

DEPARTMENT OF OBSTET. & GYNAECOLOGY  
Diploma in Gynaecology and Obstetrics  
Syllabus for Paper I.  
(Applied Basic Sciences and family Welfare).  
PDGO-01

Maximum Marks 50.

Basic sciences applicable in the topics of syllabus of Obst. & Gynae in paper II and III.  
Additional topics are as below.

1. Molecular Biology and Genetics.
2. Preventive Healthcare and Screening
3. Clinical Research.
4. Immunology in relation to Obst. & Gynae.

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Diploma in Gynaecology and Obstetrics  
Syllabus for Paper II

(Obstetrics)

PDGO-02

Maximum Marks 50.

1. Maternal Anatomy
2. Implantation, Embryogenesis & placental development.
3. Fetal growth & development.
4. Physiological changes during pregnancy
5. Diagnosis of pregnancy
6. Screening for Neural - Tube Defects ,Down Syndrome and Heritable Genetic Diseases
7. Prenatal diagnosis and Fetal Therapy
8. Genetics in relation to Obstetrics-genetic/chromosomal disorders
9. Preconceptional counseling.
10. Prenatal care
11. Abortion
12. Ectopic Pregnancy
13. Gestational trophoblastic diseases
14. Teratology and medications that affect the fetus.
15. Antepartum Assessment
16. Imaging in Obstetrics.
17. Parturition- Anatomy and Physiology
18. Normal Labour and Delivery
19. Intra Partum Assessment
20. Obstetrical Anesthesia
21. Abnormal Labour - Abnormal Uterine Action , Occipito posterior , Shoulder Presentation, Face and Brow, Cord Presentation with Cord Prolapse, Breech Presentation and delivery.
22. Shoulder Dystocia.
23. Disorders of Amniotic fluid volume
24. Labour Induction
25. Operative Vaginal Delivery
26. Caesarean delivery and Peri Partum Hystectomy
27. Vaginal Delivery after Caesarean Section (VBAC).
28. Abnormalities of the placenta ,Umbilical Cord and Membranes.
29. The New Born Infant including resuscitation.
30. Neonatal complications of the Pre Maturity.
31. Meconium Aspiration
32. Still Birth
33. Diseases and Injuries of the fetus and New Born.

- 34. Normal Puerperium
- 35. Abnormal Puerperium
- 36. Hypertensive Disorders in Pregnancy
- 37. Obstetrical Hemorrhage –APH, PPH, PLACENTA ACCRETA, INCRETA, PERCRITA, Rupture Uterus and Other Injuries of the Birth Canal.
- 38. Complications of the Third Stage of Labor- Inversion of Uterus, Retained Placenta and Third Stage Hemorrhage.
- 39. Preterm Labour and Delivery
- 40. Premature rupture of membrane
- 41. Post Term Pregnancy and Post Maturity
- 42. Intra Uterine Fetal Growth Restriction
- 43. Fetal Macrosonia
- 44. Multi Fetal Gestation
- 45. Reproductive Tract abnormalities
- 46. Critical Care and Trauma in relation to Obstetrics
- 47. Obesity with Pregnancy
- 48. Cardio Vascular Diseases and Pregnancy
- 49. Chronic Hypertension and Pregnancy
- 50. Pulmonary disorder and Pregnancy
- 51. Thromboembolic disorders and Pregnancy
- 52. Renal and Urinary tract disorder and Pregnancy
- 53. Gastrointestinal Disorder and Pregnancy
- 54. Hepatic, Gallbladder and Pancreatic disorders and Pregnancy
- 55. Hematological Disorders and Pregnancy
- 56. Rh-incompatibility in Pregnancy
- 57. Diabetes and Pregnancy.
- 58. Thyroid and other Endocrine disorder and Pregnancy
- 59. Connective Tissue disorders and Pregnancy
- 60. Neurological and Psychiatric disorders and Pregnancy
- 61. Dermatological disorders and Pregnancy
- 62. Neoplastic diseases and Pregnancy
- 63. Infectious Diseases and Pregnancy including TORCH
- 64. Sexually transmitted diseases and Pregnancy
- 65. Contraception
- 66. Tubal Sterilization & NSV.
- 67. Safe Motherhood Programme run by GOI- EmOC Programme of GOI, JSY, JSSK
- 68. HIV in Pregnancy and PPTCT Programme, STI / RTI Programme.

Diploma in Gynaecology and Obstetrics  
Syllabus for Paper III  
(Gynaecology)  
**PDGO-03**

Maximum Marks 50.

1. Anatomy of Female Genital tract with special emphasis on Surgical Anatomy.
2. Development of female Genital Tract and Malformation resulting because of Mal Development.
3. Reproductive Physiology.
4. General Gynaecology
  - i. Benign Diseases of the female reproductive tract.
    - (a) **Vulva** – Skin Conditions , Pigmented lesions, Tumors and Cysts, Ulcers, Nonneoplastic epithelial disorder.
    - (b) **Vagina- Embryonic Origion**( Mesonephric , Para Mesonephric and Urogenital sinus cyst, Adenosis, Vaginal Septa or duplication).
    - (c) **Pelvic Organ Prolapse / Disorder of Pelvic Support.**
    - (d) **Others** (Condyloma, Urethral Diverticula, Fibroepithelial polyp, Vaginal Endometriosis).
    - (e) **Cervix** (Infectious- Condyloma, HSV, Chlamydial Cervicitis and Others) ( Others- Endocervical Polyps, Nabothian Cyst, Columnar Epithelial Eversion).
    - (f) **Benign Ovarian Tumor (Functional, Inflammatory, Neoplastic, Epithelial , Others)**
  - ii. Uterine Fibroids.
  - iii. Pelvic Pain and Dysmenorrhea
  - iv. Endometriosis
  - v. Genito Urinary infection and STD
  - vi. Intra Epithelial Diseases of the Cervix , Vagina and Vulva.
  - vii. Benign Breast Diseases
5. Uro Gynaecology and Pelvic Reconstructive Surgery.
  - i. Lower Urinary tract disorders
  - ii. Pelvic organ prolapse
  - iii. Anorectal Dysfunction

6. Reproductive Endocrinology.
  - i. Puberty
  - ii. Amenorrhea
  - iii. Endocrine Disorders
  - iv. Infertility and Assisted Reproductive Technology
  - v. Recurrent Pregnancy loss
  - vi. Menopause
  
7. Gynaecological Oncology.
  - i. Uterine Cancer
  - ii. Cervical & Vaginal cancer
  - iii. Ovarian fallopian tube & Peritoneal Cancer
  - iv. Vulvar Cancer
  - v. Gestational trophoblastic disease
  - vi. Breast Cancer
  
8. Radiotherapy and Chemotherapy in Gynaecology.
  
9. Contraception.
  
10. Operative Gynaecology
  - i. Pre-Operative Evaluation and Post Operative Management
  - ii. Gynaecological Endoscopy
  - iii. Hysterectomy
  - iv. Myomectomy
  - v. Surgery for Benign Ovarian Condition
  - vi. Tubal Recanalization
  - vii. Surgery for Genital fistula
  - viii. Surgery for Pelvic Organ Prolapse
  - ix. Surgery for stress incontinence
  - x. Surgery for Vagina and Urethral condition
  - xi. Surgery for Vulva and Vestibule
  - xii. Radical Surgery for different Malignancy
  - xiii. Robotic Operations

DEPARTMENT OF OBSTET. & GYNAECOLOGY

Diploma in Gynaecology and Obstetrics  
Syllabus for Paper IV

(Recent Advances)

**PDGO-04.**

Maximum Marks 50.

Recent advances in relation to all the topics mentioned in syllabus of Obst. & Gynaecology in paper II & III.

**Approved by Board of Studies on 22-03-2014.**

DEPARTMENT OF OBSTET. & GYNAECOLOGY  
Diploma in Gynaecology and Obstetrics  
Model Paper I.  
(Applied Basic Sciences and family Welfare).  
PDGO-01

Maximum Marks- 50

Time-3 hours

Instructions For The Candidates—

1. Draw the diagram & flow charts where ever applicable.
2. The main points may be highlighted.

Q.1. 10 (5+5)  
(a) What are the cardio-vascular changes in normal pregnancy and their clinical significance.  
(b) Describe the hormonal control of lactation

Q.2. 10 (5+5)  
(a) Draw a diagram of intervillous space showing intervillous circulation.  
(b) Describe lymphatic drainage of vulva

Q.3.Explain the following- 10(5+5)  
a) The mechanism of action of intra uterine contraceptive device.  
b) Shoulder dystocia in Macrosomic fetus of a diabetic mother

Q.4. Explain the following-

10(2 x 5)

- a) Dysmenorrhea in endometriosis.
- b) Hot flushes in peri-menopausal women.
- c) Hyperandrogenimia & hyperinsulinemia coexist.
- d) Fibroid uterus cases can have follicular cysts in ovary.
- e) The uterus does not developed ischaemic necrosis following ligation of uterine artery.

Q.5. What is Maternal Mortality rate and Maternal Mortality Ratio. What are the Causes in India and How can we reduce it.

10 (2+2+3+3)





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Model Paper II.  
(Obstetrics)  
PDGO-02

Maximum Marks 50.

Time: 3 Hours

Instructions For The Candidates—

1. Draw the diagram & flow charts where ever applicable.
2. The main points may be highlighted.

- Q.1. What are the components of WHO's Partograph? How does it help you in managing labour? 10 (5+5)
- Q.2. What are the congenital anomalies exclusively associated with twin gestation? How are they diagnosed? 10 (5+5)
- Q.3. While performing LSCS you have detected placenta accrete after delivery of fetus. What will you do now? What factors will decide its management? (10)
- Q.4. What are the components of biophysical profile score? How the management is decided in different score? 10 (5+5)
- Q.5. Explain the following-
- (a) Why anti-D is given after the delivery of a Rh +ve baby of a Rh -ve mother?
  - (b) Why face to pubes delivery leads to third degree perineal tear?
  - (c) How Lovset's maneuver helps in the delivery of arm in breech?
  - (d) Why Ventouse is preferred over forceps application.
  - (e) Why an episiotomy is not a must in Primi Gravida.
- 10 (2 x 5)

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Diploma in Gynaecology and Obstetrics  
Model Paper III.  
(Gynaecology)  
PDGO-03

Time: 3 Hours

Maximum Marks 50.

Instructions For The Candidates—

- 1. Draw the diagram & flow charts where ever applicable.
- 2. The main points may be highlighted.

Q.1. What are the causes of primary amenorrhea? How do you diagnose Turner's syndrome clinically? How do you confirm it? 10 (4+3+3).

Q.2. What is pelvic organ prolapse quantification (POPQ)? How does this helps in deciding management? 10 (5+5)

Q.3. What is FIGO staging for carcinoma of the body of uterus? What is the treatment for stage I disease? 10 (5+5)

Q.4. Write down the following answer by giving reasons wherever needed- 10 (2 x 5)

- (a) What happens to ureter in a case of cervical fibroid?
- (b) Whiff test is done in which condition & how?
- (c) What further test is needed for HSIL report on cytology.
- (d) What is HAIR-AN syndrome.
- (e) What further evaluation and management is needed for a patient with infertility and block tubes on HSG

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Diploma in Gynaecology and Obstetrics  
Model Paper IV.  
(Recent Advances).  
PDGO-04

Maximum Marks-50

Time-3 hours

Paper 4 Recent Advances In Obstetrics & Gynecology

Instructions For The Candidates—

1. Draw the diagram & flow charts where ever applicable.
2. The main points may be highlighted.

Q.1. What are the indications of doing color Doppler in Obstetrics? What are the different abnormal findings on color Doppler of umbilical artery? Based on abnormal findings how the management is decided? 10 (5+5)

Q.2. What are the recent development in the following contraceptive methods-

- a) Oral contraceptive pills
- b) Intrauterine contraceptive device

10 (5+5)

Q.3. What are the criteria for diagnosing Polycystic Ovarian Syndrome in an adolescent girl? What are the differential diagnosis of this condition. What is the role of weight reduction? 10 (3+4+3)

Q.4. Explain the reason

- a) Anticonvulsants can cause congenital anomaly.
- b) ACE Inhibitors should not be used in pregnancy.

10 (2 x 5)

Q.5. Write in brief-

10 (5+5)

a) Steps of NDVH

b) Cu T 380 A application technique

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- c) HIV positive mother should have elective cesarean section by 38 weeks of gestation.
- d) Elective Cesarean section is done in carcinoma cervix .
- e) Why family history is important in Ovarian Cancer.

Q.5. What is cervical insufficiency. What is prophylactic circlage? What is CIPRACT trial? 10 (4+4+2).

