



Instruktion till dig som är på utbyte under termin 10,  
Klinisk medicin 6: Obstetrik och Gynekologi 9 hp.

## Loggbok – vid klinisk placering utomlands

För att kunna bedöma och tillgodoräkna dig klinisk kurs utomlands behöver KI intyg som styrker att du fullgjort viktiga moment i din kliniska utbildning. I vissa länder finns ett system med kliniska rapporter. Dessa täcker väl behovet av dokumenterad klinisk utbildning. Det vanligaste sättet att styrka din kliniska placering är att du själv för loggbok.

Skriv loggbok på engelska, så att din handledare/ansvarig kontaktperson kan läsa den efter avslutad placering.

Loggboken skall tydligt innehålla:

1. Vilka sorts kliniska miljöer du varit i (kortfattat), vilka typer av patienter du sett och i vilken utsträckning du själv fått träna och utföra olika kliniska uppgifter. Denna del ska **signeras av lärare** vid utbytet. Det är viktigt att namnet på den som signerar är läsbart.
2. Därtill bör det framgå vilka andra undervisningsformer du deltagit i till exempel föreläsningar, seminarier och liknande. Du kan med fördel relatera dessa aktiviteter till lärandemålen i kursplanen.
3. Clinical assessment form, signerad av handledare inklusive sammantaget betyg. OBS! Denna skall fyllas i när samtliga kliniska placeringar är genomförda.

I slutet av loggboken skriver du några rader om vad du tar med dig från utbytet. Behöver du fler sidor för loggboken går det bra att kopiera/skriva ut fler.

Om du lämnar in kopior av dina dokument, ska dessa vara vidimerade.

### Mer information

Mer information finns på [Utbytesstudier under Klinisk medicin 6: Obstetrik och Gynekologi 9 hp.](#)



## Assessment form – Clinical Rotation

### *Exchange student from Karolinska Institutet (KI)*

This form is to be filled in by the host university where a student from KI is carrying out clinical rotations. Upon return to KI the student will present this document to his/her study director who will decide on recognition of the exchange studies.

Name	Date of Birth
Host University	Study Period (from -to)
Department	Clinical Rotation/Subject
Name of teacher responsible for the assessment	E-mail (teacher)

	<b>Pass/Fail</b>
Attendance and Punctuality:	
Participation and initiative:	
Progress in knowledge and understanding:	
Progress in skills and abilities:	
Overall judgement:	
Further comments ( <i>please continue on the back if you need more space</i> ):	

**Comprehensive grade according to the ECTS grading scale below. Please mark the correct grade:**

**A B C D E FX F**

.....  
Place and date

.....  
Signature, teacher/supervisor responsible for the assessment

<b><i>ECTS Grading Scale</i></b>	
<b>Grade</b>	<b>Definition</b>
A	Excellent - outstanding performance with only minor errors
B	Very Good - above the average standard but with some errors
C	Good - generally sound work with a number of notable errors
D	Satisfactory - fair but with significant shortcomings
E	Sufficient - performance meets the minimum criteria
FX	Fail - some more work required before the credit can be awarded
F	Fail – considerable further work is required



## Logbook | Exchange studies in Medicine

<b>Student name</b>	
<b>Host university/hospital</b>	
<b>Department</b>	
<b>Name of course or clinical rotation</b>	
<b>Supervisor</b>	
<b>Start date</b>	
<b>End date</b>	

<b>The number of days/weeks I serviced at the clinic/hospital (if any)</b>	
<b>Emergency</b>	
<b>Inpatient</b>	
<b>Outpatient</b>	
<b>Other, namely</b>	

<b>To be signed after completed course or clinical rotation</b>	
<b>Date</b>	
<b>Student</b>	
<b>Supervisor</b>	
<b>Stamp</b>	



<b>Week ....</b>	<b>Supervisor   department</b>	<b>I did the following</b>	<b>I learnt the following</b>
<b>Monday</b>			
<b>Tuesday</b>			
<b>Wednesday</b>			
<b>Thursday</b>			
<b>Friday</b>			
<b>Own reflections   Short evaluation</b>			



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**What are your experiences from this student exchange?**

- Briefly reflect of the placement. What did you learn?
- What similarities and differences are there? Briefly compare your education at Karolinska Institutet and Swedish health care with your host university/hospital.
- How do you think your experiences from the exchange period will affect your future career?



## Study guide for Obstetrics and Gynaecology

Clinical medicine 6: Obstetrics and Gynaecology 9 ECTS credits  
Medical Programme, Karolinska Institutet

Anna Möller (KI SÖS), Hedvig Engberg (KBH), Helena Kopp Kallner (KI DS) and  
Lotta Herling (CLINTEC)

The course in obstetrics and gynaecology builds on the practical and theoretical knowledge that the student has acquired earlier during their medical education. The purpose of the course is to provide the student with the knowledge and skills necessary to meet, investigate, and treat a patient with gynaecological complaints or pregnancy within primary care and emergency care. The course is permeated by a scientific and interprofessional approach. The student is expected to apply a professional approach and treat patients, relatives, and colleagues with respect.

### **Overall learning objectives**

After the course, the student should have sufficient knowledge and skills to—under supervision—begin working as a doctor in gynaecology and obstetrics, and to manage patients seeking care for gynaecological or obstetric symptoms in primary care and/or emergency care.

### **Explanations:**

- **Should be able to** refers to knowledge at the S2–S3 level, and in some cases also S4. This implies that the student should know the disease's origin, epidemiology, possible genetics, risk factors, diagnosis and differential diagnoses, natural progression, investigation procedures, examinations and treatment, as well as possible short- and long-term complications for the individual. In certain cases, the knowledge requirements are specified in further detail.
- **Should be familiar with** primarily refers to knowledge at the S1–S2 level. This implies that the student should be able to describe the disease or condition in an overview manner, focusing on diagnosis and initial treatment.

## **KNOWLEDGE AND UNDERSTANDING**

Expected knowledge from earlier courses in the medical programme:

### **Should be able to:**

- Describe the anatomy of the female genital organs

- Describe pelvic anatomy
- Understand reproductive physiology, especially the menstrual cycle
- Explain breast anatomy and the physiology of lactation
- Identify non-gynecological differential diagnoses for abdominal pain
- Assess and stabilize acutely ill patients based on the ABCDE approach

**Should be familiar with:**

- Implantation
- Organogenesis and fetal development
- The Swedish Communicable Diseases Act
- Common postoperative complications

Expected knowledge in obstetrics after completion of the course:

Normal pregnancy and maternal healthcare

**Should be able to:**

- Understand normal pregnancy physiology and common pregnancy-related symptoms, and distinguish these from pathological conditions
- Diagnose and monitor normal pregnancy, including the components of the Swedish maternity care program
- Explain the purpose and structure of the Swedish maternal healthcare program
- Manage deviations in pregnancy progression and understand surveillance routines for conditions such as hypertension and abnormal symphysis-fundal (SF) height
- Distinguish between a complicated and a normal pregnancy

**Should be familiar with:**

- Prenatal diagnostics, such as NIPT and the Combined Ultrasound and Biochemical Test (CUB)
- Possibilities and limitations of obstetric ultrasound and fetal diagnostics
- Commonly used medications and contraindications during pregnancy and lactation

Complicated pregnancy and specialist maternity care

**Should be able to:**

- Recognize and manage complications such as infections during pregnancy, threatened preterm birth, and preterm prelabor rupture of membranes (PPROM)
- Understand and manage late pregnancy bleeding, such as placental abruption

- Manage common pregnancy-related conditions such as hyperemesis, gestational diabetes, intrahepatic cholestasis of pregnancy, and hypertensive disorders (HELLP syndrome, preeclampsia, eclampsia)
- Understand the short- and long-term risks after pregnancy and delivery complications

**Should be familiar with:**

- Important comorbidities in pregnancy such as thromboembolic disease, epilepsy, diabetes, thyroid disease, and psychiatric disorders
- Placental abnormalities such as placenta previa and placenta accreta
- Fear of childbirth
- Management of intrauterine growth restriction
- Management of post-term and preterm pregnancies
- Management of twin pregnancies and deliveries

Normal delivery

**Should be able to:**

- Understand the process of normal labor and delivery, including monitoring of labor, fetus, and mother
- Identify and manage perineal tears
- Understand common indications for induction, induction methods, and how to assess the Bishop score

**Should be familiar with:**

- Monitoring routines such as CTG, lactate testing, and O-NEWS
- Obstetric pain relief methods

Complicated delivery

**Should be able to:**

- Take appropriate action in cases of abnormal labor and immediately after delivery, such as uterine inertia and postpartum hemorrhage

**Should be familiar with:**

- Indications and methods for instrumental/operative delivery, such as cesarean section and vacuum extraction
- Cardiac arrest during pregnancy and delivery

## The puerperium

### **Should be able to:**

- Describe the normal postpartum period
- Identify and manage common postpartum complications such as mastitis, endometritis, and postpartum depression

## Expected knowledge in gynaecology after completion of the course:

### Acute abdominal pain and early pregnancy

#### **Should be able to:**

- Assess acute abdominal pain in non-pregnant and pregnant patients
- Manage bleeding in early pregnancy
- Diagnose and manage miscarriage and ectopic pregnancy
- Perform gynecological ultrasound, including diagnosing ovarian cysts
- Recognize and manage postoperative complications after laparoscopic, vaginal, and open surgery

### Contraception, abortion, and reproductive health

#### **Should be able to:**

- Understand the theoretical and practical effectiveness of different contraceptive methods
- Explain how barrier and fertility awareness methods work
- Describe mechanisms of action of hormonal contraceptives, including combined and progestin-only methods
- Explain the mechanism of intrauterine contraception
- Describe the risks and common side effects of contraceptives
- Understand the short- and long-term health benefits of contraceptives and their role in preventive healthcare
- Advise the majority of fertile women on suitable contraception
- Explain Swedish laws regarding abortion and sterilization
- Describe abortion methods and their complications
- Define emergency contraception, its indications, and mechanisms of action

#### **Should be familiar with:**

- Methods of sterilization and their complications
- Epidemiology of legal abortion and sterilization
- Management of patients seeking abortion
- Principles of post-abortion contraception
- Global and historical perspectives on abortion



- Side effects and contraindications for emergency contraception

#### Gynaecological endocrinology and menstrual disorders

##### **Should be able to:**

- Describe normal pubertal development
- Understand menopause and the climacteric
- Manage menstrual cycle disorders
- Diagnose and manage amenorrhea, oligomenorrhea, and anovulation, including differential diagnoses
- Understand bleeding disorders according to PALM-COEIN classification
- Manage uterine fibroids
- Diagnose and manage endometriosis

##### **Should be familiar with:**

- Evaluation of deviations in pubertal development
- Causes, investigation, and treatment of male and female infertility

#### Gynaecological infections and dermatoses

##### **Should be able to:**

- Diagnose and manage common vulvovaginal conditions such as bacterial vaginosis, Bartholin's abscess, atrophic vaginitis, and candidiasis
- Diagnose and manage lichen sclerosus
- Diagnose and manage the most common sexually transmitted infections (STIs) such as herpes, chlamydia, and gonorrhea
- Diagnose and manage upper genital tract infections such as salpingitis and endometritis
- Understand the implications of the Swedish Communicable Diseases Act for STIs

##### **Should be familiar with:**

- Other vulvovaginal dermatoses
- Investigation of benign vulvar and vaginal lesions

#### Gynaecological cancer and screening

##### **Should be able to:**

- Understand cervical dysplasia and the national screening program and apply it in practice

##### **Should be familiar with:**

- Investigation and treatment of precancerous gynecologic lesions and



cervical dysplasia

- Malignant conditions such as cervical, endometrial, ovarian, and vulvar cancer

## Urogynaecology

### **Should be able to:**

- Diagnose and manage urinary incontinence
- Diagnose and manage urinary urgency
- Diagnose and manage pelvic organ prolapse

### **Should be familiar with:**

- Anal incontinence

## Sexual and psychosocial health

### **Should be able to:**

- Recognize and respond to female genital mutilation
- Screen for intimate partner violence

### **Should be familiar with:**

- Sexual physiology
- Sexual function and dysfunction
- How common diseases affect sexual and reproductive health
- How sex, gender identity, and sexuality contribute to vulnerability at individual, relational, and societal levels
- Management after sexual assault

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## SKILLS – Practical and Professional

### **Able to perform:**

#### General:

- Take an adequate and focused medical history, such as bleeding and pain history.
- Perform an appropriate physical exam, including gynecological examination (speculum and bimanual palpation), depending on the situation.
- Based on history and physical exam, make an initial assessment and plan of action.
- Document in the medical record.
- Write consultation referrals.

- Prescribe medications and dose commonly used drugs, e.g., antibiotics for STIs.
- Prescribe medications.
- Report using SBAR.
- Professional interaction with patients and their families.
- Collegial and interprofessional cooperation.

#### Obstetrics:

- Interpret maternity health records.
- Measure symphysis–fundus height.
- Perform external palpation of the pregnant woman (Leopold's maneuvers).
- Auscultate fetal heart sounds.
- Assess basic CTG.
- Assist during childbirth.
- Techniques during vaginal delivery, including perineal protection.
- Assist in a simulated vaginal delivery.
- Interpret partograms – normal progress, different types of uterine inertia.
- Manage and perform techniques during postpartum hemorrhage.

#### Gynaecology:

- Perform sampling such as Pap smears, STI tests, herpes tests.
- Provide contraceptive counseling and demonstrate contraceptive methods.
- Assess hormone tests.
- Interpret voiding diaries.
- Assess vaginal discharge and perform a wet smear.
- Assess vulvar changes.
- Assess acute abdomen.

#### **Be familiar with:**

#### Obstetrics:

- Connect external CTG.
- Perform a vaginal examination during induction and labor.
- Assess when labor has started.
- Palpate and assess uterine contractions.
- Observe the woman during the third stage of labor.
- Perform external cephalic version of a fetus in breech presentation.
- Perform obstetric ultrasound, including flow measurements.
- Perform amniotomy.
- Apply a scalp electrode.
- Perform scalp blood sampling.



- Use internal contraction monitoring.
- Assist with twin delivery.
- Assist with vaginal breech delivery.
- Assist with forceps delivery.
- Suture perineal tears.
- Cardiac arrest during pregnancy and delivery.

Gynaecology:

- Vacuum aspiration.
- Laparoscopy for gynecological conditions.
- Hysteroscopy.
- Conization.
- Insertion of intrauterine contraceptives.