

**COURSE CURRICULUM FOR THIRD PROFESSIONAL BAMS
(PRESCRIBED BY NCISM)**

शास्त्रं ज्योतिः प्रकाशार्थं दर्शनं बुद्धिरात्मनः।

**Prasuti Tantra evam Stree Roga
(Gynecology and Obstetrics)**

(SUBJECT CODE : AyUG-PS)

(Applicable from 2021-22 batch, from the academic year 2024-25 onwards for 5 batches or until further notification by NCISM, whichever is earlier)



॥ आयुषे सर्वलोकानाम् ॥

**BOARD OF AYURVEDA
NATIONAL COMMISSION FOR INDIAN SYSTEM OF MEDICINE
NEW DELHI-110026**



NCISM
III Professional Ayurvedacharya
(BAMS)

Subject Code : AyUG-PS

Prasuti Tantra evam Stree Roga
(Gynecology and Obstetrics)

Summary

| Total number of Teaching hours: 275 | | | |
|--|----|------------|-----------------|
| Lecture (LH) - Theory | | 100 | 100(LH) |
| Paper I | 50 | | |
| Paper II | 50 | | |
| Non-Lecture (NLHT) | | 52 | 175(NLH) |
| Paper I | 26 | | |
| Paper II | 26 | | |
| Non-Lecture (NLHP) | | 123 | |
| Paper I | 62 | | |
| Paper II | 61 | | |

| Examination (Papers & Mark Distribution) | | | | | |
|---|-------------------------------|----------------------------------|-------------|-----------------|-----------|
| Item | Theory Component Marks | Practical Component Marks | | | |
| | | Practical | Viva | Elective | IA |
| Paper I | 100 | 100 | 60 | 10 (Set-TA) | 30 |
| Paper II | 100 | | | | |
| Sub-Total | 200 | 200 | | | |
| Total marks | 400 | | | | |

Important Note :- The User Manual III BAMS is a valuable resource that provides comprehensive details about the curriculum file. It will help you understand and implement the curriculum. Please read the User Manual III before reading this curriculum file. The curriculum file has been thoroughly reviewed and verified for accuracy. However, if you find any discrepancies, please note that the contents related to the MSE should be considered authentic. In case of difficulty and questions regarding curriculum write to syllabus24ayu@ncismindia.org

PREFACE

The Indian government introduced the National Education Policy with the aim of transforming India into a knowledge-based society by providing quality education to all.

Prasuti Tantra and Stree Roga is a comprehensive and integral subject that equips students with the knowledge and skills required for the effective care of women throughout their life stages with special emphasis on reproductive health & management of pregnancy, child birth & postpartum care.

The curriculum is designed to develop a strong foundation in Ayurvedic concepts related to women's health, combined with contemporary medical knowledge, making it a dynamic and interdisciplinary subject.

In this competency based curriculum the syllabus has been crafted by blending traditional teachings & guidance with the latest scientific advancements to create a comprehensive & relevant educational experience. There is a conscious effort to incorporate a variety of innovative learning methods to ensure more practical education.

Innovative teaching methodologies, including problem-based learning (PBL), case-based learning (CBL), and simulation-based training, are integrated to encourage clinical reasoning, critical thinking, and application of theoretical knowledge. These methods help in honing the competencies necessary for handling real-life situations in Prasuti Tantra and Stree Roga practice. Vertical and horizontal integration with other subjects ensures a seamless learning process and prepares students for interdisciplinary care delivery.

Incorporating student-centric and activity-based learning, the curriculum also focuses on building competencies in areas such as patient interaction, clinical examination, diagnostic decision-making, and treatment planning. Dedicated time for clinical exposure, self-directed learning, peer learning, community outreach programs, and surveys on women's health helps students understand the diverse range of health issues faced by women across different demographics.

The curriculum is aligned with Competency-Based Dynamic Curriculum (CBDC) aims to produce confident, skilled practitioners who can diagnose and treat women's health issues effectively, keeping in mind the ancient wisdom of Ayurveda and the advances in contemporary medicine. Through traditional and modern assessment methods, students will be regularly evaluated to ensure they achieve the desired learning outcomes, contributing to both their academic success and professional development.

By the end of this course, students will not only be well-versed in Ayurvedic approaches but also adapt in contemporary medical practices, enabling them to provide high-quality, integrated healthcare to women.

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Course Code and Name of Course

| | |
|--------------------|--------------------------------|
| Course code | Name of Course |
| AyUG-PS | Prasuti Tantra evam Stree Roga |

Table 1 : Course learning outcomes and mapped PO

| SR1 CO No | A1 Course learning Outcomes (CO) AyUG-PS At the end of the course AyUG-PS, the students should be able to- | B1 Course learning Outcomes mapped with program learning outcomes. |
|--------------------------|--|---|
| CO1 | Explain anatomy, physiology, neuro-endocrinology of reproduction and implement <i>Garbhini Paricharya</i> (Antenatal care), <i>Garbha Samskara</i> to achieve <i>Shreyasi Praja</i> (healthy progeny) and minimize maternal morbidity and mortality. | PO1,PO4,PO5 |
| CO2 | Explain <i>Youvanavastha</i> (Puberty), <i>Kishoravastha</i> (Adoloscence) and <i>Rajonivrutti</i> (Menopause). Diagnose <i>Yonivyapad</i> (Gynecological disorders), <i>Artava vyapad</i> (Menstrual disorders), <i>Vandhyatva</i> (Infertility), <i>StanaRoga</i> with integration of Ayurveda principles and Scientific advances for holistic management. | PO1,PO3 |
| CO3 | Perform <i>Sthanika upakrama</i> (in-situ treatment), <i>Panchakarma</i> and Surgical procedures and implement drug interventions ethically ensuring patient safety. | PO2,PO4,PO5 |
| CO4 | Perform Normal labor, anticipate Obstetric emergencies and ensure timely referral. Manage <i>Sutika</i> (normal puerperium) and <i>Sutika Vyapad</i> (abnormal puerperium). Postpartum counseling on contraceptives. | PO2,PO3,PO6 |
| CO5 | Participate in National maternal health programs and comprehend the medicolegal aspects related to <i>Prasuti tantra and Stree Roga</i> including the MTP ACT and PC-PNDT ACT. | PO6,PO7 |
| CO6 | Demonstrate professional ethics, communication skills with compassionate attitude, engage in clinical research embracing the principles of lifelong learning and professional development. | PO6,PO8,PO9 |

Table 2 : Contents of Course

| Paper 1 (PRASUTI TANTRA - OBSTETRICS) | | | | | | |
|--|--|----------------|-----------------|-------------------------|------------------------------------|--|
| Sr. No | A2 List of Topics | B2 Term | C2 Marks | D2 Lecture hours | E2 Non-Lecture hours Theory | E2 Non-Lecture hours Practica I |
| 1 | <p>Stree Vishishta Shareera Vigyana - Anatomy of Female Reproductive System</p> <p>a. Introduction to <i>Prasuti Tantra</i> and <i>Stree Roga</i>. Origin of word "Stree" with nomenclature. (<i>Vayobheden Stree sangya</i>)</p> <p>b. <i>Tryavarta Yoni</i> and anatomical insights of <i>Garbhashaya</i> with <i>marma, peshi</i>.</p> <p>c. <i>Artavavaha</i> and <i>Stanyavaha Srotas</i>.</p> <p>d. Anatomy of Female internal and external genital organs with applied aspects.</p> <p>e. <i>Streeshroni</i> (Female Pelvis) -Types, Diameters and Obstetric significance.</p> | 1 | 30 | 3 | 2 | 4 |
| 2 | <p>Rutuchakra - Menstrual Cycle</p> <p>a. <i>Shuddha Artava & Shuddha Shukra Lakshana</i>.</p> <p>b. <i>Tridosha & Panchamahabhoota</i> in <i>Rutuchakra</i>.</p> <p>c. Practices of <i>Rajaswala Paricharya</i> and its potential effects on reproductive health.</p> <p>d. <i>Rutukala, Rutumati Lakshana</i> and <i>Rutumati Paricharya</i> with significance.</p> <p>e. Highlights on <i>Beeja Nirmana</i> - Oogenesis, Spermatogenesis.</p> <p>f. <i>Rutuvyatita Kala</i>.</p> <p>g. Phases of Menstrual cycle. Importance of HPO axis in menstrual regulation.</p> | 1 | | 1 | 4 | 1 |
| 3 | <p>Garbha Vigyana - Embryology & Fetal Development</p> | 1 | | 4 | 4 | 4 |

| | | | | | | |
|---|--|---|----|---|---|---|
| | <p>a. <i>Garbhakara Bhava</i>, <i>Garbhadhana</i>, <i>Garbhavakranti</i>, <i>Garbha Samskara</i>, <i>Pumsavana Samskara</i> for achieving <i>Shreyashi-praja</i>.</p> <p>b. <i>Apara</i> (Placenta) and <i>Garbha Nabhinadi</i> (umbilical cord), <i>Garbhodaka</i> (amniotic fluid) - formation with abnormalities</p> <p>c. <i>Garbha Poshana</i></p> <p>d. Fetal nourishment and Fetal circulation.</p> <p>e. <i>Masanumasika Garbha Vriddhi</i></p> <p>f. <i>Garbhashyantara Garbha Sthiti</i> (Fetus-in-utero) - Lie, Attitude, Presentation, Presenting part, Denominator, Position.</p> | | | | | |
| 4 | <p>Garbhini Vigyana - Physiology of Pregnancy & Antenatal Care</p> <p>a. <i>Garbhini Nidana – Garbhini Lakshana</i>, <i>Garbha-Upaghatkara bhava</i>, <i>Garbha Vikruti</i>.</p> <p>b. Physiological changes and Diagnosis of Pregnancy.</p> <p>c. <i>Garbhini Paricharya</i>, <i>Prajasthapana gana</i>.</p> <p>d. Antenatal care – Objectives, Immunization, Examination, Investigations and Management with contemporary National protocol.</p> <p>e. Demographic statistics related to Obstetrics.</p> | 1 | | 3 | 3 | 8 |
| 5 | <p>Garbha Vyapad - Fetal Pathologies</p> <p>a. <i>Garbha Srava</i>, <i>Garbha Pata - Nidana</i>, <i>Samprapti</i>, <i>Lakshana</i>, <i>Chikitsa</i>.</p> <p>b. Abortion, Medical Termination of Pregnancy Act (MTP Act).</p> <p>c. <i>Garbha Vyapad – Nidana</i>, <i>Samprapti</i>, <i>Lakshana</i>, <i>Chikitsa</i>.</p> <p>d. Intrauterine Growth Restriction, Oligohydramnios, Polyhydramnios—Etiological factors, Clinical features, Management.</p> | 2 | 40 | 4 | 4 | 7 |

| | | | | | |
|---|---|---|----|---|----|
| | <p>e. Rh incompatibility, ectopic pregnancy, gestational trophoblastic disease.</p> <p>f. <i>Antarmruta Garbha – Nidana, Samprapti, Lakshana, Chikitsa.</i></p> <p>g. Intrauterine Fetal Demise—Etiological factors, Clinical features, Management.</p> <p>h. <i>Raktagulma—Nidana, Lakshana, Chikitsa.</i></p> | | | | |
| 6 | <p>Garbhini Vyapad - Minor Ailments and Major Disorders of Pregnancy</p> <p>a. <i>Garbhini Vyapad – Aruchi, Hrillasa, Chardhi, Vibanda, Atisara, Arsha, Parikartika, Udavarta</i></p> <p>b. <i>Vaivarnya, Kandu, Kikkisa, Pandu, Garbhini Jwara, Shotha.</i></p> <p>c. Hypertensive Disorders in Pregnancy.</p> <p>d. High risk Pregnancy.</p> <p>e. <i>Prasava poorva rakta srava (Ante Partum Hemorrhage) – Causes, Classification, Clinical features, Management.</i></p> | 2 | 6 | 0 | 6 |
| 7 | <p>Prasava Vigyana - Labour</p> <p>a. <i>Sutikagara</i> and Labour Room setup, Labour Room Protocol according to contemporary National Health Guidelines.</p> <p>b. Drugs commonly used during Labour (Uterotonics, Tocolytics, Analgesics, Ergot Alkaloids and Anesthetics) - Guidelines for use with Pharmacotherapeutics.</p> <p>c. <i>Prasava Paribhasha, Prasava Hetu, Prasava Kala.</i></p> <p>d. Causes of onset, Physiology and Diagnosis of Labour.</p> <p>e. Anatomy of Fetal Skull and Clinical Pelvimetry.</p> <p>f. <i>Prajayini, Upasthita Prasava and Asanna Prasava.</i></p> | 2 | 10 | 1 | 17 |

| | | | | | | |
|---|---|---|----|---|---|---|
| | <p>g. Stages of Labour and Mechanism of Labour.</p> <p>h. <i>Avi, Grahishoola, Prasuti maruta</i> and <i>Garbha Sthiti Parivartana</i> during <i>Prasava Kala</i>.</p> <p>i. <i>Prasava Paricharya</i> - Monitoring with Partograph and management of Labour.</p> <p>j. Episiotomy.</p> <p>k. Intrapartum Fetal Monitoring techniques, Non Stress Test, Fetal Distress.</p> <p>l. <i>Jatamatra Paricharya</i> (Immediate care & Resuscitation of Newborn).</p> | | | | | |
| 8 | <p>Prasava Vyapad - Labour Complications & Obstetric Emergencies.</p> <p>a. <i>Nidana, Samprapti, lakshana</i> and <i>Chikitsa</i> of <i>Akala Prasava</i> (Preterm labour)</p> <p>b. Post term pregnancy</p> <p>c. <i>Garbha Sanga, Vilambita Prasava</i>.</p> <p>d. Obstructed and Prolonged labour.</p> <p>e. <i>Apara sanga - Nidana, Lakshana and Chikitsa</i>.</p> <p>f. Post Partum Haemorrhage - Causes, Clinical features, Complications and Management.</p> | 3 | 30 | 6 | 2 | 4 |
| 9 | <p>Moodhagarbha - Obstructed Labour</p> <p>a. <i>Nirukti, Samprapti, Bheda, Gati, Chikitsa</i> of <i>Moodhagarbha</i>.</p> <p>b. Abnormal Presentations – Breech, Persistent Occipito Posterior Position.</p> <p>c. Cephalo Pelvic Disproportion (CPD).</p> <p>d. <i>Moodhagarbha Upadrava – Garbhakosha-parasanga, Makkala, Yonisamvarana</i>.</p> <p>e. Obstetric Emergencies with timely referral - Cord prolapse, Genital Tract Injuries during labour,</p> <p>f. Uterine -inversion, Amniotic fluid Embolism,</p> | 3 | | 8 | 3 | 6 |

| | | | | | | |
|--------------------|---|---|------------|-----------|-----------|-----------|
| | Obstetric Shock, Uterine Rupture. g. Induction and Augmentation of Labour and Assisted Labour Techniques. (Forceps, Vacuum, Caesarean Section). | | | | | |
| 10 | Sootika Vigyana - Puerperium a. <i>Sootika, Sootika-kala, Sootika Paricharya.</i> b. Puerperial changes, Postpartum care. c. Contraception d. <i>Sootika Vyapad – Nidana, Samprapti, Lakshana, Chikitsa.</i> e. Puerperial Disorders. | 3 | | 3 | 1 | 3 |
| 11 | Stanya Vigyana - Lactation a. <i>Stanya, Stanya Sampat.</i> b. Physiology of Lactation, Breast feeding techniques. c. <i>Stanya dushti, Stana Shotha, Stana Vidradhi.</i> d. Mastitis, Breast abscess. | 3 | | 2 | 2 | 2 |
| Total Marks | | | 100 | 50 | 26 | 62 |

| Paper 2 (STREE ROGA - GYNAECOLOGY) | | | | | | |
|---|--|----------------|-----------------|-------------------------|------------------------------------|--|
| Sr. No | A2 List of Topics | B2 Term | C2 Marks | D2 Lecture hours | E2 Non-Lecture hours Theory | E2 Non-Lecture hours Practica I |
| 12 | Stree Prajanananga Nirmana and Vikruti - Development of Female Reproductive System with Anomalies. a. Development of female reproductive system from Mullerian duct and its anomalies. b. Neuroendocrinology of reproduction. | 1 | 30 | 3 | 2 | 4 |

| | | | | | |
|----|---|---|---|---|---|
| | c. Anatomy and Physiological aspects of Puberty and Menopause. | | | | |
| 13 | <p>Yantra evam Shastra - Instruments</p> <p>Instruments commonly used in <i>Prasutitantra</i> (Obstetrics) and <i>Stree Roga</i> (Gynaecology) procedures and surgeries -</p> <p>a. Types of <i>Yantra</i> (Blunt instruments) and utilization-</p> <p>i) <i>Sandansha Yantra</i> (Pincer like or dissecting forceps) –</p> <p>* <i>Annigraha</i> – plain non toothed forceps * <i>Sannigraha</i> – Toothed forceps</p> <p>ii) <i>Swastika Yantra</i> (Cruciform like Forceps) - Allies forceps, Vulsellum, Sponge holding forceps, Cheatle’s forceps, Kocher’s forceps, Babcock’s forceps, Needle holder, Artery forceps, Ovum forceps, Green armytage forceps, Cervical punch biopsy forceps.</p> <p>iii) <i>Shalaka Yantra</i> (Rod like instruments) - Uterine sound, Hegar’s dilator, Uterine curette, Endometrial biopsy curette, <i>Agnikarma Shalaka</i>, Anterior vaginal wall retractor</p> <p>iv) <i>Dvi Tala Yantra</i> (Scoops or spoon-shaped instruments) - Sim’s speculum, Endometrial curette, Cusco’s speculum, Doyen’s retractor, Obstetric forceps</p> <p>v) <i>Nadi Yantra</i> (Tubular instruments) - <i>Yonivranekshana yantra</i>, Leech Wilkinson’s HSG cannula, Rubin’s cannula, Suction cannula, <i>Uttarabasti</i> cannula, Vaginal douching syringe, <i>Basti yantra</i></p> <p>b. Type of <i>Shastra</i> (Sharp instruments) and utilization -</p> <p>i) <i>Kartari Shastra</i> (Scissors) - <i>Atimukha Shastra</i> (Episiotomy Scissors), <i>Mandalagra Shashtra</i> (Umbilical cord cutting Scissors), <i>Shararimukha Shastra</i> (Mayos scissors / Simple scissors, suture removing scissors)</p> | 1 | 1 | 1 | 6 |

| | | | | | | |
|----|---|---|----|----|---|----|
| | ii) <i>Vridhipatra Shastra</i> – Scalpel | | | | | |
| | iii) <i>Suchi Shastra</i> – different type of needles | | | | | |
| 14 | Stree Rugna Parikshana - Gynaecological Examination a. Gynaecological History taking. b. General and systemic examination. c. Breast examination, Per abdomen, Per speculum, Per vaginal, Per rectal examination. | 1 | | 2 | 1 | 4 |
| 15 | Artava Vyapad - Menstrual Disorders a. <i>Ashtartava Dushti</i> . b. <i>Anartava</i> (Amenorrhoea). c. Poly Cystic Ovarian Syndrome (PCOS). d. <i>Artava Kshaya</i> (Oligomenorrhoea, Hypomenorrhoea). e. <i>Artava Vruddhi</i> (Polymenorrhoea). f. <i>Asrugdara</i> (Abnormal Uterine Bleeding). | 1 | | 6 | 2 | 4 |
| 16 | Rajonivritti - Menopause a. Anatomical & Physiological changes in Genital organs during Menopause. b. <i>Rajonivritti Janya Lakshana</i> (Menopausal Syndrome). c. Management of Menopausal syndrome. d. Role of <i>Rasayana</i> in Menopausal syndrome. | 1 | | 2 | 1 | 2 |
| 17 | Yoni Vyapad - Disorders of Female Reproductive system a. <i>Yoni vyapad - Bheda, Nidana, Samprapti, Lakshana, Upadrava, Samanya & Vishesh Chikitsa</i> . b. <i>Udavarta, Vandhya, Vipluta, Paripluta, Vatala, Rudhirakshara, Vamini, Sramsini, Putraghni, Pittala,</i> | 2 | 40 | 13 | 3 | 10 |

| | | | | | |
|----|--|---|---|---|---|
| | <p>c. <i>Atyananda, Karnini, Acharana, Aticharana, Shleshmala, Shandhi,</i></p> <p>d. <i>Phalini, Mahati, Soochivaktra, Sarvaja, Antarmukhi, Shuska, Arajaska, Lohita kshaya, Upapluta.</i></p> <p>e. Dysmenorrhoea, Pruritus Vulvae, Endometriosis, Adenomyosis, Pelvic Inflammatory Diseases,</p> <p>f. Pelvic organ prolapse, Cervical erosion and Ectropion, Dyspareunia, Vaginismus, Presacral neuralgia, Constitutional nymphomania, Effluvium seminis - Causes, Clinical features, Investigations and Management.</p> | | | | |
| 18 | <p>Vandhyatwa - Infertility</p> <p>a. <i>Nirukti and Bheda of Vandhyatwa.</i></p> <p>b. Female and Male factors of infertility.</p> <p>c. Infertility Evaluation - Semen Analysis, Hormonal assays, Follicular study, Ultrasonography & Hysterosalpingography</p> <p>d. <i>Chikitsa of Vandhyatwa – Shodhana, Shamana and Sthanika upakrama</i></p> <p>e. Assisted Reproductive Techniques.</p> | 2 | 4 | 3 | 8 |
| 19 | <p>Vyadhi Vinischaya Upaya - Diagnostic Tools and Techniques</p> <p>a. Pap smear</p> <p>b. Colposcopy</p> <p>c. Cervical biopsy</p> <p>d. Endometrial biopsy</p> <p>e. Hysterosalpingography</p> <p>f. Ultrasonography</p> <p>g. Hysteroscopy</p> <p>h. Laparoscopy</p> | 2 | 1 | 1 | 2 |

| | | | | | | |
|----|---|---|----|---|---|---|
| | i. Magnetic Resonance Imaging j. Computed Tomography scan | | | | | |
| 20 | Sthanika Upakrama - In situ Treatment Modalities <i>Sthanika Upakrama - Yoni Dhavana, Yoni Prakshalana, Yoni Pichu, Yoni Varti, Yoni Lepana, Yoni Avachurnana, Yoni Purana, Yoni Dhoopana, Dahana, Ksharkarma, Uttarbasti.</i> | 2 | | 1 | 2 | 7 |
| 21 | Stree Janananga Granthi Evam Arbuda - Benign & Malignant lesions of Female Reproductive System a. <i>Yonikanda, Yoni Arsha.</i> b. Benign lesions of reproductive system - Fibroid uterus, Bartholin cyst, Endometrial and Cervical polyp, Ovarian cyst, Tubo ovarian mass. c. <i>Arbuda</i> d. Premalignant & Malignant lesions of Uterus, Cervix, Endometrium & adnexa - Aetiology, Evaluation, Staging, Management e. Preventive aspects of Malignancies. f. Vaccination for cervical cancer. | 3 | 30 | 4 | 2 | 4 |
| 22 | Guhya Roga - Sexually Transmitted Diseases a. <i>Upadamsha, Firanga, Puyameha - Nidana, Samprapti, Lakshana, Chikitsa.</i> b. Sexually Transmitted Infections.- Causative microorganisms, Pathology, Clinical features, Investigations and Treatment. | 3 | | 2 | 1 | 0 |
| 23 | Yoni srava - Vaginal Discharge a. <i>Shweta pradar - Nidana, Lakshana and Chikitsa.</i> b. Differential Diagnosis of Abnormal Vaginal Discharge and management. | 3 | | 1 | 1 | 2 |
| 24 | Stana Roga - Breast Disorders a. Clinical Anatomy of Breast. | 3 | | 3 | 1 | 3 |

| | | | | | |
|----|--|---|---|---|---|
| | <p>b. <i>Stana Keelaka, Stana Granthi - Nidana, Samprapti Lakshana, Bheda, Upadrava & Chikitsa</i></p> <p>c. Fibroadenoma Breast.</p> <p>d. <i>Stanarbuda</i> - Breast carcinoma.</p> <p>e. Aetiology, Clinical features, Diagnosis, Staging, Prevention & Management.</p> | | | | |
| 25 | <p>Shastra Karma in Stree Roga - Surgical Procedures in Gynaecology</p> <p>a. Sterilization methods of Instruments, Equipments and Labour - OT complex.</p> <p>b. <i>Garbhashaya Mukha Vistrutikarana evam Lekhana</i> (Dilatation & Curettage).</p> <p>c. <i>Garbhashaya Mukha Dahana</i> (cauterization).</p> <p>d. <i>Vandhya karana</i> (Sterilization) – Tubectomy & Vasectomy.</p> <p>e. <i>Udaramarga Garbhashaya Nirharana</i> (Abdominal hysterectomy).</p> <p>f. <i>Yonimarga Garbhashaya Nirharana</i> (Vaginal hysterectomy).</p> <p>g. <i>Arbudanirharana</i> (Myomectomy).</p> <p>h. <i>Granthinirharana</i> (Cystectomy).</p> <p>i. <i>Arshanirharana</i> (Polypectomy).</p> | 3 | 4 | 1 | 4 |
| 26 | <p>Stree Roga Sambandhi Aushadhi- Classical Formulations</p> <p>a. <i>Vishista-Phalashruti</i> (Specific indication) of following formulations -</p> <p>b. <i>Churna Kalpana - Pushyanuga Churna, Shatpushpa Churna, Shatavari Churna, Nagakeshara Churna.</i></p> <p>c. Ghrita Kalpana - Phalaghrita, Kashmaryadi Ghrita, Vidaryadi Ghrita.</p> <p>d. <i>Taila Kalpana - Dahtakyadi Taila, Shatpushpa</i></p> | 3 | 1 | 1 | 0 |

| | | | | | | |
|--------------------|--|---|------------|-----------|-----------|-----------|
| | <p><i>Taila, Jatyadi Taila, Narayana Taila.</i></p> <p>e. <i>Asava and Arishta - Ashokarishta, Kumaryasava.</i></p> <p>f. <i>Rasa aushadhi - Rajahpravartini Vati, Pratapalankeshwar Rasa, Garbhapala Rasa, Pushpadhanva Rasa.</i></p> <p>g. <i>Kwatha - Nyagrodhadi kwatha, Dashmoola Kwatha, Panchavalakala Kwatha.</i></p> <p>h. <i>Paka Kalpana - Sobhagya Shunthi Paka, Puga Khanda/ Puga Paka.</i></p> <p>i. <i>Avaleha - Jeerakavaleha, Kushmandavaleha</i></p> | | | | | |
| 27 | <p>National Maternal Health Programs</p> <p>a. Family planning.</p> <p>b. Reproductive and Child Health</p> <p>c. 'Janani Suraksha Yojana'</p> <p>d. 'Janani Shishu Suraksha Karyakram'</p> <p>e. 'Pradhan Mantri Surakshit Matritva Abhiyan'</p> <p>f. 'Mission Indradhanush'</p> <p>g. 'Menstrual Hygiene Scheme'</p> <p>h. 'LaQshya programme'</p> | 3 | 1 | 2 | 0 | |
| 28 | <p>Medical ethics, Record keeping and Audit in Obstetrics and Gynaecology</p> <p>a. Medical ethics.</p> <p>b. Medical record documentation – Informed Consent, Birth & Death registration, Issuing Medical Certificate</p> <p>c. Audit in Obstetrics and Gynaecology.</p> | 3 | 1 | 1 | 1 | |
| Total Marks | | | 100 | 50 | 26 | 61 |

Table 3 : Learning objectives of Course

| Paper 1 (PRASUTI TANTRA - OBSTETRICS) | | | | | | | | | | |
|---|--|-------------------------|---------------------------|--------------------|-------------------------|-----------------------------|------------------------------|-------------------|--------------------------|-------------------|
| A3 Course outcome | B3 Learning Objective (At the end of the session, the students should be able to) | C3 Domain/sub | D3 MK / DK / NK | E3 Level | F3 T-L method | G3 Assessment | H3 Assessment Type | I3 Term | K3 Integration | L3 Type |
| Topic 1 Stree Vishishta Shareera Vigyana - Anatomy of Female Reproductive System (LH :3 NLHT: 2 NLHP: 4) | | | | | | | | | | |
| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
| CO1 | Explain the origin of the word " <i>Stree</i> " with nomenclature and classification based on age (<i>Vayobhedena Stree Sangya</i>). | CK | MK | K | L&PPT | VV-Viva | F&S | I | - | LH |
| CO1 | Demonstrate the anatomy of female reproductive organs - <i>Tryavarta Yoni, Garbhashaya, Stree vishista Marma & Peshi</i> . | CAP | MK | SH | D,D-M | PP-Practical,P-VIVA,VV-Viva | F&S | I | - | NLHP1.1 |
| CO1 | Enumerate and describe <i>Stree vishista Rachana Shareera</i> - <i>Tryavarta Yoni, Garbhashaya, Stree vishista Marma</i> and <i>Peshi</i> . Describe <i>Artava vaha srotas</i> and <i>Stanya vaha srotas</i> with <i>Viddha Lakshana</i> . | CC | MK | K | L&PPT | S-LAQ,P-VIVA | F&S | I | - | LH |
| CO1 | Demonstrate the spatial orientation and positioning of the female reproductive organs within pelvic cavity and role of ligaments. Demonstrate Blood supply to the Uterus, Adnexa and Pelvic floor. | CAP | MK | SH | D-M,D | P-EXAM | F | I | - | NLHP1.2 |
| CO1 | Describe external genital organs and Internal genital organs with applied clinical aspects. | CC | MK | K | L&PPT ,CBL | P-VIVA,INT,P-EXAM ,S-LAQ | F&S | I | - | NLHT1.1 |
| CO1, CO4 | Demonstrate landmarks of true pelvis, false pelvis, inlet, cavity, outlet with diameters of Obstetric importance and their measurements. | CAP | MK | SH | D-M | P-MOD,VV-Viva,P-VIVA | F&S | I | - | NLHP1.3 |

| | | | | | | | | | | |
|-------------|--|----|----|----|-------|--|-----|---|---|---------|
| CO1 | Describe <i>Stree Shroni - Asthi, Sandhi, Parimana</i> and highlight difference with <i>Purusha Shroni</i> . | CC | MK | K | L&PPT | S-LAQ,VV -Viva,P-VI VA,P- MOD | F&S | I | - | NLHT1.2 |
| CO1, CO4 | Classify Female Pelvis. Describe Obstetric measurements with clinical importance. | CC | MK | KH | L&PPT | VV-Viva,P- VIVA,S- LAQ | F&S | I | - | LH |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|---|--|
| NLHT 1.1 | Anatomy of female genital organs | (1 hr) Teacher will demonstrate Normalcy and abnormalities in Female external genital organs - vulva, labia majora, labia minora, clitoris and vestibule with videos or images and explain clinical importance. Normalcy and abnormalities in internal female genital organs - vagina, cervix, uterus, fallopian tubes and ovaries with videos or images and explain clinical importance. Encourage students to relate anatomical positioning to clinical conditions. |
| NLHT 1.2 | <i>Asthi, Sandhi and Parimana of Stree Shroni</i> | (1 hr) Teacher will demonstrate <i>Asthis in Stree Shroni</i> - Guda, Bhaga, Nitamba, Trika, Shroniphalaka. <i>Sandhis - Tunnasevani and Samudga in Stree Shroni</i> . Discuss <i>Angula Parimana</i> with comparative study of <i>Purusha Shroni</i> . |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|----------|-----------------------|-----------------------------------|
| NLHP 1.1 | <i>Tryavarta Yoni</i> | (1 hr) |

Teacher will orient students on anatomy of female reproductive system and demonstrate anatomical co-relations of *Tryavarta yoni* on model -

A)

1. vagina with adnexal structures
2. cervix with adnexal structures
3. uterus with adnexal structures

B)

1. introitus
2. mid-canal
3. fornices

C)

1. Thick connective and fibrous layers separating vaginal canal from urinary bladder and urethra anteriorly & rectum and anus posteriorly.
2. Muscular layer
3. Mucous layer

D)

1. External genitalia
2. Vagina
3. Uterus with adnexa

E)

1. Submental sulcus
2. Transverse vaginal sulcus
3. Bladder sulcus

Locate *Garbhashaya* on model and understand with respect to description given by Acharya Sushrut and Kashyap.

Locate *Stree Vishista Peshis* and *marmas* on model and understand their importance.

Divide students into small groups and student will immitate the demonstration -

Provide each group with anatomical models of the female reproductive system - uterus with adnexa models.

Students will identify and demonstrate structures namely *Avarta of Yoni*, *Garbhashaya*, and *marma*,

| | | |
|---|---|---|
| | | <i>stree vishista peshi and srotas.</i> |
| NLHP 1.2 | Spatial orientation and Blood supply of uterus and adnexa | <p>(1 hr)</p> <p>Teacher will use anatomical models to demonstrate - Blood supply to the uterus, ovaries, and fallopian tubes.</p> <p>Detailed structure of the pelvic floor muscles and their clinical importance.</p> <p>Ligaments and their role in pelvic support.</p> <p>Group Activity -</p> <p>Divide students into small groups,</p> <p>Provide each group a pelvic model and chart showing the vascular and ligamentous connections.</p> <p>Instruct groups to debrief - the arterial and venous supply to the uterus and adnexa.</p> <p>Identify the spatial orientation of pelvic organs in relation to each other.</p> <p>Spatial Orientation Exercise -</p> <p>Use cross-sectional images or models to demonstrate how reproductive organs are positioned within the pelvic cavity.</p> <p>Students will practice positioning models accurately to demonstrate version and flexion of uterus.</p> |
| NLHP 1.3 | Female bony pelvis | <p>(2 hrs)</p> <p>Teacher will demonstrate on bony pelvis model -</p> <p>Boundaries of True & false pelvis.</p> <p>Dimensions of the pelvic inlet - Plane, Axis, Antero-posterior diameter, Oblique diameter, Transverse diameter.</p> <p>Dimensions of Mid-Cavity - Axis, Diameter, Boundaries and Plane.</p> <p>Dimensions of Outlet - Antero-posterior diameter, Transverse diameter, Pubic arch angle, Waste space of Morris.</p> <p>Pictorial Demonstration of types of pelvis - Gynecoid, Android, Anthropoid and Platypelloid.</p> <p>The student will imitate demonstration on model, describe the importance of obstetric diameters.</p> |
| Topic 2 Rutuchakra - Menstrual Cycle (LH :1 NLHT: 4 NLHP: 1) | | |

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|-----|----|----|----------------|----------------------|-----|----|----|---------|
| CO2 | Define <i>Raja, Artava, Shukra</i> . Describe <i>Shuddha Artava & Shuddha Shukra Lakshanas</i> with clinical significance. | CC | MK | K | L&GD | VV-Viva | F&S | I | - | NLHT2.1 |
| CO1 | Explain the role of <i>Tridosha</i> and <i>Panchamahabhoota</i> in <i>Rutuchakra</i> (Menstrual cycle) | CC | MK | K | L&GD | VV-Viva | F&S | I | - | NLHT2.2 |
| CO1 | Explain the phases of the menstrual cycle and the role of hypothalamo-pituitary-ovarian axis in its regulation. | CC | MK | K | L&PPT | VV-Viva,S-LAQ,P-VIVA | F&S | I | - | LH |
| CO1 | Explain physiology of Menstruation and phases of Menstrual cycle. | CAP | MK | K | FC | CL-PR,VV-Viva,P-VIVA | F&S | I | - | NLHT2.3 |
| CO1 | Demonstrate dietary recommendations and other practices with potential health benefits of <i>Rajaswala Paricharya</i> . | CAP | MK | KH | D,RP | VV-Viva | F&S | I | - | NLHP2.1 |
| CO1 | Describe <i>Rutumati Lakshana and Paricharya</i> . | CAP | MK | K | L&GD, DIS,PE R | VV-Viva,C L-PR,PRN | F&S | I | - | NLHT2.4 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|---|--|
| NLHT 2.1 | Concept of <i>Raja, Artava and Shukra</i> . | <p>(1 hr)</p> <p>Teacher will facilitate presentation, discussion and clarification of the concept, dividing students into small groups and assign each group with one of topics - '<i>Raja, Artava and Shukra</i>'. Teacher will ensure discussion of <i>Shuddha Artava & Shuddha Shukra Lakshanas</i> and their clinical significance. Peer discussion on the concept of <i>Stree Shukra</i> followed by interaction with students.</p> |

| | | |
|-----------------------------------|--|--|
| NLHT 2.2 | <i>Tridosha and Panchamahabhuta in Rutuchakra.</i> | (1 hr) Teacher will give presentation and have discussion with students, on <i>Gunas</i> of <i>Tridosha</i> and <i>Panchamahabhut</i> in correlation with different phases - <i>Rajasrava Kaala</i> , <i>Rutukala</i> and <i>Rutu Vyateeta Kala</i> with focus on physical, mental, and emotional manifestations. Students will have discussion on cases of irregular menstrual cycles and abnormal menstruation with respect to imbalance of <i>Doshas</i> , <i>Mahabhutas</i> and <i>Gunas</i> involved. |
| NLHT 2.3 | Physiology of Menstruation. | (1 hr) Flipped Classroom - Students will review reading material before class and during class-presentation they will create flow chart / present with diagrams of hormonal regulation of different phases of menstrual cycle followed by peer discussion. Teacher will encourage students to analyze different case scenarios of menstrual irregularities and identifying which phase of the menstrual cycle is affected and how the HPO axis dysfunction contributes. |
| NLHT 2.4 | Importance of <i>Rutukala</i> | (1 hr) Teacher will discuss the significance of <i>Rutukala</i> with physiology of Ovulation. Explain <i>Rutumati Lakshana</i> and enumerate <i>Rutumati Paricharya</i> (practices to be followed) for successful conception & the process of <i>Beeja Nirmana</i> (gamete formation-spermatogenesis and oogenesis) in Ayurveda and contemporary science. Class presentation by students on spermatogenesis and oogenesis followed by peer discussion. |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 2.1 | <i>Rajaswala paricharya</i> | (1 hr) Teacher will discuss and analyze role of various components - <i>Ahara</i> , <i>Vihara</i> and <i>Sadvrutta</i> of <i>Rajaswala Paricharya</i> through role play & Interaction. Student will demonstrate and explain the benefits of dietary recommendations with analysis of |

techniques that help to balance *Vata dosha* during menstruation aligning with recommendations in *Rajaswala Paricharya* (menstruating women).

Topic 3 Garbha Vigyana - Embryology & Fetal Development (LH :4 NLHT: 4 NLHP: 4)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|---|-----|----|----|-----------------------|----------------------------------|-----|----|------|---------|
| CO1 | Define <i>Garbha</i> and explain the process of <i>Garbhadhana</i> (conception) and <i>Garbhavakranti</i> (chronological evolution of <i>Garbha</i>), describe <i>Garbha-kara shad-bhavas</i> (factors influencing development and traits of fetus). | CC | MK | KH | L&GD, PER,FC | S-LAQ,T-O BT,CL-PR, P-REC,P-VIVA | F&S | I | - | NLHT3.1 |
| CO1 | Explain the importance of pre-conception care and factors promoting conception. | CAP | MK | KH | L&PPT | S-LAQ,VV-Viva | F&S | I | - | LH |
| CO1 | Explain significance of <i>Garbha Samskara</i> and <i>Pumsavana Samskara</i> for achieving <i>Shreyasee-Praja</i> - Fetal optimisation (physical, mental and emotional development of fetus). | CAP | MK | K | CBL,SI M,RP,D ,W | P-PRF,VV-Viva,S-LAQ,P-EN | F&S | I | V-SW | NLHP3.1 |
| CO1 | Describe the formation and functions of <i>Apara</i> (placenta with membranes), <i>Garbha Nabhinadi</i> (umbilical cord), and <i>Garbhodaka</i> (amniotic fluid) | CC | MK | K | L&PPT | VV-Viva,QZ ,S-LAQ | F&S | I | - | LH |
| CO1 | Describe <i>Apara</i> , <i>Nabhinadi</i> and <i>Garbhodaka Vikaras</i> (abnormalities of placenta, umbilical cord and amniotic fluid) with clinical significance. | CAN | MK | K | D-M,C D,CBL, PBL,LR I | P-PS,S-LAQ,P-ID,VV-Viva | F&S | I | - | NLHT3.2 |
| CO1 | Describe <i>Garbha Vriddhikara Bhava</i> (factors affecting fetal growth) and <i>Garbha Poshana</i> (mechanisms of fetal nourishment). Illustrate fetal circulation along with utero- placental and fetoplacental circulation. | CC | MK | K | L&PPT ,D-M,D,FC | M-CHT,V V-Viva,COM,QZ ,S-LAQ | F&S | I | - | NLHT3.3 |
| CO1 | Explain <i>Masanumasika Garbha Vriddhi</i> (Month wise fetal growth) | CC | MK | K | PER,L_ | P-REC,S-L | F&S | I | - | NLHT3.4 |

| | | | | | | | | | | |
|----------|---|---------|----|----|--------------------|---------------------------------|-----|---|---|---------|
| | and development) | | | | VC,D-M | AQ,COM,PA | | | | |
| CO1 | Explain <i>Garbhashyantara Garbha Sthiti</i> . | CC | MK | K | L&PPT | P-MOD,S-LAQ,P-PRF,VV-Viva | F&S | I | - | LH |
| CO1, CO4 | Demonstrate <i>Garbhashyantara Garbha Sthiti</i> (fetus -in utero). | PSY-SET | MK | SH | CBL,D,CD,D-M,D-BED | VV-Viva,P-EXAM,P-IVA,OSCE,P-PRF | F&S | I | - | NLHP3.2 |
| CO1, CO4 | Describe fetus-in-utero - Lie, attitude, presentation, presenting part, denominator and position. | CC | MK | K | L&PPT,D-M | P-MOD,OSCE,VV-Viva,S-LAQ | F&S | I | - | LH |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|--|--|
| NLHT 3.1 | <i>Garbha</i> and <i>Garbhavakranti</i> | (1 hr) Student will present and discuss <i>Garbha Kara Shad Bhavas</i> in conception and guidelines of <i>Garbhadhana Vidhi</i> during classroom presentation with flow charts. Teacher will explain components of <i>Garbhavakranti</i> with applied clinical aspects - <i>Anupahata Retus, Apradushta Yoni, Shonita and Garbhashaya</i> . |
| NLHT 3.2 | <i>Apara, Nabhinadi</i> and <i>Garbhodaka Vikaras</i> (abnormalities of placenta, umbilical cord and amniotic fluid) with clinical significance. | (1 hr) Teacher will demonstrate abnormal conditions related to following, on models / charts / specimen / clinical case / videos - 1. Placenta - formation, location, shape, size and implantation, |

| | | |
|-----------------------------------|---|--|
| | | <p>2. Umbilical cord - structure, characteristics, length and attachment,</p> <p>3. Amniotic fluid – volume and colour</p> <p>Student will be given case scenarios to discuss clinical consequences and strategies to improve pregnancy outcome.</p> |
| NLHT 3.3 | <i>Garbha Poshana</i> (fetal nourishment) and <i>Garbha Vridhhikara Bhava</i> . | <p>(1 hr)</p> <p>Flipped class - Students will be encouraged to review the literatures related to different methods of <i>Garbhaposhana</i> (<i>Upasneha</i>, <i>Upasweda</i>, through <i>Nabhinadi</i>) during different stages of intra uterine development with utero- placental and feto-placental circulation and make compilation. Teacher will summarize concepts of <i>Garbhaposhana</i> with theories of <i>Upasneha</i>, <i>Upasweda</i>, <i>Apara</i> and <i>Garbha Nabhinadi</i> (fetal Circulation) with utero- placental and feto-placental circulation and discuss the importance of <i>Garbha Vridhhikara bhava</i> (factors affecting fetal growth).</p> |
| NLHT 3.4 | Month wise fetal development | <p>(1 hr)</p> <p>Teacher will explain the stages of <i>Masanumasika Garbha Vriddhi</i> - month wise development of fetus and demonstrate on model/ videos/ charts/ specimen. Student will analyze the mile-stones of fetal development and recite the shlokas of <i>Masanumasika Garbha Vriddhi</i>. Teacher will assign compilation work to students.</p> |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 3.1 | <i>Garbha Samskara</i> and <i>Pumsavana Samskara</i> . | <p>(2 hrs)</p> <p>Activity 1 (Garbha samskara) - Teacher will discuss the process and practices of <i>Garbha Samskara</i> for achieving <i>Shreyasee-Praja</i> and</p> |

| | | |
|---|----------------|---|
| | | <p>orient students to Pre-Conception and Pre-natal care. Discuss and provide clinical exposure to <i>Garbha Samskara</i> Practices - <i>Beejasamskara</i> (Preconceptional <i>Samsodhana</i> therapy) and special diet indications viz <i>Taila, Masha</i> to female and <i>madhura ousadha sidhha Ghrita, Ksheera</i> to male. Equip students with skill to advice couple desiring healthy progeny through garbhasamskara programme viz Dietary recomendations - <i>Garbhini Masanumasika pathya</i> (monthly regime). Prenatal <i>Yoga and Pranayam</i> : <i>yoga</i> postures and breathing techniques designed to promote physical and mental well-being during pregnancy under supervision of yoga instructor. Meditation and Chanting: meditation or chanting practices. Activity 2 (<i>Pumsavana</i> samskara for achieving <i>Shreyasee-praja</i>) - Teacher will explain the ritual of <i>Pumsavana Samskara</i> for achieving <i>Shreyasee-praja</i>. Demonstrate process of drug collection, ritual with time, preparation and procedure of administration indicated (nasally or orally), followed by the chanting of specific mantras. Student will observe and discuss the process and benefits.</p> |
| NLHP 3.2 | Fetus-in-utero | <p>(2 hrs) Teacher will demonstrate with help of female pelvis and fetal skull/ model and dummy of fetus - Fetal Lie - longitudinal, transverse, oblique Fetal Attitude - flexed, deflexed, extended and hyper-extended Fetal Presentation - cephalic, breech, shoulder Fetal Presenting part - vertex, brow, face, mentum, breech, foot, compound Fetal Position - Occiput Anterior, Occiput Posterior, Left Occiput Anterior, Left Occiput Posterior, Right Occiput Anterior, Right Occiput Posterior, Left Occiput Transverse, Right Occiput Transverse. Denominator - Occiput, Mentum, Sacrum, Acromion. Student will practice the components of fetus in utero and demonstrate denominator and its relation with various quadrants of pelvis in determining fetal position.</p> |
| <p>Topic 4 Garbhini Vigyana - Physiology of Pregnancy & Antenatal Care (LH :3 NLHT: 3 NLHP: 8)</p> | | |

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|----------|---|------|----|----|-------------------------|------------------------------------|-----|----|----|---------|
| CO1 | Explain the physiological changes during pregnancy and discuss maternal adaptations. | CC | MK | K | L&PPT | COM,S-LAQ,VV-Viva,P-VIVA | F&S | I | - | LH |
| CO1 | Explain Garbhini Nidana and analyze Sadyogruhita Garbha, Vyakta Garbha Lakshanas, and the Clinical diagnosis of pregnancy in the first, second, and third trimesters based on signs and symptoms. | CAP | MK | KH | REC,L&PPT,CD | VV-Viva,S-LAQ,P-RE C,P-VIVA,P-CASE | F&S | I | - | NLHT4.1 |
| CO1 | Identify and demonstrate pregnancy signs - Trimester wise. | CAP | MK | KH | D-M,C D,D-BE D,SIM,L_VC | P-VIVA,SP,OSCE | F&S | I | - | NLHP4.1 |
| CO1 | Describe <i>Garbhopaghatakara Bhava</i> and <i>Garbha Vikruti</i> . | CC | MK | K | L&GD,CBL | VV-Viva,CBA,INT | F | I | - | NLHP4.2 |
| CO1 | Describe <i>Masanumasika Garbhini Paricharya</i> and importance of <i>Garbha Sthapaka Gana</i> . | CC | MK | K | L&PPT | P-VIVA,S-LAQ | F&S | I | - | LH |
| CO1 | Describe Antenatal care as per National protocol. | CC | MK | K | L&PPT | P-VIVA,P-CASE,SP,S-LAQ,VV-Viva | F&S | I | - | LH |
| CO1, CO4 | Screen & identify high risk pregnancy. | CAP | MK | KH | D-BED,DIS,L&PPT,CBL,CD | VV-Viva,SBA,P-VIVA,CBA | F | I | - | NLHT4.2 |
| CO1, | Demonstrate Obstetric history taking and perform Antenatal | PSY- | MK | SH | SIM,CB | P-EXAM,S | F&S | I | - | NLHP4.3 |

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|-------------|---|-----|----|----|-----------------------------------|--------------------------------|-----|---|---|---------|
| CO4 | Examination. | GUD | | | L,D-M, D-BED, CD | P,VV-Viva, P-VIVA,P- MOD | | | | |
| CO1, CO5 | Enlist routine investigations in pregnancy and know the role of Ultra sound in pregnancy Be familiarized with special diagnostic aids in pregnancy viz, double marker, triple marker, quadruple marker and Nonstress test. Analyze the provisions and limitations of PC PNNT act. | CAN | MK | KH | LRI,CD ,D-BED ,L&GD, PBL | VV-Viva,C BA,P- VIVA,SBA | F&S | I | - | NLHP4.4 |
| CO1, CO5 | Describe demographic statistics related to obstetrics - Maternal Mortality Rate, Maternal Morbidity, Infant Mortality Rate. | CC | MK | K | L&PPT ,BS | VV-Viva,C L-PR | F | I | - | NLHT4.3 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|---|---|
| NLHT 4.1 | <i>Garbhini Nidana</i> : Diagnosis of pregnancy | (1 hr) Teacher will explain <i>Garbhini Nidana</i> based on <i>Sadyogruhita Garbha</i> and <i>Vyakta Garbha Lakshanas</i> . Discuss clinical signs and symptoms related to diagnosis of pregnancy in first, second and third trimester. Student will recite shlokas and analyze the diagnosis of pregnancy based on clinical findings. |
| NLHT 4.2 | High Risk Pregnancy | (1 hr) Teacher will discuss the alarming signs and methods of screening and identifying high risk pregnancy like multiple gestation, pregnancy induced hypertension, elderly primigravida, gestational diabetes etc. for timely referral to appropriate higher health care facility. Students will have peer discussion about high risk pregnancy cases. |
| NLHT 4.3 | Demographic Statistics in Obstetrics | (1 hr) Teacher will facilitate the students with credible sources on current demographic statistics related to obstetrics - Maternal Mortality rate, Maternal Morbidity and Infant Mortality rate. |

| | | |
|-----------------------------------|--|--|
| | | Students will discuss the factors contributing to the statistical data (e.g., socioeconomic factors, healthcare access). Recent trends and initiatives to address issues related to ststatistics. |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 4.1 | Clinical Diagnosis of pregnancy | (2 hr) Teacher will demonstrate physical signs - Jacquemier's or Chadwick's, Oslander's, Goodell's, Hegar's, Piskack's and Palmer's signs, Chloasma, Montgomery's tubercle, Linea nigra, Stria gravidarum, Braxton-hicks contractions during clinical demonstration / demonstration on models and simulators/ Videos. Student will explain trimester wise signs of pregnancy. |
| NLHP 4.2 | <i>Garbha Vikruti</i> | (1 hr) Teacher will explain <i>Garbha Upaghatakara Bhava</i> with effect on fetus. Students will be given case scenarios involving fetal deformities to analyze the possible <i>Garbha Upaghatakara Bhava</i> -maternal lifestyle, diet, stress and environmental exposure and discuss preventive measures. |
| NLHP 4.3 | Antenatal History taking and Examination | (4hrs) Teacher will orient students to develop communication skill, identify risk factors, plan investigations and give appropriate advice for Antenatal cases. A. History taking in Pregnancy - 1. Patient particulars |

2. Chief complaints – Complaints, their onset in chronological order (e.g. - complaints like Pain abdomen / Vaginal bleeding / Urinary problems / other minor complaints)
3. History of present illness: Elaboration of the chief complaints as regard to their onset, duration, severity, use of medications, investigations & progress. Trimester wise complications if any.
4. Past Pregnancy and Obstetric History : Gravida , Parity, Abortion, high risk pregnancy, Ectopic, Twins, mode of previous delivery , Intrapartum complications, Post partum haemorrhage, Fetal morbidity, Fetal Death,
5. Menstrual History: Menarche (age), Last Menstrual Period (LMP), Regular /Irregular cycles
6. Naegele's formula - calculate Expected Date of Delivery (EDD)
7. History of Medications, Surgeries, Allergies
8. Family history : Parents & First degree relatives with a condition such as Diabetes, Multiple pregnancy, consanguineous marriage, bleeding dyscrasias, birth defects.
9. Personal History : Smoking, sleep, appetite , bowel & bladder habits.

B. Examination (on models / clinically)

1. General appearance and parameters viz, Height, Weight, Pallor, Jaundice, Oral cavity, Hair, Neck, Lymph nodes, edema, Varicosities, BP, Pulse, Temperature
2. Breast examination : Patient reclining, arms to the sides, breasts are inspected and palpated with flat of fingers of both hands
3. Systemic Examination: Respiratory system respiratory rate, Inspection & Auscultation of the

chest

Cardiovascular system : Inspect the chest , Auscultate heart sounds

4. Obstetric Examination

Pre-requisites: Verbal consent, Bladder evacuation, Proper exposure of abdomen from Xiphisternum to symphysis pubis

Woman in dorsal posture with thighs & knees slightly flexed

Stand on right side of the patient

Woman's head should be tilted to the left side

a. Inspection: Uterine shape, Contour of Uterus

Skin condition: Presence of Linea nigra, Striae gravidarum, presence of scar mark, infection

b. Palpation: Height of the uterus in terms of weeks

Symphysis - fundal height in cm to be measured with measuring tape.

Obstetric grips (Leopold's maneuvers) - Hands on practice on the manikin/real cases

i. Fundal grip

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| | | <p>ii. Lateral or Umbilical grip</p> <p>iii. First pelvic grip</p> <p>iv. Second pelvic grip (Pawlik's grip)</p> <p>c. Auscultation of Fetal Heart Sound (FHS)</p> <p>C. Case writing in prescribed journal proforma</p> |
| NLHP 4.4 | Investigations in pregnancy | <p>(1hr) Teacher will elaborate planning routine and special investigations in pregnancy with provisions of PC & PNDT act. Narrate & Interpret routine and special investigations viz, double marker, triple marker, quadruple marker and Nonstress test with appropriate time of advice. Ultrasonography - Indications and interpretation of USG parameters during pregnancy. Early pregnancy scan, Nuchal Translucency Scan (NT), Targeted imaging for fetal anomaly (TIFFA) scan and growth scan in third trimester. Student can interpret various normal and abnormal investigation reports.</p> |

Topic 5 Garbha Vyapad - Fetal Pathologies (LH :4 NLHT: 4 NLHP: 7)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|------|--|----|----|----|---------|-------------|-----|----|----|---------|
| CO1 | Define <i>Garbha Srava</i> and <i>Garbha Pata</i> . Explain <i>Nidana</i> , <i>Samprapti</i> , <i>Lakshana</i> , and <i>Chikitsa</i> . | CC | MK | K | L&PPT | P-REC,S-LAQ | F&S | II | - | LH |
| CO1, | Define Abortion and describe classification with aetiological | CC | MK | K | DIS,LRI | P-VIVA,S- | F&S | II | - | NLHT5.1 |

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| CO5 | factors, clinical features, and investigations with medical and surgical management. | | | | | L&PPT, CD, CBL | LAQ, P-CA SE, VV-Viva, CBA | | | | |
| CO1, CO5 | Demonstrate Dilatation & Curettage (D & C), Provisions of MTP act. Demonstrate cervical encirclage procedure (McDonald and Shirodkar procedure) | CAP | DK | KH | | L_VC, CBL, D | VV-Viva, C-VC, CBA, S-LAQ | F&S | II | - | NLHP5.1 |
| CO1 | Elaborate <i>Nidana, Samprapti, Lakshana and Chikitsa of Garbha Vyapad - Upavishtaka Nagodara, Linagarbha, Makkala, Jarayudasha.</i> | CC | MK | K | | REC, L&PPT | S-LAQ, P-REC, VV-Viva | F&S | II | - | LH |
| CO1 | Define Intra Uterine Growth Restriction (IUGR). Enumerate aetiological factors, classification, clinical diagnosis, investigations & management. | CC | MK | K | | L&PPT, CBL, CD, LRI | P-VIVA, SP, S-LAQ | F&S | II | - | NLHT5.2 |
| CO1 | Identify and explain etiology, clinical diagnosis, investigations & management of Intra Uterine Growth Restriction, Oligohydramnios and Polyhydramnios. | CC | MK | K | | CD, D-BED, CBL, L&PPT | CBA, VV-Viva, OSCE, P-VIVA | F&S | II | - | NLHP5.2 |
| CO1 | Describe Gestational Trophoblastic diseases and Rh incompatibility - pathophysiology and prevention. | CK | DK | K | | L&PPT | VV-Viva | F&S | II | - | LH |
| CO1 | Identify Ectopic pregnancy. Explain causes, clinical features, differential diagnosis & management. | CC | MK | K | | CBL, DIS, L&PPT | VV-Viva, P-VIVA, OSCE, S-LAQ | F&S | II | - | NLHP5.3 |
| CO1 | Describe <i>Antarmruta Garbha – Nidana, Samprapti, Lakshana, Chikitsa.</i> | CK | MK | K | | L&PPT, REC | P-VIVA, S-LAQ, P-REC, T-OBT | F&S | II | - | LH |
| CO1, CO6 | Describe Intrauterine fetal demise (IUFD) - Definition, causes, diagnosis, management & complications. | CK | MK | K | | CBL, L&PPT, CD, DIS | P-VIVA, P-EXAM, SBA, S-LAQ, V | S | II | - | NLHT5.3 |

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| | | | | | ,X-Ray | V-Viva | | | | |
| CO1, CO6 | Diagnose and plan management of Intrauterine fetal demise. | CAP | MK | KH | CBL,X-Ray,PB L,SIM | PP-Practical, P-VIVA,S BA,VV- Viva,CBA | F&S | II | - | NLHP5.4 |
| CO1 | Explain <i>Rakta Gulma</i> - differential diagnosis and management. | CK | NK | K | L&PPT | VV- Viva,INT | F | II | - | NLHT5.4 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|----------------------------------|--|
| NLHT 5.1 | Abortion | (1 hr) Teacher will discuss classification of abortion with aetiological factors, clinical features, investigations with medical and surgical management. Present case scenarios of abortion - threatened, inevitable, complete, incomplete, missed, septic and habitual abortion. Students will analyze the clinical features of given scenarios and discuss timely referral. |
| NLHT 5.2 | Intra uterine growth restriction | (1 hr) Teacher will discuss aetiological factors, classification, clinical diagnosis, Investigations & Management of IUGR as per gestational age. Students will have peer discussion of simulated cases / clinical cases. |
| NLHT 5.3 | Intra uterine fetal demise. | (1 hr) Faculty will discuss case scenario of fetal demise based on clinical features ,investigations and explain management strategies Students will analyse the clinical features, identify appropriate investigations, complications and discuss management |

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| NLHT 5.4 | <i>Rakta Gulma</i> | (1hr) Teacher will discuss <i>Rakta Gulma</i> in terms of <i>Dosha, Dushya</i> and clinical manifestations Students will differentiate conditions involving clinical features and underlying concept. |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
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| NLHP 5.1 | <i>Garbhashaya Mukha Vistrutikarana evam Garbhasaya Lekhana - Dilatation and Curettage</i> <i>Garbhashaya Greeva Samvrutikarana - Cervical Encirclage</i> | (3hrs) Teacher will explain Indications of Dilatation and Curettage (diagnostic/therapeutic), complications and it's management with video demonstration. a. Dilatation and Curettage in Abortion. Prerequisites – Provisions of MTP act. Steps – 1. History of presenting complaint - Details such as onset, duration and amount of bleeding, whether mild, moderate or severe. 2. Examination i. General examination: Assessment of general condition ii. Systemic examination: CVS, RS, NS & Breast examination. iii. Per abdomen examination |

iv. Per speculum examination and vaginal examination

3. Investigations: Guided by clinical history & examination

4. Differential diagnosis

i. Intra uterine pregnancy

ii. Abortion

iii. Ectopic pregnancy

iv. Molar pregnancy

Case discussion - Clinical Case scenarios

Observation of procedure –

Pre-requisites- consent, pre-operative preparations, operation, post operation.

b. Cervical Encirclage

Enlist Indications and observe methods of cervical encirclage in pregnancy.

Demonstration of the Mc Donald and Shirodkar procedure through a video or on a mannikin.

Students will observe the procedure and analyze the type of abortion and discuss management.

NLHP 5.2

Intra Uterine Growth Restriction,
Oligohydramnios and Polyhydramnios

(2 hrs)

Teacher will demonstrate clinical examination and diagnosis of following conditions.

a. Intra Uterine Growth Restriction

1. Clinical examination - Per abdomen

Essential points in Diagnosis

Serial measurements of Symphysis Fundal Height (SFH) or Biometry

Case demonstrations for normal growth vs restricted growth of fetus, assessment of amniotic fluid and management based on the gestational age.

2. Ultrasonography – Amniotic Fluid Index / Fetal biometry / Expected Fetal Weight

3. Discussion - Enumeration of various causes of Growth restrictions like, Maternal, Fetal & Placental.

b. Oligohydramnios and Polyhydramnios

Case / scenario-based discussion with explanation of aetiology, clinical diagnosis, investigations & management.

Students will be engaged interpreting clinical examination, ultrasound findings and differential diagnosis with selection of appropriate treatment.

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| NLHP 5.3 | Ectopic pregnancy | <p>(1 hr)</p> <p>Teacher will present a case scenario of undiagnosed ectopic pregnancy (presenting with acute abdominal pain and bleeding p/v). Discussion on differential diagnosis, interpreting ultrasound findings, and selecting the appropriate treatment (medical vs. surgical).</p> |
| NLHP 5.4 | Intrauterine Fetal Demise (IUFD) | <p>(1 hr)</p> <p>Teacher will present a case scenario of third trimester of pregnancy with absent fetal movements and discuss approach to the case as below Clinical findings Role of USG X-ray findings Investigations, management protocols and complications Counselling techniques Students will have peer discussion on clinical examination and plan management</p> |

Topic 6 Garbhini Vyapad - Minor Ailments and Major Disorders of Pregnancy (LH :6 NLHT: 0 NLHP: 6)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|---------------|---|-----|----|----|---------------------|------------------|-----|----|----|---------|
| CO1, CO3, CO6 | Describe <i>Nidana, Lakshana, Chikitsa of Garbhini Vyapad - Aruchi, Hrillasa, Chardhi, Vibandha.</i> | CC | MK | K | L&PPT | S-LAQ,VV-Viva | F&S | II | - | LH |
| CO1, CO3, CO6 | Describe <i>Nidana, Lakshana, Chikitsa of Garbhini Vyapad - Atisara, Arsha, Parikartika, Udavarta, Vaivarnya, Kandu, Kikkisa.</i> | CC | MK | K | DIS,L&PPT ,CBL | S-LAQ,VV-Viva | F&S | II | - | LH |
| CO1, CO3, CO6 | Diagnose <i>Garbhini Pandu - Anaemia</i> in pregnancy, describe investigations and plan of management. | CAN | MK | KH | CBL,IB L,LRI,D A,CD | P-VIVA,P-CASE,RK | F&S | II | - | NLHP6.1 |

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| CO1, CO3, CO6 | Diagnose <i>Garbhini Jwara</i> (fever in pregnancy) - clinical features, investigations and management protocol | CAN | MK | KH | DA,CD, CBL,LR I | VV-Viva,S- LAQ,P-CA SE,P-VIVA ,P-EXAM | F&S | II | - | NLHP6.2 |
| CO1, CO3, CO6 | Define Pregnancy-Induced Hypertension, Pre-Eclampsia and Eclampsia. Describe causative factors, clinical features, and management. | CC | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | II | - | LH |
| CO1, CO3, CO6 | Diagnose Pregnancy induced hypertension, pre-eclampsia and eclampsia with clinical features, examination and investigations. | CAN | MK | SH | TBL,RP ,CD,D- BED,L RI | S-LAQ,VV -Viva,SP,P M,P- EXAM | F&S | II | - | NLHP6.3 |
| CO1, CO3, CO5 | Describe Gestational diabetes, Thyroid dysfunction and HIV - in pregnancy | CK | DK | K | CBL,LR I,CD,L &PPT | VV-Viva | F | II | H-KC | LH |
| CO1, CO3, CO6 | Describe <i>Bahu-Apatya</i> (Multiple pregnancy) - Causes, clinical findings, diagnosis and plan of management. | CK | DK | K | CBL,L &PPT | VV-Viva | F | II | - | LH |
| CO1, CO3, CO6 | Diagnose <i>Yamala-garbha</i> (Twin Pregnancy) and describe varieties, etiology, lie, presentation, complications and management. | CAN | DK | K | D-BED, LRI,CD ,D- M,CBL | VV-Viva,P- EXAM,CB A,P- VIVA,SBA | F&S | II | - | NLHP6.4 |
| CO1, CO3, CO5 | Define Antepartum Hemorrhage (APH) and enumerate causes, classification, clinical features and management guidelines. | CC | MK | K | L&PPT ,CD,CB L | CBA,VV-V iva,SBA,S- LAQ | F&S | II | - | LH |
| CO1, CO3, CO5 | Diagnose Antepartum hemorrhage - Placenta previa with clinical features and confirmation by ultrasound. Plan management with timely referral. | CS | MK | KH | D-BED, LRI,CD ,PBL,L | VV-Viva,P- ID,P-VIVA | F&S | II | - | NLHP6.5 |

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| | | | | | &PPT | | | | | |
| CO1, CO3, CO5 | Diagnose Antepartum hemorrhage - Abruption placenta, clinical features, and confirmation by ultrasound. Plan management with knowledge of the need for referral. | CS | MK | KH | PBL,D- M,CBL, D,L&PP T | P-EXAM,P -VIVA,CO M,S-LAQ | F&S | II | - | NLHP6.6 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
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| NLHP 6.1 | <i>Garbhini Pandu</i> - Anaemia in pregnancy. | <p>(1hr) Faculty will present a case of Anaemia in pregnancy and explain</p> <ol style="list-style-type: none"> 1. Symptoms exploration - Pallor, fatigability, breathlessness on exertion, giddiness, anorexia, tingling sensation in extremities 2. Analysis of history - Obstetric history (Mupltiparity), Menstrual History(Abnormal Uterine Bleeding) , Contraceptive history & Dietary history, bleeding piles etc 3. Examination - <ul style="list-style-type: none"> A) General Examination - Record vitals B) Systemic Examination - CVS , Respiratory & Nervous system examination C) Obstetric examination (e.g. -Twins & multiple pregnancy) D) Investigations – to assess severity of Anaemia as mild ,moderate or severe |

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| | | <p>4. Plan Management as per the gestation ,severity & type of Anaemia</p> <p>Students will discuss the effects of Anaemia, clinical outcome and plan management as per severity and gestational age .</p> |
| NLHP 6.2 | <i>Garbhini Jwara</i> - fever in pregnancy. | <p>(1 hr) Teacher will present a case /scenario of Fever in pregnancy and explain 1. Symptoms exploration - temperature, fatigability, giddiness, anorexia, dryness of mouth 2. Examination - A) General Examination - Record vitals with temperature. B) Systemic Examination – CVS , Respiratory & Nervous system examination C) Obstetric examination (to assure fetal wellbeing) D) Investigations – to assess the cause/aetiology of fever 4. Plan Management as per the cause and severity. Student will have peer discussion and record the case in prescribed journal proforma</p> |
| NLHP 6.3 | Hypertensive disorders in Pregnancy | <p>(1 hr) Teacher will demonstrate clinical features in pregnancy induced hypertension and pre-eclampsia.Plan investigations, management, anticipate complications and explain timely referral. Demonstrate approach to a pregnant or puerperal woman presenting with convulsions. Demonstration of Eclampsia drill. Students will analyse the diagnosis,plan primary care,document the case and importance of timely referral to higher centre for advance care.</p> |
| NLHP 6.4 | <i>Yamala-garbha</i> - Twin Pregnancy (1 hr) | <p>(1 hr) Teacher will demonstrate clinical diagnostic features,varieties,lie, presentation on manikin/ video/ clinical case . Discuss and Interpret investigation ,understand possible care,complications and plan management in</p> |

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| | | <p>pregnancy and labour</p> <p>Student will imitate examination of Twin pregnancy on manikin and have peer discussion on Antenatal care</p> |
| NLHP 6.5 | Antepartum Hemorrhage -Placenta previa | <p>(1 hr)</p> <p>Teacher will enable students to -</p> <ol style="list-style-type: none"> 1. Diagnose Antepartum hemorrhage - Placenta previa based on clinical features and confirmation by ultrasound. 2. Identify the degree of placenta previa. 3. Plan management, know the limitations 4. Analyze need for referral to higher centre <p>Teacher will analyse the diagnostic skill and preparedness of student</p> |
| NLHP 6.6 | Antepartum Hemorrhage - Abruptio placenta | <p>(1hr)</p> <p>Teacher will enable students to -</p> <ol style="list-style-type: none"> 1. Diagnose Antepartum hemorrhage - Abruptio placenta based on clinical features and confirmation by ultrasound. 2. Identify the type of Abruptio placenta 3. Plan management, know the limitations |

4. Analyze need for referral to higher centre

Teacher will analyse the diagnostic skill and preparedness of student

Topic 7 Prasava Vigyana - Labour (LH :10 NLHT: 1 NLHP: 17)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-------------|---|-------------|----|----|--------------------------|----------------------------------|-----|----|----|---------|
| CO4 | Describe <i>Sutikagara nirmana and sangrahaneeya dravya</i> . | CK | MK | K | L&PPT | S-LAQ,VV-Viva | F&S | II | - | LH |
| CO3, CO4 | Explain chemical composition, indication, contraindication, mode of action, dosage, shelf life, and complications of drugs commonly used during labour. Explain guidelines for use with pharmacotherapeutics. | CK | MK | K | DA,BL, L&PPT | VV-Viva | F | II | - | NLHT7.1 |
| CO4, CO5 | Visualize and Demonstrate Labour room set-up and labour room protocol according to National health Guidelines. | PSY- SET | MK | KH | DIS,D,F V,TPW, TBL | PA,VV- Viva | F&S | II | - | NLHP7.1 |
| CO4, CO5 | Define <i>Prasava</i> , explain <i>Prasavahetu</i> and <i>Prasava kala</i> . | CK | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | II | - | LH |
| CO4, CO5 | Describe causes of onset of Labour & narrate Physiology of Labour. | CC | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | II | - | LH |
| CO4, CO5 | Diagnose Labour - Identify true and false labour pain. | PSY- GUD | MK | SH | SIM,D- M,CBL, CD | CBA,VV-V iva,SBA,Mi ni-CEX | F&S | II | - | NLHP7.2 |
| CO4, CO5 | Describe anatomy of fetal skull with diameters, fontanelle, and importance in labour. | CC | MK | K | L&PPT | S-LAQ,VV- Viva | F&S | II | - | LH |

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| CO4 | Demonstrate anatomy of fetal skull with diameters, fontanelle, and their obstetric importance. | PSY-GUD | MK | SH | D,D-M | P-MOD,V V-Viva | F&S | II | - | NLHP7.3 |
| CO4, CO5 | Define and explain the <i>Avasthas - Prajayini, Upastitha Prasava, Asanna Prasava.</i> | CC | MK | K | REC,L &PPT | P-REC,VV- Viva,S-LA Q,PP- Practical | F&S | II | - | LH |
| CO4 | Assess adequacy of pelvis. | CE | MK | SH | D-M,X- Ray,D,S IM | OSCE,VV- Viva,P- PRF,SBA | F&S | II | - | NLHP7.4 |
| CO4 | Define Avi Shoola and Grahi Shoola. Explain Prasuti Maruta and Garbhastithi Parivartana during Prasavakala. | CC | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | II | - | LH |
| CO4 | Describe Stages of Labour. | CC | MK | K | L&PPT | S-LAQ,VV- Viva,COM | F&S | II | - | LH |
| CO4, CO5 | Demonstrate events in each stage of labour. | PSY-GUD | MK | KH | D,D-BE D,SIM, CBL,FV | RK,VV-Vi va,CBA,P- VIVA,SP | F&S | II | - | NLHP7.5 |
| CO4 | Explain the Mechanism of labour. | CC | MK | K | L&PPT | S-LAQ,VV- Viva | F&S | II | - | LH |
| CO4 | Demonstrate Mechanism of Labour | PSY-GUD | MK | SH | D,SIM, D-M | DOAP,VV- Viva,P-VIV A,P-MOD, S-LAQ | F&S | II | - | NLHP7.6 |
| CO4 | Describe Prasava Paricharya. Explain monitoring and | CC | MK | K | L&PPT | VV-Viva,S- LAQ,P- VIVA | F&S | II | - | LH |

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| | management of all stages of labour. | | | | | | | | | |
| CO4 | Explain the Importance of Partograph. | CC | MK | K | D,L&PPT | VV-Viva,CBA | F&S | II | - | LH |
| CO4 | Monitor labour | CAN | MK | KH | CBL,D,FV,PT,SIM | P-PRF,P-VIVA,VV-Viva,SP | F&S | II | - | NLHP7.7 |
| CO4 | Monitor progress and manage stages of labour. | CAN | MK | KH | SIM,CD,D-BED,CBL,PT | VV-Viva,Log book,P-VIVA,OSCE,CBA | F&S | II | - | NLHP7.8 |
| CO3, CO4 | Plot Partograph. | PSY-GUD | MK | SH | D,SIM,PT,D-M | S-LAQ,DOPS,P-PRF,RK,DOAP | F&S | II | - | NLHP7.9 |
| CO3, CO4 | Demonstrate and practice Episiotomy on model and simulation. | PSY-SET | MK | SH | FV,D,D-M,L_VC,CBL | VV-Viva,P-PRF | F&S | II | - | NLHP7.10 |
| CO4 | Demonstrate applications of Intrapartum fetal monitoring techniques. | PSY-GUD | MK | SH | CBL,L_VC,D-M,FV,D | Log book,P-VIVA,VV-Viva | F&S | II | H-KB | NLHP7.11 |
| CO4, CO5 | Perform <i>Jatamatra Paricharya</i> | PSY-GUD | MK | KH | D-BED,CBL,PT,PBL,L_VC | PP-Practical,VV-Viva,P-CASE,P-VIVA | F&S | II | H-KB | NLHP7.12 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
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| NLHT 7.1 | Essential drugs for labour practice; as per National protocol. | <p>(1 hr) Teacher will explain chemical composition, indication, contraindication, mode of action, dosage, shelf life, route of administration, and complications of drugs commonly used during labour-</p> <ul style="list-style-type: none"> a) uterotonics b) analgesics c) ergot alkaloids e) anaesthetics. <p>Explain guidelines for use with pharmacotherapeutics. Student will discuss and analyze the drugs commonly used during labour.</p> |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|----------|------------------------|---|
| NLHP 7.1 | Labour Room Setup | <p>(1hr) Teacher will make students familiarize with standards of Labour room set up and gain competency in labour room practice protocol according to National Health Guidelines. Student will get acquainted with the labour room set up and demonstrate functionality with respect to labour room practice protocols according to National Health Guidelines.</p> |
| NLHP 7.2 | Diagnosis of Labour | <p>(1hr) Teacher will equip students to develop clinical diagnostic skills in identifying true labour pains through case presentation and demonstration on model, simulator, clinical examination. Students will observe and imitate examination on model and explain the signs of true labour pains.</p> |
| NLHP 7.3 | Fetal skull and labour | <p>(1 hr) Teacher will demonstrate anatomy of fetal skull with diameters and fontanelles, assessment of presenting part with discussion on obstetric importance. Students will imitate demonstration of fetal skull on models and discuss its outcome on labour.</p> |

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| NLHP 7.4 | Adequacy of pelvis | <p>(1 hr)</p> <p>Teacher will demonstrate different scenarios regarding pelvic diameters and engaging diameter of fetal skull.</p> <p>Clinical adequacy features of maternal pelvis through clinical pelvimetry and assess the presenting part.</p> <p>Student will observe and imitate skills of pelvic assessment on model.</p> |
| NLHP 7.5 | Stages of Labour | <p>(3 hrs)</p> <p>Teacher will equip students to develop clinical skill to identify stages of labour with discussion on duration and events of labour. Teacher will use video demonstration of stages of labour/ simulator/case based demonstration of labour process.</p> <p>First stage: Assessment of cervical dilatation and effacement</p> <p>Second stage: Status of membranes, descent of fetus, station of head, expulsion of fetus</p> <p>Third stage: Signs of placental separation, expulsion of placenta, placenta and cord examination.</p> <p>Students will observe and discuss events of each stage of labour alongwith duration and record in prescribed journal proforma.</p> |
| NLHP 7.6 | Mechanism of Labour | <p>(2hrs)</p> <p>Teacher will demonstrate events in Mechanism of labour on model and simulator - Engagement, Descent, Flexion, Internal rotation, Crowning, Extension, Restitution, External rotation, Expulsion.</p> <p>Students will practice, demonstrate on model / simulator and explain each event in mechanism of labour.</p> |
| NLHP 7.7 | Labour monitoring | <p>(1 hr)</p> <p>Teacher will demonstrate the factors of assessment</p> <p>A) Interval, intensity and duration of uterine contractions</p> <p>B) Cervical changes- dilatation, effacement, position, consistency.</p> |

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| | | <p>C) Station of presenting part D) Status of membranes & Liquor Student will observe and document progress of labor in prescribed case proforma. Students will observe and document in prescribed journal proforma.</p> |
| NLHP 7.8 | Management of stages of labour | <p>(1 hr) Teacher will enable students to develop skill of management of labour. Steps of management of each stage beginning from observation, counseling, preparedness and implement action / intervention as needed. Students will demonstrate skills to identify the active stage and progress of labour with the steps of management. Record the findings in prescribed journal format.</p> |
| NLHP 7.9 | Plot partograph | <p>(2 hrs) Teacher will enable students to monitor labour progress and plot partograph for proper management and timely intervention. Students will discuss the components of partograph - alert line, action line and other aspects and practice to plot. Teacher will evaluate and provide feedback.</p> |
| NLHP 7.10 | Episiotomy | <p>(2 hrs) Teacher will demonstrate Episiotomy on manikin and discuss types -Medial ,Lateral, Mediolateral & J-shaped with administration of local anaesthesia. Explain the merits and demerits of different types of incision. Demonstrate repair in layers with suturing techniques. Student will practice episiotomy on manikin and imitate repair Discuss possible complications, post repair assessment and plan perineal care.</p> |

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| NLHP 7.11 | Intrapartum fetal monitoring techniques | (1 hr) Teacher will demonstrate with video / clinical case and interpret the result of Intrapartum fetal monitoring. Student will discuss and analyse different techniques and its clinical importance. |
| NLHP 7.12 | <i>Jatamatra Paricharya</i> | (1hr) Teacher will demonstrate immediate newborn care on model / case Student will practice newborn resuscitation on model. |

Topic 8 Prasava Vyapad - Labour Complications & Obstetric Emergencies. (LH :6 NLHT: 2 NLHP: 4)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|-----|----|----|------------------|---------------------------|-----|-----|----|---------|
| CO4 | Elaborate - <i>Paribhasa, Nidana, Samprapti, Lakshana and Chikitsa of Akala Prasava</i> (Preterm labour). | CC | MK | K | L&PPT | COM,VV-Viva,S-LAQ | F&S | III | - | LH |
| CO4 | Analyze management of preterm labour through observation. | CAN | MK | KH | PBL,CD,CBL,D-BED | COM,S-LAQ,CBA,VV-Viva,SBA | F&S | III | - | NLHP8.1 |
| CO4 | Explain Pre-labour rupture of membranes (PROM) | CC | MK | KH | PBL,CBL,L&PPT,CD | VV-Viva,COM,S-LAQ | F&S | III | - | LH |
| CO4 | Elaborate - <i>Paribhasa, Nidana, Samprapti, Lakshana and Chikitsa of Vilambita Prasava</i> (Prolonged labour) | CC | MK | KH | L&PPT | VV-Viva,COM,S-LAQ | F&S | III | - | LH |
| CO4 | Analyze causes and plan management in <i>Vilambita prasava</i> (Prolonged labour) | CAP | MK | K | L&PPT,CD,PBL,CBL | S-LAQ,VV-Viva,CBA | F&S | III | - | NLHT8.1 |
| | | | | | | | | | | |

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|-----|--|-------------|----|----|------------------------------------|---|-----|-----|---|---------|
| CO4 | Elaborate <i>Kalateeta Prasava</i> and Postmaturity. | CC | MK | K | L&PPT ,CBL,P BL,CD | COM,S-LA Q,VV-Viva ,P-VIVA | F&S | III | - | NLHT8.2 |
| CO4 | Define Postpartum Hemorrhage. Describe classification and explain causes and clinical features. | CC | MK | K | L&PPT ,CBL | COM,S-LA Q,VV-Viva | F&S | III | - | LH |
| CO4 | Describe complications and steps of management of postpartum haemorrhage. | CC | MK | K | L&PPT | VV-Viva,C OM,SBA,S -LAQ,P- VIVA | F&S | III | - | LH |
| CO4 | Elaborate <i>Paribhasa, Nidana, samprapti, lakshana</i> and <i>chikitsa of Aparasanga</i> (Retained placenta) | CC | MK | K | L&PPT | S-LAQ,CB A,VV- Viva,COM | F&S | III | - | LH |
| CO4 | Demonstrate causes and clinical features of Postpartum Hemorrhage (PPH). | CAP | MK | KH | CBL,L &PPT , SIM,DI S,PBL | P-VIVA,PP -Practical,V V-Viva,S- LAQ,CBA | F&S | III | - | NLHP8.2 |
| CO4 | Demonstrate management of Retained placenta. | PSY- SET | MK | SH | CBL,C D,D-M | P-MOD,SB A,CBA,S-L AQ,VV- Viva | F&S | III | - | NLHP8.3 |
| CO4 | Practice steps of management under guidance, in Postpartum Hemorrhage (PPH). | PSY- GUD | MK | SH | D-M,C BL,SIM ,D,TBL | PP-Practica l,TR,COM, VV- Viva,Log book | F&S | III | - | NLHP8.4 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|------|------------------|--------------------------------|
|------|------------------|--------------------------------|

| | | |
|----------|------------------|---|
| NLHT 8.1 | Prolonged Labour | <p>(1 hr) Teacher will demonstrate -</p> <ol style="list-style-type: none"> 1. Diagnosis of Prolonged Labour 2. Analysis of cause 3. Assessment of fetal wellbeing 4. Anticipate complications 5. Plan management. <p>Student will discuss diagnosis, possible complications and plan of management</p> |
| NLHT 8.2 | Postmaturity | <p>(1 hr) Teacher will demonstrate -</p> <ol style="list-style-type: none"> 1. Diagnosis of Post maturity 2. Plan investigations 3. Assessment of fetal wellbeing 4. Anticipate complications 5. Plan management |

Student will discuss diagnosis, assessment methods, possible complications and plan of management.

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|----------|-----------------------------------|--|
| NLHP 8.1 | Preterm labour | (1hr) Teacher will discuss the methods of determining gestational age ,assess established labor and propose plan of management Students will observe and document. |
| NLHP 8.2 | Postpartum Hemorrhage | (1hrs) Teacher will demonstrate - 1. Diagnosis of Postpartum hemorrhage. 2. Analyze underling cause 3. Assess the condition of patient and explain need of resuscitation. Student will discuss causes of postpartum hemorrhage - Tone, Trauma, Tissue, Thrombin. Peer discussion on clinical findings to know the cause. |
| NLHP 8.3 | Retained placenta | (1hr) Teacher will demonstrate the signs of retained placenta and steps of management Student will observe, analyze the underlying cause and document |
| NLHP 8.4 | Postpartum hemorrhage management. | (1hr) Teacher will - |

1. Demonstrate techniques for manual removal of the placenta and management of postpartum hemorrhage using simulation models.
2. Manage birth canal injuries.
3. Identification of Atonic uterus and demonstrate bimanual compression.
4. Demonstrate PPH (Postpartum Hemorrhage) drill.

Students will participate in the drill and demonstrate management techniques.

Topic 9 Moodhagarbha - Obstructed Labour (LH :8 NLHT: 3 NLHP: 6)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-------------|--|---------|----|----|--------------------|---------------------------|-----|-----|----|---------|
| CO1, CO4 | Explain- <i>Nirukti, Paribhasa, Nidana, Samprapti, Lakshana</i> of <i>Moodhagarbha</i> . | CC | DK | K | L&PPT | COM,VV-Viva,S-LA Q,P-REC | F&S | III | - | LH |
| CO4 | Elaborate <i>Bheda, Gati</i> and <i>Chikitsa</i> of <i>Moodhagarbha</i> . | CC | MK | K | L&PPT ,D-M | VV-Viva,C OM,S-LAQ ,P-REC | F&S | III | - | LH |
| CO4 | Demonstrate <i>Bheda and Gati</i> of <i>Moodhagarbha</i> . | CAP | MK | KH | D-M,L &PPT ,PrBL,D | VV-Viva,PRN,S-LAQ, P-MOD | F&S | III | - | NLHT9.1 |
| CO4 | Enumerate different types of abnormal presentations. | CK | DK | K | L&PPT | VV-Viva | F | III | - | LH |
| CO4 | Demonstrate Assisted Breech delivery techniques. | PSY-SET | DK | KH | SIM,D-M,L_V C | P-MOD,V V-Viva | F | III | - | NLHP9.1 |

| | | | | | | | | | | |
|---------------|---|-----|----|----|-----------------|---------------------|-----|-----|---|---------|
| CO4 | Describe Cephalopelvic disproportion (CPD) | CC | MK | K | L&PPT | VV-Viva,S-LAQ | F&S | III | - | LH |
| CO4 | Diagnose Cephalopelvic disproportion (CPD). | CAN | MK | KH | SIM,D-M | VV-Viva,P-MOD | F | III | - | NLHP9.2 |
| CO4 | Describe <i>Upadrava of Moodha garbha. - Garbhakosha Parasanga, Makkala and Yonisamvarana.</i> | CK | MK | K | L&PPT | S-LAQ,VV-Viva,P-REC | F | III | - | LH |
| CO4 | Demonstrate <i>Upadrava of Moodha garbha - Garbhakosha Parasanga, Makkala and Yonisamvarana</i> | CAP | MK | KH | CBL,L &GD | VV-Viva | F | III | - | NLHP9.3 |
| CO4 | Describe obstetric emergencies with causes, clinical features and complications - cord prolapse, uterine inversion, amniotic fluid embolism, obstetric shock and uterine rupture. | CC | DK | K | L&PPT ,CBL | VV-Viva | F | III | - | LH |
| CO4 | Discuss causes, clinical features and findings of investigation in obstetric emergencies. | CC | DK | K | PSM,L_VC,SIM ,D | INT,P-ID,V V-Viva | F | III | - | NLHT9.2 |
| CO4 | Describe Bishop's Score.Explain methods of induction and augmentation of labour. | CC | DK | K | L&PPT | S-LAQ,VV-Viva | F&S | III | - | LH |
| CO1, CO3, CO4 | Explain -a. Indications, contraindications, procedure and complications of ventouse delivery.b. Indications, contraindications, procedure and complications of forceps delivery.c. Indications, types and procedure of caesarean section. | CC | MK | K | L&PPT ,FV | COM,VV-Viva,S-LAQ | F&S | III | - | LH |
| CO1, CO3, CO4 | Calculate and Interpret Bishop's score.Demonstrate forceps application, vacuum extraction and Caesarean Section.Explain indications and complications for each mode of assistance. | CAP | DK | KH | D-M,L_VC,D | P-MOD,V V-Viva,COM | S | III | - | NLHP9.4 |
| CO1, CO4 | Demonstrate abnormal presentations - face, brow, shoulder | CAP | MK | KH | D-M,L &PPT | SBA,P-EX AM,VV- | S | III | - | NLHT9.3 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|----------|---|---|
| NLHT 9.1 | <i>Moodhagarbha - Bheda and Gati.</i> | (1 hr) Teacher will demonstrate <i>Bheda</i> and <i>Gati</i> of <i>Moodhagarbha</i> on model/manikin/3D. Students will compile and present <i>Moodhagarbha</i> with peer discussion. |
| NLHT 9.2 | Obstetric Emergencies | (1 hr) Teacher will demonstrate identification of obstetric emergency through examination and investigations. Plan mock Drill for timely referral to higher centers. Students will observe and participate. |
| NLHT 9.3 | Abnormal presentations – face, brow, shoulder presentations | (1 hr) Teacher will demonstrate abnormal presentations – face, brow, shoulder presentations on model/manikin/3D video/case. Student will practice abnormal presentations on model and discuss its outcome on labour. |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|----------|---------------------------|---|
| NLHP 9.1 | Assisted Breech delivery. | (2 hrs) Teacher will demonstrate on manikin / model / with 3D video. 1. Clinical diagnosis of type of breech |

| | | |
|--|---|--|
| | | <p>2. Determining positions (L.S.A/R.S.A/R.S.P/L.S.P.)</p> <p>3. Preparedness</p> <p>4. Steps of assisted breech delivery</p> <p>Student will observe and analyze steps of breech delivery.</p> |
| NLHP 9.2 | Assesment of Cephalo-Pelvic Disproportion | <p>(1 hr)</p> <p>Teacher will demonstrate and guide student to assess cephalo pelvic disproportion by clinical assessment.</p> <p>Student will observe, discuss and emulate clinical examination to diagnose CPD.</p> |
| NLHP 9.3 | Complications of <i>Moodha Garbha</i> | <p>(1 hr)</p> <p>Teacher will discuss the complications of obstructed labour and demonstrate outcomes-cervical dystocia and uterine rupture.</p> <p>Students will analyze the complications and discuss preventive strategies.</p> |
| NLHP 9.4 | <p>1. Bishop's score and Induction/ Augmentation of Labour</p> <p>2. Assisted labour techniques</p> | <p>(2 hrs)</p> <p>1. Teacher will demonstrate components of Bishop's score on model / clinical case and interpret the score favourable for induction of labour and decide the method of induction.</p> <p>Student will observe and document the components of Bishop's score.</p> <p>2. Teacher will demonstrate assisted labour techniques namely forceps application, vaccum extraction, caesarean section through video /manikin / case.</p> <p>Students will observe and record in prescribed journal proforma.</p> |
| Topic 10 Sootika Vigyana - Puerperium (LH :3 NLHT: 1 NLHP: 3) | | |

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|---------------|---|---------|----|----|--------------------------|------------------------------------|-----|-----|----|----------|
| CO4 | Define <i>Sootika</i> and explain <i>Sootika Kala</i> with <i>Paricharya</i> . Describe puerperal changes and explain post-partum care. | CC | MK | K | L&PPT, REC | P-REC, S-LAQ, COM, VV-Viva | F&S | III | - | LH |
| CO4 | Demonstrate clinical examination of a puerperal woman - abdominal, perineal, and breast. | PSY-GUD | MK | SH | CBL, D, D-BED, SIM, D-M | P-VIVA, P-CASE, VV-Viva | F&S | III | - | NLHP10.1 |
| CO4 | Describe <i>Nidana</i> , <i>Samprapti</i> , <i>Lakshana</i> , <i>Bheda</i> and <i>Chikitsa</i> of <i>Sootika Vyapad</i> . | CC | MK | K | PBL, CBL, L&PPT | S-LAQ, COM, VV-Viva | F&S | III | - | LH |
| CO4 | Explain causes, clinical features, management and complications of puerperal diseases. | CC | MK | K | DIS, CBL, CD, PBL, L&PPT | COM, S-LAQ, VV-Viva | F&S | III | - | NLHT10.1 |
| CO4 | Present case study on <i>Sootika Vyadhi</i> . | PSY-GUD | MK | SH | D-BED, SIM, CD, PER, PBL | VV-Viva, CL-PR, P-CASE, P-VIVA | F&S | III | - | NLHP10.2 |
| CO4, CO5, CO6 | Explain contraception and family planning methods. | CK | MK | K | L&PPT, DIS | S-LAQ, VV-Viva, COM | F&S | III | - | LH |
| CO4, CO5 | Justify selection of contraceptives with method and time of administration. | CE | MK | KH | DIS, TUT, D, D-M, SIM | VV-Viva, P-PRF, OSCE, PP-Practical | F&S | III | - | NLHP10.3 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|---------------------|---|
| NLHT 10.1 | Puerperal diseases. | (1 hr) Teacher will describe and explain puerperal diseases and discuss plan of management. Student will analyze the causes of puerperal diseases and discuss preventive strategies by implementation of <i>sootika paricharya</i> . |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|---|---|
| NLHP 10.1 | Examination of a puerperal woman - abdominal, perineal, and breast. | (1 hr) Teacher will - <ol style="list-style-type: none">1. Demonstrate breast examination2. Demonstration of consistency and involution of uterus with other pelvic structures.3. Demonstrate perineal examination4. Explain characteristics of normal lochia. Student will observe and practice abdominal examination on model / manikin. Student will record in prescribed journal proforma. |
| NLHP 10.2 | <i>Sootika Vyadhi</i> | (1 hr) Students will be divided into groups. They will record cases of <i>Sootika vyadhi</i> under guidance of teacher and present with peer discussion. Teacher will assess the skill of history taking, examination and provide feedback. |
| NLHP 10.3 | Contraception | (1 hr) |

Teacher will discuss contraceptive methods.

a. Temporary: Physical method/Oral contraceptives/Intra uterine contraceptive devices/
Emergency contraception.

b. * Permanent methods. (* Details in Paper-II)

1. Select ideal method of contraception

2. Prerequisites for administration of contraceptives

3. Demonstrate the method of use / administration

Student will be given case scenarios to select appropriate contraceptive method with time of administration.

Topic 11 Stanya Vigyana - Lactation (LH :2 NLHT: 2 NLHP: 2)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|---------|----|----|----------------------|---------------|-----|-----|------|----------|
| CO4 | Explain <i>Stanya Utpatti</i> and describe <i>Stanya Sampat Lakshana</i> . Describe physiology of lactation and components of breast milk. | CC | MK | K | L&PPT | VV-Viva,S-LAQ | F&S | III | - | LH |
| CO4 | Analyze Breast milk components and Learn breastfeeding techniques. | CAN | MK | KH | SIM,L&PPT | VV-Viva,S-LAQ | F&S | III | H-KB | NLHT11.1 |
| CO4 | Demonstrate breast feeding techniques. | PSY-GUD | MK | SH | RP,D-B ED,CB L | VV-Viva | F | III | - | NLHP11.1 |
| CO4 | Describe <i>Nidana, Samprapti, Lakshana</i> of <i>Stanya</i> | CC | MK | K | L&PPT | VV-Viva,S- | F&S | III | - | LH |

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|-----|--|-----|----|----|-------------------------------|--|-----|-----|------|----------|
| | <i>Dushti and Stana Vidradhi.</i> | | | | | LAQ | | | | |
| CO4 | Explain causes, clinical features, investigations and management of mastitis and breast abscess. | CC | MK | K | D, CD, D A, CBL, PBL | VV-Viva, C -VC, S-LA Q, P-CASE | F&S | III | H-SH | NLHT11.2 |
| CO4 | Diagnose Breast Engorgement, Mastitis, Breast abscess. | CAP | MK | KH | D, CBL, CD, PBL , D-BED | S-LAQ, P-C ASE, P-VIV A, P-ID, VV- Viva | F&S | III | H-SH | NLHP11.2 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|-------------------------------------|---|
| NLHT 11.1 | Breast milk and feeding techniques. | (1hr) Teacher will discuss breast milk components with its importance and demonstrate breast feeding techniques. Student will observe and review the breast milk substitutes from literature and discuss the importance of breast feeding for maternal and child health. |
| NLHT 11.2 | Mastitis and Breast Abscess. | (1 hr) Teacher will explain causes, clinical features and examination of breast for diagnosis of mastitis and breast abscess with plan of management. Student will observe and learn medical and surgical management of breast abscess. |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|------------------------------|---|
| NLHP 11.1 | Techniques of Breastfeeding. | (1 hr) Students will be divided into groups and will emulate breast feeding techniques in different postures. Teacher will assess the techniques and provide feedback. |

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|-----------|--|--|
| NLHP 11.2 | Breast Engorgement, Mastitis, Breast abscess | <p>(1hr)</p> <p>Teacher will demonstrate Breast Engorgement, Mastitis, Breast abscess. with Video / Clinical case and explain plan of management</p> <p>Student will observe and identify the clinical features and discuss medical and surgical management</p> |
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| Paper 2 (STREE ROGA - GYNAECOLOGY) | | | | | | | | | | |
|--|---|-------------------------|---------------------------|--------------------|-------------------------|---------------------------------|------------------------------|-------------------|--------------------------|-------------------|
| A3 Course outcome | B3 Learning Objective (At the end of the session, the students should be able to) | C3 Domain/sub | D3 MK / DK / NK | E3 Level | F3 T-L method | G3 Assessment | H3 Assessment Type | I3 Term | K3 Integration | L3 Type |
| Topic 12 Stree Prajanananga Nirmana and Vikruti - Development of Female Reproductive System with Anomalies. (LH :3 NLHT: 2 NLHP: 4) | | | | | | | | | | |
| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
| CO2 | Explain the development of the Female Reproductive system from the Mullerian duct - Stree Jananaga Vikara (Muillerian duct anomalies) | CC | MK | K | L&PPT | COM,S-LA Q,VV-Viva | F&S | I | - | LH |
| CO1, CO2 | Demonstrate the anatomy of female reproductive system. | CAP | MK | KH | D-M,L_V C | S-LAQ,M-CHT,VV-Viva,P-ID,P-VIVA | F&S | I | - | NLHP12.1 |
| CO1, CO2 | Demonstrate the anomalies of Female Reproductive system. | CAP | MK | KH | D-BED, PBL,L& | P-VIVA,V V-Viva,P-I | F&S | I | - | NLHP12.2 |

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|-------------|--|-----|----|----|------------------|-----------------------------|-----|---|---|----------|
| | | | | | PPT ,C BL,D-M | D,S- LAQ,QZ | | | | |
| CO1, CO2 | Explain Neuendocrinology in Puberty & Menopause | CC | MK | K | L&PPT | S-LAQ,VV- Viva | F&S | I | - | LH |
| CO1, CO2 | Explain Anatomical and Physiological aspects of Puberty and Menopause. | CC | MK | K | L&PPT | S-LAQ,VV- Viva,COM | F&S | I | - | LH |
| CO2 | Explain neuroendocrinology with respect to puberty - hormones and functions. | CC | MK | K | PER,DI S | VV-Viva,S- LAQ,CL- PR | F&S | I | - | NLHT12.1 |
| CO2 | Explain applied aspects of Puberty and Adolescence. | CAP | MK | K | DIS,PE R | CL-PR,S-L AQ,VV- Viva | F&S | I | - | NLHT12.2 |
| CO2 | Demonstrate Pubertal changes –Thelarche, Pubarche and Menarche | CAP | MK | KH | PER,CB L,D | QZ ,VV- Viva | F&S | I | - | NLHP12.3 |
| CO2 | Identify normal and abnormal Pubertal changes. | CAN | MK | KH | D-M,C D,DIS | QZ ,VV- Viva | F&S | I | - | NLHP12.4 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|--|--|
| NLHT 12.1 | Neuroendocrinology with respect to Puberty | (1hr) Students will have class presentation,discussion and concluding remarks by teacher. |
| NLHT 12.2 | Applied aspects - Puberty and Adolescence | (1hr) Students will have Class presentation ,Group discussion on healthy transition through Puberty and Adolescence followed by concluding remarks by the teacher. |

| Non Lecture Hour Practical | | |
|-----------------------------------|--|---|
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 12.1 | Development of Female reproductive system | (1hr) Teacher will demonstrate development Female reproductive system from Mullerian Duct system on model / with video Student will discuss and analyse the possible defects. |
| NLHP 12.2 | Anomalies of Female reproductive system | (1 hr) Teacher will demonstrate the Structural anomalies of Female reproductive system on model / video/ case instances Student will observe and analyze the underlying cause. |
| NLHP 12.3 | Puberty | (1hr) Teacher will demonstrate changes in Puberty on Model / Charts / Case Students will discuss Pubertal changes -Thelarche- Tanner's staging , Pubarche & Menarche. |
| NLHP 12.4 | Identify normal and abnormal Pubertal changes. | (1hr) Teacher will demonstrate Normal changes and discuss Abnormal conditions on Video / Chart / Case. Students will analyze outcomes of abnormal Puberty. |

Topic 13 Yantra evam Shastra - Instruments (LH :1 NLHT: 1 NLHP: 6)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----------|---|-----------|-----------|-----------|-------------|---|-----------|-----------|-----------|-----------|
| CO3 | Elaborate instruments commonly used in procedures and surgeries in Stree Roga (Gynaecology) and Prasuti tantra (Obstetrics). Describe the type of Yantra (Blunt instruments) and its utilization. 1. Sandansha Yantra- (Pincer-like | CC | MK | K | L&PPT ,D | P-EXAM,D OPS,P-ID, VV- Viva,DOPS | F&S | I | - | LH |

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|-----|---|---------|----|----|------|-----------------------|-----|---|------|----------|
| | or dissecting forceps) Annigraha - plain/ non-toothed forceps, Sannigraha - Toothed forceps.2. Swastika Yantra (Cruciform like forceps) - Allies forceps, Vulsellum, Sponge holding forceps, Artery forceps, Babcock,s forceps, Cheatle's forceps, Kocher's forceps, Needle holder, Artery forceps, Ovum forceps, Green armytage forceps, Cervical punch biopsy forceps. 3. Shalaka Yantra- (Rod like instruments) - Uterine sound, Hegar's dilator, Uterine curette, endometrial biopsy curette, Anterior vaginal wall retractor, Agnikarma Shalaka4. Tala Yantra- (scoop or spoon-shaped instruments) - Sim's speculum, Cusco's speculum, Doyen's retractor, Obstetric forceps, Endometrial curette. 5.Nadi Yantra - (Tubular instruments) - Yonivranekshana yantra, Endometrial biopsy cannula, HSG cannula/ Rubin's cannula, Suction cannula, Uttara basti cannula, Leech Wilkinson's cannula, Basti yantra. Describe types of Shastra (Sharp instruments) and utilization: 1. Kartari Shastra - Scissors;Atimukha Shastra - Episiotomy scissorsMandalagra Shastra, umbilical cord-cutting scissors,Shararimukha Shastra - Mayos scissors / simple scissors, Stich removing scissors. 2. Vriddhipatra Shastra - Scalpel 3. Suchi Shastra - different types of needles. | | | | | | | | | |
| CO3 | Identify & Discuss the uses of instruments with method of sterilization. | CC | MK | K | PT,D | VV-Viva,P-EXAM,OS CE | F&S | I | - | NLHT13.1 |
| CO3 | Describe instrument sterilization methods | CC | MK | K | PT,D | INT,VV-Viva | F | I | H-SH | NLHP13.1 |
| CO3 | Demonstrate the techniques of holding and using instruments .Enlist uses in <i>Prasuti & Stree Roga -Sandansham and Swastika yantra</i> | PSY-GUD | MK | SH | D | VV-Viva,P-VIVA,P-EXAM | F&S | I | - | NLHP13.2 |
| CO3 | Demonstrate techniques of holding and using instruments .Enlist | PSY- | MK | SH | D | PP-Practica | F&S | I | - | NLHP13.3 |

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|-----|--|-------------|----|----|---|------------------|--------------------------------------|---|---|----------|--|
| | uses in <i>Prasuti & Stree Roga</i> - Shalaka, Tala & Nadi yantra | GUD | | | | | 1,P-EXAM, VV-Viva,P- ID,P-VIVA | | | | |
| CO3 | Practice techniques of holding and using Sharp instruments. Enlist uses in <i>Prasuti and Stree roga</i> | PSY- GUD | MK | SH | D | P-ID,VV- Viva | F&S | I | - | NLHP13.4 | |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|--|---|
| NLHT 13.1 | Instruments used in Obstetrics and Gynaecology | <p>(1 hr) Teacher will facilitate students to get familiarize with Instruments commonly used in Obstetrics and Gynaecology and discuss methods of sterilization for blunt and sharp instruments Students will document instruments with,</p> <ol style="list-style-type: none"> 1. Identification 2. Description 3. Uses 4. Advantages & Disadvantages |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|----------------------------------|---|
| NLHP 13.1 | Instrument sterilization methods | <p>(1hr) Teacher will enable students to experience the method processing of instruments Students will have exposure to -</p> <ol style="list-style-type: none"> 1. Disinfection of Instruments 2. Scrubbing methods 3. Sterilization methods for blunt instruments 4. Sterilization methods for sharp instruments |

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| NLHP 13.2 | Instruments - <i>Sandansha and Swastika yantra</i> | <p>(2hrs) Teacher will demonstrate techniques of holding and using instruments - <i>Sandanmsha and Swastika yantra</i> Students will practice the technique of holding and using - 1. <i>Sandansha Yantra</i> (Pincer like or dissecting forceps) – <i>Annigraha</i> – plain non-toothed forceps; <i>Sannigraha</i> – Toothed forceps 2. <i>Swastika Yantra</i> (Cruciform like Forceps) - Allies forceps, Vulsellum, Sponge holding forceps, Cheatle’s forceps, Kocher’s forceps, Babcock’s forceps, Needle holder, Artery forceps, Babcock’s forceps, Ovum forceps, Green armytage forceps, Cervical punch biopsy forceps.</p> |
| NLHP 13.3 | Instruments - <i>Shalaka, Tala & Nadi yantra</i> | <p>(2hrs) Teacher will demonstrate techniques of holding & using instruments - <i>Shalaka, Tala and Nadi yantra</i> Students will practice the technique of holding and using - 3. <i>Shalaka Yantra</i>- (Rod like instruments) - Uterine sound, Hegar’s dilator , Uterine curette, endometrial biopsy currette, Anterior vaginal wall retractor, Agnikarma shalaka. 4. <i>Tala Yantra</i> (Scoops or spoon-shaped instruments - <i>Dvi Tala yantra</i> - Sim’s speculum, Endometrial curette, Cusco’s speculum, Doyen’s retractor, Obstetric forceps. 5. <i>Nadi Yantra</i> (Tubular instruments)- <i>Yonivranekshana yantra</i>, Leech Wilkinson’s HSG cannula, Rubin’s cannula, Suction cannula, <i>UttaraBasti</i> cannula, Vaginal douching syrrenge, <i>Basti yantra</i>.</p> |
| NLHP 13.4 | Sharp instruments. | <p>(1hr) Teacher will demonstrate holding & using various <i>Shastra</i> (sharp instruments) Students will practice the technique of holding & using - 1. <i>Kartari Shastra</i> - Scissors; <i>Atimukha Shastra</i> - Episiotomy Scissors, <i>Mandalagra Shashtra</i> -Umbilical cord cutting Scissors, <i>Shararimukha Shastra</i> - Mayos Scissors / Simple scissors, Stitch removing Scissors 2. <i>Vridhipatra Shastra</i> – Scalpel 3. <i>Suchi Shastra</i> – different types of needles</p> |

| Topic 14 Stree Rugna Parikshana - Gynaecological Examination (LH :2 NLHT: 1 NLHP: 4) | | | | | | | | | | |
|---|---|-------------|-----------|-----------|----------------------------------|--|-----------|-----------|-----------|-----------|
| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
| CO2, CO6 | Enumerate history taking in Gynaecology. | CK | MK | K | DIS,L& PPT | P-CASE,P- VIVA,RK, PP-Practica l,CL-PR | F&S | I | - | LH |
| CO2, CO6 | Elaborate essential components of Gynaecological history taking. | CK | MK | K | CBL,L &PPT ,CD,DI S | PP-Practica l,P-VIVA,S BA,P-CAS E,P-EXAM | F&S | I | - | NLHT14.1 |
| CO2, CO6 | Acquire the knowledge of Gynecological examination- Breast examination, Abdominal examination, Pelvic , Per rectal examination and plan investigations | CAP | MK | SH | L&PPT ,PL | VV-Viva,P- PRF,P-EX AM,PP-Pra ctical,P- VIVA | F&S | I | - | LH |
| CO2, CO6 | Demonstrate General - Physical & Systemic examination in Gynaecology Breast examination. | PSY- GUD | MK | SH | D-M,C BL,SDL ,D- BED,RP | RK,P-CAS E,P-PRF,P- EXAM,VV- Viva | F&S | I | - | NLHP14.1 |
| CO2, CO6 | Demonstrate Abdominal Examination in Gynaecology – Inspection, Palpation, Percussion & Auscultation | PSY- GUD | MK | SH | D-BED, SIM,D- M,D,CB L | P-PRF,P-VI VA,VV-Vi va,DOAP,O SCE | F&S | I | - | NLHP14.2 |
| CO2, CO6 | Demonstrate Vaginal Examination - Inspection & Palpation of External genitalia.Speculum examination, Bimanual examination, Rectovaginal & Per Rectal examination. | PSY- GUD | MK | SH | SIM,DL ,PT,TB L,CD | OSCE,DO AP,P-CAS E,P-EXAM ,P-PRF | F&S | I | - | NLHP14.3 |

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| CO2 | Plan Diagnostic procedures - Cervical & Vaginal smear, Colposcopy, Endometrial sampling & Culdocentesis. | CS | MK | KH | L_VC,L &GD,L RI,CD, CBL | S-LAQ,VV -Viva,P-VI VA,P- EXAM | F&S | I | - | NLHP14.4 |
|-----|--|----|----|----|----------------------------------|---|-----|---|---|----------|

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|--------------------------------|--|
| NLHT 14.1 | Gynaecological history taking. | <p>(1hr) Teacher will discuss essential components of Gynaecological history taking based on case scenario / clinical case and on various essential components viz , Age, parity & complaint specific elicitation of history - Chief complaints in chronological order Important aspects of Gynaecological history Pelvic pain Vaginal discharge Menstrual abnormality & abnormal uterine bleeding Presence of Urinary / Fecal incontinence Something coming down per vagina Past Obstetric history Past Gynaecological history Past Medical & Surgical history Marital & Sexual history – Dyspareunia , Vaginismus Contraceptive history Drug history Students will comprehend ,discuss and record in prescribed case proforma.</p> |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|------|-------------------|-----------------------------------|
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|-----------|---|---|
| NLHP 14.1 | Examination in Gynaecology including Breast | <p>(1hr) Demonstration on Manikin / Clinical case by the teacher - Physical examination: Appearance, Built ,Nutrition, Height,Weight, Edema, Pallor, Cyanosis, Icterus, Clubbing, Secondary sexual characters, BP Pulse, Respiration & Temperature Systemic examination : C V S, Respiratory system, G I system, Neurological system Clinical Breast Examination: Breast size, Symmetry, Skin, Areola & Nipple Student will observe and emulate examination on Manikin / case under guidance. Teacher will provide feedback to improve skill of students.</p> |
| NLHP 14.2 | Abdominal Examination in Gynaecology | <p>(1hr) Demonstration of Abdominal examination by the teacher on Model / Manikin / Clinical Case - Prerequisites : Obtain consent & introduce self Ask the patient to void urine Accompany female attendant Stand on right side of the patient Position of patient -Dorsal supine position Abdomen is exposed fully "9 region Abdominal assessment" Steps : 1.Inspection 2.Palpation 3.Percussion 4.Auscultation Students will observe and emulate Abdominal examination under guidance of teacher on Model/ Manikin/Clinical case. Teacher will provide feedback to improve skill of students.</p> |
| NLHP 14.3 | Vaginal ,Recto vaginal & Per Rectal examination | <p>(1hr) Teacher will demonstrate examination of external genitalia, Internal genitalia & Recto vaginal examination</p> |

on Model / Manikin / Clinical case

Steps :

1. Pre-requisites - Consent, Privacy, good source of light, gloved hands & Examination specific preparedness –

Bladder emptying

Position : Dorsal supine position / Dorsal lithotomy position /Sim's or Lateral position

2. Demonstration of External Genital organs – Inspection & palpation

A .Inspection of External Genitalia – Vulva

Labia majora & Labia minora

Clitoris

Urethra

Fourchette

Vaginal Introitus

Bartholin's gland

Gynaecological perineum

Anus

B. Palpation of External Genitalia & Vagina

Urethra & Bartholin gland

3. Demonstration of Per speculum examination

| | | | | | | | | | | |
|---|----------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | | <p>Visualization with Sim's speculum & Anterior vaginal wall retractor /Cusco's speculum Note the findings of Vagina on inspection & Speculum examination Note the cervical findings</p> <p>4. Demonstration of Bimanual examination / Pelvic examination</p> <p>Note the Size ,Position & Mobility of Uterus Palpation of Fornices & Adnexa</p> <p>5. Demonstration of Recto vaginal & Per rectal examination</p> <p>Inspection & Palpation of Rectovaginal area (Gynaecological perineum) -Palpate rectovaginal septum , Pouch of douglas , Posterior surface of uterus , fornices and uterosacral ligaments Per rectal examination - Understand indications and perform with gloved lubricated index finger Summarize the findings/case Students will emulate and document in the journal .</p> | | | | | | | | |
| NLHP 14.4 | Plan Diagnostic procedures | <p>(1hr) Teacher will explain the indications and demonstrate diagnostic procedures -Cervical & Vaginal smear collection, Colposcopy, Endometrial sampling & Culdocentesis Students will plan the diagnostic procedure on the given case scenario.</p> | | | | | | | | |
| Topic 15 Artava Vyapad - Menstrual Disorders (LH :6 NLHT: 2 NLHP: 4) | | | | | | | | | | |
| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |

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|----------|--|-----|----|----|----------------------|--------------------------------|-----|---|---|----------|
| CO2 | Explain <i>Nidana, Samprapti, Lakshana and Chikitsa of Ashta-Artava Dushti.</i> | CC | MK | K | L&PPT | P-VIVA,S-LAQ,P-REC,VV-Viva,COM | F&S | I | - | LH |
| CO2 | Acquire comprehensive understanding of <i>Ashta-Artava Dushti.</i> | CAP | MK | KH | REC,DIS,L&PPT,CBL,CD | S-LAQ,P-REC,CBA,VV-Viva | F&S | I | - | NLHT15.1 |
| CO2 | Explain <i>Nidana, Samprapti, Lakshana and Chikitsa of Artava kshaya</i> with understanding of Oligomenorrhoea and Hypomenorrhoea | CC | MK | K | DIS,L&PPT | VV-Viva,S-LAQ,P-REC | F&S | I | - | LH |
| CO2 | Identify, record and plan the management of <i>Artava Kshaya - Oligomenorrhoea & Hypomenorrhoea</i> | CS | MK | KH | CBL,CD,DIS | SP,SBA,P-CASE,P-VIVA,VV-Viva | F&S | I | - | NLHP15.1 |
| CO2 | Explain polycystic Ovarian Syndrome (PCOS) – Aetiology, Pathophysiology, Clinical features, Investigations, consequences and management | CC | MK | K | L&PPT,CD | S-LAQ,VV-Viva | F&S | I | - | LH |
| CO2 | Describe <i>Nidana, Samprapti, Lakshana and Chikitsa of Anartava</i> Describe etiology, types, clinical features, differential diagnosis, diagnosis and management of Amenorrhoea. | CC | MK | KH | L&PPT,CBL,CD | S-LAQ,CBA,P-VIVA | F&S | I | - | LH |
| CO2, CO6 | Diagnose Amenorrhoea and plan management. | CS | MK | KH | D-BED,CBL,DIS,CD,PBL | CBA,SP,S-LAQ,P-VIVA,VV-Viva | F&S | I | - | NLHP15.2 |
| CO2, | Diagnose and plan management of Poly Cystic Ovarian Syndrome | CS | MK | KH | CD,CB | SP,P-CASE | F&S | I | - | NLHP15.3 |

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|----------|---|----|----|----|----------------------|---------------------------|-----|---|---|----------|
| CO6 | (PCOS) | | | | L,LRI,DIS | ,VV-Viva,RK,P-VIVA | | | | |
| CO2, CO6 | Explain <i>Nidana, Samprapti, Lakshana and Chikitsa of Asrugdara and Artava Vruddhi.</i> | CC | MK | K | CD,CBL,L&PPT | VV-Viva,CBA,COM,SBA,S-LAQ | F&S | I | - | LH |
| CO2, CO6 | Describe etiology, types, clinical features, differential diagnosis, diagnosis and management of Abnormal uterine bleeding. | CC | MK | K | L&PPT,CD,CBL,LRI | S-LAQ,CBA,VV-Viva | F&S | I | - | LH |
| CO2, CO6 | Describe - <i>Artava Kshaya, Anartava, Asrugdara & Artava Vruddhi.</i> | CC | MK | K | PER,RE C,DIS,CBL | SBA,CBA,PM,CL-PR,VV-Viva | F&S | I | - | NLHT15.2 |
| CO2, CO6 | Identify the causes and plan management of <i>Asrugdara and Artava Vruddhi.</i> | CS | MK | KH | CD,LRI,D-BED,CBL,DIS | VV-Viva,SP,CBA,COM,S-LAQ | F&S | I | - | NLHP15.4 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|---|---|
| NLHT 15.1 | Ashtartava dusti | (1hr) Teacher will provide case scenarios pertaining to various artava dushti and students will analyse the characteristics of Artava and identify the respective dosha involvement with recitation of shlokas. |
| NLHT 15.2 | <i>Artava kshaya, Anartava , Asrugdara & Artava vruddhi</i> | (1hr) Students will be divided into groups to present cases of <i>Artava kshaya, Anartava , Asrugdara & Artava vruddhi</i> Teacher will assess and give remark. |

| Non Lecture Hour Practical | | |
|-----------------------------------|--|---|
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 15.1 | Artava kshaya - Oligomenorrhoea & Hypomenorrhoea | <p>(1 hr) Students will document the case in prescribed journal proforma and</p> <ol style="list-style-type: none"> 1. Evaluate in relation to Age, Weight, H-P-O axis dysregulation, Endocrine Disorders, Androgen producing tumours, Tubercular endometritis and drugs 2. Plan management <p>Teacher will assess and provide feedback.</p> |
| NLHP 15.2 | Anartava - Amenorrhoea evaluation and management | <p>(1hr) Student will document the case in prescribed journal proforma and note the clinical type with</p> <ol style="list-style-type: none"> 1. Evaluation- i) Clinical examination ii) In depth investigations 2. Plan of management; Shodhana / Shamana <p>Teacher will assess and guide in planning the management based on the type of Amenorrhoea.</p> |
| NLHP 15.3 | Poly Cystic Ovarian Syndrome (PCOS) | <p>(1 hr) Teacher will enable students to determine signs, symptoms, results of investigations and plan management of Poly Cystic Ovarian Syndrome based on case scenario / clinical case</p> <ol style="list-style-type: none"> 1. Analyse main concerns – Menstrual abnormalities, Symptoms of hyperandrogenemia , subfertility, weight gain 2. Analyse diagnostic criteria -Biochemical abnormalities (Hyperandrogenemia, |

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| | | <p>hyperinsulinemia, hyperlipidaemia, hyper prolactaenemia , low FSH , hyper secretion of LH)</p> <p>3. Plan management -Conservative(sansodhana & sansamana)/ Surgery</p> <p>Students will comprehend and evaluate Poly Cystic Ovarian Syndrome.</p> |
| NLHP 15.4 | Management of <i>Asrugdara</i> and <i>Artava Vruddhi</i> - Structural and Non-structural / Systemic causes | <p>(1hr)</p> <p>Students will document the case in the prescribed journal proforma under the guidance of teacher with</p> <p>1.Evaluation and classification</p> <p>i) Structural causes (PALM) -Polyp, Adenomyosis, Leiomyoma & Malignancy</p> <p>ii) Non-structural systemic causes(COEIN) -Coagulopathy, Ovulatory dysfunction, Endometrial, Iatrogenic and Not yet identified</p> <p>2.Plan of management</p> <p>Teacher will assess and give remarks.</p> |

Topic 16 Rajonivritti - Menopause (LH :2 NLHT: 1 NLHP: 2)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-------------|--|----|----|----|--------------------------|--|-----|----|----|----------|
| CO2 | Define <i>Rajonivrutti</i> – Menopause and explain the symptoms with changes in organs | CK | MK | K | LS,L&P PT | VV-Viva,C R-RED,S- LAQ | F&S | I | - | LH |
| CO2 | Understand Endocrinology of Menopause and management options with emphasis on role of <i>Rasayana Chikitsa</i> | CK | MK | K | CD,L& PPT | VV-Viva,S- LAQ | F&S | I | - | LH |
| CO2, CO6 | Discuss Hormone Replacement Therapy (HRT) | CK | NK | K | L&PPT ,DA,DI S,CBL | INT,VV-Vi va,CR-RED ,PRN,CL- PR | F&S | I | - | NLHT16.1 |

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| CO2 | Diagnose Menopause | CAN | MK | KH | CD,CB L,D-BE D,LRI,S IM | P-PRF,P-C ASE,CBA, VV-Viva | F&S | I | - | NLHP16.1 |
| CO2 | Plan management of Menopause | CS | MK | KH | DA,CB L,CD,D IS | P-CASE,R K,SP,CBA, S-LAQ | F&S | I | - | NLHP16.2 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|-----------------------------------|---|
| NLHT 16.1 | Hormone Replacement Therapy (HRT) | <p>(1hr) Students will present Indications, Contraindications, Risk factors and complications of Hormone Replacement Therapy in Menopause. Review of research paper / publications Teacher will assess the presentations and discuss the alternate therapies .</p> |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|-------------------|---|
| NLHP 16.1 | Menopause | <p>(1hr) Students will document following in the prescribed journal proforma under the guidance of teacher -</p> <ol style="list-style-type: none"> 1. History taking with special reference to Age, Period of Amenorrhoea and Symptoms such as hot flash and night sweats 2. Physical examination 3. Hormonal Assay <p>Teacher will assess and give remarks.</p> |

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| NLHP 16.2 | Plan management of Menopause | <p>(1hr) Teacher will present a case scenario and students will learn and present plan of management with following components -</p> <ol style="list-style-type: none"> 1. Counselling 2. Advice on Diet, Life style and Meditation 3. Rasayana and Phytoestrogens 4. Symptomatic management |
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Topic 17 Yoni Vyapad - Disorders of Female Reproductive system (LH :13 NLHT: 3 NLHP: 10)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|----|----|----|---------------------------|-----------------------------|-----|----|----|----|
| CO2 | Enlist <i>Yonivyapad - Sankhya, Doshanusara bheda, Samanya Nidana, Upadrava and Sadhya-Asadhyata</i> | CC | MK | K | CBL,RE C,L&PP T | VV-Viva,S- LAQ,P- REC | F&S | II | - | LH |
| CO2 | Explain <i>Nidana, samprapti, Lakshana and Chikitsa of Udavarta, Vandhya, Vipluta ,Paripluta Vatala Yonivyapad.</i> | CC | MK | K | CBL,L &PPT ,REC | P-REC,VV- Viva,S- LAQ | F&S | II | - | LH |
| CO2 | Explain <i>Nidana, samprapti, Lakshana and Chikitsa of Rudhirakshara, Vamini, Sramsini, Putraghni, Pittala Yonivyapad.</i> | CC | MK | K | CBL,RE C,L&PP T | P-REC,S-L AQ,VV- Viva | F&S | II | - | LH |
| CO2 | Explain <i>Nidana, Samprapti, Lakshana and Chikitsa of Atyananda, Karnini, Acharana, Aticharana, Shleshmala</i> | CC | MK | K | REC,C D,L&PP T | VV-Viva,S- LAQ,P- REC | F&S | II | - | LH |
| CO2 | Explain <i>Nidana, Samprapti, Lakshana and Chikitsa of Shandi, Phalini, Mahati, Suchivaktra, Sarvaja</i> | CC | MK | K | REC,C D,L&PP T ,CBL | P-REC,VV- Viva,S- LAQ | F&S | II | - | LH |

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|----------|---|----|----|----|-----------------------|--------------------------|-----|----|---|----------|
| CO2 | Explain <i>Nidana, samprapti, Lakshana and Chikitsa of Antarmukhi, Shuska, Arajaska, Lohita kshaya, Upapluta, Prakcharana Yonivyapad.</i> | CC | MK | K | L&PPT,REC | VV-Viva,S-LAQ,P-REC | F&S | II | - | LH |
| CO2 | Explain <i>Samanya Chikitsa Siddhanta of Yonivyapad and Pathya-Apathya.</i> | CC | MK | K | REC,CBL,CD,L&PPT,PL | VV-Viva,PA,CBA,S-LAQ | F&S | II | - | LH |
| CO2 | Diagnose and plan management of <i>Udavarta (Kastartava) / Vatala/ Vipluta /Paripluta Yonivyapad.</i> | CS | MK | KH | SIM,CD,DA,PBL,LRI | VV-Viva,CBA,P-REC,RK,SBA | F&S | II | - | NLHP17.1 |
| CO2, CO6 | Diagnose and plan management of <i>Pittala/ Rudhirakshara/ Karnini/ Acharana/ Aticharana Yonivyapad.</i> | CS | MK | KH | DA,CD,CBL,D-BED,LRI | SP,P-CASE,PM,P-VIVA,CBA | F&S | II | - | NLHP17.2 |
| CO2 | Memorize and recite <i>Shlokas of Yonivyapad.</i> | CK | MK | K | REC | VV-Viva,P-REC | F&S | II | - | NLHT17.1 |
| CO2 | Define Dysmenorrhoea. Explain types – Primary & Secondary, aetiology, clinical signs and symptoms, investigations with treatment. | CC | MK | K | CBL,CD,L&PPT,D-BED,DA | CBA,SP,S-LAQ,VV-Viva,PM | F&S | II | - | LH |
| CO2, CO6 | Diagnose Dysmenorrhoea and plan management | CS | MK | SH | PBL,LR I,CD,DA,D-BED | P-CASE,VV-Viva,CBA,SBA | F&S | II | - | NLHP17.3 |
| CO2 | Define Endometriosis and Adenomyosis . Explain causes, clinical symptoms, investigations and treatment | CC | MK | K | L&PPT,DA,LR I,CD,C | CBA,VV-Viva,S-LAQ | F&S | II | - | LH |

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| | | | | | BL | | | | | |
| CO2, CO6 | Diagnose and plan management of Endometriosis and Adenomyosis. | CS | MK | SH | LRI,PB L,CBL, D-BED, DA | VV-Viva,C BA,PM,P- CASE,SP | F&S | II | - | NLHP17.4 |
| CO2 | Define Pelvic Inflammatory Disease (PID). Explain aetiology, Types, clinical diagnostic criteria, Investigations, complications and management. | CC | MK | K | CD,LRI ,DIS,L &PPT | S-LAQ,VV- Viva | F&S | II | - | LH |
| CO2, CO6 | Diagnose and plan management of Pelvic Inflammatory Disease (PID) | CS | MK | SH | CD,D-B ED,CB L,LRI,D A | SP,SBA,V V-Viva,CB A,P-CASE | F&S | II | - | NLHP17.5 |
| CO2 | Explain Role of <i>Panchakarma</i> in <i>Yoni Vyapad</i> | CAP | MK | K | DIS,CB L,PER, CD,LRI | VV-Viva,C R-RED,PR N,S-LAQ | F&S | II | - | NLHT17.2 |
| CO2, CO6 | Present case studies on <i>Yonivyapad</i> | AFT- RES | MK | SH | PER,D- BED,C D,CBL | P-PRF,CR- RED,VV-V iva,CL- PR,CBA | F&S | II | - | NLHP17.6 |
| CO2 | Explain Cervical erosion and Ectropion – Aetiology, Clinical features, Investigations and Management | CC | MK | K | L&PPT ,CD,CB L,D | VV-Viva,S- LAQ,CBA | F&S | II | - | LH |
| CO2, CO6 | Diagnose and Plan management of Cervical erosion. | CS | MK | SH | PBL,CD ,D-BED ,CBL,L RI | SP,DOAP, VV-Viva,C BA,P- CASE | F&S | II | - | NLHP17.7 |
| CO2, | Diagnose and plan management of <i>Yoni Kandū</i> - Pruritus Vulvae. | CS | MK | SH | D-BED, | VV-Viva,P | F&S | II | - | NLHP17.8 |

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|-------------|---|-------------|----|----|----------------------------------|---|-----|----|---|-----------|
| CO6 | | | | | CBL,C D,L&PP T | M,P-CASE | | | | |
| CO2, CO6 | Define Pelvic organ prolapse (POP) and explain entities with conservative and surgical treatment options -1.Vaginal Prolapse -Cystocele,Cystourethrocele, Rectocele, Enterocele 2.Uterovaginal prolapse -Uterine prolapse , | CC | MK | K | CD,L& PPT | S-LAQ,VV- Viva | F&S | II | - | LH |
| CO2, CO6 | Diagnose and plan management of Vaginal prolapse – Cystocele & Rectocele. | CS | MK | KH | D-BED, D-M,C BL,PBL ,CD | VV-Viva,S- LAQ,P-VI VA,CBA,P- CASE | F&S | II | - | NLHP17.9 |
| CO2, CO6 | Diagnose and plan management of Uterovaginal prolapse. | CS | MK | KH | CBL,D, CD,DA, PBL | S-LAQ,P-C ASE,CBA, SP,P-VIVA | F&S | II | - | NLHP17.10 |
| CO2 | Explain the causes and management of -1. Dyspareunia2. Vaginismus3. Presacral neuralgia4.Constitutional nymphomania 5. Effluvium seminis | CC | MK | KH | CD,L& PPT ,CBL | VV-Viva,S- LAQ | F&S | II | - | LH |
| CO2, CO6 | Present case studies on different <i>Yonivyapad</i> . | AFT- RES | MK | KH | DA,RP, DIS,LRI ,PER | VV-Viva,P- EXAM,CL- PR,S-LAQ, P-VIVA | F&S | II | - | NLHT17.3 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|------------------------------|---|
| NLHT 17.1 | <i>Shlokas of Yonivyapad</i> | (1 hr) Students will recite <i>Shlokas of Yonivyapad</i> from <i>Brihatrayi</i> . |

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| NLHT 17.2 | <i>Panchakarma in Yonivyapad</i> | <p>(1 hr) Teacher will divide students into groups and allot topics on <i>Shodhana Chikitsa</i> in <i>Yonivyapad</i>. Students will review research publications / clinical cases and present in class. Teacher will assess and discuss importance of <i>Panchakarma</i> in <i>Yonivyapad</i>.</p> |
| NLHT 17.3 | Case studies on different <i>Yonivyapad</i> | <p>(1hr) Students will be divided into smaller groups, each group will be given a case scenario to present . Teacher will analyse and give remarks.</p> |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 17.1 | <i>Udavarta (Kastartava) / Vatala/ Vipluta /Paripluta yonivyapad.</i> | <p>(1hr) Teacher will provide case scenarios with clinical features of <i>Udavarta, Vatala, Vipluta</i> and <i>Paripluta Yonivyapad</i>. Students will diagnose by-</p> <ol style="list-style-type: none"> 1. Analysis of <i>lakshana</i> 2. Discussion on <i>samprapti vighatana</i> based on <i>dosha</i> involved. 3. Examination and investigations. <p>Student will discuss management plan with <i>Shodhana, Shamana</i> and <i>Sthanik Chikitsa</i> and document in prescribed journal proforma. Teacher will assess and provide feedback.</p> |
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| NLHP 17.2 | <i>Pittala/ Rudhirakshara/ Karnini/ Acharana/ Aticharana yonivyapad</i> | <p>(1hr) Teacher will provide case scenarios with clinical features of <i>Pittala/ Rudhirakshara/ Karnini/ Acharana/ Aticharana yonivyapad</i>. Students will diagnose by-</p> <ol style="list-style-type: none"> 1. Analysis of <i>lakshana</i> 2. Discussion on <i>samprapti vighatana</i> based on <i>dosha</i> involved. 3. Examination and investigations. <p>Student will discuss management plan with <i>Shodhana, Shamana</i> and <i>Sthanik Chikitsa</i> and document in prescribed journal proforma. Teacher will assess and provide feedback.</p> |
| NLHP 17.3 | Dysmenorrhoea | <p>(1hr) Student will document case in prescribed journal proforma.</p> <ol style="list-style-type: none"> 1. History taking to elicit Primary / Secondary dysmenorrhea <p>Menstrual history - Age of Menarche & relation of the onset Dysmenorrhoea with menarche. Obstetric history : Association of Dysmenorrhoea with previous delivery History of Intra Uterine Contraceptive Device use, Oral Contraceptive Pills ,Depot Medroxyprogesterone acetate (DMPA), Progestin Intrauterine System</p> <ol style="list-style-type: none"> 2. General physical examination |

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| | | <p>3. Abdominal examination</p> <p>4. Pelvic examination</p> <p>5. Investigations</p> <p>6. Plan management -Primary / Secondary</p> <p>Teacher will assess and provide feedback.</p> |
| NLHP 17.4 | Endometriosis and Adenomyosis. | <p>(1 hr)</p> <p>Student will document the case in prescribed journal proforma.</p> <p>1. History taking : Chief complaints with reference to severe cyclical pain in lower abdomen mostly during menstruation - Dysmenorrhoea, Dyspareunia and Dyschezia</p> <p>2. Gynaecological examination -</p> <p>i) Abdominal examination</p> <p>ii) Vaginal examination : Bimanual examination :</p> <p>Uterus-size</p> <p>Rectovaginal mobility</p> <p>Tenderness</p> <p>Fornices</p> <p>Adnexae</p> <p>Palpation of Pouch of douglas</p> |

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| | | <p>Rectovaginal septum iii) Rectal examination 4. Investigations : 5. Differential diagnosis 6. Plan management of Endometriosis /Adenomyosis Teacher will discuss cases with clinical outcome.</p> |
| NLHP 17.5 | Pelvic Inflammatory Disease (PID) | <p>(1 hr) Student will document case in prescribed journal proforma.</p> <p>1. History taking – Analysis of symptoms - Pain abdomen, Vaginal discharge, Menstrual disturbance (menorrhagia)</p> <p>2. General examination : Acute / Chronic</p> <p>Record vitals – Temperature, Pulse, Respiratory rate Per abdomen : Elicitation of tenderness in lower abdomen Per vaginal : Offensive vaginal discharge, tenderness on movement of cervix , fornices tenderness and fullness of posterior fornix</p> <p>3. Differential diagnosis</p> <p>4. Investigations</p> <p>Teacher will assess and discuss management plan.</p> |

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| NLHP 17.6 | Case presentation on <i>Yonivyapad</i> | <p>(1hr) Teacher will divide students into groups and allot topics of Yonivyapad to each group. Student will review clinical case studies / systematic review of research publications of Yonivyapad allotted to them and present in class. Teacher will discuss and assess the presentations on clinical cases and provide feedback.</p> |
| NLHP 17.7 | Cervical erosion | <p>(1 hr) Student will document case in prescribed journal proforma.</p> <ol style="list-style-type: none"> 1. History taking – Analysis of symptoms 2. General examination <p>Per abdomen : Per speculum : Vagina, Cervix - lesion/ breach in portion to be documented, white discharge, any spotting / bleeding Per vaginal – Uterus / Fornices</p> <ol style="list-style-type: none"> 3. Investigations : 4. Plan management <p>Teacher will discuss management options and provide feedback on cases.</p> |

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| NLHP 17.8 | <i>Yoni kandu</i> - Pruritus Vulvae | <p>(1hr) Teacher will discuss a case scenario / clinical case of Yoni Kandu -Pruritus Vulvae 1.History taking and examination 2. Analyse aetiology –Vaginal discharge, local skin lesions, infections, allergy, systemic diseases 3.Plan management -i) Local hygiene ii) Drug application - local and/or systemic Students will discuss and document in the prescribed journal proforma.</p> |
| NLHP 17.9 | Cystocele & Rectocele | <p>(1hr) Teacher will explain and demonstrate Cystocele & Rectocele on manikin / clinical case with discussion on following - 1. History taking – i) Predisposing (acquired /congenital) ii) Aggravating (postmenopausal atrophy, chronic cough, constipation, obesity, multiparity, weight lifting, under nutrition, smoking 2 Examination : i. General – Body Mass Index , Signs of myopathy or neuropathy, features of chronic airway disease, abdominal mass ii. Composite examination- Inspection and Palpation : Vaginal, Rectal and Recto vagina. 1. Diagnosis - Cystocele / Urethrocele / Rectocele / Enterocele/ Vault prolapse 2. Plan of management Students will observe and document in the prescribed journal proforma</p> |

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| NLHP 17.10 | Uterovaginal prolapse | <p>(1hr) Teacher will explain and demonstrate Uterovaginal prolapse on manikin / clinical case with discussion on -</p> <ol style="list-style-type: none"> 1. History taking – i) Predisposing (acquired /congenital) ii) Aggravating (postmenopausal atrophy, chronic cough, constipation, obesity, multiparity, weight lifting, under nutrition, smoking 2. Examination : i) General – Body Mass Index , Signs of myopathy or neuropathy , features of chronic airway disease , abdominal mass ii) Composite examination- Inspection and Palpation : Vaginal , Rectal and Recto vagina 3. Diagnosis : Uterine prolapse / Uterovaginal prolapse 4. Assigning degrees of Uterine prolapse - First/Second/Third/Procidentia 5. Plan of management – conservative / surgical <p>Students will observe, discuss and record in the prescribed journal proforma.</p> |
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Topic 18 Vandhyatwa - Infertility (LH :4 NLHT: 3 NLHP: 8)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
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| CO2 | Elaborate the concept of <i>Vandhyatwa, Bheda</i> and various <i>Nidana - Aharaja, Viharaja, Yoni Vyapadjanya , Shukra Doshaja, Artava Doshaja, Akalyoga</i> and <i>Atmadoshajanya</i> . | CC | MK | K | L&PPT | P-VIVA,V V-Viva,S-L AQ,P- EXAM | F&S | II | - | LH |
| CO2 | Describe <i>Vandhyatwa Chikitsa and Pathya-Apathya</i> . | CC | MK | K | L&PPT ,DIS | P-VIVA,V V-Viva,S- LAQ | F&S | II | - | LH |
| CO2, CO3 | Discuss Role of <i>Panchakarma in Vandhyatwa</i> . | CC | MK | K | CD,TB L,PER, FC,L& GD | CBA,P-VI VA,PM,P-E XAM,VV- Viva | F&S | II | H-PK | NLHT18.1 |

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| CO2 | Define Infertility and elaborate Female factors of Infertility, Investigations and guidelines of management. | CC | MK | K | L&PPT | VV-Viva,S-LAQ | F&S | II | - | LH |
| CO2, CO6 | Perform Evaluation of Female partner in Infertility. | CAP | MK | KH | DIS,CD ,PBL,P T,CBL | P-VIVA,SP ,S-LAQ,VV -Viva,P-CASE | F&S | II | - | NLHP18.1 |
| CO2 | Describe Male factors of Infertility with Investigations and guidelines of management. | CC | MK | K | L&PPT | VV-Viva,S-LAQ,COM | F&S | II | - | LH |
| CO2, CO6 | Perform evaluation of Male partner in Infertility. | CAP | MK | SH | DIS,CB L,LRI,C D,D-BED | P-CASE,S BA,CR-RE D,SP,INT | F&S | II | - | NLHP18.2 |
| CO2 | Discuss <i>Shukra Dushti</i> and semen abnormalities. | CC | MK | K | DL,CD, LRI,CB L,PER | CL-PR,VV-Viva | F&S | II | - | NLHT18.2 |
| CO2 | Demonstrate Semen Analysis and Interpretation of parameters. | CAP | MK | KH | LRI,PT, DL,CD, CBL | P-EXAM,V V-Viva,P-VIVA,CBA | F | II | - | NLHP18.3 |
| CO2 | Demonstrate and interpret Ultrasound / Follicular study. | CAP | MK | KH | LRI,L& PPT ,CBL,C D | VV-Viva,P-VIVA | F | II | - | NLHP18.4 |
| CO2 | Evaluate Tubal Patency by Hystero Salpingography (HSG). | CE | DK | KH | X-Ray, D,L_ VC ,CD,CB L | CBA,S-LA Q,P-ID,VV-Viva | F&S | II | - | NLHP18.5 |
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| CO2 | Demonstrate cervical mucous study / test -Fern testSpinbarkket | PSY-GUD | MK | KH | LRI,D,P T | INT,P-CASE | F | II | - | NLHP18.6 |
| CO2 | Describe Assisted Reproductive Techniques (ART) and ART act. | CK | NK | K | L_VC,L &PPT , CBL,DI S | COM | F | II | - | NLHT18.3 |
| CO2 | Gain insight of Intra Uterine Insemination (IUI). | CK | DK | K | D,L_VC | VV-Viva,P P-Practical | F | II | - | NLHP18.7 |
| CO2 | Present case of Infertility. | AFT-RES | MK | SH | PBL,X- Ray,D- BED,PE R,CBL | CL-PR,VV- Viva,P-CA SE,SBA,PR N | F&S | II | - | NLHP18.8 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
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| NLHT 18.1 | Role of <i>Panchakarma in Vandhyatwa</i> | (1hr) Students will have Class presentation / Class seminar / Group discussion / Project work/ Flipped class room on <i>Panchakarma</i> treatment options in <i>Vandhyatwa</i> . Teacher will assess and provide feedback. |
| NLHT 18.2 | Shukra Dushti and semen abnormalities | (1hr) Teacher will discuss identification of <i>Shukra Dusti</i> and various abnormalities of Semen Student will analyze various nomenclature related to abnormalities of Semen viz, Aspermia, Hypospermia, Oligozoospermia, Polyzoospermia, Azoospermia , Asthenozoospermia, Leucocytospermia, Necrozoospermia Teratozoospermia and |

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| | | Oligoasthenoteratozoospermia. |
| NLHT 18.3 | Assisted Reproductive Techniques (ART) | (1hr) Teacher will help students familiarize with various Assisted Reproductive Techniques (ART) with help of Video demonstration and discuss about ART act. |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 18.1 | Female partner evaluation in Infertility | (1hr) Teacher will guide the students for - History taking : Specify & discuss with reference to Age,Duration and type of Infertility, Contraceptive history, Sexual history, Menstrual history, Previous treatment history, Obstetric history, Gynaecological history, History of past illness, Personal and Family history General Physical, Systemic and Local examination Investigations Teacher will assess the findings,counsel and plan the management. |
| NLHP 18.2 | Male partner evaluation in Infertility | (1hr) Teacher will guide the students for - 1. History taking; Specify & discuss with reference to Age, Occupation, Habits, Duration, Environmental exposure, Sexual history, Past illness 2. General Physical, systemic and local examination 3. Investigations Teacher will assess,counsel and plan management. |
| NLHP 18.3 | Semen Analysis. | (1hr) Teacher will discuss time and method of collection, Interpretation of report and plan the management |

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| | | Students will comprehend and discuss. |
| NLHP 18.4 | Interpret Ultrasound / Follicular study | <p>(1hr) Teacher will discuss -</p> <ol style="list-style-type: none"> 1. Pelvic Ultrasound – Assessment of Uterine cavity / Size / Endometrial Thickness, free fluid in pouch of douglas 2. Follicular study – Interpret the follicular size / Ovulation 3. Counsel and Plan management <p>Student will comprehend and discuss.</p> |
| NLHP 18.5 | Hysterosalpingography (HSG) | <p>(1hr) Teacher will demonstrate Hysterosalpingography and discuss about the consent, time of procedure, method, precautions and possible complications with the help of Video /X-ray film. Students will comprehend, understand and document.</p> |
| NLHP 18.6 | Cervical mucous tests | <p>(1hr) Teacher will demonstrate Fern test and Spinbarkette</p> <ol style="list-style-type: none"> 1. Procedure of collecting cervical mucous under aseptic precautions 2. Observation and interpretation <p>Students will observe , assess and document</p> |
| NLHP 18.7 | Intra Uterine Insemination (IUI) | <p>(1hr) Teacher will demonstrate Intra uterine Insemination (IUI) with Video /Clinical case. Students will observe and analyze.</p> |

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| NLHP 18.8 | Practical case presentation on Infertility | <p>(1hr) Student will present case of Infertility focusing on - History taking Examination – Male / Female Investigations Interpretation / Identify the cause Plan management - <i>Shodhana / Shamana / Sthanika upakrama/ Integrative</i> Teacher will evaluate and give remarks</p> |
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Topic 19 Vyadhi Vinischaya Upaya - Diagnostic Tools and Techniques (LH :1 NLHT: 1 NLHP: 2)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|----------|--|-----|----|----|---------------------------|---------------------------|-----|----|----|----------|
| CO2 | Discuss various diagnostic procedures in Gynaecology viz PAP smear, Colposcopy, Cervical biopsy, Endometrial biopsy, Ultrasound, Hysteroscopy, Laparoscopy, Magnetic resonance imaging, Computed Tomography. | CC | DK | K | X-Ray, CBL,L &PPT | CBA,INT | F&S | II | - | LH |
| CO2 | Interpret Ultrasound, Hysteroscopy, Laparoscopy, Magnetic resonance imaging, Computed Tomography in Gynaecology. | CC | DK | K | LRI,CD ,X-Ray, CBL,L &PPT | INT,SBA,V V-Viva,CO M,CBA | F | II | - | NLHT19.1 |
| CO2 | Perform PAP test, Visual inspection examination and Colposcopy. | CAP | DK | KH | CD,CB L,D-M, L_VC,D | INT | F | II | - | NLHP19.1 |
| CO2, CO6 | Observe the procedure for Cervical biopsy and Endometrial biopsy | CC | DK | K | CBL,D-M,L_V C | INT | F | II | - | NLHP19.2 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
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| NLHT 19.1 | Diagnostic tools | (1hr) Teacher will assist students in comprehending and interpreting Ultrasound, Hysteroscopy, Laparoscopy, Magnetic resonance imaging, Computed Tomography reports in Gynaecology. |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 19.1 | PAP test, Visual inspection and Colposcopy | (1hr) Teacher will demonstrate the procedures of PAP test, Visual inspection methods and Colposcopy on model / manikin / clinical case/video. Students will perform and analyze the steps - 1 . Prerequisites and Procedure : Educate about the time of test Consent Collection of required material for respective test i) PAP test - Gloves , Instruments ,Spatula , Slides ii) Visual Inspection : Visual Inspection with Acetic acid (VIA) and Visual inspection with Lugol's Iodine (VILI) iii) Colposcopic visualization 2. Procedure 3. Interpret findings. |
| NLHP 19.2 | Cervical biopsy and Endometrial biopsy | (1hr) Teacher will demonstrate the procedures of collecting Cervical and Endometrial Biopsy on model / manikin / clinical case / video. Students will discuss- |

1. Prerequisites : Consent, premedication, sterilized instruments
2. Procedure of collection and preservation
3. Interpretation of results
4. Conselling and referral for further management

Topic 20 Sthanika Upakrama - In situ Treatment Modalities (LH :1 NLHT: 2 NLHP: 7)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-------------|---|-------------|----|----|-------------------------------|---|-----|----|----|----------|
| CO3 | Discuss the role of <i>Sthanika Upakrama</i> in <i>Streeroga - Yoni dhavana ,Yoni prakshalana , Pichu dharana, Yoni varti, Yoni lepana, Yoni avachurnana, Yoni purana, Yoni dhoopana, Kshara karma, Agni karma and Uttarabasti.</i> | CC | MK | K | L&PPT ,L_VC | RK,S-LAQ, COM,VV- Viva,P- VIVA | F&S | II | - | LH |
| CO3 | Discuss <i>Purvakarma, Pradhana Karma</i> and <i>Paschat Karma</i> of <i>- Kshara Karma</i> and <i>Agni Karma</i> with indications, contraindications, precautions and time of procedure. | CC | MK | K | L_VC,L &PPT ,CD,CB L | C-VC,VV- Viva,SP,CB A | F&S | II | - | NLHT20.1 |
| CO3, CO6 | Discuss <i>Purvakarma, Pradhana Karma</i> and <i>Paschat Karma</i> of <i>Uttarabasti</i> with indications, contraindications, precautions and time of procedure. | CC | MK | K | D-M,L &PPT | P-VIVA,V V- Viva,COM | F&S | II | - | NLHT20.2 |
| CO3, CO6 | Perform <i>Yonidhavana and Yoniprakshalana</i> | PSY- GUD | MK | SH | CBL,D- M,D | DOPS,OSC E,DOPS,V V-Viva,P- VIVA | F&S | II | - | NLHP20.1 |
| CO2 | Perform <i>Yoni - Pichu dharana</i> | PSY- GUD | MK | SH | D,PT | DOAP,DO PS,DOPS,P | F&S | II | - | NLHP20.2 |

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| CO2 | Perform <i>Yoni-varti</i> insertion. | PSY-GUD | MK | SH | PT,RLE | DOPS,VV-Viva,DOPS,OSCE,P-PRF | F&S | II | - | NLHP20.3 |
| CO2 | Perform <i>Yoni lepana</i> . | PSY-GUD | MK | SH | RLE,PT,D | P-PRF,VV-Viva,OSCE,DOAP | F&S | II | - | NLHP20.4 |
| CO2 | Perform <i>Yoni- avachoorana</i> . | PSY-GUD | MK | SH | D,PT | DOPS,OSCE,DOPS,DOAP,P-PRF | F&S | II | - | NLHP20.5 |
| CO2 | Perform <i>Yonipurana</i> | PSY-GUD | MK | SH | RLE,D,PT | DOAP,DOPS,DOPS,P-PRF,VV-Viva | F&S | II | - | NLHP20.6 |
| CO2 | Perform <i>Yoni dhoopana</i> . | PSY-GUD | MK | SH | PT,RLE,D | P-PRF,OSCE,DOPS,VV-Viva,DOPS | F&S | II | - | NLHP20.7 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
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| NLHT 20.1 | <i>Kshara karma and Agni karma</i> | (1hr) Teacher will discuss <i>Purvakarma, Pradhana karma</i> and <i>Paschat karma</i> of - <i>Kshara karma</i> and <i>Agni karma</i> with indications, contraindications, precautions and time of procedure. Students will comprehend. |

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| NLHT 20.2 | <i>Uttara Basti</i> | (1hr) Teacher will discuss <i>Purvakarma, Pradhana Karma</i> and <i>Paschat karma</i> of <i>Uttarabasti</i> with indications, contraindications, precautions and time of procedure. Students will comprehend. |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
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| NLHP 20.1 | <i>Yonidhavana and Yoniprakshalana</i> | (1 hr) Teacher will debrief the Indications, contraindications, time of procedure and ensure prerequisites - Consent, preparation of Kashaya / Kwatha (decoction) as per Standard Operating Procedure (SOP), Sterilized instruments, gloves, linen, Syringe, Douche can, procedure Student will perform <i>Yonidhavana and Yoniprakshalana</i> and discuss special precautions Complete documentation of the procedure in prescribed journal. |
| NLHP 20.2 | <i>Yoni-Pichu dharana</i> | (1hr) Teacher will debrief the Indications and contraindications,time of procedure and ensure prerequisites :Consent, medication -Taila (oil) / Ghrita (ghee) / Kwatha (decoction) / other proposed drug form,as per Standard Operating Procedure,Sterilized instruments,linen,Sterile Pichu (Tampoon) Students will perform the procedure and discuss special precautions Complete documentation of the procedure in the prescribed journal proforma |
| NLHP 20.3 | <i>Yoni-varti</i> | (1hr) Teacher will debrief the Indications,contraindications,time of procedure and ensure prerequisites : Consent,Sterilized instruments, linen,Varti / Suppository Students will perform the procedure of insertion of Yoni varti and discuss special precautions Complete documentation of the procedure in prescribed journal proforma. |

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| NLHP 20.4 | Yoni lepana | (1 hr) Teacher will debrief the indication,contraindications,time of procedure of Yoni lepana and ensure prerequisites : consent ,sterilized instruments, drug of application, linen. Students will perform the procedure of Yonilepana and discuss special precautions Complete documentation of the procedure in the prescribed journal proforma. |
| NLHP 20.5 | <i>Yoni-avachoorana</i> | (1hr) Teacher will debrief the Indications, contraindications, time of procedure and ensure prerequisites :consent , sterilized instruments, linen, drug Students will perform the procedure <i>Yoni-Avachoorana</i> and discuss on special precautions Complete documentation of the procedure in the prescribed journal proforma. |
| NLHP 20.6 | <i>Yonipurana</i> | (1hr) Teacher will debrief the indications,contraindications, time of procedure and ensure prerequisites : consent, sterilized instruments, linen,oil /decoction Students will perform the procedure Yonipurana and discuss special precautions Complete documentation of the procedure in the prescribed journal proforma. |
| NLHP 20.7 | <i>Yoni dhoopana</i> | (1hr) Teacher will debrief the Indications,contraindications,time of procedure and ensure prerequisites: consent, sterilized instruments,linen,dhoopana yantra,dhoopana drugs. Students will perform the procedure <i>Yoni dhoopana</i> and discuss special precautions. Complete documentation of the procedure in the prescribed journal proforma. |

Topic 21 Stree Janananga Granthi Evam Arbuda - Benign & Malignant lesions of Female Reproductive System (LH :4 NLHT: 2 NLHP: 4)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|------|---|----|----|----|-------|-----------|-----|-----|----|----|
| CO2, | Elaborate <i>Nidana, Samprapti, Bheda, Lakshana and</i> | CC | MK | K | L&PPT | S-LAQ,VV- | F&S | III | - | LH |

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| CO3 | <i>Chikitsa of Yonyarsha and Yonikanda.</i> | | | | | Viva | | | | |
| CO2, CO3 | Explain the pathologies, clinical features, investigations and treatment of Bartholinitis, Bartholin's abscess and Bartholin's cyst | CAP | MK | K | L&PPT | S-LAQ,VV-Viva | F&S | III | - | LH |
| CO2, CO3 | Diagnose and manage Bartholin abscess / Cyst. | CAN | MK | KH | D-M,C BL,D | S-LAQ,CO M,SBA,RK ,VV-Viva | F&S | III | - | NLHP21.1 |
| CO2, CO3 | Explain the pathology, clinical features, investigations and treatment of Polyp – Cervical and Endometrial (Fibroid polyp) | CC | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | III | - | LH |
| CO2, CO3 | Diagnose and manage Uterine Polyp | CAN | MK | KH | PBL,D- M,CD,C BL,D | COM,INT, CBA,VV- Viva,SBA | F&S | III | - | NLHP21.2 |
| CO2, CO3 | Explain Fibroid Uterus -Types, Clinical features, Investigations and Management | CC | MK | K | DIS,L& PPT | COM,S-LA Q,VV-Viva | F&S | III | - | LH |
| CO2, CO3 | Diagnose and manage Fibroid Uterus. | CAN | MK | KH | D-BED, CBL,D- M,PBL, CD | P-PS,P-PR F,VV-Viva, P-VIVA,P- CASE | F&S | III | - | NLHP21.3 |
| CO2, CO3, CO6 | Elaborate Benign conditions of Ovary – Ovarian tumour and Tubo-ovarian mass | CC | MK | K | L&PPT ,D,CBL, PBL,CD | S-LAQ,CO M,VV- Viva,SBA | F&S | III | - | NLHT21.1 |
| CO2, CO3 | Diagnose and plan management of Tubo-ovarian mass | CS | MK | KH | CD,D,C BL,D- M,LRI | S-LAQ,SB A,CBA,QZ ,INT | F | III | - | NLHP21.4 |
| CO2, CO3 | Identify Premalignant and Malignant lesions of Female reproductive organs.Analyze Vaccination in cervical cancer. | CC | DK | K | CD,CB L,L&PP | SBA,COM, CBA,INT, | F | III | - | NLHT21.2 |

T ,X-
Ray,LRI

VV-Viva

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|---|--|
| NLHT 21.1 | Benign conditions of Ovary and Fallopian tube | (1 hr) Teacher will elaborate and demonstrate benign conditions of Adnexa (ovary and fallopian tube) Students will discuss differential diagnosis and investigation methods. |
| NLHT 21.2 | Premalignant and Malignant lesions | (1 hr) Teacher will elaborate clinical diagnosis of premalignant and malignant lesions of Female reproductive organs and discuss diagnostic aids. students will analyze complains, clinical examination and laboratory findings and importance of Vaccination in cervical cancer. |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|---|--|
| NLHP 21.1 | Diagnose and plan management of Bartholin Cyst /Abscess | (1 hr) Teacher will demonstrate following on case of Bartholin abscess or Cyst / model / with video - 1. Clinical examination of vulva with swelling and pain. 2. Surgical management of - a) Cyst – Excision / Marsupialization b) Abscess – Incision and Drainage Student will discuss differential diagnosis and observe Excision/Marsupialization/Incision and Drainage and document. |
| NLHP 21.2 | Uterine Polyp | (1 hr) Students will analyze signs and symptoms and discuss differential diagnosis with following steps - |

| | | |
|-----------|-----------------|--|
| | | <p>1. History taking - clinical presentations; Vaginal discharge, Pain in lower abdomen, Intermenstrual bleeding, Irregular bleeding</p> <p>2. General examination</p> <p>3. Pelvic examination : Per speculum : any mass Uterus : size</p> <p>4. Investigations :</p> <p>5. Differential diagnosis</p> <p>Teacher will demonstrate polypectomy on model/ video/ case</p> |
| NLHP 21.3 | Fibroid Uterus. | <p>(1 hr)</p> <p>Students will discuss following steps and analyze diagnosis;</p> <p>1. History taking - clinical presentation; Heavy, Painful and Irregular menstruation, lump in abdomen, Pain in lower abdomen, pressure symptoms</p> <p>2. General examination</p> <p>3. Abdominal examination : with / without enlarged firm mass</p> <p>4. Pelvic examination : Uterus - size , additional mass</p> <p>5. Investigations</p> <p>6. Differential diagnosis</p> <p>Teacher will guide students to plan conservative management and demonstrate surgical management of fibroid uterus.</p> |

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|-----------|------------------------------------|--|
| NLHP 21.4 | Ovarian tumour / Tubo-ovarian mass | <p>(1 hr)</p> <p>Teacher will demonstrate a diagnosed case of Tubo-ovarian mass and surgical management with help of video/ case.</p> <p>Students will analyze method of diagnosis and appropriate treatment option with following steps -</p> <ol style="list-style-type: none"> 1. History taking - clinical presentation; Pain in lower abdomen and heaviness / associated symptoms 2. General examination 3. Abdominal examination : Abdominal mass 4. Pelvic examination : Tuboovarian mass 5. Investigations : 6. Differential diagnosis : 7. Complications : 8. Plan treatment : Young patient vs Parous woman |
|-----------|------------------------------------|--|

Topic 22 Guhya Roga - Sexually Transmitted Diseases (LH :2 NLHT: 1 NLHP: 0)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|---------------|---|----|----|----|--------------|----------------------|-----|-----|----|----------|
| CO2, CO3 | Describe <i>Hetu, Samprapti, Lakshana, Upadrava, and Chikitsa</i> of <i>Upadamsha, Firanga, and Puyameha</i> | CC | MK | KH | L&PPT | COM,S-LA Q,VV-Viva | F | III | - | LH |
| CO2, CO3 | Describe Sexually Transmitted Diseases with causative micro-organisms, pathology, clinical features, investigations and management. | CC | MK | KH | L&PPT | VV-Viva,S-LAQ | F&S | III | - | LH |
| CO2, CO3, CO6 | Diagnose and plan management of <i>Guhya Roga</i> (Sexually Transmitted Diseases) | CS | MK | KH | L&GD, CD,LRI | CBA,QZ ,V V-Viva,SBA | F&S | III | - | NLHT22.1 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|---|--------------------------------|
| NLHT 22.1 | <i>Guhya roga</i> (Sexually Transmitted Diseases) | (1 hr) |

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|--|---|
| | Teachers will elaborate clinical features, diagnosis and management of <i>Guhya roga</i> (STDs) Students will have Group discussion and analysis of preventive measures. |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|------|-------------------|-----------------------------------|
|------|-------------------|-----------------------------------|

Topic 23 Yoni srava - Vaginal Discharge (LH :1 NLHT: 1 NLHP: 2)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|---------------------|---|-----|----|----|--------------------------------------|--|-----|-----|----|----------|
| CO2, CO3 | Describe <i>Hetu, Samprapti, Lakshana and Chikitsa of Shweta Pradara.</i> | CC | MK | KH | L&PPT | VV-Viva,S- LAQ | F&S | III | - | LH |
| CO2, CO3 | Explain Infections of Pelvic organs ; i) Due to a specific infection ii) Due to sensitive reaction iii) Due to Vaginal discharge or urinary contamination | CC | MK | K | DIS,PE R,L&PP T ,D-BE D,CBL | P-PRF,CL- PR,SP,P- VIVA,PRN | F&S | III | - | NLHT23.1 |
| CO2, CO3, CO6 | Diagnose and manage Abnormal Vaginal Discharges / Leucorrhoea (Non-infective) | CAN | MK | SH | CBL,PB L,D,CD, DA | CBA,P-CA SE,OSCE, VV- Viva,DOA P | F&S | III | - | NLHP23.1 |
| CO2, CO3, CO6 | Diagnose and manage Abnormal Vaginal Discharges (Infective) | CAN | MK | SH | PT,DA, D-BED, CBL,C D | P-CASE,P- VIVA,VV- Viva,P- PRF,DOAP | F&S | III | - | NLHP23.2 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|-----------------------------|--------------------------------|
| NLHT 23.1 | Infections of Pelvic organs | (1 hr) |

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| | Students will be assigned with research project on Infections of Pelvic organs and have peer discussion on underlying etiology. Teacher will elaborate Infections of Pelvic organs - i) Due to specific infection ii) Due to sensitive reaction iii) Due to Vaginal discharge or urinary contamination |
|--|--|

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|-----------|---|--|
| NLHP 23.1 | Abnormal Vaginal Discharges / Leucorrhoea | (1 hr) Teacher will diagnose and manage Abnormal Vaginal Discharge (Non-infective) Students will discuss importance of steps involved - History taking, General Physical Examination, Pelvic Examination, Investigation, Differential diagnosis and analyze management of Lucorrhoea. |
| NLHP 23.2 | Abnormal Vaginal Discharges (Infective) | (1 hr) Teacher will diagnose and manage Abnormal Vaginal Discharge (Infective) Students will discuss importance of steps involved - History taking, General Physical Examination, Pelvic Examination, Investigation, Differential diagnosis and analyze management. |

Topic 24 Stana Roga - Breast Disorders (LH :3 NLHT: 1 NLHP: 3)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-------------|---|-----|----|----|-------|-----------------------|-----|-----|----|----|
| CO1, CO2 | Explain the Anatomy of Breast and Anatomical defects. | CAP | MK | K | L&PPT | S-LAQ,CO M,VV-Viva | F&S | III | - | LH |
| CO2, CO3 | | CC | MK | K | L&PPT | VV-Viva,S- LAQ | F&S | III | - | LH |

| | | | | | | | | | | |
|---------------|---|---------|----|----|--------------------------|--------------------------------|-----|-----|---|----------|
| | Elaborate Stana Roga - Stana Keelaka, Stana Granthi and Stanarbuda with Nidana, Samprapti, Lakshana and Chikitsa. | | | | | | | | | |
| CO2, CO3 | Describe causative factors, etiopathogenesis, clinical features, investigations, complications and management of Mastalgia, Fibroadenoma, Carcinoma breast. | CC | DK | K | L&PPT | S-LAQ,VV-Viva | F&S | III | - | LH |
| CO2 | Demonstrate Self Breast examination | PSY-SET | MK | KH | SIM,D-M,L_V C,CBL, D | P-PRF,VV-Viva,DOA P,OSCE,SP | F&S | III | - | NLHT24.1 |
| CO2, CO3, CO6 | Illustrate Investigations in diseases of Breast - 1. Sono-mammogram 2. Fine Needle Aspiration Cytology (FNAC)3. Biopsy | CAN | MK | KH | CBL,C D,LRI,L_V C,L &PPT | P-VIVA,P M,VV-Viva ,SP,P-EXAM | F&S | III | - | NLHP24.1 |
| CO2, CO3, CO6 | Diagnose and manage Fibroadenoma Breast | CAN | MK | KH | D-M,C BL,CD, X-Ray | VV-Viva,P-CASE,S-L AQ,CBA,S BA | F | III | - | NLHP24.2 |
| CO2, CO3, CO6 | Diagnose Breast carcinoma | CAN | MK | K | CBL,LR I,L&PPT ,CD | SBA,VV-Viva,CBA | F&S | III | - | NLHP24.3 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|-------------------------|---|
| NLHT 24.1 | Self Breast examination | (1hr) Teacher will demonstrate steps of self breast examination by Video / Pictorial demonstration. Students will discuss the importance of Self Breast examination. |

| Non Lecture Hour Practical | | |
|-----------------------------------|--|--|
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 24.1 | Investigations in diseases of Breast | <p>(1 hr) Teacher will discuss various methods of investigation in the diseases of Breast and demonstrate procedure by Video / Pictorial demonstration Students will analyze and interpret -</p> <ol style="list-style-type: none"> i) Sono-mammogram ii) Fine Needle Aspiration Cytology (FNAC) iii) Biopsy |
| NLHP 24.2 | Fibroadenoma Breast | <p>(1 hr) Teacher will demonstrate diagnosis and management of Fibroadenoma Breast on case/ model. Students will elaborate following steps in cases of Fibroadenoma Breast -</p> <ol style="list-style-type: none"> 1. History taking 2. Examination 3. Investigations 4. Counselling 5. Management 6. Indications for referral |
| NLHP 24.3 | Clinical diagnosis of Breast carcinoma | <p>(1 hr) Teacher will demonstrate clinical features and methods of diagnosis of Breast carcinoma on case/ model. Students will elaborate following steps in cases of diagnosis of Breast carcinoma -</p> <ol style="list-style-type: none"> 1. History taking 2. Examination 3. Provisional diagnosis |

4. Need of Investigations
5. Diagnosis and referral

Topic 25 Shastra Karma in Stree Roga - Surgical Procedures in Gynaecology (LH :4 NLHT: 1 NLHP: 4)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|----------|--|----|----|----|-------------|--------------------------|-----|-----|----|----------|
| CO3 | Elaborate Preoperative preparation with respect to <i>Prasuti Stree Roga</i> | CC | NK | K | L&PPT | S-LAQ,VV-Viva | F | III | - | LH |
| CO3 | Explain Postoperative care in <i>Prasuti Stree Roga</i> | CC | NK | K | L&PPT | S-LAQ,VV-Viva | F | III | - | LH |
| CO3 | Explain <i>Granthi Nirharana</i> (Cystectomy) | CC | DK | K | L&PPT | S-LAQ,VV-Viva | F&S | III | - | LH |
| CO3 | Explain <i>Garbhashaya Arbuda Nirharana</i> (Myomectomy) | CC | DK | K | L&PPT | VV-Viva,COM,S-LAQ | F | III | - | LH |
| CO3 | Explain the Steps of Laparoscopic Tubal Ligation. | CC | DK | K | L_VC | P-VIVA,VV-Viva | F&S | III | - | NLHT25.1 |
| CO3, CO6 | Describe the steps of surgical procedure in <i>Udaragata Garbhashaya Nirharana</i> - Abdominal Hysterectomy | CC | DK | K | D,CBL, L_VC | VV-Viva,COM,S-LAQ | F&S | III | - | NLHP25.1 |
| CO3, CO6 | Describe the steps of surgical procedure in <i>Yonimarga-gata Garbhashaya Nirharana</i> - Vaginal Hysterectomy | CC | DK | K | D,CBL, L_VC | S-LAQ,VV-Viva,COM | F&S | III | - | NLHP25.2 |
| CO3, CO6 | Describe the steps of surgical procedure in <i>Garbhashayamukha Vistrutikarana</i> and <i>Lekhana</i> . (Dilatation and Curettage) | CC | DK | K | D,D-M,CBL | S-LAQ,P-VIVA,VV-Viva,COM | F&S | III | - | NLHP25.3 |
| CO3, CO6 | Describe the steps of Surgical sterilization – Tubectomy and Vasectomy | CC | DK | K | L_VC,D | VV-Viva,S-LAQ | F&S | III | - | NLHP25.4 |

| Non Lecture Hour Theory | | |
|-----------------------------------|-----------------------------|--|
| S.No | Name of Activity | Description of Theory Activity |
| NLHT 25.1 | Laparoscopic Tubal Ligation | (1 hr) Teacher will demonstrate laparoscopic procedure of Tubal Ligation through Video / Case Students will observe and document steps of Laparoscopic Tubal Ligation. |
| Non Lecture Hour Practical | | |
| S.No | Name of Practical | Description of Practical Activity |
| NLHP 25.1 | Abdominal Hysterectomy | (1 hr) Teacher will demonstrate the steps of surgical procedure in <i>Udaragata Garbhashaya Nirharana</i> - Abdominal Hysterectomy on Video / Case. Students will observe the steps of Abdominal Hysterectomy, discuss precautions and possible complications. |
| NLHP 25.2 | Vaginal Hysterectomy | (1 hr) Teacher will demonstrate the steps of surgical procedure in <i>Yonimarga-gata Garbhashaya nirharana</i> - Vaginal Hysterectomy on Video / Case. Students will observe the steps of Vaginal Hysterectomy, discuss precautions and possible complications. |
| NLHP 25.3 | Dilatation and Curettage | (1 hr) Teacher will demonstrate steps of Dilatation and Curettage and explain the possible complications on Video / Case. Students will observe, discuss the indications and document. |
| NLHP 25.4 | Tubectomy and Vasectomy | (1 hr) |

Teacher will demonstrate steps of Surgical sterilization – Tubectomy and Vasectomy and explain the possible complications on Video / Case.
Students will observe,analyze the methods and document.

Topic 26 Stree Roga Sambandhi Aushadhi- Classical Formulations (LH :1 NLHT: 1 NLHP: 0)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|---|-----|----|----|-----------------------|------------------|-----|-----|----|----------|
| CO3 | Demonstrate Vishishta Phalashruti (Indication) of Formulations used in Prasuti and Streeroga. Churna Kalpana: Pushyanuga Churna, Shatpushpa Churna, Shatavari Churna, Nagakeshara Churna,Ghrita Kalpana: Phalaghrita, Kashmaryadi Ghrita, Vidaryadi GhritaTaila Kalpana: Dahtakyadi taila, Shatpushpa taila, Jatyadi Taila, Narayana Taila,Asava and Arishta: Ashokarishta, Kumaryasava,Rasa aushadhi: Rajahpravartini Vati, Pratapalankeshwar Rasa, Garbhapala Rasa, Pushpadhanva Rasa,Kwatha : Nyagrodhadi Kwatha, Dashmoola Kwatha, Panchavalakala KwathaPaka Kalpana: Sobhagya Shunthi Paka, Puga Khanda/ Puga Paka,Avaleha: Jeerakavaleha, Kushmandavaleha | CAP | MK | KH | L&GD, DA | INT,VV- Viva | F&S | III | - | LH |
| CO3 | Adapt the indication and importance of formulation used in <i>Prasuti Stree Roga</i> . | CAP | MK | KH | L&GD, PL,PER ,DIS,D A | SP,CL-PR, PRN,QZ | F | III | - | NLHT26.1 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|--|--|
| NLHT 26.1 | Application of Formulations in <i>Prasuti Stree Roga</i> | (1 hr) Students will have class room presentation/ Peer discussion Teacher will guide students to develop critical thinking about use of formulations in <i>Prasuti Stree</i> |

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| | | <i>Roga.</i> |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|------|-------------------|-----------------------------------|
|------|-------------------|-----------------------------------|

Topic 27 National Maternal Health Programs (LH :1 NLHT: 2 NLHP: 0)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|---------|----|----|---------------|-------------------------|-----|-----|----|----------|
| CO5 | Explain the aims, objectives, and benefits of Maternal and Child Health care programs - "Janani Suraksha yojana""Janani Shishu Suraksha Karyakram""Pradhan Mantri Surakshit Matritva Abhiyan""Mission Indradhanush""Menstrual hygiene""LaQshya Program""MAA program" | CC | MK | K | L&PPT | QZ ,S-LAQ ,VV- Viva,COM | F&S | III | - | LH |
| CO5 | Follow Sexual and Reproductive Health Rights. | AFT-REC | MK | KH | BL,DIS, PL,FC | COM,VV- Viva,INT,Q Z | F | III | - | NLHT27.1 |
| CO5 | Explain the goals, objectives, and strategies of Reproductive and Child Health programme. | CC | MK | K | FV,DIS | QZ ,VV- Viva,RK | F&S | III | - | NLHT27.2 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|---|--|
| NLHT 27.1 | Sexual and Reproductive Health Rights | (1 hr) Students will do research on Sexual and Reproductive Health rights and have peer discussion. Teacher will explain the key points on sexual health, sexual rights, reproductive health and reproductive rights |
| NLHT 27.2 | Reproductive and Child health care services | (1 hr) |

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| | | Teacher will equip students to get familiarized with Health care facility and functionality. Students will discuss and document the aspects of early identification and tracking of the individual beneficiary throughout the reproductive lifecycle of women and promote, monitor and support the reproductive, maternal, new-born and child health (RMNCH) schemes/programme delivery and reporting. |
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Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|------|-------------------|-----------------------------------|
|------|-------------------|-----------------------------------|

Topic 28 Medical ethics, Record keeping and Audit in Obstetrics and Gynaecology (LH :1 NLHT: 1 NLHP: 1)

| A3 | B3 | C3 | D3 | E3 | F3 | G3 | H3 | I3 | K3 | L3 |
|-----|--|-----|----|----|---------------|-------------------|-----|-----|----|----------|
| CO6 | Explain the importance of Medical ethics and documentation in Obstetrics & Gynaecology | CC | MK | K | L&PPT | S-LAQ,RK, VV-Viva | F&S | III | - | LH |
| CO6 | Demonstrate documentation and audit in <i>Prasuti Stree Roga</i> | CAP | MK | KH | DIS,PT | RK | F&S | III | - | NLHT28.1 |
| CO6 | Practice documentation - Antenatal Care, Intranatal care, Postnatal care, Tubectomy, Birth registry, Surgery and referral. | CAP | MK | KH | FV,BL,I BL,PT | VV-Viva,RK | F&S | III | - | NLHP28.1 |

Non Lecture Hour Theory

| S.No | Name of Activity | Description of Theory Activity |
|-----------|-------------------------|--|
| NLHT 28.1 | Documentation and audit | (1 hr) Teacher will demonstrate documentation and audit in <i>Prasuti Stree Roga</i> . Students will observe and analyze Medical records - registers, consent sheets, case sheets and explain components in audit process. |

Non Lecture Hour Practical

| S.No | Name of Practical | Description of Practical Activity |
|------|-------------------|-----------------------------------|
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| | | |
|-----------|------------------------------|---|
| NLHP 28.1 | Medical record documentation | (1 hr) Teacher will enable students to gain competency in documentation. Students will Practice documentation in Antenatal Care, Intranatal care, Postnatal care, Tubectomy, Birth registry, Surgery and referral. |
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Table 4 : NLHT Activity

(*Refer table 3 of similar activity number)

| Activity No* | CO No | Activity details |
|--------------|---------|---|
| 1.1 | CO1 | Anatomy of female genital organs |
| 1.2 | CO1 | <i>Asthi, Sandhi and Parimana of Stree Shroni</i> |
| 2.1 | CO2 | Concept of <i>Raja, Artava and Shukra</i> . |
| 2.2 | CO1 | Physiology of Menstruation. |
| 2.3 | CO1 | Importance of <i>Rutukala</i> |
| 2.4 | CO1 | <i>Tridosha and Panchamahabhuta in Rutuchakra</i> . |
| 3.1 | CO1 | <i>Garbha and Garbhavakranti</i> |
| 3.2 | CO1 | <i>Apara, Nabhinadi and Garbhodaka Vikaras</i> (abnormalities of placenta, umbilical cord and amniotic fluid) with clinical significance. |
| 3.3 | CO1 | <i>Garbha Poshana</i> (fetal nourishment) and <i>Garbha Vridhhikara Bhava</i> . |
| 3.4 | CO1 | Month wise fetal development |
| 4.1 | CO1 | <i>Garbhini Nidana</i> : Diagnosis of pregnancy |
| 4.2 | CO1,CO4 | High Risk Pregnancy |
| 4.3 | CO1,CO5 | Demographic Statistics in Obstetrics |
| 5.1 | CO1,CO5 | Abortion |
| 5.2 | CO1 | Intra uterine growth restriction |
| 5.3 | CO1,CO6 | Intra uterine fetal demise. |
| 5.4 | CO1 | <i>Rakta Gulma</i> |

| | | |
|------|---------|---|
| 7.1 | CO3,CO4 | Essential drugs for labour practice; as per National protocol. |
| 8.1 | CO4 | Prolonged Labour |
| 8.2 | CO4 | Postmaturity |
| 9.1 | CO4 | <i>Moodhagarbha - Bheda and Gati.</i> |
| 9.2 | CO4 | Obstetric Emergencies |
| 9.3 | CO1,CO4 | Abnormal presentations – face, brow, shoulder presentations |
| 10.1 | CO4 | Puerperal diseases. |
| 11.1 | CO4 | Breast milk and feeding techniques. |
| 11.2 | CO4 | Mastitis and Breast Abscess. |
| 12.1 | CO2 | Neuroendocrinology with respect to Puberty |
| 12.2 | CO2 | Applied aspects - Puberty and Adolescence |
| 13.1 | CO3 | Instruments used in Obstetrics and Gynaecology |
| 14.1 | CO2,CO6 | Gynaecological history taking. |
| 15.1 | CO2 | Ashtartava dusti |
| 15.2 | CO2,CO6 | <i>Artava kshaya, Anartava , Asrugdara & Artava vruddhi</i> |
| 16.1 | CO2,CO6 | Hormone Replacement Therapy (HRT) |
| 17.1 | CO2 | <i>Shlokas of Yonivyapad</i> |
| 17.2 | CO2 | <i>Panchakarma in Yonivyapad</i> |

| | | |
|------|-------------|--|
| 17.3 | CO2,CO6 | Case studies on different <i>Yonivyapad</i> |
| 18.1 | CO2,CO3 | Role of <i>Panchakarma</i> in <i>Vandhyatwa</i> |
| 18.2 | CO2 | Shukra Dushti and semen abnormalities |
| 18.3 | CO2 | Assisted Reproductive Techniques (ART) |
| 19.1 | CO2 | Diagnostic tools |
| 20.1 | CO3 | <i>Kshara karma</i> and <i>Agni karma</i> |
| 20.2 | CO3,CO6 | <i>Uttara Basti</i> |
| 21.1 | CO2,CO3,CO6 | Benign conditions of Ovary and Fallopian tube |
| 21.2 | CO2,CO3 | Premalignant and Malignant lesions |
| 22.1 | CO2,CO3,CO6 | <i>Guhya roga</i> (Sexually Transmitted Diseases) |
| 23.1 | CO2,CO3 | Infections of Pelvic organs |
| 24.1 | CO2 | Self Breast examination |
| 25.1 | CO3 | Laparoscopic Tubal Ligation |
| 26.1 | CO3 | Application of Formulations in <i>Prasuti Stree Roga</i> |
| 27.1 | CO5 | Sexual and Reproductive Health Rights |
| 27.2 | CO5 | Reproductive and Child health care services |
| 28.1 | CO6 | Documentation and audit |

Table 5 : List of Practicals

(*Refer table 3 of similar activity number)

| Practical No* | CO No | Practical Activity details |
|----------------------|--------------|--|
| 1.1 | CO1 | <i>Tryavarta Yoni</i> |
| 1.2 | CO1 | Spatial orientation and Blood supply of uterus and adnexa |
| 1.3 | CO1,CO4 | Female bony pelvis |
| 2.1 | CO1 | <i>Rajaswala paricharya</i> |
| 3.1 | CO1 | <i>Garbha Samskara and Pumsavana Samskara.</i> |
| 3.2 | CO1,CO4 | Fetus-in-utero |
| 4.1 | CO1 | Clinical Diagnosis of pregnancy |
| 4.2 | CO1 | <i>Garbha Vikruti</i> |
| 4.3 | CO1,CO4 | Antenatal History taking and Examination |
| 4.4 | CO1,CO5 | Investigations in pregnancy |
| 5.1 | CO1 | Ectopic pregnancy |
| 5.2 | CO1,CO5 | <i>Garbhashaya Mukha Vistrutikarana evam Garbhasaya Lekhana - Dilatation and Curettage</i> <i>Garbhashaya Greeva Samvritikarana - Cervical Encirclage</i> |
| 5.3 | CO1 | Intra Uterine Growth Restriction, Oligohydramnios and Polyhydramnios |
| 5.4 | CO1,CO6 | Intrauterine Fetal Demise (IUFD) |
| 6.1 | CO1,CO3,CO6 | <i>Garbhini Pandu - Anaemia in pregnancy.</i> |
| 6.2 | CO1,CO3,CO6 | <i>Yamala-garbha - Twin Pregnancy (1 hr)</i> |

| | | |
|------|-------------|---|
| 6.3 | CO1,CO3,CO6 | <i>Garbhini Jwara</i> - fever in pregnancy. |
| 6.4 | CO1,CO3,CO6 | Hypertensive disorders in Pregnancy |
| 6.5 | CO1,CO3,CO5 | Antepartum Hemorrhage -Placenta previa |
| 6.6 | CO1,CO3,CO5 | Antepartum Hemorrhage - Abruptio placenta |
| 7.1 | CO4,CO5 | Labour Room Setup |
| 7.2 | CO4,CO5 | Diagnosis of Labour |
| 7.3 | CO4 | Fetal skull and labour |
| 7.4 | CO4 | Adequacy of pelvis |
| 7.5 | CO4 | Mechanism of Labour |
| 7.6 | CO4 | Management of stages of labour |
| 7.7 | CO3,CO4 | Plot partograph |
| 7.8 | CO4 | Intrapartum fetal monitoring techniques |
| 7.9 | CO4,CO5 | Stages of Labour |
| 7.10 | CO4 | Labour monitoring |
| 7.11 | CO3,CO4 | Episiotomy |
| 7.12 | CO4,CO5 | <i>Jatamatra Paricharya</i> |
| 8.1 | CO4 | Preterm labour |
| 8.2 | CO4 | Postpartum Hemorrhage |
| 8.3 | CO4 | Retained placenta |

| | | |
|------|-------------|--|
| 8.4 | CO4 | Postpartum hemorrhage management. |
| 9.1 | CO4 | Assisted Breech delivery. |
| 9.2 | CO4 | Assesment of Cephalo-Pelvic Disproportion |
| 9.3 | CO4 | Complications of <i>Moodha Garbha</i> |
| 9.4 | CO1,CO3,CO4 | 1. Bishop's score and Induction/ Augmentation of Labour 2. Assisted labour techniques |
| 10.1 | CO4 | Examination of a puerperal woman - abdominal, perineal, and breast. |
| 10.2 | CO4 | <i>Sootika Vyadhi</i> |
| 10.3 | CO4,CO5 | Contraception |
| 11.1 | CO4 | Techniques of Breastfeeding. |
| 11.2 | CO4 | Breast Engorgement, Mastitis, Breast abscess |
| 12.1 | CO1,CO2 | Development of Female reproductive system |
| 12.2 | CO1,CO2 | Anomalies of Female reproductive system |
| 12.3 | CO2 | Puberty |
| 12.4 | CO2 | Identify normal and abnormal Pubertal changes. |
| 13.1 | CO3 | Instrument sterilization methods |
| 13.2 | CO3 | Instruments - <i>Sandansha and Swastika yantra</i> |
| 13.3 | CO3 | Instruments - <i>Shalaka,Tala & Nadi yantra</i> |
| 13.4 | CO3 | Sharp instruments. |

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| 14.1 | CO2,CO6 | Examination in Gynaecology including Breast |
| 14.2 | CO2,CO6 | Abdominal Examination in Gynaecology |
| 14.3 | CO2 | Plan Diagnostic procedures |
| 14.4 | CO2,CO6 | Vaginal ,Recto vaginal & Per Rectal examination |
| 15.1 | CO2 | Artava kshaya - Oligomenorrhoea & Hypomenorrhoea |
| 15.2 | CO2,CO6 | Anartava - Amenorrhoea evaluation and management |
| 15.3 | CO2,CO6 | Poly Cystic Ovarian Syndrome (PCOS) |
| 15.4 | CO2,CO6 | Management of <i>Asrugdara</i> and <i>Artava Vruddhi</i> - Structural and Non-structural / Systemic causes |
| 16.1 | CO2 | Menopause |
| 16.2 | CO2 | Plan management of Menopause |
| 17.1 | CO2 | <i>Udavarta (Kastartava) / Vatala/ Vipluta /Paripluta yonivyapad.</i> |
| 17.2 | CO2,CO6 | <i>Pittala/ Rudhirakshara/ Karnini/ Acharana/ Aticharana yonivyapad</i> |
| 17.3 | CO2,CO6 | Dysmenorrhoea |
| 17.4 | CO2,CO6 | Endometriosis and Adenomyosis. |
| 17.5 | CO2,CO6 | Pelvic Inflammatory Disease (PID) |
| 17.6 | CO2,CO6 | Case presentation on <i>Yonivyapad</i> |
| 17.7 | CO2,CO6 | Cervical erosion |
| 17.8 | CO2,CO6 | <i>Yoni kandu</i> - Pruritus Vulvae |
| 17.9 | CO2,CO6 | Cystocele & Rectocele |
| 17.10 | CO2,CO6 | Uterovaginal prolapse |

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| 18.1 | CO2,CO6 | Male partner evaluation in Infertility |
| 18.2 | CO2,CO6 | Female partner evaluation in Infertility |
| 18.3 | CO2 | Semen Analysis. |
| 18.4 | CO2 | Interpret Ultrasound / Follicular study |
| 18.5 | CO2 | Hysterosalpingography (HSG) |
| 18.6 | CO2 | Cervical mucous tests |
| 18.7 | CO2 | Intra Uterine Insemination (IUI) |
| 18.8 | CO2 | Practical case presentation on Infertility |
| 19.1 | CO2 | PAP test, Visual inspection and Colposcopy |
| 19.2 | CO2,CO6 | Cervical biopsy and Endometrial biopsy |
| 20.1 | CO3,CO6 | <i>Yonidhavana and Yoniprakshalana</i> |
| 20.2 | CO2 | <i>Yoni-Pichu dharana</i> |
| 20.3 | CO2 | <i>Yoni-varti</i> |
| 20.4 | CO2 | Yoni lepana |
| 20.5 | CO2 | <i>Yoni-avachoorana</i> |
| 20.6 | CO2 | <i>Yonipurana</i> |
| 20.7 | CO2 | <i>Yoni dhoopana</i> |
| 21.1 | CO2,CO3 | Diagnose and plan management of Bartholin Cyst /Abscess |
| 21.2 | CO2,CO3 | Uterine Polyp |
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|------|-------------|---|
| 21.3 | CO2,CO3 | Fibroid Uterus. |
| 21.4 | CO2,CO3 | Ovarian tumour / Tubo-ovarian mass |
| 23.1 | CO2,CO3,CO6 | Abnormal Vaginal Discharges / Leucorrhoea |
| 23.2 | CO2,CO3,CO6 | Abnormal Vaginal Discharges (Infective) |
| 24.1 | CO2,CO3,CO6 | Investigations in diseases of Breast |
| 24.2 | CO2,CO3,CO6 | Fibroadenoma Breast |
| 24.3 | CO2,CO3,CO6 | Clinical diagnosis of Breast carcinoma |
| 25.1 | CO3,CO6 | Abdominal Hysterectomy |
| 25.2 | CO3,CO6 | Vaginal Hysterectomy |
| 25.3 | CO3,CO6 | Dilatation and Curettage |
| 25.4 | CO3,CO6 | Tubectomy and Vasectomy |
| 28.1 | CO6 | Medical record documentation |

Table 6 : Assessment Summary: Assessment is subdivided in A to H points

6 A : Number of Papers and Marks Distribution

| Subject Code | Papers | Theory | Practical/Clinical Assessment (200) | | | | | Grand Total |
|--------------|--------|--------|-------------------------------------|------|-------------|----|-----------|-------------|
| | | | Practical | Viva | Elective | IA | Sub Total | |
| AyUG-PS | 2 | 200 | 100 | 60 | 10 (Set-TA) | 30 | 200 | 400 |

6 B : Scheme of Assessment (Formative and Summative)

| PROFESSIONAL COURSE | FORMATIVE ASSESSMENT | | | SUMMATIVE ASSESSMENT |
|---------------------|-------------------------|---------------------------|---------------------------|----------------------|
| | First Term (1-6 Months) | Second Term (7-12 Months) | Third Term (13-18 Months) | |
| Third | 3 PA & First TT | 3 PA & Second TT | 3 PA | UE** |

PA: Periodical Assessment; **TT:** Term Test; **UE:** University Examinations; **NA:** Not Applicable.

**University Examination shall be on entire syllabus

6 C : Calculation Method for Internal assessment Marks

| TERM | PERIODICAL ASSESSMENT* | | | | | TERM TEST** | TERM ASSESSMENT | |
|-----------------|--|--------------|--------------|-------------------|---------------------------------|-----------------------------------|----------------------|--------------------------|
| | A 5 | B | C | D | E | F | G | H |
| | 1 (15 Marks) | 2 (15 Marks) | 3 (15 Marks) | Average (A+B+C/3) | Converted to 30 Marks (D/15*30) | Term Test (Marks converted to 30) | Sub Total _/60 Marks | Term Assessment (.../30) |
| FIRST | | | | | | | E+F | (E+F)/2 |
| SECOND | | | | | | | E+F | (E+F)/2 |
| THIRD | | | | | | NIL | | E |
| Final IA | Average of Three Term Assessment Marks as Shown in 'H' Column. | | | | | | | |
| | Maximum Marks in Parentheses *Select an Evaluation Method which is appropriate for the objectives of Topics from the Table 6 D for Periodic assessment. Conduct 15 marks assessment and enter marks in A, B, and C. ** Conduct Theory (100 Marks)(MCQ(20*1 Marks), SAQ(8*5), LAQ(4*10)) and Practical (100 Marks) Then convert to 30 marks. | | | | | | | |

6 D : Evaluation Methods for Periodical Assessment

| S. No. | Evaluation Methods |
|--------|--|
| 1. | Practical / Clinical Performance |
| 2. | Viva Voce, MCQs, MEQ (Modified Essay Questions/Structured Questions) |
| 3. | Open Book Test (Problem Based) |
| 4. | Summary Writing (Research Papers/ Samhitas) |
| 5. | Class Presentations; Work Book Maintenance |
| 6. | Problem Based Assignment |
| 7. | Objective Structured Clinical Examination (OSCE), Objective Structured Practical Examination (OPSE), Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedures (DOP), Case Based Discussion (CBD) |
| 8. | Extra-curricular Activities, (Social Work, Public Awareness, Surveillance Activities, Sports or Other Activities which may be decided by the department). |
| 9. | Small Project |
| 10. | Activities Indicated in Table 3 - Column G3 as per Indicated I, II or III term in column I3. |

Topics for Periodic Assessments

| PA | PAPER 1 | PAPER 2 |
|--|-----------------|-------------------|
| PA 1 | Topic 1 Topic 2 | Topic 12 |
| PA 2 | Topic 3 | Topic 13 Topic 14 |
| PA 3 | Topic 4 | Topic 15 |
| TERM TEST 1 – Entire syllabus of Term 1 of Paper 1 and 2 | | |
| PA 4 | Topic 5 | Topic 17 |
| PA 5 | Topic 6 | Topic 18 |
| PA 6 | Topic 7 | Topic 20 |
| TERM TEST 2 – Entire syllabus of Term 2 of Paper 1 and 2 | | |
| PA 7 | Topic 9 | Topic 21 |
| PA 8 | Topic 10 | Topic 23 |
| PA 9 | Topic 11 | Topic 24 |

6 E : Question Paper Pattern

III PROFESSIONAL BAMS EXAMINATIONS

AyUG-PS

PAPER-I

Time: 3 Hours Maximum Marks: 100

INSTRUCTIONS: All questions compulsory

| | | Number of Questions | Marks per question | Total Marks |
|-----|---------------------------------|----------------------------|---------------------------|--------------------|
| Q 1 | MULTIPLE CHOICE QUESTIONS (MCQ) | 20 | 1 | 20 |
| Q 2 | SHORT ANSWER QUESTIONS (SAQ) | 8 | 5 | 40 |
| Q 3 | LONG ANSWER QUESTIONS (LAQ) | 4 | 10 | 40 |
| | | | | 100 |

Similar for Paper II.

6 F : Distribution of theory examination

| Paper 1 (PRASUTI TANTRA - OBSTETRICS) | | | | | |
|--|---|--------------------|------------|------------|------------|
| Sr. No | A List of Topics | B Marks | MCQ | SAQ | LAQ |
| 1 | Stree Vishishta Shareera Vigyana - Anatomy of Female Reproductive System | 30 | Yes | Yes | Yes |
| 2 | Rutuchakra - Menstrual Cycle | | Yes | Yes | Yes |
| 3 | Garbha Vigyana - Embryology & Fetal Development | | Yes | Yes | Yes |
| 4 | Garbhini Vigyana - Physiology of Pregnancy & Antenatal Care | | Yes | Yes | Yes |
| 5 | Garbha Vyapad - Fetal Pathologies | 40 | Yes | Yes | Yes |
| 6 | Garbhini Vyapad - Minor Ailments and Major Disorders of Pregnancy | | Yes | Yes | Yes |
| 7 | Prasava Vigyana - Labour | | Yes | Yes | Yes |
| 8 | Prasava Vyapad - Labour Complications & Obstetric Emergencies. | 30 | Yes | Yes | Yes |
| 9 | Moodhagarbha - Obstructed Labour | | Yes | Yes | Yes |
| 10 | Sootika Vigyana - Puerperium | | Yes | Yes | Yes |
| 11 | Stanya Vigyana - Lactation | | Yes | Yes | No |
| Total Marks | | 100 | | | |

| Paper 2 (STREE ROGA - GYNAECOLOGY) | | | | | |
|---|---|--------------------|------------|------------|------------|
| Sr. No | A List of Topics | B Marks | MCQ | SAQ | LAQ |
| 12 | Stree Prajanananga Nirmana and Vikruti - Development of Female Reproductive System with Anomalies. | 30 | Yes | Yes | Yes |
| 13 | Yantra evam Shastra - Instruments | | Yes | Yes | No |
| 14 | Stree Rugna Parikshana - Gynaecological Examination | | No | Yes | No |
| 15 | Artava Vyapad - Menstrual Disorders | | Yes | Yes | Yes |
| 16 | Rajonivritti - Menopause | | Yes | Yes | Yes |
| 17 | Yoni Vyapad - Disorders of Female Reproductive system | 40 | Yes | Yes | Yes |
| 18 | Vandhyatwa - Infertility | | Yes | Yes | Yes |
| 19 | Vyadhi Vinischaya Upaya - Diagnostic Tools and Techniques | | Yes | Yes | No |

| | | | | | |
|--------------------|---|------------|-----|-----|-----|
| 20 | Sthanika Upakrama - In situ Treatment Modalities | | Yes | Yes | Yes |
| 21 | Stree Janananga Granthi Evam Arbuda - Benign & Malignant lesions of Female Reproductive System | 30 | Yes | Yes | Yes |
| 22 | Guhya Roga - Sexually Transmitted Diseases | | Yes | Yes | No |
| 23 | Yoni srava - Vaginal Discharge | | Yes | Yes | Yes |
| 24 | Stana Roga - Breast Disorders | | Yes | Yes | Yes |
| 25 | Shastra Karma in Stree Roga - Surgical Procedures in Gynaecology | | Yes | Yes | Yes |
| 26 | Stree Roga Sambandhi Aushadhi- Classical Formulations | | Yes | Yes | No |
| 27 | National Maternal Health Programs | | Yes | Yes | No |
| 28 | Medical ethics, Record keeping and Audit in Obstetrics and Gynaecology | | No | Yes | No |
| Total Marks | | 100 | | | |

6 G : Instructions for UG Paper Setting & Blue print

1. All questions shall be compulsory.
2. Questions shall be drawn based on Table 6F, which provides the topic name, types of questions (MCQ(Multiple Choice Question), SAQ(Short Answer Question), LAQ(Long Answer Question)).
3. The marks assigned in Table 6F for each topic/group of topics shall be considered as the maximum allowable marks for that topic/group of topics.
4. Ensure that the total marks allocated per topic/group of topics do not exceed the limits specified in Table 6F.
5. Refer to Table 6F before setting the questions. Questions shall be framed only from topics where the type is marked as “YES”, and avoided if marked as “NO”.
6. Each 100-mark question paper shall contain:
 - 20 MCQs
 - 8 SAQs
 - 4 LAQs
7. MCQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 3.
 - Questions from the Nice to Know part of syllabus shall not exceed 2.
8. SAQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 1.
 - No questions shall be drawn from the Nice to Know part of syllabus.
 - SAQs shall assess understanding, application, and analysis, rather than simple recall.
9. LAQs:
 - All LAQs shall be drawn exclusively from the Must to Know part of the syllabus.
 - No questions shall be taken from the Desirable to Know or Nice to Know part of the syllabus.
 - Number of LAQs should not exceed one per topic unless maximum marks exceed 20 for the topic.
10. Long Answer Questions shall be structured to assess higher cognitive abilities, such as application, analysis, and synthesis.
11. Follow the guidelines in User Manual III for framing MCQs, SAQs, and LAQs.

6 H : Distribution of Practical Exam

| S.No | Heads | Marks |
|------|--|-------|
| 1 | Case Taking - 2 cases (15 marks each) <ul style="list-style-type: none">• Prasuti - 1 case• Stree Roga - 1 case | 30 |
| 2 | Spotting of Instruments, Drugs, Models and Specimen - <ul style="list-style-type: none">• 10 Instruments - Identification, use• 2 Drugs - Identification, indication• 2 Models - Identification• 1 Specimen - Identification | 30 |
| 3 | Clinical Skill Based Examination. | 20 |
| 4 | Structured Viva-Voce - <ul style="list-style-type: none">• Shloka recitation - 10 marks• Conceptual knowledge - 10 marks• Diagnostic interpretation - 10 marks• Procedures and practical applications - 10 marks• Therapeutics and management - 10 marks• Preventive care and recent advances - 10 marks | 60 |
| 5 | Practical record - <ul style="list-style-type: none">• Prasuti Tantra - 5 Garbhini (Antenatal), 5 Prasava (Labour), 5 Sutika (Postnatal)• Stree Roga - 10 Stree roga(Gynaecological disorders), 5 Sthanika Upakrama (In-situ treatment modalities) | 20 |
| 6 | Internal Assessment | 30 |

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|--------------------|-------------------|------------|
| 7 | Electives Set -TA | 10 |
| Total Marks | | 200 |

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Abbreviations

| Domain | | T L Method | | Level | | Assessment | | Integration | |
|---------|------------------------------------|------------|--------------------------------------|-------|-----------|------------|------------------------------|-------------|-----------|
| CK | Cognitive/Knowledge | L | Lecture | K | Know | T-CS | Theory case study | V-RS | V RS |
| CC | Cognitive/Comprehension | L&PPT | Lecture with PowerPoint presentation | KH | Knows how | T-OBT | Theory open book test | V-KS | V KS |
| CAP | Cognitive/Application | L&GD | Lecture & Group Discussion | SH | Shows how | P-VIVA | Practical Viva | H-KC | H KC |
| CAN | Cognitive/Analysis | L_VC | Lecture with Video clips | D | Does | P-REC | Practical Recitation | H-SH | H SH |
| CS | Cognitive/Synthesis | REC | Recitation | | | P-EXAM | Practical exam | H-PK | H PK |
| CE | Cognitive/Evaluation | SY | Symposium | | | PRN | Presentation | H-SHL | H SHL |
| PSY-SET | Psychomotor/Set | TUT | Tutorial | | | P-PRF | Practical Performance | H-SP | H SP |
| PSY-GUD | Psychomotor/Guided response | DIS | Discussions | | | P-SUR | Practical Survey | H-KB | H-KB |
| PSY-MEC | Psychomotor/Mechanism | BS | Brainstorming | | | P-EN | Practical enact | H-Samhita | H-Samhita |
| PSY-ADT | Psychomotor/Adaptation | IBL | Inquiry-Based Learning | | | P-RP | Practical Role play | V-DG | V DG |
| PSY-ORG | Psychomotor/Origination | PBL | Problem-Based Learning | | | P-MOD | Practical Model | V-RN | V RN |
| AFT-REC | Affective/Receiving | CBL | Case-Based Learning | | | P-POS | Practical Poster | V-RS | V RS |
| AFT-RES | Affective/Responding | PrBL | Project-Based Learning | | | P-CASE | Practical Case taking | V-AT | V AT |
| AFT-VAL | Affective/Valuing | TBL | Team-Based Learning | | | P-ID | Practical identification | V-SW | V SW |
| AFT-SET | Affective/Organization | TPW | Team Project Work | | | P-PS | Practical Problem solving | | |
| AFT-CHR | Affective/characterization | FC | Flipped Classroom | | | QZ | Quiz | | |
| PSY-PER | Psychomotor/perception | BL | Blended Learning | | | PUZ | Puzzles | | |
| PSY-COR | Psychomotor/Complex Overt Response | EDU | Edutainment | | | CL-PR | Class Presentation | | |
| | | ML | Mobile Learning | | | DEB | Debate | | |
| | | ECE | Early Clinical Exposure | | | WP | Word puzzle | | |
| | | SIM | Simulation | | | O-QZ | Online quiz | | |
| | | RP | Role Plays | | | O-GAME | Online game-based assessment | | |
| | | SDL | Self-directed learning | | | M-MOD | Making of Model | | |
| | | PSM | Problem-Solving Method | | | M-CHT | Making of Charts | | |
| | | KL | Kinaesthetic Learning | | | M-POS | Making of Posters | | |

| | | | | | | | | | |
|--|--|-------|---------------------------|--|--|--------------|--|--|--|
| | | W | Workshops | | | C-INT | Conducting interview | | |
| | | GBL | Game-Based Learning | | | INT | Interactions | | |
| | | LS | Library Session | | | CR-RED | Critical reading papers | | |
| | | PL | Peer Learning | | | CR-W | Creativity Writing | | |
| | | RLE | Real-Life Experience | | | C-VC | Clinical video cases | | |
| | | PER | Presentations | | | SP | Simulated patients | | |
| | | D-M | Demonstration on Model | | | PM | Patient management problems | | |
| | | PT | Practical | | | CHK | Checklists | | |
| | | X-Ray | X-ray Identification | | | Mini-CEX | Mini-CEX | | |
| | | CD | Case Diagnosis | | | DOPS | DOPS | | |
| | | LRI | Lab Report Interpretation | | | CWS | CWS | | |
| | | DA | Drug Analysis | | | RS | Rating scales | | |
| | | D | Demonstration | | | RK | Record keeping | | |
| | | D-BED | Demonstration Bedside | | | COM | Compilations | | |
| | | DL | Demonstration Lab | | | Portfolios | Portfolios | | |
| | | DG | Demonstration Garden | | | Log book | Log book | | |
| | | FV | Field Visit | | | TR | Trainers report | | |
| | | | | | | SA | Self-assessment | | |
| | | | | | | PA | Peer assessment | | |
| | | | | | | 360D | 360-degree evaluation | | |
| | | | | | | PP-Practical | Practical | | |
| | | | | | | VV-Viva | Viva | | |
| | | | | | | DOAP | Demonstration Observation Assistance Performance | | |
| | | | | | | SBA | Scenario Based Assessment | | |
| | | | | | | CBA | Case based Assessment | | |
| | | | | | | S-LAQ | Structured LAQ | | |
| | | | | | | OSCE | Observed Structured Clinical Examination | | |
| | | | | | | OSPE | Observed Structured Practical Examination | | |
| | | | | | | DOPS | Direct observation of procedural skills | | |