



UNIVERSITY | MEDICAL
of NICOSIA | SCHOOL

MED-509
Obstetrics and Gynaecology
Course Handbook

2024-2025

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Course Handbook introduction by the Chair of Clinical Education

Dear Student,

Your course handbook is an invaluable resource. Reading it before starting your placement will make a huge difference to your learning experience. You will find outlines of the course, the objectives of your learning, the assessment requirements, learning resource suggestions, contact numbers and reporting structures.

You can use the learning outcomes and objective list to guide you through your learning of the subject and even to discuss with your tutors. The requirements, whether these are workplace - based assessments or tutorials, will allow smooth running of your clinical block and avoid unnecessary last-minute hardship.

The medical school has a course lead in place, with knowledge of the specific block, including its learning, revision, and assessment. And the department of clinical education ensures smooth running and delivery of the clinical training, through a number of Curriculum Leads (one for each main specialty) who work with the course leads and the local teams at the placement, to ensure the curriculum is delivered as planned.

The nature of clinical learning is such that, whilst your experiences will be comparable, it is not possible to have identical clinical exposure across all students; a case of disease X may be available today, whereas when the next student comes along it may be disease Y. It is desirable that we see all cases as far as possible but your handbook with its checklist of conditions and objectives will allow you to not fall behind and fill any gaps that may appear during your clinical exposure, and help guide your preparation for assessments.

If there are academic or administrative problems, if you need help and if you need to report anything back to your medical school, the reporting structures ensure that you should not feel even for one minute that you do not have someone to go to when needed. Please contact the team if you need any help, we are all here with our contact details available if you need us.

Please ensure that you are present and available for learning, opportunities will come when you least expect them, the amount we can learn from patients is huge and endless and therefore sitting with, talking to and examining patients is one of your strongest tools.

I hope you gain a lot of knowledge and clinical experience.

Enjoy the next few weeks!

Professor Joseph Joseph
Chair of Clinical Education

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1. Welcome

Dear Students,

The MED-509 Obstetrics and Gynaecology clinical course/ clinical rotation aims to teach students the anatomy and physiology of female reproductive organs, the fundamentals for normal and abnormal labour, as well as the most frequent pathologies in gynaecology.

This is a structured and well organised training program that ensures adequate exposure to the diagnostic and therapeutic approaches. The first 2 days of the course, consist of lectures with targeted learning objectives, aiming to provide all necessary theoretical knowledge, essential for better understanding of the clinical placements that will follow. Rotations in the departments of outpatient clinics, ultrasound, labour and operating rooms will provide the opportunity to take history and examine patients, to investigate for signs and symptoms, to revise anatomy and physiology. In addition, you will be challenged to make a diagnosis and propose management of the cases.

Your active contribution is imperative to gain the maximum of this clinical training; to develop the necessary clinical skills for the correct diagnosis and treatment of ObGyn patients. Do not hesitate to spend some extra hours in the labour room to follow a woman in labour, to observe a delivery or to see the final steps of a minimal invasive surgery. I strongly advise you during your home study to review the cases you examined in the morning in the hospital and ask questions where necessary. Try to be creative and efficient. Your questions, comments and interest will inspire and challenge your tutors to be more interactive and devote more time discussing and demonstrating interesting cases.

I am ready to assist you with any questions you may have. You will also have the opportunity to ask questions and discuss about your training at the beginning, middle and end of your ObGyn attachment.

I wish you all a fruitful and exciting rotation in ObGyn with lots of experiences.

Vasilios Tanos MD. PhD
Clinical Prof in Obstetrics and Gynaecology
Course Lead for MED-509 Obstetrics and Gynaecology

2. MED-509 Obstetrics and Gynaecology course/ Clinical rotation Course Outline

Course Title	Obstetrics and Gynaecology						
Course Code	MED-509						
Course Type	Required						
Level	Undergraduate						
Year Semester /	Year 5/ Semester 10 (Spring)						
Teacher's Name	Course Lead: Prof Vasilios Tanos						
ECTS	8	Lectures / week	4	Laboratories / week	0	Clinical Practice	36
Course Purpose and Objectives	<p>The main objectives of the last two years of the six year medical programme are to provide students with extensive experience in the clinical environment, mainly in hospitals but also in the community, so that they can utilise their learning over the previous 4 years to practise their clinical, communication, diagnostic and reasoning skills on real patients, and to learn about the management of patients, from a medical, therapeutic, surgical, psychosocial and caring perspective.</p> <p>In this course, students will spend five weeks working primarily with women of all ages, and, particularly during pregnancy, labour and birth, with their families. They will develop an understanding of the presentation, signs and symptoms, physical examination findings, investigations, diagnosis, treatment (medical, pharmacological and surgical) and management plan for straightforward and abnormal obstetric and gynaecological conditions.</p> <p>The course introduces the students to key processes in human procreation and development. They will follow normal and abnormal pregnancies, from conception to delivery and will encounter, and learn how to deal with, common obstetric problems, including emergencies. Students will also acquire an understanding of all aspects of health and illness relating to women from childhood to old age and will</p> <p>Identify common problems related to the female reproductive system and describe their management.</p>						

Learning Outcomes	<p>After the completion of the course the students should be able to:</p> <ol style="list-style-type: none"> 1. Take a general obstetric history, and identify case-specific obstetric risk factors, from women with normal and abnormal pregnancies, in a sensitive and caring manner 2. Describe, in detail, normal pregnancy, labour, delivery and the puerperium and its management. 3. Take a gynaecological history from women with abnormal gynaecological presentations 4. Carry out obstetric examinations, including what is required for a routine antenatal check. 5. Carry out an abdominal examination, with particular relevance to common gynaecological conditions. 6. Perform intimate examinations where appropriate, including vaginal and speculum examinations on both gynaecological and obstetric patients. 7. Develop competence at taking cervical smears and where relevant vaginal and cervical swabs. 8. Select appropriate investigations for Obstetrics & Gynaecology patients, interpret the results accurately and come up with a differential diagnosis for the presenting complaint 9. Prepare a treatment management plan for the patient to present to the responsible clinician to include medical, pharmacological, surgical options as appropriate 10. Communicate effectively with women and colleagues about general health and problems related to their reproductive system. 11. Work effectively as a key team member in the management of health and illness issues for women 12. Observe, and where appropriate carry out or assist with, the following procedures: pelvic examination, forceps, vacuum & Caesarean delivery, manual removal of the placenta, fetal blood sampling, epidural and spinal anaesthetic delivery, episiotomy, family planning, termination of pregnancy (TOP), obstetric scanning, fertility planning, colposcopy, uterine curettage and evacuation, hysteroscopy, hysterectomy, salpingo-oophorectomy, anterior and posterior vaginal repair, colposuspension, Caesarean section and other surgical procedures, planned and opportunistic.
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Prerequisites	None	Required	None
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Course Content	<ul style="list-style-type: none"> • Antenatal care • Intrapartum Care • The puerperium • Prepubertal and congenital gynaecological disorders • Ambiguous genitalia • Pubertal disorders • Menstruation and menstrual disorders • Amenorrhoea, oligomenorrhoea, menorrhagia, dysmenorrhoea • Dysfunctional uterine bleeding (DUB) • Intermenstrual (IMB) and post coital bleeding (PCB) • HRT • Pelvic Pain and Dyspareunia • Fertility Control • Genital Tract Infection • Sexually transmitted infections • Fertility and sub-fertility, IVF • Polycystic Ovarian Syndrome (PCOS) and hirsutism • Climacteric and Menopause disorders • Postmenopausal disorders • Pelvic organ prolapse • Urinary incontinence • Gynaecological Oncology and screening • Gynaecological surgery • Gestational diabetes • Pre-eclampsia • Intrauterine pregnancy • Hyperemesis gravidarum • Miscarriage • Ectopic pregnancy • Hydatidiform mole & choriocarcinoma • Postpartum haemorrhage • Cord prolapse • Shoulder dystocia. • Respiratory distress syndrome of the newborn • Lactation • Mother-child bonding • Healthcare professionals involved in O&G patient care
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Teaching Methodology	The course is delivered by clinical placements, lectures, tutorials, case studies and group discussions, theatre attendance and visits to the community.
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Bibliography	Required Textbooks/Reading:				
	Recommended Textbooks/Reading:				
	Authors	Title	Publisher	Year	ISBN/ E-Book
	Hanretty, K	Obstetrics Illustrated, 7 th ed.	Churchill Livingstone	2010	978-0702030666
Symonds, I.M. & Arulkumaran, S	Essential Obstetrics and Gynaecology, 6 th ed.	Churchill Livingstone	2020	978-0702076381	
Sally Collins, Kevin Hayes, Sabaratnam Arulkumaran, Kirana Arambage, Lawrence Impey	Oxford handbook of Obstetrics and Gynaecology, 4th ed.	Oxford	2023	978-0198838678	
	E-book resources for Clinical Placements Support Resources: https://libguides.unic.ac.cy/placementresources				
Assessment	Final year exam (EYEs) and final year OSCE.				
Language	English				

3. MED-509 Obstetrics and Gynaecology course/ Clinical rotation

Requirements

Please take note of the following assessments that students will need to complete and submit via **'MyProgress Health'**, **no later than one week** after the completion of the MED-509 Obstetrics and Gynaecology course/ clinical rotation. You must also cross-reference the above with the Year 5 PVB assessment domain handbook, which takes precedence to any other handbook.

Required PVB Assessments

1 x Clinical Placement and Professionalism Certificate (CPPC)
2 x Mini Clinical Education Exercise (Mini-Cex)
2 x Case Based Discussion (CBD)
2 x ECSA (1 Bimanual Vaginal Examination &/or Cuscoe's Speculum and 1 Antenatal Examination)
Daily Attendance Logbook (submitted via 'MyProgress Health' by uploading the attendance weekly sheets)
1 x Learning Outcomes Record (LOR)
Evidence of completing online student feedback survey

Floating WPBA and On-line Feedback Survey

Submit the above forms together with any Floating WPBAs completed during the MED-509 Obstetrics and Gynaecology course/ clinical rotation. You also need to ensure that you have completed the online feedback survey and upload evidence of this via **'MyProgress Health'**, by the deadline.

Logbook

The logbook should be completed on a daily basis and submitted at the end of your course/ clinical rotation by uploaded on **'MyProgress Health'**.

Attachment sign-off process

PLEASE NOTE: It is your responsibility to ensure that your tutor completes your Clinical Practice Portfolio Certificate (CPPC) as well as WPBA forms for you.

You should follow these steps:

- You should contact your Clinical Lead in advance to agree a mutually convenient date to conduct the completion and sign-off of the **CLINICAL PLACEMENT & PROFESSIONALISM CERTIFICATE (CPPC)** using the final week of your attachment. It may take around 15-20 minutes so please bear that in mind when arranging a suitable time slot. You should check in advance if the Clinical Lead will be absent at any time towards the end of the attachment.
- Your CPPC must be completed by the relevant tutor/lead clinician no later than one week after the completion of the attachment (recommended to be completed by the last day of the clinical attachment). Your tutor will be able to access all the WPBAs you have completed on your device during the attachment, as well as your logbooks and other evidence of your attendance.
- If you have not been told who will be signing you off you should contact your local administrator for guidance.
- Attend the meeting with your clinical tutor and bring your device to present all required WPBA forms and logbooks, as well as any other evidence of your attendance.
- It is your responsibility to ensure that the CPPC certificate and all WPBA forms are properly completed prior to their submission. If any of the assessments on the form have been changed, the assessor must sign where the correction has been made. Absence of a signature will result in the form being returned to the assessor for validation. In addition, you are required to use your logbooks to record activities and attendance and ask for a signature from your supervisor prior to submitting these.

DON'T FORGET:

- You should use the diaries to record activities and attendance and ask for a signature from supervising Consultant or Registrar each week.

✔ You need to achieve submission of all assessment forms and attendance logbook/diaries via **'MyProgress Health'** within one week of completing an attachment. If you are using the 'E-mail to Assessor to complete later' function it is your responsibility to chase up the clinician and have your WPBAs completed and submitted by the deadline. **If you anticipate any delays please always inform the PVB administrator. No communication and late submissions are considered serious and recorded under Professional Behaviour of the PVB domain.**

✔ You must check that all section of WPBA forms have been completed appropriately and fully before you submit. Otherwise, your forms will not be accepted by the system.

✔ If you are marked with a 'Fail' on the CPPC form for any of the elements, the assessor must give specific detailed feedback explaining reasons for the grade. Feedback should be focused and specific. In such cases or in cases where you fail to complete the required number of WPBAs, you will normally be required to redo part or the whole of the course/clinical rotation (after discussion with your local PVB Domain Lead). **Once remediation is complete a new CPPC form needs to be completed and signed off by the Clinical Lead or the remediation supervisor along with a new Logbook that shows remediation dates.**

✔ Check that your course/clinical rotation specific and floating WPBAs have been supervised and signed off by the correct assessor level. If you are unsure, please check before you undertake the WPBA to avoid your forms being rejected and having to return to your placement to repeat the WPBA with the correct assessor. Ensure you have completed the online feedback survey and upload evidence of this via **'MyProgress Health'**, by the submission deadline.

 **Note that late submissions will be recorded under PVB Professional Behaviour Element. Your clinical Site Administrator is here to help! If you are unclear or unsure about any aspect of the PVB Domain ask your Clinical Site Administrator.**

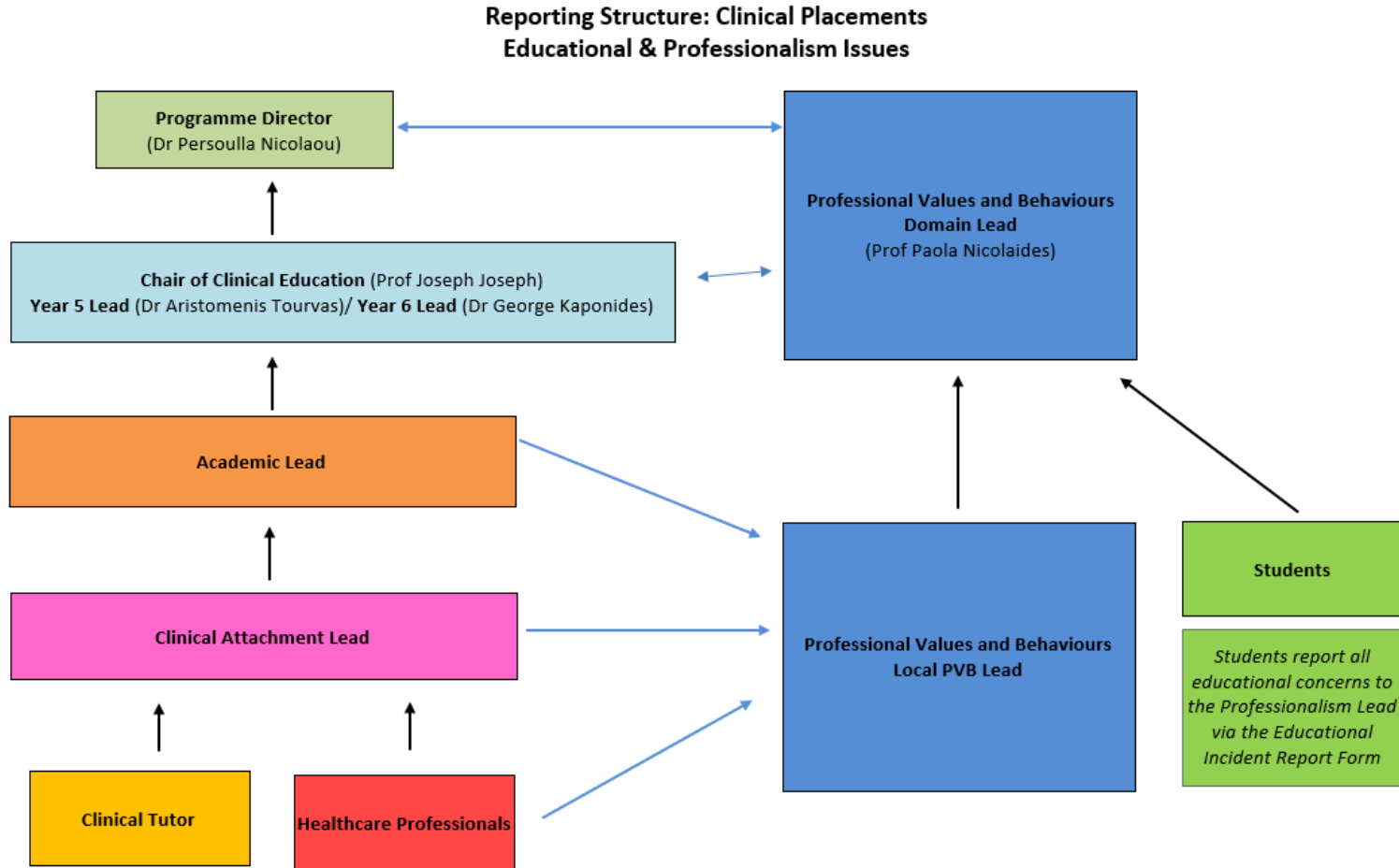
 **In case of illness or absence**

Students must notify their Clinical Site Administrators via E-mail, and their Clinical Tutor prior or on the day of absence.

4. MED-509 Obstetrics and Gynaecology course/ Clinical rotation material on Moodle

1. The External Female Genital Organs
2. The Internal Female Genital Organs
3. The Structure and Functions of the Bony Pelvis
4. Explanation of the Normal Menstrual Bleeding
5. Physiological mechanisms, Endometrial Effect and Implantation
6. Menstrual Disorders
7. Early Pregnancy Loss
8. Ectopic Pregnancy
9. Abdominal Pain: Differential Diagnosis and Management
10. Endometriosis: Diagnosis and Management of Chronic Pain and Infertility
11. Gynaecological Malignancies
12. Cord Prolapse and Shoulder Dystocia
13. Normal Labour Part I: Mechanisms
14. Normal Labour Part II: Intrapartum Assessment
15. Abnormal Labour Part I: Fetal-pelvic Disproportion
16. Abnormal Labour Part II: Instrumental Delivery and Caesarean Section
17. Obstetric Complications Part I:
 - Preterm Labour
 - Preterm Premature Rupture of Membranes
 - Hypertensive Disorders of Pregnancy
 - Macrosomia
 - Intrauterine Growth Restriction
18. Obstetric Complications Part II: GDM and Obstetrical Haemorrhage
19. Obstetric Complications Part III: Post term Pregnancy and Twin Pregnancy
20. CBD Tutorials
 - Postnatal Care
 - Episiotomy
 - PROM at term
 - Medical Disorders
 - Caesarean Section
 - Peri Partum collapse and care of the critically ill patient
 - Infections in pregnancy (Rubella, measles, Parvo virus, CMV, Hepatitis B, Varicella, Syphilis, toxoplasmosis, GP strep & GP A strept)
21. Presentations DoR
 - HPV infection
 - Cervical Cancer

5. Reporting Structure



Reporting Structure: Clinical Attachments Patient and Student Safety Issues

