KERALA UNIVERSITY OF HEALTH SCIENCES
THRISSUR – 680 596

(Name of Medical College)

Emblem

COMPETENCY BASED MEDICAL EDUCATION (CBME)

MBBS

LOG BOOK
& PORTFOLIO

Department of Obstetrics & Gynaecology

(as per GMR 2019)

Name of the Student: ……..

Roll No: ……..

University Registration No: ……

LOGBOOK CERTIFICATE

This is to certify that the candidate Ms/Mr ……

Roll No. ……. KUHS Registration no. ……. admitted in the year ……..in ……. has undergone 20 weeks of training in Obstetrics & Gynaecology and *has satisfactorily completed / has not completed* all assignments &requirements mentioned in this logbook for the MBBS course in the subject of Obstetrics & Gynaecologyduring the period from……to…… .

She / He *is / is not* eligible to appear for the summative (University) assessment as on the date given below.

Signature with date

HEAD,

DEPARTMENT OF OBSTETRICS &GYNAECOLOGY

BIODATA of the Student

PH

Name of the student :

Date of birth :

Mobile number :

e-mail ID :

Permanent address :

Signature of the student……

GENERAL INSTRUCTIONS

1. Completion of the activities specified and submission of the certified logbook is a prerequisite for a student to apply for the end of phase summative examination.

2. The logbook is a record of the academic /co-curricular activities of the student, who would be responsible for maintaining his/her logbook. It should be maintained from beginning of phase 2 and completed by Phase 3 part2

3. The student is responsible for getting the entries in the logbook verified by the Faculty in charge regularly.

4. Entries in the logbook will reflect the activities undertaken in the department and have to be scrutinized by the Head of the concerned department.

5. The logbook is a record of various activities by the student like:
    - Overall participation & performance
    - Attendance
    - Participation in sessions
    - Record of completion of pre-determined activities
    - Acquisition of selected competencies

6. The logbook is the record of work done by the candidate in that department /specialty and should be verified by the college before submitting the application of the students for the University examination.

7.Students shall also write reflections on the topics learnt in relevant sections oflogbook.Reflectionsshouldbestructuredusingthefollowingguidingquestions:

a. Whathappened?(Whatdidyoulearnfromtheexperience?)

b. Sowhat?(Whataretheapplicationsofthelearning?)

c. Whatnext?(Howwouldyouapplytheseknowledgeandskills?)

LOG OF FORMATIVE ASSESSMENT

S.No	Phase	Type of Assessment	Date
1	II	Theory	
2		Practical	
3	III (1)	Theory	
4		Practical	
5	III (2)	Theory	
6		Practical	
7			
8			

Index

Competencies in Obstetrics and Gynaecology

There are 10 broad competencies in Obstetrics and 3 in Gynecology which have been divided into **38 topics and 126 outcomes** for OBGYN that you need to acquire as per the NMC document for CBME as follows.

(a) Competencies in Obstetrics:

The student must demonstrate ability to:

1. Provide peri-conceptional counseling and antenatal care
2. Identify high-risk pregnancies and refer appropriately
3. Conduct normal deliveries, using safe delivery practices in the primary and secondary care settings
4. Prescribe drugs safely and appropriately in pregnancy and lactation
5. Diagnose complications of labor, institute primary care and refer in a timely

manner
6. Perform early neonatal resuscitation
7. Provide postnatal care, including education in breast-feeding
8. Counsel and support couples in the correct choice of contraception,
9. Interpret test results of laboratory and radiological investigations as they apply to the care of the obstetric patient
10. Apply medico-legal principles as they apply to tubectomy, Medical Termination of Pregnancy (MTP), Pre-conception and Prenatal Diagnostic Techniques (PC PNDT Act) and other related Acts.

(b) Competencies in Gynaecology:

The student must demonstrate ability to:

1. Elicit a gynaecologic history, perform appropriate physical and pelvic examinations and PAP smear in the primary care setting,
2. Recognize, diagnose and manage common reproductive tract infections in the primary care setting,
3. Recognize and diagnose common genital cancers and refer them appropriately

List of Competencies Requiring DOAP Sessions / Logbook Documentation as per NMC Document

**These can be integrated with the case presentations/ demonstrations/ seminars or may be done as standalone activities.*

S No.	Number	Competency
1.	OG 8.3	Describe, demonstrate, document and perform an obstetrical examination including a general and abdominal examination and clinical monitoring of maternal and fetal well-being
2.	OG 8.4	Describe and demonstrate clinical monitoring of maternal and fetal well being
3.	OG 8.5	Describe and demonstrate pelvic assessment in a model
4.	OG 8.6	Assess and counsel a patient in a simulated environment regarding appropriate nutrition in pregnancy
5.	OG 9.2	Describe the steps and observe/ assist in the performance of an MTP evacuation
6.	OG 13.3	Observe/ assist in the performance of an artificial rupture of membranes
7.	OG 13.4	Demonstrate the stages of normal labor in a simulated environment/ mannikin
8.	OG 13.5	Observe and assist the conduct of a normal vaginal delivery
9.	OG 14.1	Enumerate and discuss the diameters of maternal pelvis and types
10	OG 14.2	Discuss the mechanism of normal labor, define describe obstructed labor, clinical features prevention and management
11	OG 15.2	Observe and assist in performance of episiotomy, demonstrate correct suturing technique of episotomy in a simulated environment. Forceps, CS, vaccum, breech delivery
12	OG 17.2	Counsel in a simulated environment care of the breast, importance and technique of breast feeding
13	OG 18.2	Demonstrate the steps of newborn care in a simulated environment
14	OG 19.2	Counsel in a simulated environment contraception and puerperal sterlisation
15	OG 19.3	Observe assist in performance of tubal ligation
16	OG 19.4	Enumerate the indications, describe the stepsin insertion and removal of IUCD
17	OG 20.2	In a simulated environmentadminister informed consent to a person wishing to undergo MTP
18	OG 33.3	Describe and demonstrate the screening of cervical cancer in a simulated environment
19	OG 35.11	Demonstrate the correct use of appropriate universal precautions for self-protection against HIV and hepatitis and counsel patients
20	OG 35.12	Obtain a PAP smear in a stimulated environment
21	OG 35.13	Demonstrate the correct technique to perform artificial rupture of membranes in a simulated / supervised environment

22	OG 35.14	Demonstrate the correct technique to perform and suture episiotomies in a simulated/ supervised environment
23	OG 35.15	Demonstrate the correct technique to insert and remove an IUD in a simulated/ supervised environment
24	OG 35.16	Diagnose and provide emergency management of antepartum and postpartum haemorrhage in a simulated / guided environment
25	OG 35.17	Demonstrate the correct technique of urinary catheterisation in a simulated/ supervised environment
26	OG 36.2	Organise antenatal, postnatal, well-baby and family welfare clinics
27	OG 37.1	Observe and assist in the performance of a Caesarean section
28	OG 37.6	Observe and assist in the performance of outlet forceps application/vacuum application
29.	OG 37.7	Observe and assist in the performance of MTP in the first trimester and evacuation in incomplete abortion
30.	AN 53.1	Identify & hold the bone in the anatomical position, Describe the salient features, articulations& demonstrate the attachments of muscle groups
31.	AN53.2	Demonstrate anatomical position of bony pelvis & show boundaries of pelvic inlet, pelvic cavity, pelvic outlet
32.	AN 53.3	Define true pelvis and false pelvis and demonstrate sex determination in male & female bony pelvis
33.	CM 9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates
34.	PE7.8	Educate mothers on ante natal breast care and prepare mothers for lactation
35.	PE7.9	Educate and counsel mothers for best practices in breast feeding

Phase-wise Distribution of Activities

Phase	Activity	Number
Phase II	Antenatal history and examination	2
	Demonstration of Pelvis and Fetal skull Skill lab	1
	Perspeculum and Pervaginal examination – Simulated environment	1
Phase III part 1	Antenatal history	3
	Gynaecological history	2
	Student doctor history	2
	IUCD insertion DOAP in simulated environment	1
	Obtain pap smear as DOAP in simulated environment	1
	VIA /VILI –Punch biopsy in a simulated environment DOAP	1
	Counselling for contraception as DOAP in simulated environment	1
Phase III part II	Mechanism of labor as DOAP in simulated environment	1
	Conduct of delivery as DOAP in simulated environment	1
	Suturing Episiotomy as DOAP in simulated environment	1
	Urinary catheterization as DOAP in simulated environment	1
	Handwashing and personal protective precautions as DOAP in simulated environment	1
	Instrumental delivery vacuum, as DOAP in simulated environment	1
	Instrumental delivery forceps as DOAP in simulated environment	1
	Mechanism and conduct of breech delivery as DOAP in simulated environment	1
	Gynecological history	3
	Student doctor history	2
	Labor record (Certifiable)	10
	Caesarean section record	2
	Gynecology surgery record	2
	Mock drill eclampsia	1
	Mock drill PPH	1
	Counselling for breast feeding as DOAP in simulated environment	1
	Informed Consent	1
	Discharge Summary	1

PHASE 2

Learning Contract

Phase 2 **Date:**

My objectives and expectations from the Department:

My Learning Plan: How I will achieve my objectives:

Trainers' comments:

Antenatal case

Write a complete case record of an antenatal case with all necessary details
Competencies addressed: OG 5.2, OG 8.2, OG 8.3, OG 8.4, OG 8.6, OG 35.1,OG 35.2, OG 35.3, OG 35.5, OG 35.8, OG 36.1, OG 36.2

Sl No 1

Name : Age : OP no: Date :

Occupation : Education:

Obstetricscore:

LMP……EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:Obs

tetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family history :

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP……mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system :

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip :

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Diagnosis

Sl No 2

Name : Age : OP no: Date :

Occupation : Education:

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:

Obstetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family history :

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP…….mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system:

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip:

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Diagnosis

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 8.3	Antenatal case record						

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 14.1	Enumerate and discuss the diameters of maternal pelvis and types						
OG 35.1	Perspeculum Pervaginal examination						

Reflection on Phase II

What happened ?

So what:?

What next : ?

Phase III Part I

Learning Contract

Phase III Part 1 **Date:**

My objectives and expectations from the Department:

My Learning Plan: How I will achieve my objectives:

Trainers' comments:

Family planning

Counseling for contraception- Cafeteriaapproach

OG19.2 Counsel in a simulated environment, contraception and puerperal Sterilisation

Reflections:

Feedback from the Facilitator

Sl no	Date	Name of the person	Age	Parity score	Last childbirth	ContraceptivecounselingObserved/Performed inastandardizedpatient	Methodacceptedbytheperson

Intrauterine contraceptive Insertion

Sln o	Dat e	Name of theper son	Ag e	Paritysc ore	Last childbi rth	TimingofInser tion	Observed/ass isted /performed inamanikin

Medicalterminationof pregnancy- procedureandcounseling

Sl no	Date	Name of theperson	Age	Parity score	Last child birth	Gastationa lage	ReasonforM TP	MTPcounselling Observed/ Performedinasta ndardizedpatien t	Typeofprocedure - observed/assisted

Forms to be filled in MTP are …….

Female/Malesterilization surgery (excludingconcurrentsterilization during caesareansection)

Sl no	Date	Name of theperson	age	Parity score	Last childbirth	TypeofProcedure	Observed /assisted /

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 9.2	Describe the steps and observe/ assist in the performance of an MTP evacuation						
OG 19.2	Counsel in a simulated environment contraception and puerperal sterlisation						
OG 19.4	Enumerate the indications, describe the stepsin insertion and removal of IUCD						
OG 20.2	In a simulated environment administer informed						

	consent to a person wishing to undergo MTP						

Antenatal case

Sl No 3

Name : Age : OP no: Date :

Occupation : Education:

Obstetricscore:

LMP……EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:

Obstetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family history :

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP…….mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system:

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip:

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Diagnosis

Antenatal case

Sl No 4

Name : Age : OP no: Date :

Occupation : Education:

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:

Obstetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family History :

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP…….mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system:

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip:

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Diagnosis

Antenatal case

Sl No 5

Name : Age : OP no: Date :

Occupation : Education:

Obstetricscore:

LMP……EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:

Obstetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family History :

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP…….mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system :

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip :

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Diagnosis

Gynaecology Case Record

Sl No 1 Date of examination:

Name :Age : IPno:

Occupation : Education: Parity score:

Presentingcomplaint:

Historyofpresent illness :

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

Family History :

Drughistory :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment **Ht ……..Wt ……BMI ……**

Pallor …….Icterus…….Cyanosis……Oedema……Clubbing……LN……

PR……./min BP……mmHg RR ……../min Temp ……

Thyroid……..Breast ……..

Spine andgait……..

SystemicExamination

Respiratorysystem :
Cardiovascular system :
Centralnervoussystem :
Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Diagnosis

Gynaecology Case Record

Sl No 2 Date of examination:

Name :Age : IPno:

Occupation : Education: Parityscore:

Presentingcomplaint:

Historyofpresentingillness :

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

F a m i l y H i s t o r y   :

Drughistory   :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment **Ht ……………………..Wt ……………………………BMI ……………………**

Pallor ……….Icterus………….Cyanosis……………Oedema…………Clubbing…………LN………

PR…………/min BP………mmHg RR ………../min Temp ……………..

Thyroid……………………Breast ………………………………..

Spine andgait,,,

SystemicExamination

Respiratorysystem :

Cardiovascular system :

Centralnervoussystem :

Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Diagnosis

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
	Antenatal case record						
	Gynaecology case record						
OG 33.3	Describe and demonstrate the screening of cervical cancer in a simulated environment						
OG 35.11	Demonstrate the correct use of appropriate universal precautions for self-protection against HIV and hepatitis and counsel patients						
OG 35.12	Obtain a PAP smear in a stimulated environment						

Reflection on Phase III Part 1

What happened

So what:

What next :

Phase III Part 2

Learning Contract

Phase III Part 2 **Date:**

My objectives and expectations from the Department:

My Learning Plan: How I will achieve my objectives:

Trainers' comments:

Gynaecology Case Record

Sl No 3 Date of examination:

Name :Age : IPno:

Occupation : Education: Parity score:

Presentingcomplaint:

Historyofpresentingcomplaint:

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

Family History :

Drughistory :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment **Ht ……………………..Wt ……………………………BMI ……………………**

Pallor ……….Icterus………….Cyanosis……………..Oedema…………Clubbing…………LN………

PR…………./min BP………mmHg RR ………../min Temp ………………

Thyroid…………………….Breast ………………………………..

Spine andgait,,,

SystemicExamination

Respiratorysystem :

Cardiovascular system :

Centralnervoussystem :

Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Diagnosis

Gynaecology Case Record

Sl No 4 Date of examination:

Name :Age : IPno:

Occupation : Education: Parityscore:

Presentingcomplaint:

Historyofpresentingcomplaint:

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

Family History :

Drughistory :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment **Ht ……………………..Wt ……………………………BMI ……………………**

Pallor ……….Icterus………….Cyanosis……………..Oedema…………Clubbing…………LN………

PR…………/min BP………mmHg RR ………../min Temp ……………..

Thyroid…………………….Breast ………………………………..

Spine andgait,,

SystemicExamination

Respiratorysystem :

Cardiovascular system :

Centralnervoussystem :

Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Diagnosis

Gynaecology Case Record

Sl No 5 Date of examination:

Name :Age : IPno:

Occupation : Education: Parityscore:

Presentingcomplaint:

Historyofpresentingcomplaint:

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

Family History :

Drughistory :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment Ht ……………………..Wt ……………………………BMI ……………………

Pallor ……….Icterus………….Cyanosis………………Oedema………..Clubbing………..LN………

PR…………/min BP………mmHg RR ………../min Temp ……………..

Thyroid……………………Breast ………………………………..

Spine andgait,,,

SystemicExamination

Respiratorysystem :

Cardiovascular system :

Centralnervoussystem :

Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Diagnosis

Student Doctor Case Record

Antenatal Case

Name : Age : OP/IP no:

Date of admission Date of examination :

Occupation : Education: Socioeconomic

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:P

resentingcomplaint:

History of presenting complaint:

Historyofpresentpregnancy:

ITrimester:

II Trimester :

IIITrimester:

Menstrual History :

MaritalHistory:

Obstetrichistory :

Order ofpregnancy	Modeofdeliverymiscarriage	Gestational ageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduring pregnancy	Complications during labour	Complications during puerperium	Birthweight	Sex	Age (Years backif miscarriage)

Past medical/surgical/gynecological history :

Family history

Drug history :

Personal History :

Social history :

EXAMINATION

General examination

Built and nourishment :

Ht …… cm Wt ……..kg BMI

Pallor……Icterus……Cyanosis……..Oedema…….Clubbing…….LN…….

PR……../min BP…….mmHg RR……../min Temp …….

Thyroid……..Breast…….. Spine and gait ……

Systemic Examination

Respiratory system:

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Obstetric Examination

Inspection

Palpation

Fundal height : Symphysio fundal height in cm : Abdominal girth :

Fundal Grip:

Umbilical grip :

I st pelvic grip :

II nd pelvic grip :

Liquor Volume : Auscultation

Summary :

Provisional Diagnosis

Investigations ..Suggested

Results

Treatment Initiated:*(Pharmacological and Non Pharmacological including special nursing care)*

Further Monitoring - (*Response to treatment ,Results of investigations, any new complaint)s*
Treatment modified (if any)

Follow Up Daily

Discharge Planning& Date of discharge

Discharge Summary –

Final Diagnosis ……

Counselling given :

Follow up advice:

Feedback from the patient if any :

Student Doctor Case Record

Gynecology Case

Name :Age : IPno:

Occupation : Education: Parityscore:

Date of admission: Date of examination

Presentingcomplaint:

Historyofpresentingillness :

Menstrual History:

MaritalHistory :

Sexualandcontraceptivehistory:

Obstetrichistory:

Pastmedical/surgical/gynecologicalhistory:

Family history

Drughistory :

PersonalHistory:

Social history:

Generalexamination

Built &Nourishment **Ht …………………….Wt ……………………………BMI ……………………**

Pallor ……….Icterus………….Cyanosis………………Oedema…………Clubbing…………LN………

PR…………./min BP………mmHg RR ………../min Temp ………………

Thyroid…………………….Breast ………………………………..

Spine andgait,,,

SystemicExamination

Respiratorysystem :

Cardiovascular system :

Centralnervoussystem :

Gastrointestinalsystem:

Gynecological Examination

Inspection :

Palpation:

Percussion :

Auscultation

:Loc

al examination

Perspeculumexamination

Summary

Provisional Diagnosis :

Investigations ..Suggested

Results

Treatment Initiated:*(Pharmacological and Non Pharmacological including special nursing care)*

Further Monitoring - (*Response to treatment ,Results of investigations, any new complaint)s*
Treatment modified (if any)

Follow Up Daily

Discharge Planning& Date of discharge

Discharge Summary

Final Diagnosis ……

Counselling given :

Follow up advice:

Feedback from the patient if any :

Labour Cases

Labourcases

Sl No 1

Name : Age : IP no:

Occupation :

Obstetricscore: Date of admission

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:**Obstetrichis**

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :

Generalexamination

Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——

SystemicExamination

Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic grip:II

2ndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

1) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

2) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

3) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

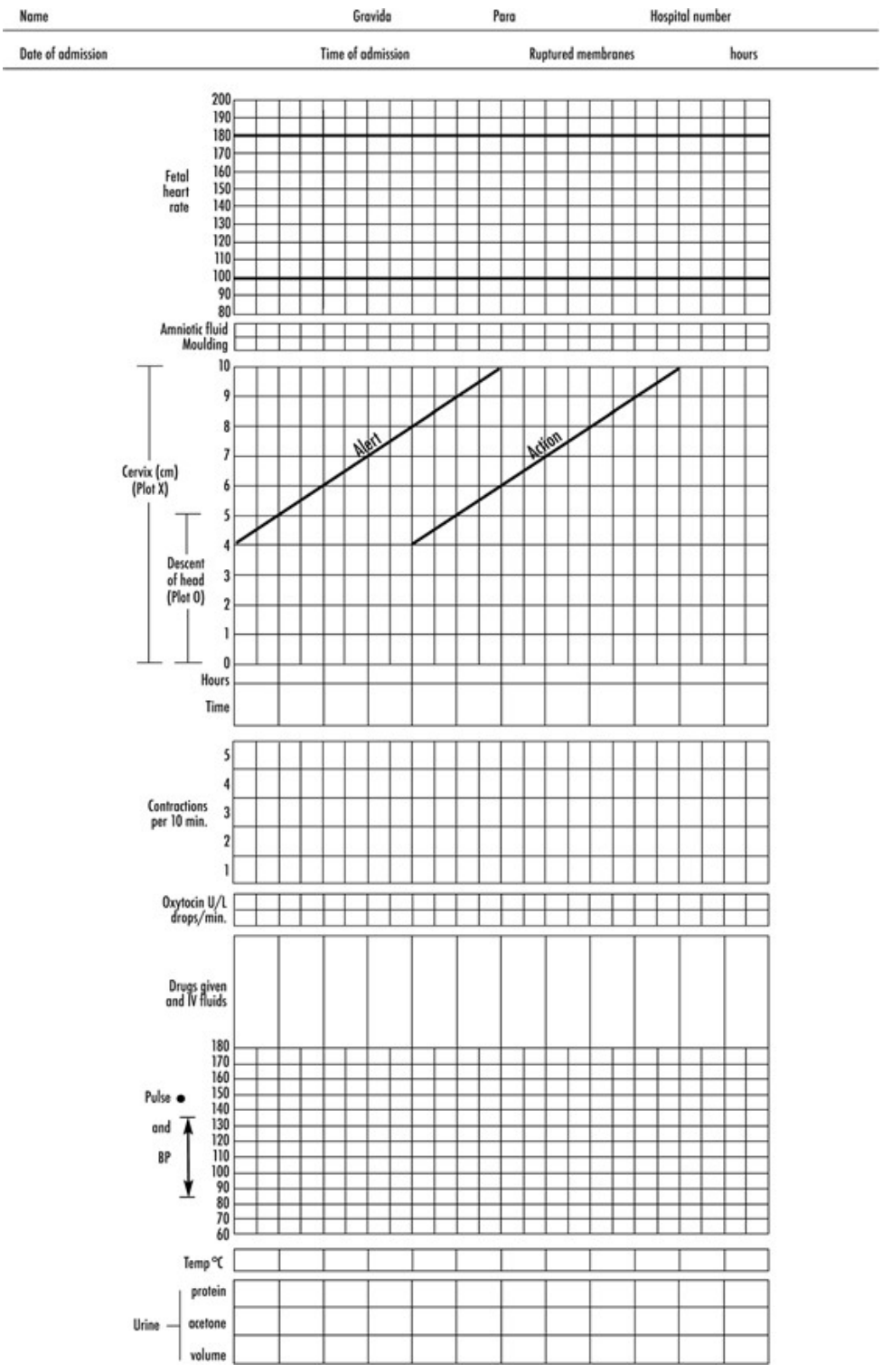
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine RE	TSH
HIV	VDRL
HBSAg	Anti HCV ab

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 2

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

4) cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

5) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

6) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

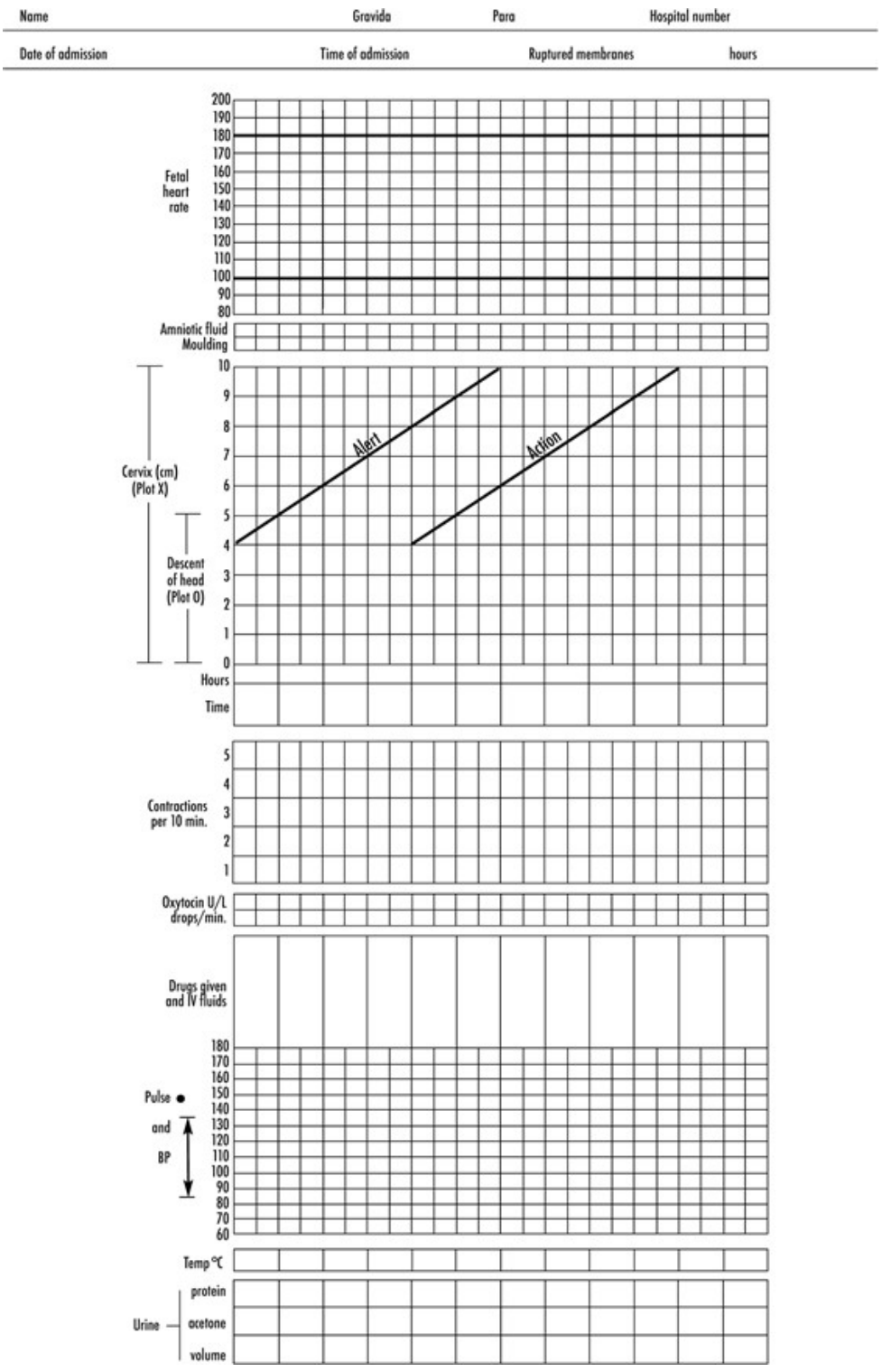
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 3

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

7) cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

8) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

9) Cervixconsistency,……position……,Effacement.……dilatation… ..... membranes present/absent,liquorclear/meconiumstained,presentingpart… ..... , position……,station… ..... ,Pelvisadequate/notadequate

Bishopsscore-

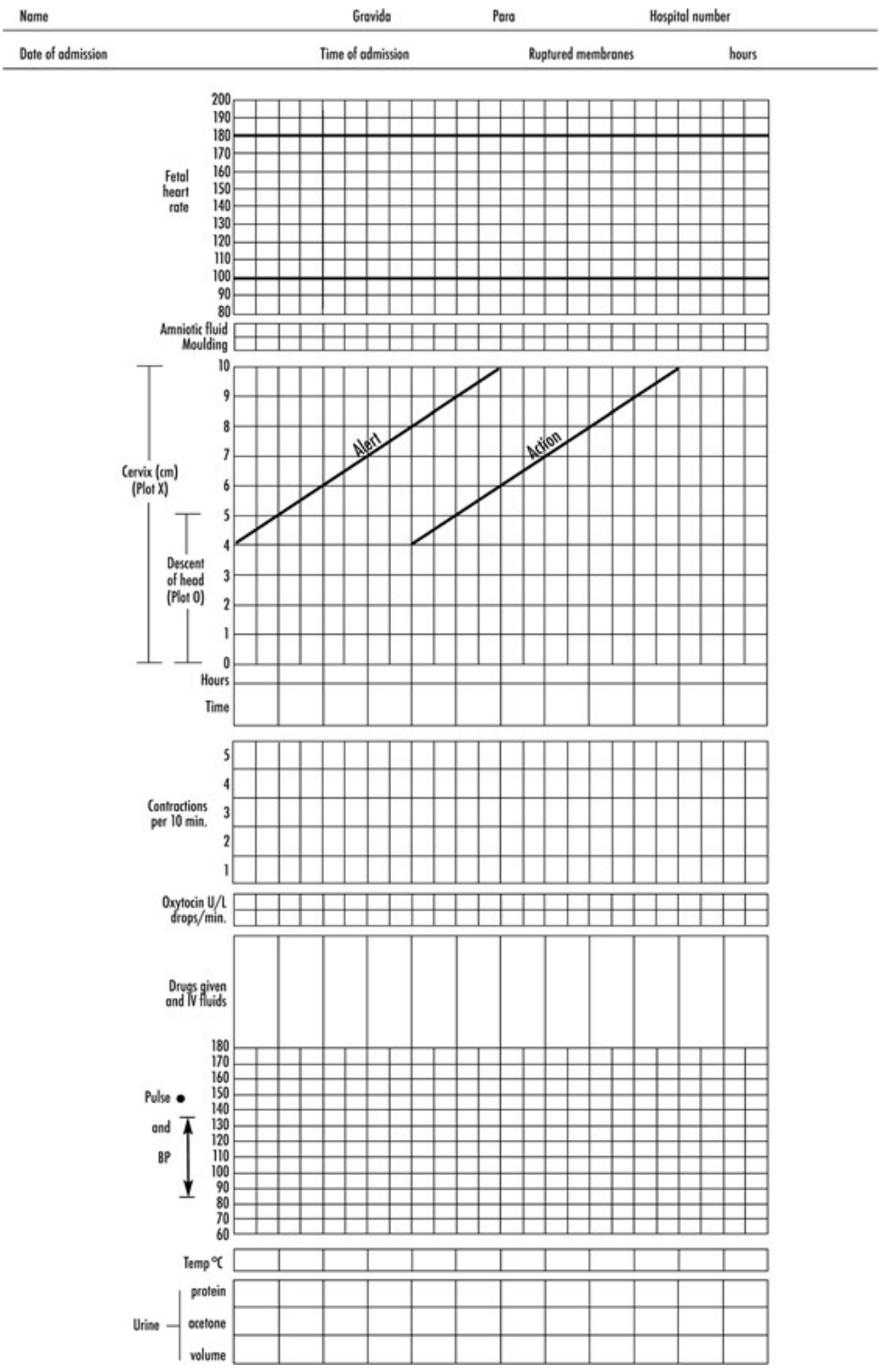
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 4

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

10)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

11)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

12)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

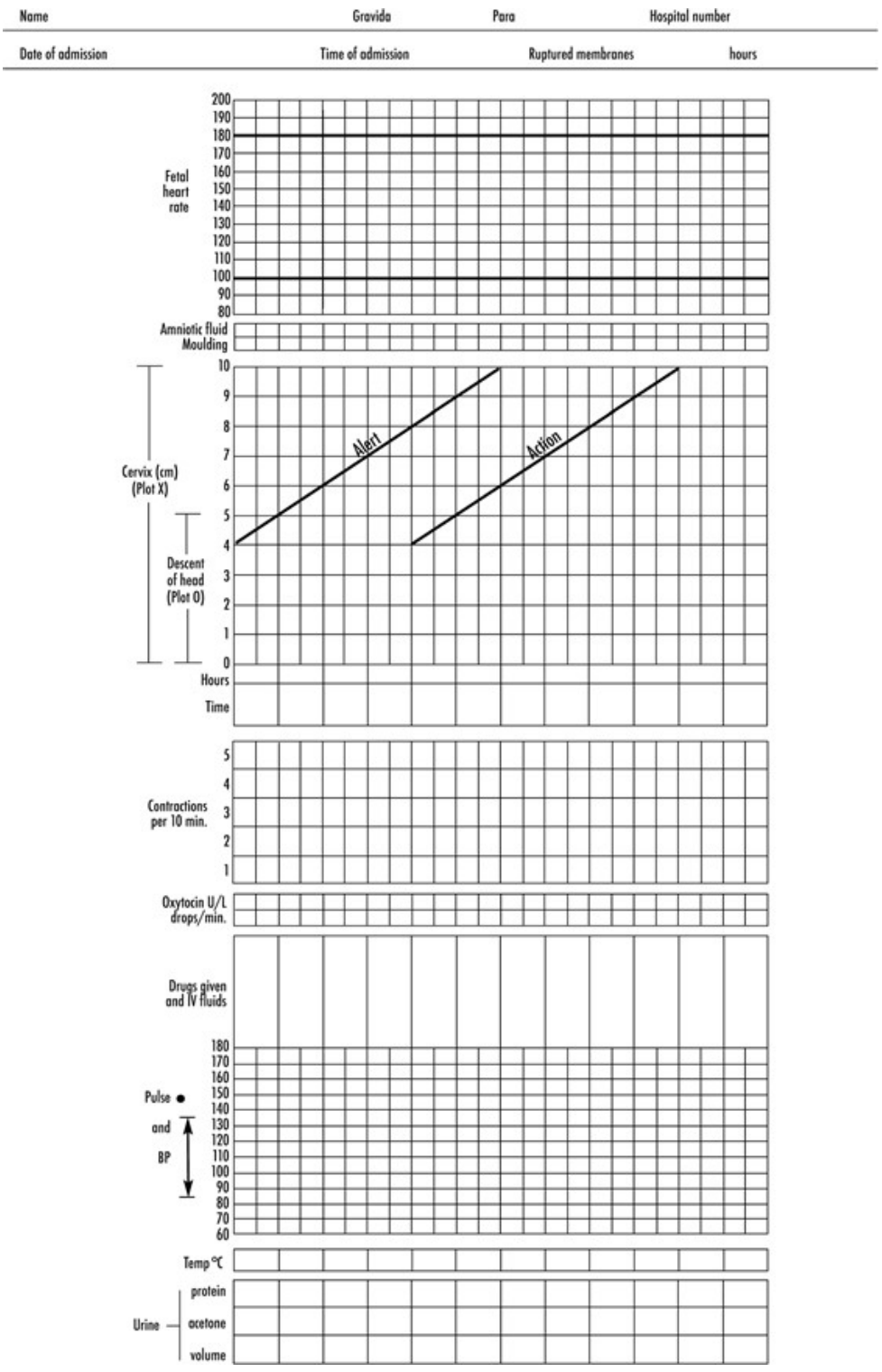
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 5

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

13)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

14)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

15)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

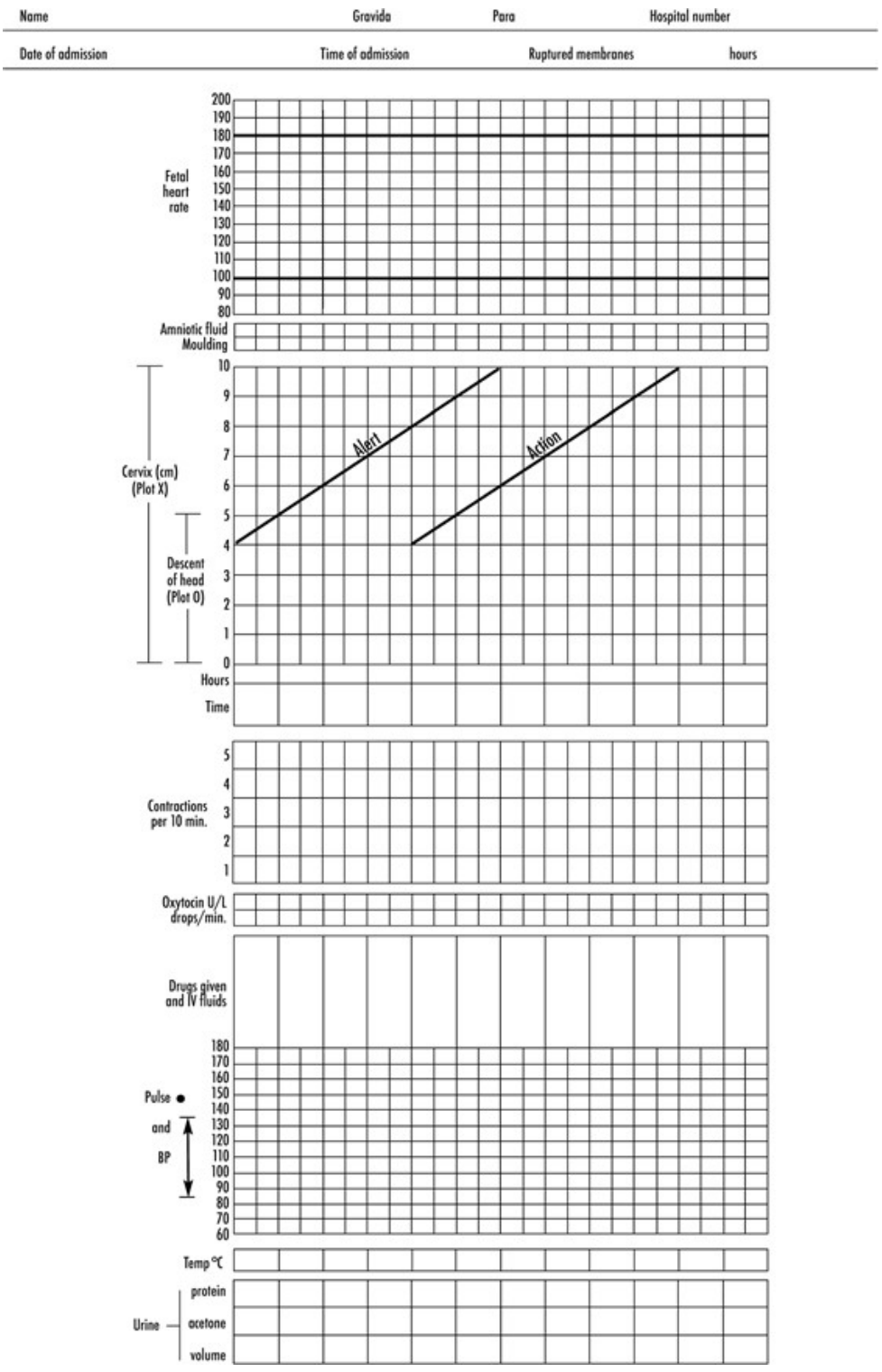
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 6

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

16).....cervixconsistency,...
.....position.....,Effacement.....dilatation... ..... membranes present/absent,liquorclear/meconiumstained,presentingpart... ..... , position.....,station... ..... ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

17).....Cervixconsistency,...
.....position.....,Effacement.....dilatation... ..... membranes present/absent,liquorclear/meconiumstained,presentingpart... ..... , position.....,station... ..... ,Pelvisadequate/notadequate

Bishopsscore-

18).....Cervixconsistency,...
.....position.....,Effacement.....dilatation... ..... membranes present/absent,liquorclear/meconiumstained,presentingpart... ..... , position.....,station... ..... ,Pelvisadequate/notadequate

Bishopsscore-

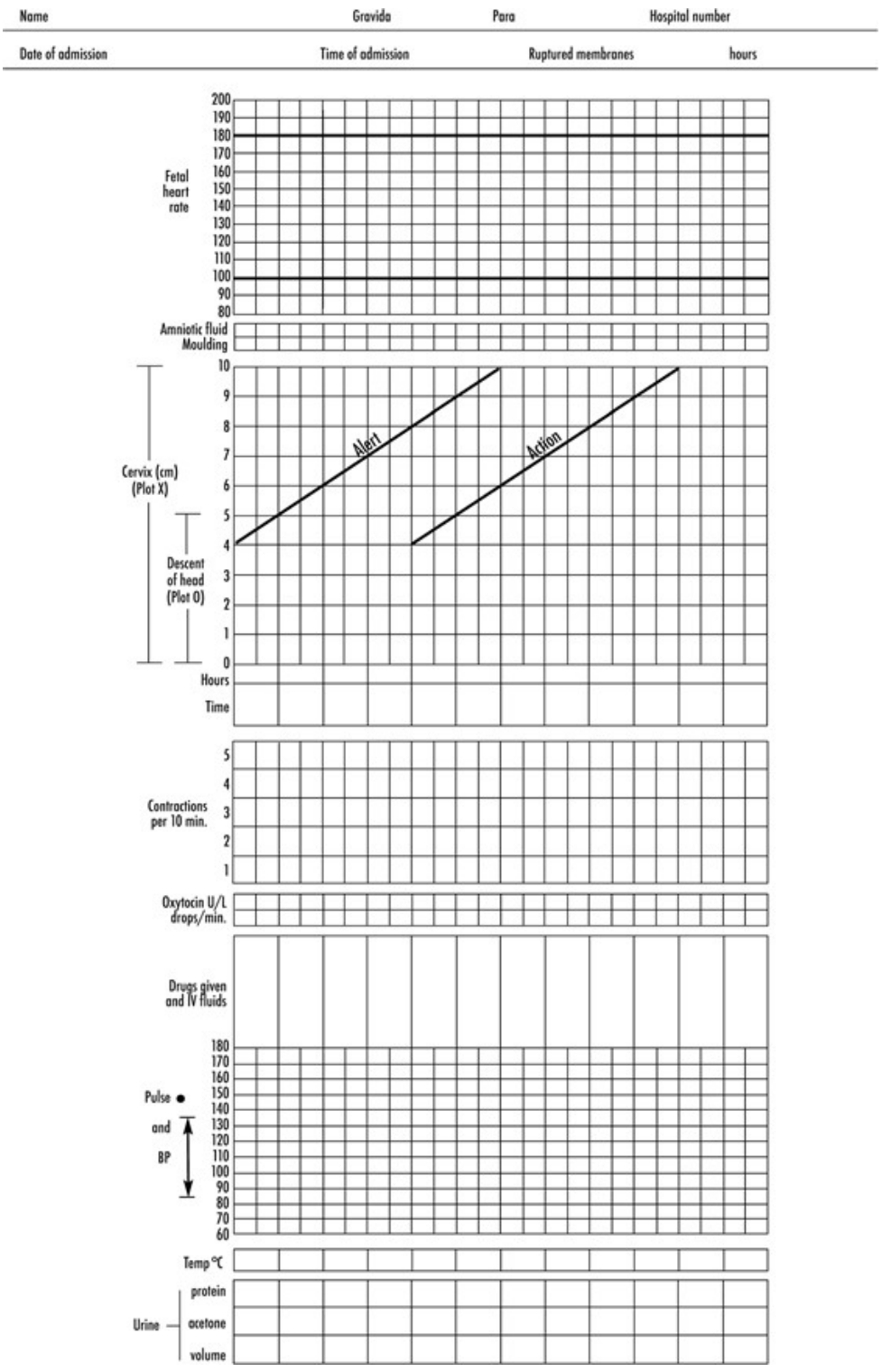
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 7

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

19)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

20)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

21)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

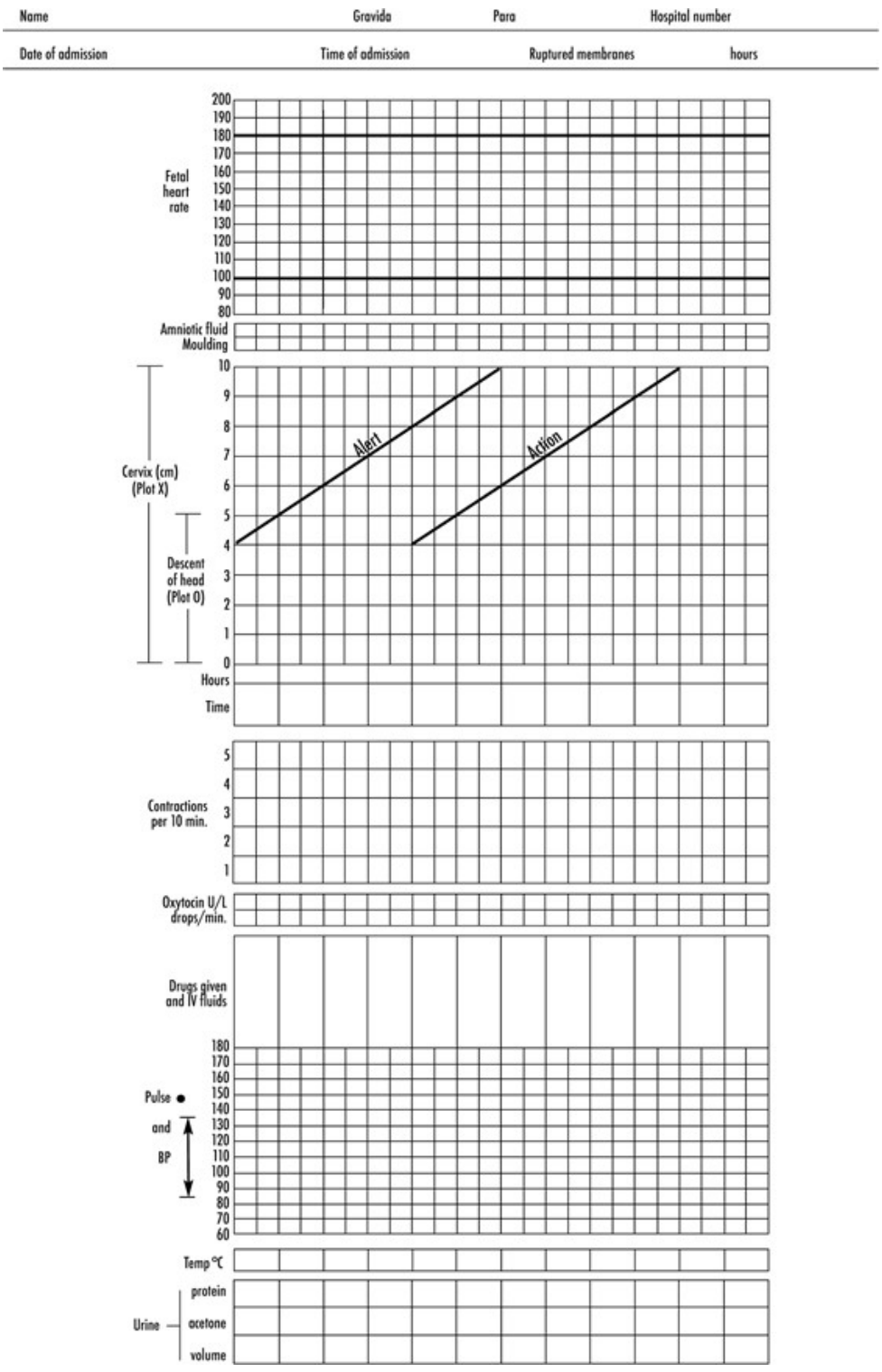
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 8

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery/ miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

22)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

23)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

24)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes
present/absent,liquorclear/meconiumstained,presentingpart… ……. ,
position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

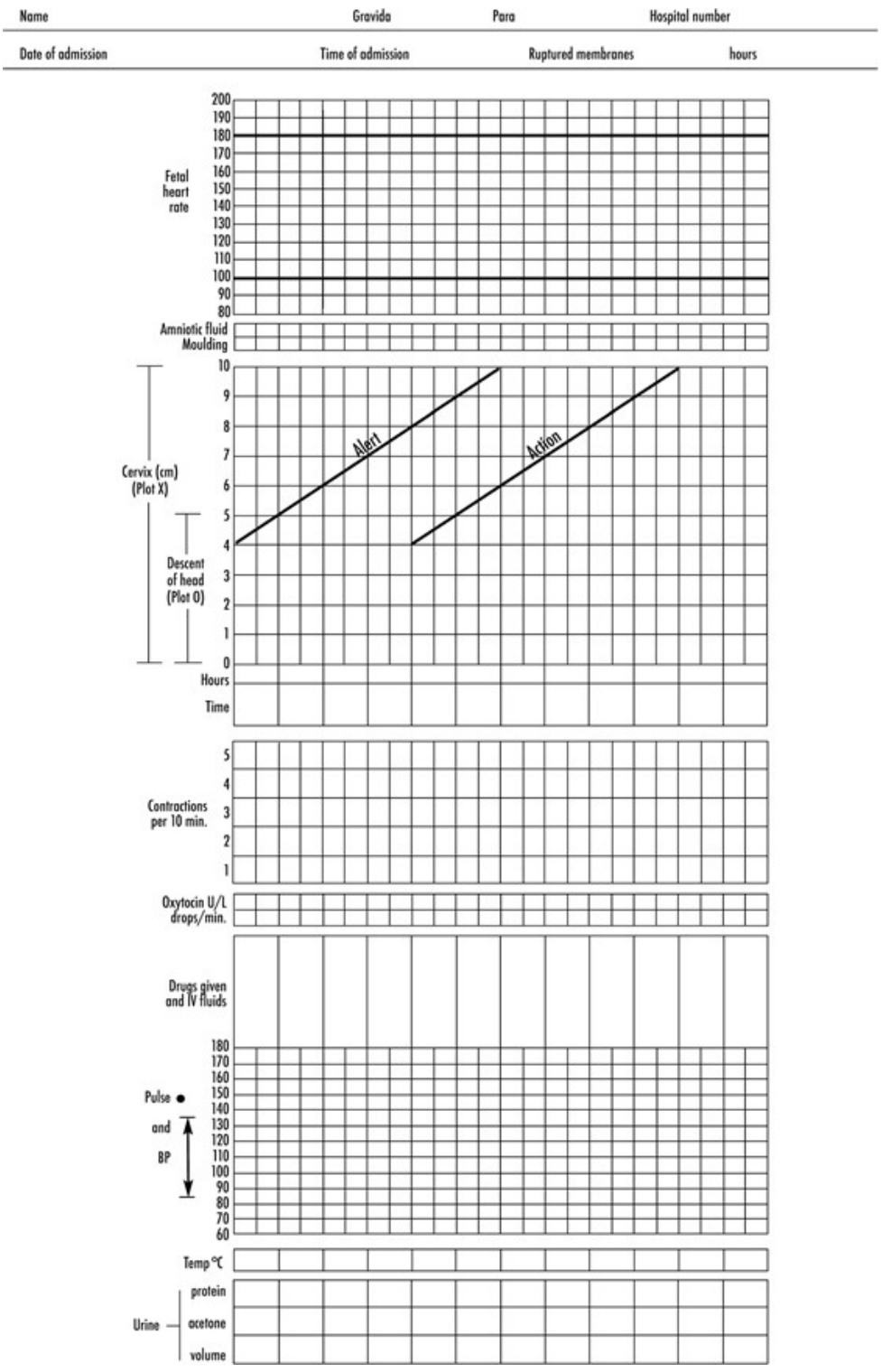
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 9

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnanc y	Modeofdeli verymiscarri age	Gestationala geofdelivery / miscarriage	IndicationforC S/instrument	Complication sduringpregn ancy	Complicati onsduring labour	Complicat ionsdurin g puerpe rium	Birthwei ght	Sex	Age (Yearsba ckif miscar riage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

25)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

26)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

27)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

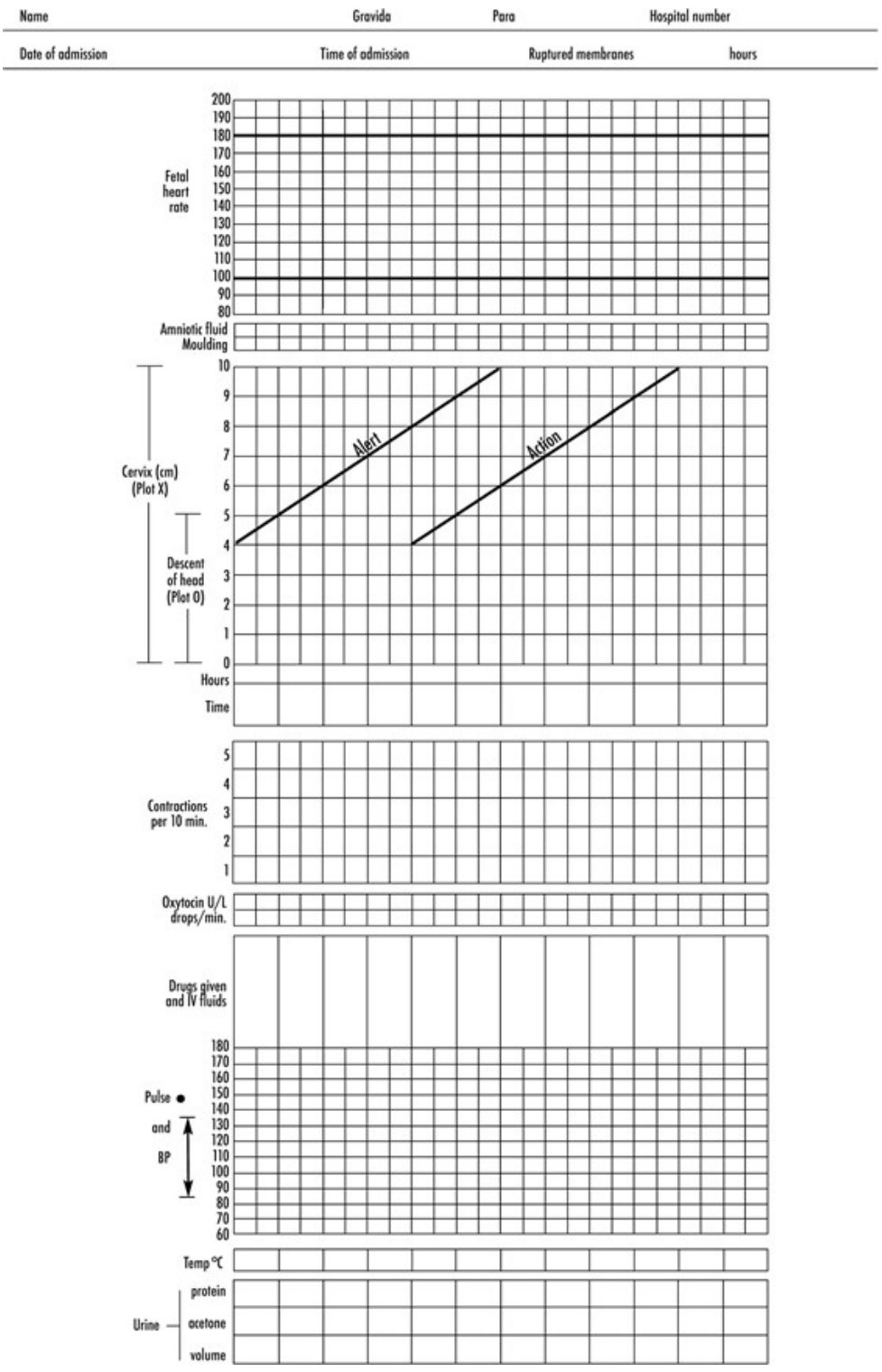
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Labourcases

Sl No 10

Name : Age :

Occupation :

Obstetricscore:

LMP……..EDC……GestationalAge……..

MaternalBloodGroup:Pres

entingcomplaint:

Historyofpresentingcomplaint:Histo

ryofpresentpregnancy:IstTrimester:

2nd Trimester

:3rdTrimester:

MenstrualHistory:Mari

talHistory:Obstetrichis

tory:

Order ofpregnancy	Modeofdeliverymiscarriage	Gestationalageofdelivery / miscarriage	IndicationforCS/instrument	Complicationsduringpregnancy	Complicationsduring labour	Complicationsduring puerperium	Birthweight	Sex	Age (Yearsbackif miscarriage)

Pastmedical/surgical/gynecologicalhistory

Drughistory :
PersonalHistory:
Socialhistory :
Generalexamination
Pallor——Icterus——Cyanosis—Oedema———————Clubbing——LN——PR———
BP————————RR———Thyroid——Breast——Spine and gait ——
SystemicExamination
Respiratory system
:Cardiovascular system
:Centralnervoussystem:Gastro
intestinalsystem:**ObstetricExa**
minationInspection

Palpation
Fundalheight: Symphysio fundal height in
cmAbdominalgirth:
Fundal Grip:Umbical

grip :Ist pelvic

grip:IIndpelvicgrip :

LiqourVolume:Auscul
tation

Summary

Diagnosis

Pervaginalexamination

28)……cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

Intervention done-

29)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

30)……Cervixconsistency,…
……position……,Effacement……dilatation… …… membranes present/absent,liquorclear/meconiumstained,presentingpart… ……. , position……,station… ……. ,Pelvisadequate/notadequate

Bishopsscore-

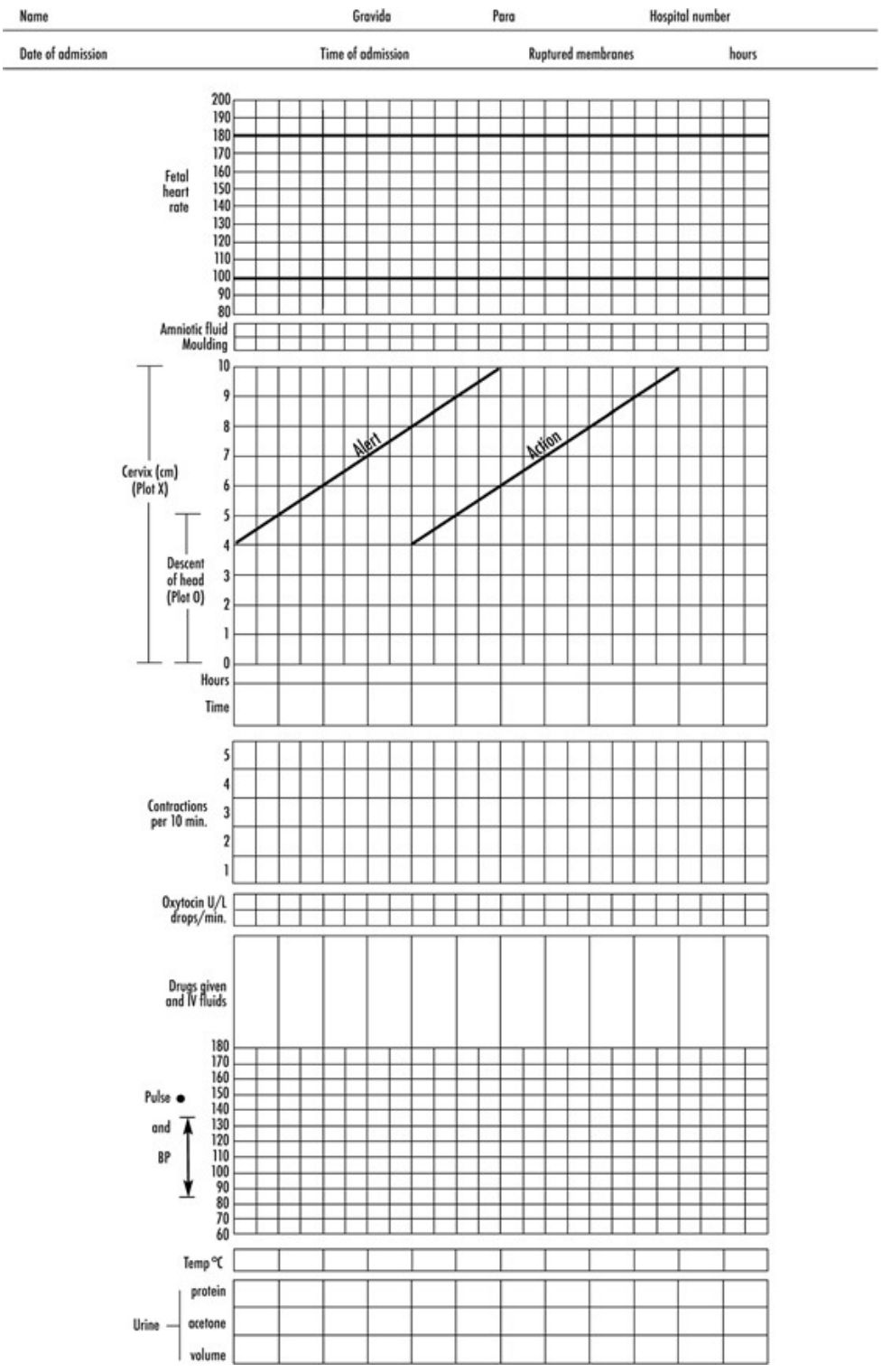
Labinvestigation

Hb	BloodgroupandRh
Plateletcount	GTT
Urine alb Sug Deposit	
HIV	VDRL
HBSAg	Anti HCV ab
TSH	

DeliveryNotes

PostnatalAdvise

Partogram



Signature	

Date	

Caesarean Section

Caesareancase

Sl No 1

Name : Age: IP no:

Occupation: Obstetricscore:

LMP……..EDC……GestationalAge……..

Indication for CS :

Category of CS : 1 /2 /3 /4

Type of Anesthesia :

Date: Time :

Surgeon :

Anaesthetist :

Staff Nurse :

Surgical safety checklist used:

Operationnotes:

Blood /component transfusion:

Baby details :

Time of birth
Birth weight
Sex
Apgar score at 1 minute

Postoperativeorders:

Signature	
Date	

Caesareancase

Sl No 2

Name : Age:

Occupation: Obstetricscore:

LMP……..EDC……GestationalAge……..

Indication for CS :

Category of CS : 1 /2 /3 /4

Type of Anesthesia :

Date: Time :

Surgeon :

Anaesthetist :

Staff Nurse :

Surgical safety checklist used :

Operationnotes :

Baby details :

Time of birth
Birth weight
Sex
Apgar score at 1 minute

Postoperativeorders:

Signature	
Date	

Gynecology Surgery Cases

Gynecology surgery case

Sl No 1

Name : Age : IP no:

Occupation:

Parity score :

Presenting complaint:

History of presenting complaint :

Menstrual History :

Marital History :

Sexual and contraceptive history :

Obstetric history :

Past medical/surgical/gynecological history :

Drug history :

Personal History :

Family History

Social history :

General examination

Pallor……Icterus……Cyanosis……..Oedema……..Clubbing……..- LN

PR……../min BP…….mmHg RR…… Temp…….

Thyroid…….. Breast……. Spine and gait…

Systemic Examination

Respiratory system :

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Gynecological Examination

Inspection :

Palpation :

Percussion :

Auscultation :

Per speculum examination :

Summary

Diagnosis

Investigation

Hb		LFT	
Platelet count		RFT	
TC		FBS	
DC		PPBS	
ESR		Blood Grp RH	
Urine alb		Chest X ray	
sugar		ECG	
deposit		Pap smear	

Ultrasound diagnosis :
CT scan diagnosis : MRI diagnosis :

Surgery done :
Date :
Indcation :Anesthesia :

Surgery Team members Anesthesia team

Surgical safety checklist : Yes /No

Operation notes :
Incision

Findings
Procedure

Post operative orders

Discharge Summary and advice

Gynecology surgery case

Sl No 2

Name : Age : IP no:

Occupation:

Parity score :

Presenting complaint:

History of presenting complaint :

Menstrual History :

Marital History :

Sexual and contraceptive history :

Obstetric history :

Past medical/surgical/gynecological history :

Drug history :

Personal History :

Family History

Social history :

General examination

Pallor……Icterus……Cyanosis……..Oedema……..Clubbing……..- LN

PR……../min BP……mmHg RR…… Temp…….

Thyroid…….. Breast…… Spine and gait……..

Systemic Examination

Respiratory system :

Cardiovascular system :

Central nervous system :

Gastrointestinal system :

Gynecological Examination

Inspection :

Palpation :

Percussion :

Auscultation :

Per speculum examination :

Summary

Diagnosis

Investigation

Hb		LFT	
Platelet count		RFT	
TC		FBS	
DC		PPBS	
ESR		Blood Grp RH	
Urine alb		Chest X ray	
sugar deposit		ECG	
		Pap smear	

Ultrasound diagnosis :
CT scan diagnosis : MRI diagnosis :

Surgery done :
Date :
Indcation :Aneasthesia :

Surgery Team members Anaesthesia team

Surgical safety checklist : Yes /No

Operation notes :
Incision

Findings
Procedure

Post operative orders

Discharge Summary and Advise

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 13.4	Demonstrate the stages of normal labor in a simulated environment/ mannikin						
OG 13.5	Observe and assist the conduct of a normal vaginal delivery						
OG 14.2	Discuss the mechanism of normal labor, define describe obstructed labor, clinical features prevention and management						
OG 13.3	Observe/ assist in the performance of an artificial rupture of membranes						
OG 15.2	Observe and assist in performance of episiotomy, demonstrate correct suturing technique of episotomy in a simulated environment.						
OG 18.2	Demonstrate the steps of newborn care in a simulated environment						
OG 35.13	Demonstrate the correct technique to perform artificial rupture of membranes in a simulated / supervised environment						

OG 35.14	Demonstrate the correct technique to perform and suture episiotomies in a simulated/ supervised environment						
OG 35.16	Diagnose and provide emergency management of antepartum and postpartum haemorrhage in a simulated / guided environment						
OG 35.17	Demonstrate the correct technique of urinary catheterisation in a simulated/ supervised environment						
OG 36.2	Organise antenatal, postnatal, well-baby and family welfare clinics						
OG 37.1	Observe and assist in the performance of a Caesarean section						
OG 37.6	Observe and assist in the performance of outlet forceps application/vacuum application						

Skill Lab Competencies

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
Competency-OG 8.3	*General Examination of a patient*						
Competency-OG 8.3.	*Obstetric Examination .*						
Competency-OG 14.1	Maternal pelvis and fetal skull						
Competency-OG 35.1	Pelvic examination						
- Competency OG19.4, OG35.15:	*Enumeratetheindicationsfor,describethestepsinandinsertandremoveanintrauterinedeviceinasimulatedenvironment*						
Competency-OG33.3 *OG35.12*	*DescribeanddemonstratescreeningofCarcinomaCervixinasimulatedenvironment,* *-Obtain aPap smearin asimulated environment*						
Competency-OG36.3,	*PerformVIA/VILIandpunchbiopsy*						

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
Competency-OG35.11	*PerformHand washingandpersonalprotectiveprecautions*						
Competency OG 14.2	*Demonstrate mechanism of Normal labour in Dummy and Pelvis*						
Competency OG 14.2	*Mechanism of Occipito posterior and Obstructed labour*						
Competency OG 13.4	*Conduct normal labour and delivery of placenta in mannikin*						
Competency OG 37,6	*Mechanism of Breech delivery*						
Competency OG 37,6	*Demonstrate Instrumental delivery*						
Competency OG 35.13	*Demonstrate ARM*						
Competency OG 35.14	*Episiotomy suture*						
Competency OG 35.17	*Urinary catheterisation*						

Mock Drill

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
1	PPH						
2	Eclampsia						
3	Maternal Collapse						

Role Play

Counselling

OG 17.2, PE 7.8 , PE 7.9

Counselling for Breastfeeding

Counsel in a simulated environment, care of the breast, importance and the technique of breast feeding

Reflections:

Feedback from the Facilitator

Role play

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG35.4,	Breakingbadnews Role play						
	Counselanddiscussillnessandoutcomewithpatientandfamily Role play						
OG 17.2 *PE 7.8 , PE 7.9*	Counsel in a simulated environment care of the breast, importance and technique of breast feeding						

INFORMED CONSENT

Competency- 35.7 Obtain informed consent for any examination /procedure

Obtain Consent for any 5- MTP, Caesarean section, Female sterilization, Male sterilization, AbdominalHysterectomy,Vaginalhysterectomy,Laparoscopy,Hysteroscopy

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 35.7	*Obtain informed consent for any examination /procedure*						
	Obtain informed consent for any examination /procedure						
	Obtain informed consent for any examination /procedure						
	Obtain informed consent for any examination /procedure						
	Obtain informed consent for any examination /procedure						

DISCHARGE SUMMARY

Discharge Summary –Obstetrics

Name of patient		Age:
Address:		I.P no:
Date of admission:	Date of discharge:	Date of delivery/CS/ surgery:
Diagnosis		
Brief summary		
Blood investigation results		
USG		
Course in the hospital		
Delivery-		
Baby details		
Discharge Advice		

Discharge Summary-Gynecology

Name of patient		Age:
Address:		I.P no:
Date of admission:	Date of discharge:	Date of delivery/CS/ surgery:
Diagnosis		
Brief summary		
Blood investigation results		
USG	CT scan	
MRI		
Course in the hospital	Other departments involved	
Surgery done		
Operation finding-		
Discharge Advice		

Integration Topics

S No.	Name of Activity	Date completed:	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date (mention level achieved)
OG 1.1 Community medicine	Define and discuss birth rate maternal mortality and morbidity						
OG 1.2 (PEDIATRICS PHASE3 PART1)	Define and discuss perinatal mortality and morbidity including perinatal and neonatal motality D and morbidity audit						
OG 18.1 (PAEDIATRICS PHASE3 PART 2)	assessment of maturity of the newborn, diagnosis of birth asphyxia, principles of resuscitation, common problems.						

Reflections onPhase III Part 2

What happened?

So what?

What next:

Glossary

Log Book:
Logbook is a verified record of the progression of the learner documenting the acquisition of the requisite knowledge, skills, attitude and/ or competencies. Log book is the most important tool that will help us achieve successful implementation of the key aspects of the new Competency Based UG Curriculum–we hope you understand the importance of maintaining it meticulously. It is a record of all your learning that takes place and the competencies acquired by you. It also forms an integral part of your internal assessment /formative assessment and your eligibility for appearing in the final summative assessment. Successful documentation and submission of the logbook is a prerequisite for being allowed to take the final summative examination (GMER 11.1.1.b.7).

Portfolio:
A portfolio is an evidence of events documented in the logbook along with selected assignments, self-assessment, feedback, work-based and in-training formative assessments, reflections and learnings from planned activity in the curriculum.

Activity:
This term refers to a predefined task performed by learners that contributes to the achievement of stated objectives or competencies.

Remedial:
Remedial is a planned activity aimed at correcting deficits that prevent a learner from achieving an intended outcome.

Feedback:
Feedback is a formal active interaction performed at the completion of an observed activity (or activities) intended to facilitate positive change, growth and improvement of the learner through guided reflection of activities performed.

Understanding the logbook activity table:

S No.	Competency # addressed	Name of Activity	Date completed: dd-mm-yyyy	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date
1.								
2.								
3.								
4.								
5.								
6.								
7.								

1. **The number of the competency addressed**, includes the subject initial and number (from Volume III of the UG Curriculum) e.g. OG 2.1

1. **Name of activity:** Seminar / Small Group Discussion/ Skills Lab / Drill / Role Play

2. **Date the activity gets completed**

3. **Attempt at activity by learner**, indicate if:
    a. First attempt (or) only attempt
    b. Repeat (R) of a previously done activity
    c. Remedial activity (Re) based on the determination by the faculty

5. **Rating**, use one of the following three grades:
    a. Below expectations (B)
    b. Meets expectations (M)
    c. Exceeds expectations (E)

6. **Decision of faculty**
    a. C: activity is completed, therefore closed and can be certified, if needed
    b. R: activity needs to be repeated without any further intervention
    c. Re: activity needs remedial action (usually done after repetition did not lead to satisfactory completion)

8. **Initial (Signature) of faculty** indicating the completion or other determination

9. **Initial (Signature) of the learner** if feedback has been received.

Annexure : WHO Surgical Safety Checklist

Appendix 1: World Health Organization SSC

World Health Organization

SURGICAL SAFETY CHECKLIST (FIRST EDITION)

Before induction of anaesthesia ▸▸▸▸▸▸▸▸▸ Before skin incision ▸▸▸▸▸▸▸▸▸▸▸▸▸ Before patient leaves operating room

SIGN IN

- ☐ PATIENT HAS CONFIRMED
  - IDENTITY
  - SITE
  - PROCEDURE
  - CONSENT
- ☐ SITE MARKED/NOT APPLICABLE
- ☐ ANAESTHESIA SAFETY CHECK COMPLETED
- ☐ PULSE OXIMETER ON PATIENT AND FUNCTIONING

DOES PATIENT HAVE:

KNOWN ALLERGY?

- ☐ NO
- ☐ YES

DIFFICULT AIRWAY/ASPIRATION RISK?

- ☐ NO
- ☐ YES, AND ASSISTANCE AVAILABLE

RISK OF >500 ML BLOOD LOSS (7 ML/KG IN CHILDREN)?

- ☐ NO
- ☐ YES, AND ADEQUATE INTRAVENOUS ACCESS AND FLUIDS PLANNED

TIME OUT

- ☐ CONFIRM ALL TEAM MEMBERS HAVE INTRODUCED THEMSELVES BY NAME AND ROLE
- ☐ SURGEON, ANAESTHETIC PROFESSIONAL AND NURSE VERBALLY CONFIRM
  - PATIENT
  - SITE
  - PROCEDURE
- ☐ ANTICIPATED CRITICAL EVENTS
- ☐ SURGEON REVIEWS: WHAT ARE THE CRITICAL OR UNEXPECTED STEPS, OPERATIVE DURATION, ANTICIPATED BLOOD LOSS?
- ☐ ANAESTHETIC TEAM REVIEWS: ARE THERE ANY PATIENT-SPECIFIC CONCERNS?
- ☐ NURSING TEAM REVIEWS: HAS STERILITY (INCLUDING INDICATOR RESULTS) BEEN CONFIRMED? ARE THERE EQUIPMENT ISSUES OR ANY CONCERNS?
- ☐ DOES ANTIBIOTIC PROPHYLAXIS GIVEN WITHIN THE LAST 60 MINUTES?
  - YES
  - NOT APPLICABLE
- ☐ IS ESSENTIAL IMAGING DISPLAYED?
  - YES
  - NOT APPLICABLE

SIGN OUT

- ☐ NURSE VERBALLY CONFIRMS WITH THE TEAM
  - THE NAME OF THE PROCEDURE RECORDED
- ☐ THAT INSTRUMENT, SPONGE AND NEEDLE COUNTS ARE CORRECT (OR NOT APPLICABLE)
- ☐ HOW THE SPECIMEN IS LABELLED (INCLUDING PATIENT NAME)
- ☐ WHETHER THERE ARE ANY EQUIPMENT PROBLEMS TO BE ADDRESSED
- ☐ SURGEON, ANAESTHETIC PROFESSIONAL AND NURSE REVIEW THE KEY CONCERNS FOR RECOVERY AND MANAGEMENT OF THIS PATIENT

THIS CHECKLIST IS NOT INTENDED TO BE COMPREHENSIVE. ADDITIONS AND MODIFICATIONS TO FIT LOCAL PRACTICE ARE ENCOURAGED.