

# Clinical Log Book

Department of Obstetrics & Gynaecology

Bacha Khan Medical College



Name of Student: \_\_\_\_\_

Roll Number: 3rd Year \_\_\_\_\_

4th Year \_\_\_\_\_

Final Year \_\_\_\_\_

Session: \_\_\_\_\_

## **VISION**

To become a prominent regional health center focused on improving individual and community health and achieving national and international standards of excellence.

## **MISSION**

To train the student through best practices to fulfil the health needs of the society with emphasis on professionalism, research and health advocacy.

# FACULTY

Gynae "A" Unit	Gynae "B" Unit
Professor Dr. Nasim Akhtar <a href="mailto:nasimakhtar4658@gmail.com">nasimakhtar4658@gmail.com</a>	Professor Dr. Samina Jadoon <a href="mailto:dr_saminajadoon@yahoo.com">dr_saminajadoon@yahoo.com</a>
Professor Dr. Nuzhat Amin <a href="mailto:nuzhatamin@gmail.com">nuzhatamin@gmail.com</a>	Assistant Professor Dr. Nabila Khan <a href="mailto:dr.nabilakhan7@gmail.com">dr.nabilakhan7@gmail.com</a>
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Senior Registrar Dr. Maryam Khan Badshah <a href="mailto:maryam.guday@gmail.com">maryam.guday@gmail.com</a>	
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Compiled and Edited by:

**Dr. Naila, Dr. Nabila Khan, Dr. Fatima Muslim**

# **OBSTETRICS & GYNAECOLOGY DEPARTMENT**

## **MTI / MMC MARDAN**

### **GENERAL INSTRUCTIONS**

1. The student should arrive on time and dress appropriately (lab coats).
2. The student should respect patient, hospital staff and other personal.
3. The student should take active participation in outpatient department, operation theatre, evening ward rounds and participation in minor procedure skills.
4. History should be written in log book, submitted and signed at the end of each day to the facilitator on that day.
5. The formative assessment test would be within the posting duration on the last day of rotation.
6. Any student found absent from maternity would be marked absent for that day and deficit to be completed on Saturday.
7. Students should ensure their attendance from 10.00 am to 1.00 pm, and 5.00 pm to 8.00 pm during maternity rotation five days a week.
8. The students deputed at reception/enquiry of labour rooms suite will help them to learn admission procedures and problems of patients and their relatives. They should sit at the reception desk and be a source of information and communication between the doctors and patients inside and relatives outside and thus provide full assistance and help in informed consent and counselling.
9. The students should follow their cases in the post-natal ward until discharge and note their daily progress.
10. Presentations/activities/procedural skills of day which are assign to them should be accomplished in morning/evening and signed by Senior Registrar/Assistant Professor on call on the same day.
11. In case of any problems with studies or duties, the students should take help of house surgeons, registrar and senior registrar. They should not hesitate to discuss events with consulting staff.

**Dr. Naila**  
Head / Assistant Professor

## Internal Assessment for Final Year MBBS

		Total Marks	Obtained Marks
<b>1</b>	Behaviour & Dress Code	<b>4</b>	
<b>2</b>	Ward Assessment	<b>8</b>	
<b>3</b>	Evening Case Presentation	<b>4</b>	
<b>4</b>	Block Exam	<b>12</b>	
<b>5</b>	Log Book	<b>6</b>	
<b>6</b>	Attendance	<b>12</b>	Lectures (4) _____ Clinical (i) Morning(4)_____ (ii) Evening(4)_____
	Total Marks	<b>46</b>	

\_\_\_\_\_  
Examiner Signature

\_\_\_\_\_  
Head of Department

**OBSTETRICS & GYNAECOLOGY DEPARTMENT**  
**MTI / MMC MARDAN**  
**Third Year MBBS(Gynae B)**

Days: Monday to Friday

Timings: Morning = 10.00 am – 12.00 pm

Clinical rotation from \_\_\_\_\_ to \_\_\_\_\_

<b>Days</b>	<b>Activities</b>	<b>Facilitator Name</b>	<b>Facilitator Sign</b>
Day-1	Obstetrical History taking (general)		
Day-2	Gynaecological History taking (general)		
Day-3	Anemia in pregnancy – History taking Discuss type of Anemia / Causes / Investigation		
Day-4	Hypertension in pregnancy History taking / Examination		
Day-5	Diabetes in pregnancy – History taking		
Day-6	Cardiac diseases – History taking of Cardiac patient (elicit important points in history and Sign/Symptoms of heart failure)		
Day-7	Multiple pregnancy – History taking		
Day-8	PROM – History taking (elicit important points in history)		
Day-9	Antepartum haemorrhage – History taking Signs and Symptoms of shock		
Day-10	Menstrual Irregularities – History taking Causes of Menstrual irregularities		
Day-11	Mass Pelvis – History taking and common causes of pelvic mass		
Day-12	Pv discharge – History taking of normal and abnormal vaginal discharge		
Day-13	Pain lower abdomen – History taking and to elicit common causes of lower abdominal pain		
Day- 14	Miscarriages - History taking		







**FOURTH YEAR MBBS****Gynae "A" Unit**

Clinical rotation from \_\_\_\_\_ to \_\_\_\_\_

<b>Days</b>	<b>Activities</b>	<b>Facilitator Name</b>	<b>Facilitator Sign</b>
Day-1	Orientation Obst. History and Examination (Review)		
Day-2	Gynaecology History and Examination (Review)		
Day-3	Baseline and specific investigations of Obst. & Gynae patient and draw inferences from it		
Day-4	Pelvic inflammatory diseases / vaginal discharge History / Examination / Management Perform high vaginal swab		
Day-5	D/D and Management of adnexal mass/ tumours		
Day-6	Miscarriages / History / Examination / Management of 1 <sup>st</sup> & 2 <sup>nd</sup> Trimester miscarriages		
Day-7	Molar pregnancy History / Examination / Management		
Day-8	Ectopic pregnancy History / Examination / Management		
Day-9	Demonstrate contraceptive counselling of simulated / actual patients		
Day-10	UV prolapse Examination / Investigation and Management		
Day-11	Urinary incontinence History / Examination / Management		
Day-12	Polycystic ovary syndrome History / Examination / Management		
Day-13	Postmenopausal bleeding (Endometrial carcinoma) History / Examination / Management		
Day-14	Abnormal uterine bleeding History / Examination / Management		
Day-15	Fibroid uterus History / Examination / Management		
Day-16	Endometriosis History / Examination / Management		
Day-17	History, examination and workup of infertile couple		
Day-18	History, examination and workup of endometrial carcinoma		
Day-19	History, examination and workup of cervical carcinoma Perform pap smear on mannikin		











## FINAL YEAR MBBS

### Gynae "A" Unit

Clinical rotation from \_\_\_\_\_ to \_\_\_\_\_

Day-1	Orientation / General history and Examination of Obstetrical patients + baseline investigations		
Day-2	General Gynaecological History / Examination / Investigation		
Day-3	Anemia in pregnancy / History / GPE / Obstetrical examination of anemic patient and relevant investigations		
Day-4	Demonstration of breech vaginal delivery on mannikin Management of cord prolapse		
Day-5	Demonstration of Instrumental vaginal delivery on mannikin Type of forceps and vacuum cups		
Day-6	Antepartum haemorrhage History / Examination / D/D's/ Investigations		
Day-7	Post partum haemorrhage History / Examination / D/D's / relevant Investigations		
Day-8	Management of patient with Rh incompatibility History / Examination / D/D's		
Day-9	Interpretation of partogram Interpretation of CTG		
Day-10	Stages of normal labour Mechanism of labour on mannikin		
Day-11	Observation of steps of caesarean section		
Day-12	Multiple pregnancy History / Examination / D/D's / relevant Investigations		
Day-13	Abnormalities of Amniotic fluid volume (oligo + poly) History / Examination / D/D's / relevant Investigations		
Day- 14	Management of case of shoulder dystocia		
Day- 15	Review management of abnormal uterine bleeding		

## FINAL YEAR MBBS

### Gynae "B" Unit

Clinical rotation from \_\_\_\_\_ to \_\_\_\_\_

Days	Activities	Facilitator Name	Facilitator Sign
Day-1	General Obstetric History & examination Gynae History (Review)		
Day-2	Over view of Baseline Investigations & specific investigation in common Obstetrics & Gynaecological problems (HTN, Diabetes, Anemia, Rh incompatibility)		
Day-3	Cardiac diseases in pregnancy History / Examination / Management		
Day-4	Hypertension in pregnancy / History / GPE / Obstetrical examination / D/D's / Investigations Management of eclampsia patient		
Day-5	Assessment of fetal well being CTG interpretation Understanding Routine and doppler ultrasound		
Day-6	History & examination of patient with previous 1 scar Discuss management options in labour		
Day-7	Diabetes in pregnancy (GDM/ type 2 DM) History / Examination / Investigations/ differential diagnosis		
Day-8	Fetal anomalies Causes and management		
Day-9	Assessment & management of patient with VTE in pregnancy History / Examination / D/D's		
Day-10	Perform Normal vaginal delivery and demonstrate steps of episiotomy on mannikin		
Day-11	Premature rupture of membranes & preterm labour History / Examination Demonstrate per speculum examination and high vaginal swab on patient/ mannikin		
Day-12	Review management of UV prolapse		
Day- 13	Review management of fibroid uterus		
Day- 14	Review management of infertile couple		
Day-15	Review management of adnexal mass		



















