive method - A case presented with abnormal uterine bleeding with hormonal contraception	17 th			3
18	A1-A6 D1-D18	-A case of missed IUD threads -A case with heavy bleeding with IUD	18 th			3
19	A1-A6 D1-D18	A case of bleeding in early pregnancy	19 th			3
20	A1-A6 D1-D18	A case of pregnant woman with antepartum hemorrhage	20 th			3
21	A1-A6 D1-D18	A case of female patient presented with infertility	21 th			3
22	A1-A6 D1-D18	A case of female patient with oligomenorrhea and hirsutism	22 th			3
23	A1-A6 D1-D18	A case of postmenopausal bleeding	23 th			3
24	A1-A6 D1-D18	A case of pelvic pain	24 th			3
25	A1-A6 D1-D18	-A case of mass protruding from the vulva -A case of urinary incontinence	25 th			3
26	A1-A6 D1-D18	-A case of small for gestational age -A case of preterm labour	26 ^h			3
27	A1-A6 D1-D18	A case of pyelonephritis with pregnancy	27 th			4
	Total					82 hrs

Formative assessment

This is used to monitor student's learning to provide ongoing feedback that can be used by instructors to improve their teaching and by students to improve their learning.

It's given at least once in the form of quizzes that is made available for the students at the E-learning site at the end of the block.

Answers are presented instantly after the attempts and discussed on the students groups or in person with the teaching staff

Questions should be consistent with the level of the final exam. The student's attendance is a condition for entering the summative exams. The electronic or paper achievement file must be used to follow up on the students' evaluation, and its completion is a condition for entering the final exams

Blueprint of the block

No.	List of Topics (lectures/cases)	ILOs Subcompt ancies	Weight* from	Total marks	End of the block	Final written exam MCQ and 25% short answer & modified short essay
1.	*Fertilization and early embryo development. *Development and function of placenta & fetoplacental unit, membranes dynamics of amniotic fluid. * Anatomy and embryology *Anatomy of fetal head & female pelvis	A1,A2,A3,A4,A5,A6	3.7%	8 marks	5 marks	3 marks
2.	*Maternal changes in pregnancy, diagnosis of pregnancy, antenatal care and risk management. *Teratogenic agents	A1,A2,A3,A4,A5,A6	4.1%	9 marks	5 marks	4 marks
3.	*Imaging in obstetrics & gynecology and prenatal diagnosis. *Multiple pregnancy	A1,A2,A3,A4,A5,A6	3.2%	7 marks	5 marks	2 marks

4.	*Infections during pregnancy. *Surgical complications on pregnancy (appendicitis/ovarian tumors /fibroid /breast cancer). * Female genital mutilation	A1,A2,A3 ,A4,A5,A6	3.7%	8 marks	5 marks	3 marks
5.	*Definitions related to labor, prodromal changes, and normal uterine action, stages of labor and mechanism of normal labor. *Management of normal labor and partogram	A1,A2,A3 ,A4,A5,A6	4.1%	9 marks	5 marks	4 marks

6.	*Complications of third stage of labor: Post-Partum hemorrhage, Retained Placenta, Obstetric shock and acute inversion of the uterus	A1,A2,A3 ,A4,A5,A6	3.2%	7 marks	5 marks	2 marks
7.	* Normal menstruation, dysmenorrhea and PMS. *Amenorrhea	A1,A2,A3, A4,A5,A6	3.7%	8 marks	5marks	3 marks
8.	*Antepartum hemorrhage: placenta previa / accidental hemorrhag	A1,A2,A3, A4,A5,A6	3.7%	8 marks	5 marks	3 marks
9.	*Bleeding in early pregnancy (abortion / molar pregnancy / ectopic pregnancy	A1,A2,A3, A4,A5,A6	4.1%	9 marks	5marks	4 marks
10.	hypertension with pregnancy * vomiting in pregnancy	A1,A2,A3, A4,A5,A6	4.1%	9 marks	6marks	3 marks

Obstetrics & Gynecology (OBG-418)

11.	*Medical disorders during pregnancy 1 (Cardiac, thyroid, seizure, Diabetes, Renal)	A1,A2,A3, A4,A5,A6	4.1%	9 marks	6marks	3 marks
12.	*Medical disorders during pregnancy 2 (Anemia, Cholestasis, Fatty liver, UTI, DVT, Thrombophilia)	A1,A2,A3, A4,A5,A6	3.7%	8 marks	5marks	3 marks

13.	*Abnormal labor Contracted pelvis and obstructed labor and abnormal uterine action * Breech delivery * Occipito-posterior delivery, face, brow and transverse malpresentation	A.1,A2,A3 , A4,A5,A6	3.7%	8 marks	5 marks	3 marks
14.	*Obstetric complications (Cervical insufficiency Multiple pregnancy and Rh incompatibility) * Asphyxia, birth injuries and IUF	A.1,A2,A3 , A4,A5,A6	4.1%	9 marks	5marks	4 marks
	Mid exam				72 marks	Mid exam
15	*Operative obstetrics *Induction of labor and operative vaginal delivery & episiotomy	A.1,A2,A3 , A4,A5,A6	3.7%	8 marks		8 marks
16	*Sexually Transmitted Diseases * Genital infections and PID *Puerperal pyrexia and sepsis	A.1,A2,A3 , A4,A5,A6	3.2%	7 marks		7 marks
17	*Perinatal infections	A.1,A2,A3 , A4,A5,K	4.1%	8 marks		8 marks

18	-Family planning	A.1,A2,A3 , A4,A5,A6	3.2%	7 marks		7 marks
19	-Family planning	A.1,A2,A3 , A4,A5,A6	3.7%	8 marks		8 marks
20	*Disease of uterine cervix * CIN and cervical cancer	A.1,A2,A3 , A4,A5,	3.2%	7 marks		7 marks
21	* Puberty & menopause *Vulval diseases /cancer & vaginal cancer	A.1,A2,A3 , A4,A5,A6	4.1%	8 marks		8 marks
22	*Infertility and ART.	A.1,A2,A3 , A4,A5,A6	4.1%	8 marks		8 marks
23	*Ovulation disorders, hyperprolactinemia and PCO. *Hirsutism	AK.1,A2,A 3 , A4,A5,A6	4.1%	8 marks		8 marks
24	* Endometrial hyperplasia & carcinoma and sarcoma. *Abnormal genital bleeding.	A.1,A2,A3 , A4,A5,A6	2.7%	6 marks		6 marks

25	*Ovarian tumors and fibroids. *Endometriosis & adenomyosis	A.1,A2,A3 , A4,A5,A6	2.3%	5 marks		5 marks
26	*Perineal lacerations & fistula. *Urinary incontinence. *Genital prolapse & RVF	A.1,A2,A3 , A4,A5,A6	2.7%	6 marks		6marks
27	Disproportionate fetal growth (IUGR) *PROM, prematurity, post maturity	A.1,A2,A3 , A4,A5,A6	3.2%	7 marks		7marks
28	*CS & maternal mortality *Gynecological procedures	A.1,A2,A3 , A4,A5,A6	3.2%	7 marks		7 marks
Total			100 %	216 marks	72 marks	108 Marks MCQ & 36 marks المقالی
						144 marks

Please redistribute the final marks on the 25% short answer and modified short essay to fulfill 36 marks

	List of skills	ILOs subcomptancies	Weight*	Number of stations	Marks of OSCE
Skills					
1.	Focused history of gynecology case	C1, C2, C3,C4, C5, C7 D1-D18	7%	1	7.5
2.	Focused history of obstetric case	C1, C2, C3,C4, C5, C7 D1-D18	7%	2	7.5
3.	Focused gynecology examination	C1, C2, C3, S4, C5, C6, C7 D1-D18	7%	3	7.5
4.	Focused obstetric examination	C1, C2, C3, S4, C5, C6, C7 D1-D18	7%	4	7.5
5.	Illustration of different medical signs photos	C1, C2, C3,C4, C5, C7 D1-D18	7%	5	7.5
6.	Illustration of obstetric and gynecology sonography photos.	C1, C2, C3,C4, C5, C7 D1-D18	7%	6	7.5
7.	Illustration of HSG photos.	C1, C2, C3,C4, S5, C7 D1-D18	6.5%	7	7
8.	Blood pressure mesurment in pregnant lady	C1, C2, C3, C4, C5, C6, C7 D1-D18	6.5%	8	7
9.	Delivery of the placenta	C1, C2, C3, C4, C5, C6, C7 D1-D18	6.5%	9	7
10.	IUD insertion	C1, C2, C3, S4, C5, C6, C7 D1-D18	6.5%	10	7
11.	IUD removal	C1, C2, C3, C4, C5, C6, C7 D1-D18	6.5%	11	7
12.	Nexplanon Insertion	C1, C2, C3, C4, C5, C6, C7 D1-D18	6.5%	12	7

13.	Detection of proteinuria	C1, C2, C3, C4, C5, C6, C7	6.5%	13	7
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		C1-D18			
14.	Assessment of the cervical dilation and effacement during labour	C1, C2, C3, C4, C5, C6, C7 D1-D18	6.5%	14	7
15.	Counselling for family planning methods.	C1, C2, C3, C4, C5, C6, C7 D1-D18	6%	15	7
Total					108 marks

Weight*= decided according to hours, amounts of information and clinical significance

الدراسات

Assessment task	Type of assessment	Proportion of total assessment		
		%	Marks	
Final written exam	75%(MCQs) and 25% short answer questions and modified short essay= 36 marks.	60%	MCQ	المقالي
			162 marks	54 marks
			216 Marks	
OSCE Final	In the form of stations/ sheet on US pictures/ HSG/ Instruments/ Museum specimens/ Contraceptive methods.	40%	144 Marks	
Total		100%	360	

Lecture Outlines

ILOs for the 4th year medical students lectures in OB/GYN

1-Embryology and genetics

- A. Describe the basic embryology and genetics of the female genital tract

2-Female reproductive anatomy

- B. Describe the basic anatomy of the female genital tract

3-Placental hormones

- A. List the placental hormones and their functions

4-Physiologic changes in pregnancy

- B. Describe the basic physiology of spermatogenesis, ovulation, pregnancy, and lactation
- C. List the stages of fetal development and risks related to premature birth
- D. Answer questions about the terminology and epidemiology of perinatal statistics and genetic disorders detectable at birth

5- Preconception care

- A. List the preconceptional investigations and describe the course of preconceptional care

6-Prenatal Management of the Normal Pregnancy

- B. Describe how to diagnose pregnancy, establish gestational age, and identify risk factors
- C. List normal pregnancy events and complaints
- D. Differentiate between safe and unsafe immunizations in pregnancy

7-Prenatal laboratory testing

- A. Clarify the difference between laboratory tests in the first, second, and third trimesters
- B. Explain the importance and function of each laboratory test

8-Normal Labor

- A. Describe the stages and management of the normal labour

9-Post partum issues

- A. Describe the causes and management of postpartum hemorrhage and fever
- B. List the sequence of physiologic changes expected after delivery
- C. Provide an overview of the special considerations for immunizations and contraception postpartum

10-Intrapartum fetal monitoring

- A. Describe the appropriate use of intrapartum fetal monitoring including FHR monitoring, fetal pH assessment, and category III fetal monitoring tracings
- B. Describe intrauterine resuscitation

11-Premenstrual disorders

- A. Describe the causes of premenstrual disorders including precocious puberty
- B. Describe normal menopause and approaches to treating symptoms

12-Menstrual abnormalities

- A. Describe the menstrual cycle
- B. Give a differential diagnosis and management of disorders of the menstrual cycle, including premenarchal menstrual bleeding, abnormal vaginal bleeding, and primary/secondary amenorrhea

13- Disorders of vulva and vagina

- A. Describe the common causes, diagnosis, and treatment of vaginal discharge
- B. List the most common vulvar diseases

14- Disease of uterus and uterine cervix

- A. Explain the use of vaccination to prevent cervical dysplasia
- B. List the common findings and their significance when diagnosing cervical lesions
- C. Give an overview of the epidemiology and management of cervical neoplasia
- D. Describe Müllerian anomalies

15=Hypertensive complications

- A. Differentiate between gestational hypertension, preeclampsia, eclampsia, and chronic hypertension with or without superimposed preeclampsia
- B. Describe the diagnosis, management, and complications of hypertensive syndromes in pregnancy
- C. Answer questions about HELLP syndrome

16=Operative obstetrics

- A. Describe the risks and indications for the use of obstetric forceps, vacuum extractor, emergency cesarean section, and elective cesarean section

17- Late pregnancy bleeding

- A. Differentiate between placental disorders and late pregnancy bleeding, including abruptio placentae, placenta previa, vasa previa, placenta accreta, placenta increta, and placenta percreta
- B. Describe the risk factors for and prognosis of uterine rupture

18- Disproportionat fetal growth

- A. Demonstrate understanding of intrauterine growth restriction
- B. Answer questions about macrosomia

19- Preterm labor

- A. Demonstrate understanding of causes, management and risks of preterm labour

20- Pelvic relaxations

- A. Demonstrate the relation between uterine/vaginal prolapse and urinary incontinence
- B. Describe other expected complications

21- Pelvic pain

- A. Differentiate primary and secondary dysmenorrhea
- B. Provide an overview of the diagnosis and treatment of pelvic inflammatory disease

22- Gynecological procedures

- A. Describe the most common gynecologic procedures

23- Obstetric procedures

- A. Describe the most common Obstetric procedures

24- Endometrial neoplasia

- A. Types and prognosis of endometrial neoplasia

25- Sexually Transmitted Diseases

- A. Give an overview of the organisms involved in STDs
- B. Differentiate between STDs with and without ulcers
- C. Describe what is known about the sexual transmission of hepatitis B and HIV

26- Perinatal infections

- A. Describe the route of transmission and common complications of perinatal infections including group B beta-hemolytic streptococci, toxoplasmosis, varicella zoster, rubella, cytomegalovirus, HSV, HIV, syphilis, and hepatitis B

27- Failed pregnancy

- A. Describe the detection and risks of ectopic pregnancy
- B. List the approaches to induced abortion at different stages of fetal development
- C. Describe the epidemiology and management of early pregnancy bleeding and fetal demise

28- Hirsutism

- A. Outline the causes of hirsutism

29- Polycystic ovarian syndrome (PCOS)

- A. Provide epidemiology, diagnosis, and management information about polycystic ovarian syndrome

30- Family planning

- A. List the advantages and disadvantages of different forms of contraception including barrier-spermicidal methods, steroid contraception, intrauterine contraception, coitus interruptus, natural family planning, lactation, vaginal douche, and sterilization

31- Abnormal labour

- A. List the abnormalities that can occur in the labor process
- B. Describe the risks and management of obstetric complications during labor

32- Medical disorders with pregnancy

- A. Describe the risks and special management of co-occurring medical conditions in pregnancy, including seizure disorders, DM, anemia, thyroid disease, cardiac disease, and liver disease
- B. Manage common infections occurring in pregnancy including urinary tract infections, pyelonephritis, cystitis, bacteriuria, and asymptomatic bacteriuria
- C. Give an overview of diagnosis and management of thrombophilias and antiphospholipid syndrome

33- Obstetric complications

- A. Describe the management of cervical insufficiency and multiple gestation
- B. Answer questions about alloimmunization

- C. List the management steps for preterm labor, premature rupture of membranes, and post-term pregnancy

34- Infertility

- A. List the different causes, investigations and management of different cases of infertility

Outlines of topics for self directed learning and case based discussions

General learning Objectives for case based discussion:

By the end of the lecture the student will be able to :

- 1- Integrate the results of history, physical examination and laboratory test findings into a meaningful diagnostic formulation.
- 2- Select the appropriate investigations.
- 3- Construct appropriate management algorithm (both diagnostic and therapeutic) for cases

Readings and references:

Basic materials:

- ☐ Department books: Lecture note
- ☐ Clinical handbook (distributed for free for all student)
- ☐ Student portfolio (distributed for free for all students)
- ☐ Audiovisual materials, jars and instruments.

Essential books (text books):

- ☐ Obstetrics by ten teachers 20th edition 2017: available from bookshops at the faculty
- ☐ Hacker and Moore 2016: available in bookstores of faculty

Recommended books:

- ☐ Novak's gynecology 15th edition, 2017: available from bookshops at the faculty
- ☐ Speroff clinical gynecologic endocrinology and infertility, 9th edition, 2016: available at bookshops at the faculty
- ☐ Fernando-Arias high-risk pregnancy, 2nd edition, 2009: available at bookshops at the faculty
- ☐ Williams Obstetrics, 25th edition, 2019: available at bookshops at the faculty.

SUGGESTED MATERIALS:

- ☐ CD-ROM containing topics and presentations in obstetrics and gynecology (available with the department book)

Facilities required for teaching & learning

Facilities used for teaching this course include:

LECTURE HALLS:

Three lecture halls for students in Classroom building.

A lecture hall in the OBGYN department (unit A)

A lecture hall in the 4th floor EBED building.

LIBRARIES:

A small library present in the OBGYN department (unit A).

Another digital library in first floor, EBAD building.

SKILL LAB:

Second floor, Ebeid building, OBGYN Hospital, equipped with dummies and mannequins to demonstrate the required skills.

BLACKBOARD COLLABORATE ACCOUNTS:

for hosting meetings via Staff members

CLINICAL FACILITIES:

- ☐ Obstetric outpatient clinic serving about 30 patients a day
- ☐ Gynecological outpatient clinic serving about 30 patient a day
- ☐ 2 general OB/GYN inpatients units in the hospital
- ☐ Emergency unit serving about 60 patients a day
- ☐ Operating theater in the emergency room with 1 delivery rooms and 1 operative theater.
- ☐ Third floor two operative theaters.
- ☐ E-learning hall.
- ☐ Ultrasound and fetal medicine unit.

Head of OBGYN Department: Prof. Dr. Salah Mohamed Rasheed