

Edition: 10 10.04.2024 Date:

Page 1/14

FACULTY MEDICINE

STUDY PROGRAM 0912.1 MEDICINE

DEPARTMENT OBSTETRICS AND GYNECOLOGY

DISCIPL	NE OBSTETRICS, GYNECOLOGY AND HUMAN
	REPRODUCTION
	ADDROVED

APPROVED

at the meeting of the Commission for Quality Assurance and Evaluation of the Curriculum in

Medicine/Pharmacy/ Dentistry

Minutes No. 7 of 1706 d

Chairman PhD, Associate Professor

(academio degree, scientific title)

(signature)

APPROVED

at the Council meeting of the Faculty

Minutes No. 10 of 18.06. 24

Dean of Faculty PhD, Associate Professor

(academic degree, scientific title)

(signature)

APPROVED

at the meeting of the chair Obstetrics, Gynecology and

Human Reproduction

Minutes No. 12 of 20.05.2024

Head of chair PhD, Professor

Friptu Valentin

(signature)

SYLLABUS

DISCIPLINE OBSTETRICS AND GYNECOLOGY Integrated studies

Tipe of course: Compulsory

Curriculum developed by the team of authors:

Friptu Valentin, PhD, professor Catrinici Rodica, PhD., associate professor



Edition:	10	
Date:	10.04.2024	
Page 2/14		

I. INTRODUCTION

• General presentation of the discipline:

"Obstetrics and Gynecology" is a clinical medical course, the study of which will allow, at the university level, the creation of the necessary skills to support a correct diagnosis based on the anamnesis, the clinical and paraclinical examination, the assimilation of necessary notions for framing certain cases in "the pregnant with high obstetrical risk" entity, the creation of necessary skills to solve emergency situations, the learning of the correct hospitalization elements of the pregnant, postpartum and gynecopath female.

This course has connections with different medical fields, such as: Endocrinology, Internal Medicine, Surgery etc. For a better assimilation of the course, knowledge obtained during the first three years of university in the following fields is required: Biology, Chemistry, Anatomy, Histology, Biochemistry, Pharmacology, Morphopathology and Physiology. Also, this course demands skills in solving the psycho-emotional and social problems of the patients.

- Mission of the curriculum (aim) in professional training the acquisition and development of professional competencies for students in the provision of safe and efficient services in obstetric and gynecological medical care.
- Languages of the discipline: Romanian, Russian, English and French;
- Beneficiaries: students of the VI year, faculty Medicine 1, Medicine 2.

II. MANAGEMENT OF THE DISCIPLINE

Code of discipline		S.11.O.091	
Name of the discipline		Obstetrics and Gynecology	
Person in charge of the discipline		Valentin Friptu, PhD, professor	
Year	VI	Semester	XI
Total number of hours,	including:		390
Lectures	56	Practical/laboratory hours	56
Seminars	56	Self-training	192
Form of assessment	E	Number of credits	13

III. TRAINING AIMS WITHIN THE DISCIPLINE

At the end of the discipline study the student will be able to:

- at the level of knowledge and understanding:
 - ✓ the principles of healthcare organization in Obstetrics and Gynecology in the Republic of Moldova;
 - ✓ the notions of: reproductive health, family planning, contraception;
 - the pathophysiological features, diagnosis and treatment, as well as the methods of



Edition: 10

Date: 10.04.2024

Page 3/14

prevention of the gynecological pathology;

- ✓ the principles of primary and secondary prevention of genital and mammary cancer;
- ✓ the methods of identification of female genital infections and the therapeutic conduct;
- the methods of infertility prevention, diagnosis and treatment in the couple;
- ✓ the principles of perinatal care;
- ✓ the diagnostic methods of pregnancy;
- ✓ the emergency signs of the pathological pregnancy, the diagnosis and treatment in these cases;
- ✓ the notion of menopause;

• at the application level:

- ✓ the counseling skills in family planning;
- ✓ the techniques for the monitoring and surveillance of a physiological pregnancy;
- ✓ the skills of counseling women concerning cervical and breast cancer screening;
- the medical techniques for exploring gynecological problems (vaginal examination with valves, digital vaginal examination). The breast exam;
- the methods of screening, diagnosis and treatment of onco-gynecological disorders;
- ✓ the prediction and diagnostic techniques in pregnancy;
- the methods and techniques of counseling and psycho-emotional support of the pregnant woman, the parturient and her family;
- the assisted birth (pelvimetry, fetal heart rate auscultation, Leopold palpation, complications of 2nd and 3rd birth period, possible interventions at natural birth: episiotomy, manual extraction of the placenta etc.);
- ✓ the basic newborn resuscitation maneuvers;
- the emergency management in Obstetrics and Gynecology, the acute abdomen in gynecology;

• at the integration level:

- the use of modern biomedical methods to assess reproductive health and family planning issues:
- ✓ the development of medical thinking in Obstetrics and Gynecology;
- the compliance with the principles of medical bioethics in solving problems related to the reproductive health of the patients;
- the demonstration of certain personal and professional values regarding the respect of ethics and medical deontology;
- ✓ the establishment of effective communication in teamwork and with patients;
- ✓ the demonstration of the patient's surveillance capacity;
- the manifestation of a responsible attitude within a team in order to provide medical assistance in Obstetrics and Gynecology;
- ✓ the acquired competencies in the study of other disciplines on the solving of clinical cases in Obstetrics and Gynecology;

IV. PROVISIONAL TERMS AND CONDITIONS

The 6-th year student coming to the Obstetrics and Gynecology course will need basic knowledge in anatomy, histology, physiology, pathophysiology, pharmacology, endocrinology, and other clinical specialties.



Edition: 10

Date: 10.04.2024

Page 4/14

V. THEMES AND ESTIMATE ALLOCATION OF HOURS

Lectures, practical hours/laboratory hours/seminars and self-training

			Hours	
No.	THEME	Lectures	Practical lessons	Individ ual work
1.	Organization of the perinatal service. The main indicators in the perinatal service. Ethical aspects related to obstetrics and gynecology		-	2
2.	Anatomy of the female genital system (anatomy of the female genital organs, mammary gland, bony pelvis)	-	4	5
3.	Examination methods in Obstetrics and Gynecology	2	-	5
4.	Gynecological and obstetrical semiology	-	4	5
5.	Fetal anomaly screening and prenatal diagnosis of fetal malformations	-	4	5
6.	Neuro-hormonal adjustment of the menstrual cycle. Disruptions of the menstrual cycle. Abnormal uterine bleedings	-	4	5
7.	Disruptions of the menstrual cycle. Amenorrhea. Dysmenorrhea	2	4	5
8.	Physiological stages in feminine pubertal development. Pediatric gynecology	2	4	5
9.	Family Planning. Contraception.	2	4	5
10.	Pelvic inflammatory disease. Sexually transmitted diseases	2	4	5
11.	Emergencies in gynecology. Acute abdomen in gynecology	2	4	5
12.	Precancerous lesions and cervical cancer	2	4	5
13.	Precancerous states and cancer of the vulva, vagina	-	4	5
14.	Pathology of the ovaries	-	4	5
15.	Uterine myoma. Endometriosis. Endometrial cancer	2	4	5
16.	Hyperandrogenia. Polycystic ovary syndrome	2	-	5
17.	The infertile couple	2	4	5
18.	Menopause. Hormonal replacement therapy	2	4	5
19.	The antenatal assistance	2	4	5
20.	Introduction to fetal medicine. Teratogenicity. Screening for fetal abnormalities and prenatal diagnosis of fetal malformations		4	5
21.	Physiological birth. Monitoring and support in physiological birth	2	4	5
22.	Puerperal period. Assistance of physiological puerperal period. Assessment of the newborn's condition, care and feeding of the full-term newborn	-	4	5
23.	Obstetric bleedings. DIC syndrome in obstetrics. Hemorrhagic shock	2	4	5
24.	Premature birth. Prenatal rupture of amniotic membranes	2	4	5
25.	Hypertensive states during pregnancy. Preeclampsia/eclampsia. HELLP syndrome	2	4	5
26.	Restriction of intrauterine growth. Methods for assessing the intrauterine status of the fetus	2	4	5
27.	Recurrent abortion	2	-	5
28.	Physiology and pathology of fetal adnexa and amniotic fluid	2	_	5
29.	Infectious maternal pathology associated with pregnancy	2		5
30.	Maternal cardiovascular disorders and pregnancy	2		5
31.	Renal and hematological disorders associated with pregnancy	2	_	5
32.	Puerperal infections	2	4	5
33.	Maternal hepato-biliary and pulmonary disorders associated with pregnancy	2	-	5
34.	Endocrine disorders associated with pregnancy. Diabetes and pregnancy.	2	-	5



Edition: 10

Date: 10.04.2024

Page 5/14

			Hours	
No.	THEME		Practical lessons	Individ ual work
35.	The pelvic presentation. Multiple pregnancy. Pregnancy and birth after previous cesarean section	-	4	5
36.	Pregnancy and post-term birth. The antenatal death of the fetus. nduction of labor. Maternal-fetal blood incompatibilities	-	4	5
37.	Labor dystocia. Mechanical dystocia. Macrosomic fetus. Transversal presentation and deflected presentations of the fetus. Shoulder dystocia. Dynamic dystocia at birth		4	5
38.	Obstetric surgery techniques and maneuvers. Cesarean surgery. The forceps. The Vacuum Extractor. Versions. Embryotomies. Maternal and fetal obstetrical trauma	2	4	5
39.	Thromboembolic complications during pregnancy, delivery and post- partum. Amniotic fluid embolism. The vital support of the pregnant woman	-	4	5
	Practical training		30	
	56 112 19			192
	Total 390			

VI. PRACTICAL TOOLS PURCHASED AT THE END OF THE COURSE

Mandatory essential practical tools are:

- Measurement of the uterine fundus height
- Performing external pelvimetry
- Performing internal pelvimetry
- Performing leopold maneuvers
- Auscultation of the fetal heartbeats
- Examination of the vagina and cervix with speculum or vaginal valves
- Performing a vaginal touch during pregnancy
- Birth assisment in cefalic presentation (expulsion of the fetus)
- Active management of the third period of delivery
- Manual remuval of the placenta
- Collection of vaginal secretions for bacterioscopic examination
- Conventional babes-papa-nicolau test
- Liquid-based test babeş-papa-nicolau
- Paracervical block
- Newborn antropometry
- Examination of the newborn in the first two hours after delivery
- Warm chain
- Foley ureter-bladder catheter

VII. OBJECTIVES AND CONTENT UNITS

Objectives	Content units
1. Physiological Obstetrics	



Edition: 10

Date: 10.04.2024

Page 6/14

Content units **Objectives** Perinatological Service of the To know the principles of perinatal service organization in the Republic of Moldova Republic of Moldova Medical ethical and deontolgic To possess the ethical and deontological norms of communication, counseling and patient consent To know the physiology of normal pregnancy The physiology of pregnancy To know the morpho-functional modifications of the maternal body The antenatal care during pregnancy To know the obstetrical pelvis The physiological birth To be able to carry out the obstetrical clinical examination To know the criteria for diagnosing pregnancy The physiological labor To know the principles of antenatal care, perinatal card and pregnancy chart To know the physiology of labor induction and the evolution of physiological birth, partogram To know the biomechanism of birth in the cranial presentation To know the notion of normal labor, care of the mother and the newborn To know the basic maneuvers of newborn resuscitation

2. Pathological Obstetrics

• To know what is a premature birth and the prenatal rupture of amniotic membranes

• To know what an intrauterine growth restriction is and how to assess the intrauterine status of the fetus

To know the maternal infectious pathology associated with pregnancy

• To know the maternal cardiovascular disorders and pregnancy

• To know the renal and hematological maternal conditions associated with pregnancy

 To know maternal hepato-biliary and pulmonary disorders associated with pregnancy

To know the endocrine conditions associated with pregnancy.
 Diabetes and pregnancy

• To know the concept of pelvic presentation, multiple pregnancy, pregnancy and birth in case of uterine scarring

 To know the notion of postterm pregnancy and birth, antenatal death of the fetus and induction of labor

• To know dystocical birth, mechanical dystocia, transversal presentation and deflected presentations of the fetus, shoulder dystocia, dynamic dystocia at birth

• To know maternal and fetal obstetrical trauma

• To know the puerperal infections

• To know the techniques and obstetric operative maneuvers, caesarean surgery, forceps, vacuum extraction, versions, embryotomies

• To know the thromboembolic complications during pregnancy, birth and post-partum, amniotic fluid embolism and vital support of the pregnant woman

• To be aware of obstetric bleedings, DIC syndrome in obstetrics and hemorrhagic shock

Premature birth

Intrauterine retarded development of the fetus

Chronic pathology and pregnancy

The multiple pregnancy

The pelvic presentation

The postterm pregnancy

Dynamic and mechanical dystocia at birth

Obstetrical trauma

Obstetric surgical techniques

Puerperal infections

Obstetric bleedings

Hypertensive conditions during pregnancy



Edition: 10

Date: 10.04.2024

Page 7/14

Objectives	Content units
To know the hypertensive conditions during pregnancy, preeclampsia/eclampsia and HELLP Syndrome	
3. Endocrinological gynecology, gynecological inflammatory pathologies	, contraception and the sterile
couple	
 To know the neuro-hormonal adjustment of the menstrual cycle, menstrual disorders and abnormal uterine bleedings To know the menstrual cycle disorders, amenorrhea, dysmenorrhea To know the physiological stages in female puberty development and pediatric gynecology To know the notions of hyperandrogenism and polycystic ovary syndrome To know the notions of menopause, hormone replacement therapy To know the pelvic inflammatory disease, sexually transmitted diseases To know the methods of family planning, contraception, the notion of infertile couple 	Neuro-hormonal adjustment of the menstrual cycle Physiological stages of female development Hormonal pathologies Pelvic Inflammatory Disease Family planning Contraception The sterile couple
4. Oncological gynecology and emergencies in gynecology	
 To know the pathology of the ovaries To know the precancerous states and cancer of the vulva, vagina and cervix To know uterine myoma, endometriosis, endometrial cancer To be aware of the emergency management in gynecology, acute abdomen in gynecology 	Precancerous pathology and cancer of the vulva, vagina and cervix Precancerous pathology and ovarian cancer Precancerous pathology and uterine cancer Acute abdomen in gynecology

VIII. PROFESSIONAL (SPECIFIC) (SC) AND TRANSVERSAL (TC) COMPETENCES AND STUDY FINALITIES

✓ Professional (specific) (SC) competences

- SC1. Responsible execution of professional tasks with the application of the values and norms of professional ethics, as well as the provisions of the legislation in force
- SC2. Adequate knowledge of the sciences about the structure of the body, physiological functions and behavior of the human body in various physiological and pathological conditions, as well as the relationships between health, physical and social environment
- SC3. Resolving clinical situations by developing a plan for diagnosis, treatment and rehabilitation in various pathological situations and selecting appropriate therapeutic procedures for them, including providing emergency medical care
- SC4. Promoting a healthy lifestyle, applying prevention and self-care measures
- SC5. Interdisciplinary integration of the doctor's activity in a team with efficient use of all resources
- SC6. Carrying out scientific research in the field of health and other branches of science

✓ Transversal competences (TC)

• TC1. Autonomy and responsibility in the activity.



Edition:	10	
Date:	10.04.2024	
Page 8/14		

✓ Study finalities

- To know the physiology and pathology of neuro-hormonal adjustment of the menstrual cycle, menstrual disorders and abnormal uterine bleedings
- To be able to perform and interpret a special gynecological examination.
- To know the physiological stages in female body development and evolution
- To know the methods of family planning and contraception
- To know basic gynecological pathologies, their symptoms and their treatment.
- To be able to determine the diagnosis of pelvic inflammatory disease, sexually transmitted diseases and their principles of treatment.
- To be able to appreciate the cases of acute gynecological abdomen and their management.
- To know the physiology of normal pregnancy and the morphological changes of the maternal body during pregnancy.
- To know the ways of preconceptional and antenatal assistance.
- To be able to perform the obstetrical clinical examination and to be familiar with the diagnostic criteria for pregnancy.
- To be able to attend a physiological birth and provide primary care for the newborn.
- To know the peculiarities of evolution of the births associated with chronic pathology.
- To be able to identify obstetric emergency situations (obstetric bleeding, pregnancy-related hypertensive conditions, amniotic fluid embolism, umbilical cord prolapse, septic states, etc.) and to know how to manage them.
- To be able to determine situations of pathological evolution of pregnancy and to know the tactics of behavior and treatment.

IX. STUDENT'S SELF-TRAINING

No.	The Expected Product	Implementation Strategies	Assessment criteria	Implementation terms
1.	Working with books and ICT	Systematic work in the library and multimedia library. Exploring current electronic sources on the subject	1. Quality of judgments formed by logical thinking, flexibility 2. The quality of the systematization of the informational material obtained through individual activity	During the module
2.	PowerPoint Presentation	Analysis of relevant sources on the topic of presentation Analysis, systematization and synthesis of information on the proposed theme Compilation of the presentation in accordance with the requirements in force and presentation to the chair	1. The quality of systematization and analysis of the informational material obtained through individual activity 2. Compliance of information with the proposed theme	During the module
3.	Choice and description of the clinical case study Case study analysis Analysis of the causes of the issues raised in the case study Prognosis of the case investigated Elaboration of the medical history		1. Analysis, synthesis, generalization of data obtained through own investigation 2. Formation of an algorithm of knowledge based on the obtained	During the module



Edition: 10

Date: 10.04.2024

Page 9/14

			conclusions	
4.	Night guard	Implementation of theoretical knowledge in practice Improvement of the physician-patient communication skills	1. Analysis, synthesis and generalization of practical knowledge and skills 2. Forming clinical thinking, teamwork	During the module
5.	Medical history	Elaboration of the query algorithm, collecting the anamnesis and establishing the diagnosis and treatment in the specific clinical case	1. Analysis, synthesis and formation of clinical thinking 2. Ability to communicate with the patient	At the end of the module
6.	Themed specialty papers	Analysis of relevant sources on the topic of the paper Analysis, systematization and synthesis of information on the proposed theme Writing the report in accordance with the requirements in force and submitting it to the chair	1. The quality of systematization and analysis of the informational material obtained through its own activity 2. Compliance of information with the proposed theme	During the module
7.	Acquirement of the ViC test certificate	Learning at distance through the e- learning system Obtaining knowledge through the full course of virtual contraception	The ability to study at distance, individually Ability to use the ViC platform	During the module
8.	Acquirement of the ViC certificate forclinical case	Learning at distance through the e- learning system Obtaining knowledge through the full course of virtual contraception	The ability to study at distance, individually Ability to use the ViC platform	During the module

X. METHODOLOGICAL SUGGESTIONS FOR TEACHING-LEARNING-ASSESSMENT

Forms of organization

The improvement of the educational process involves the creation of a satisfactory organizational framework for the achievement of the established instructive-educational objectives. This action is accomplished by diversifying the forms of organizing the activity within the instructive process, considering the optimal combination, according to the objectives pursued, of the three main forms of activity:

- frontal
- individual
- group

The frontal work involves the teacher's relationship with the entire group, working with all students engaged in the same activity. This form of organization assures the teacher's role of leader with all the consequences that follow. Essentially, such a pedagogical context requires reporting at the average level of the group - the level at which the majority of the students in that group are.

The advantage lies in the fact that, from the intellectual point of view, there is a homogeneity of the team with which they work, so the content and methods will be appropriate to the peculiarities of all the students in the group.

Major disadvantages are: the difficulty of knowing the students, the reduced possibility of developing the individual and motivation skills, difficulties in realizing the collaboration between students with different possibilities/performances, the emergence of unilateral intellectual development tendencies of the students.



Edition:	10	
Date:	10.04.2024	
Page 10/14		

Group activity involves the operation of the subgroup within the group of students, depending on the didactic objectives. This form of organization of the educational process has the following advantages: the greater involvement of each student in the activities proposed during the classes, stimulation of the student's learning motivation, transformation of the student into the subject of education, enabling of the capitalization of skills and individual abilities of each student, forming and developing the spirit of cooperation and openness to interaction.

Individual activity implies that, depending on the psycho-individual peculiarities, the student is engaged in the achievement of appropriate learning tasks appropriate to that point of view; it presents the great advantage of creating the possibility of improving and developing the individual learning level.

Teaching and learning methods

Active teaching-learning methods involve activism, intrinsic curiosity, the desire to observe, explain, explore, discover. Active methods are considered to mobilize the student's energies, which help him focus his attention, stimulate his curiosity. Active methods emphasize operational knowledge, learning by action, bring the student into direct contact with real life situations.

Regarding the student as a subject of learning, active methods consider that the educational and formative effects of education are proportional to the level of engagement and participation in the learning activity; that in the learning situation he is involved in calling for intellectual skills, which are based on different learning abilities; that each of these capacities can be analyzed from the point of view of the mental processes involved. In the Obstetrics and Gynecology course, the following active teaching-learning methods are used:

a. During the lectures:

- lectures
- PowerPoint presentations

b. During the practical lessons:

presentations-discussions, clinical cases studies, solving clinical oriented problems, small groups work, role-play, clinical cases simulations (task-trainers and Pelvic Mentor) at CUSIM, individual projects, application and interpretation of methods of examination, the interactive method.

The main stages of clinical delivery-centered teaching are:

- 1. Obtaining the initial information
- 2. Generate an initial clinical hypothesis
- 3. Highlighting important additional data to confirm the initial hypothesis
- 4. Selection of laboratory tests and elaboration of an investigation plan to specify the diagnosis
- 5. Formulating a presumptive or definitive diagnosis
- 6. Development of a treatment plan
- 7. Synthesis of the work done and identification of the necessary readings for a better understanding of the presented problem

Guards are mandatory and constitute an important learning tool that helps develop clinical skills, make decisions, recognize emergency situations, and develop a sense of responsibility. The guard student acts under the medical responsibility of the on-call physician.

Suggestions for individual activity:

If you want to be successful in learning the course of Obstetrics and Gynecology, you should actively work with the information:

1. Read the information carefully. Take notes. Try to summarize the main ideas by yourself.



Edition: 10

Date: 10.04.2024

Page 11/14

- 2. Study the schedules and images from the book. Answer the questions at the end.
- 3. Attend courses and practical tests. Consider carefully the material taught.
- 4. Ask questions, both the teacher and the colleagues.
- 5. Make groups of 2 or 3 students in order to discuss the course material and to prepare for exams.
- 6. Come to night duties, as it will help you assimilate more effectively the theoretical material and will be an essential support for your medical practice.
- 7. Use your time reasonably and establish a balance between the effort made for obtaining knowledge, other responsibilities and the personal life.

Methods of learning

- the syllabus
- methodical indications
- support materials for students, residents and doctors
- normative and legislative acts in force
- tables, leaflets
- didactic films
- multimedia, notebook
- casts
- simulators
- medical equipment
- standardized patient
- medical instruments, etc.

Methods of assessment

The evaluation of the results of the university work highlights the value, the level, the performances and the efficiency of the efforts made by all the educational factors and the efficiency of the learning work.

Evaluation is a complex didactic act integrated with the entire teaching-learning process, which ensures that the amount of knowledge gained and their value, level, performance, and effectiveness at a given time (currently, periodically, finally) are highlighted. Assessment is the didactic act that causes the promotion or non-promotion of students from one learning stage to another. The following qualities are required from examiners: skill, fairness, objectivity and responsibility.

The following forms of assessment are applied:

- ✓ **Current** (initial and formative)
- ✓ Final

Initial evaluation:

Within the educational process, each teacher has the freedom to apply the initial evaluation during classes. The initial evaluation (initial tests, brainstorming, etc.) has predominant prognostic and diagnostic functions. Following the assessment of the initial level of student training, the teacher can trace his/her teaching strategies for a better acquisition of the material proposed by the student, and the student in turn, seeing the gaps in knowledge, can be motivated to remove them.

Formative evaluation:

During the course, the responsible person conducts a formative evaluation that allows students to assess their progress in the field, their weaknesses or strengths. The formative evaluation includes:

- Written tests at the end of the seminars, which consist of questions of simple or multiple choice.
- 5 evaluations



Edition:	10	
Date:	10.04.2024	
Page 12/14		

The activity grade during the module represents: the average of 5 evaluations (endocrinological gynecology, operative gynecology, physiological obstetrics, pathological obstetrics and the student's individual work).

The semester's activity mark represents: the average of the partial (or other) assessment tests during the semester. This note informs the student on the last practical test of the semester.

Student attendance, the absences recovery and all grades will be mentioned by each teacherassistant of the group in the group catalogs for each teaching series, catalogs that are mandatory kept by the course owner.

The final examination is a standardized exam that includes three evaluation methods: written test (single and multiple choice), practical examination and oral examination.

- **a.** The written test. Each paper consists of 100 questions from the information included in the syllabus of the course and according to the unified bibliography of the discipline that is displayed and announced to students at before each semester. The first 40 questions are single choice; another 60 questions are multiple choice. The student is offered two hours to solve the questions. All the students write the tests in the same conditions (same time interval). Written tests are marked from 0 to 10. Marks are announced to all students.
- **b. Practical test.** The practical test score is the score obtained from the assessment of the stages of practical obstetric or gynecological practice based on a standardized checklist. The choice of practical obstetrical or gynecological skills to be performed by the student is done by drawing lots. The student must correctly perform the stages of practical skills, respecting the time provided for this purpose. The examination is carried out by the head of the chair at the University Simulation in Medical Training Center (CUSIM). The student has a maximum of 7 minutes to perform the task. The score is appointed from 0 to 10. The mark will be announced to the student at the end of the practical test.
- c. The oral test is carried out by offering the student a clinical case (the selection of the ticket is done by drawing lots), which reflects a clinical situation of a virtual patient, whose pathology is part of the subject included in the analytical program of the discipline, according to a theme unique displayed in the discipline, according to the bibliography displayed and announced to students at the beginning of the semester. The student has 30 minutes to prepare for the answer. The student will answer 10 questions, and the evaluation is done according to a standard grid, from 0 to 10. The test is graded from 0 to 10. The grade will be announced to the student at the end of the test.

The following criteria shall be taken into account when establishing the final mark:	The share expressed in percentage (Total = 100%)
1. Activity during the semester. This is the average mark of the	30%
five evaluations 2. The practical test	20%
3. Written test	20%
4. Oral test	30%

The examination subjects are approved at the department meeting and are offered to students at



Edition:	10	
Date:	10.04.2024	
D 12 /14		

Page 13/14

least 30 days before the session. To pass the exam, the final average must be at least 5.1. The scores obtained at each test will be passed to the students' activity charts, corresponding to each series, which is kept by the course holder.

Method of mark rounding at different assessment stages

Intermediate marks scale (annual average, marks from the examination stages)	National Assessment System	ECTS Equivalent	
1,00-3,00	2	F	
3,01-4,99	4	FX	
5,00	5	E	
5,01-5,50	5,5		
5,51-6,0	6		
6,01-6,50	6,5	- D	
6,51-7,00	7		
7,01-7,50	7,5	С	
7,51-8,00	8		
8,01-8,50	8,5		
8,51-9,00	9	В	
9,01-9,50	9,5		
9,51-10,0	10	A	

The average annual mark and the marks of all stages of final examination (computer assisted, test, oral) - are expressed in numbers according to the mark scale (according to the table), and the final mark obtained is expressed in number with two decimals, which is transferred to student's record-book.

Absence on examination without good reason is recorded as "absent" and is equivalent to 0 (zero). The student has the right to have two re-examinations in the failed exam.

XI. RECOMMENDED LITERATURE:

A. Compulsory

- 1. Williams Gynecology, 2022.
- 2. Williams Obstetrics, 2023.
- 3. Neville F. Hacker MD, Joseph C. Gambone DO, Calvin J. Hobel MD, Hacker & Moore's Essentials of Obstetrics and Gynecology, 6 th Edition, 2020.

B. Additional



Edition: 10

Date: 10.04.2024

Page 14/14

- 1. Cardaniuc C., Chesov I. Abilități practice și proceduri de bază în obstetrică. Analgezia și particularitățile de suport vital bazal la pacientele obstetricale. Elaborare metodică. Chișinău, 2015.
- 2. Cardaniuc C., Chesov I. Proceduri de bază în ginecologie. Abilități practice pentru situații de urgență. Elaborare metodică. Chișinău, 2015.
- 3. Cardaniuc C., Chesov I., Curteanu A. Abilităti practice de bază în îngrijirea esențială și resuscitarea nou-născutului. Elaborare metodică. Chișinău, 2015.