

# OBSTETRICS AND GYNECOLOGY

## Degree in Medicine

**Code:** 800828

**Module 3:** Human Clinical Training

**Materia:** Obstetrics and Gynecology

**Type of subject:** Compulsory

**Course:** Fourth

**Semester:** see calendar

**Departament:** Public and Maternal-Infant Health. Teaching Unit de Obstetrics and Gynecology

**Credits:** 12 ECTS

## FACULTY

### Group A: University Hospital Clínico San Carlos

**Coordinator:** Coronado Martín, PJ (T.U.)

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### Group B: University Hospital 12 de Octubre

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### University Hospital Infanta Cristina

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### Group C: University Hospital Gregorio Marañón

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### Group D: University Hospital Infanta Leonor

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## **COMPETENCIES**

They are those corresponding to the Module and Subject to which this subject belongs.

### **General competencies**

CG.04, .05, .06, .13, .14, .15, .16, .17, .18, .19, .20, .21, .22, .23, .24, .31, .32 y .33.

### **Specific competencies**

CEM3.01 y CEM3.02.

## AIMS

The main objective is for students to acquire basic theoretical knowledge about the physiology and pathology of human reproduction, as well as the genital apparatus and everything related to the psycho-affective sphere of women.

This knowledge will be transmitted in the form of theoretical classes whose objective is the basic teaching of the subject to place you in a position to understand and deepen your knowledge through seminars.

The seminars will be monographic, with the objective of facilitating the understanding of the theoretical teaching and the preparation of the student so that they more easily acquire the practical knowledge that will be taught in the corresponding teaching workshops.

Through these three pedagogical modalities, students will be transmitted the theoretical and practical knowledge that a primary care doctor must know about physiology, pathophysiology of gestation, normal and pathological childbirth, pathophysiology of the puerperium and lactation, functional gynecological pathology, organic gynecological pathology, Gynecological oncology, breast pathophysiology, reproductive pathophysiology and birth control.

## SYLLABUS

### THEORY

#### Section I: INTRODUCTION

##### **Lesson 1: Concept of obstetrics and gynecology.**

###### **Course presentation.**

- Historical evolution. Current situation of obstetrics and gynecology.
- Teaching Guide.
- Groups distribution.
- Presentation of teachers and assignment of tutors.
- Seminars.
- Tutoring plan.
- Exams.
- Evaluation models.

#### Section II: MATERNAL-FETAL MEDICINE

##### **Lesson 2: Establishment of pregnancy. Placenta.**

###### **Pregnancy endocrinology.**

- Gametogenesis.
- Fertilization and nesting. Decidualization.
- Implantation of the blastocyst. Trophoblastic invasion and differentiation.
- Evolution throughout pregnancy. Description of the mature placenta.
- Uteroplacental hemodynamics. Placenta physiology.
- Placental hormones. Fetoplacental unit.

##### **Lesson 3: Modifications of the maternal organism during pregnancy.**

- Pregnancy diagnosis.
- Clinical and auxiliary methods.
- Calculation of gestational age. Differential diagnosis.
- Physiological modifications of the woman's body as adaptation to pregnancy.
- Analyze the impact of the physiological changes of the pregnant woman on her pre-existing pathologies and those developed during pregnancy..

##### **Lesson 4: Prenatal consultation. Medicines, drugs and other agents that affect pregnancy.**

- Prenatal visits.
- Calendar and content of them.
- High risk pregnancy concept.
- Understanding the importance of preconception consultation to carry out primary prevention of congenital defects.
- Pregnancy hygiene. Feeding. Habits and physical activity. Drugs. Preparation for childbirth.
- Detecting the appropriate sources to know if an addictive agent, drug or other drugs administered to the mother have teratogenic potential.
- Fundamentals, indications, contraindications and complications of the most frequently administered medications during pregnancy, both physiological and pathological.

##### **Lesson 5: Fetal physiology.**

- Fetal developing.
- Fetal circulation.
- Development and function of the main fetal systems.
- Amniotic fluid.

##### **Lección 6: Normal labor (I).**

- Normal labor definition. Causes of labor. Stages of labor and clinical description.
- Elements of labor: uterine contraction. Birth canal. Characteristics of term fetus.

##### **Lesson 7: Normal labor (II).**

- Mechanism of labor stages.

##### **Lesson 8: Normal labor (III).**

- Normal birth assistance.
- Control of the fetus during childbirth.
- Adaptation and assessment of the newborn to extrauterine life.

##### **Lesson 9: Study of fetal wellbeing. Loss of fetal wellbeing.**

- a. Definition of loss of fetal well-being during pregnancy. Etiopathogenesis. Antepartum fetal death.
- b. Loss of fetal well-being during labor. Monitoring and management measures.

#### **Reinforcement of the first part: clinical cases**

#### **Lesson 10: Dynamic and mechanical dystocias.**

- a. Concept
- b. Concept of pelvic-fetal disproportion. Dystocias due to anomalies of the bone canal. Soft canal dystocias.

#### **Lesson 11: Dystocias due to anomalies of presentation and situation.**

- a. Breech presentation. Oblique and transverse situations. Anomalies in head rotation and flexion.

#### **Lesson 12: Prolonged pregnancy. Induction of labor.**

- a. Chronologically prolonged gestation: definition, predisposing factors and fetal repercussions. Obstetric conduct. Perinatal morbidity and mortality.
- b. Induced labor. Labor induction techniques and management.

#### **Lesson 13: Obstetric surgery. Caesarean section. Obstetric accidents.**

- a. Most common obstetric techniques.
- b. Caesarean section. Epidemiology. Technique. Complications. Maternal-fetal morbidity.
- c. Uterine rupture. Genital tears. Rectum- and urogenital fistulas.
- d. Uterine inversion. Obstetric shock.

#### **Lesson 14: Puerperium and lactation.**

- a. Modifications of the maternal organism during the puerperium.
- b. Surveillance and control of the puerperium.
- c. Physiology and establishment of lactation.

#### **Lesson 15: Puerperal hemorrhage. Puerperal infection. Lactation pathology.**

- a. Childbirth hemorrhages. Coagulopathies.
- b. Puerperal infection. Definition. Etiopathogenesis. Clinical forms. Diagnosis. Treatment.
- c. Hypogalactia. Hypergalactia. Breast engorgement. Suppression of lactation. Puerperal mastitis.
- d. Postpartum hemorrhages. Puerperal psychosis.

#### **Lesson 16: Pregnancy and cardiorespiratory, vascular and blood diseases.**

- a. Respiratory diseases, heart diseases.
- b. Varicose veins, thromboembolic prophylaxis,

antiphospholipid syndrome.

- c. Anemia.

#### **Lesson 17: Pregnancy and digestive and urinary diseases.**

- a. Hyperemesis gravidarum.
- b. Appendicitis.
- c. Intrahepatic cholestasis.
- d. Asymptomatic bacteriuria, cystitis and pyelonephritis.

#### **Lesson 18: Pregnancy and endocrine disorders.**

- a. Diabetes and pregnancy.
- b. Thyroid diseases.
- c. Other endocrine disorders.

#### **Lesson 19: Infectious diseases during pregnancy.**

- a. Rubella, Herpes virus (CMV, HSV, VZV) parvovirus B19, Hepatitis virus, AIDS, Human papillomavirus.
- b. Syphilis, gonorrhea, chlamydia, Listeriosis, Streptococcus agalactiae.
- c. Toxoplasmosis.

#### **Lesson 20: Abortion. Ectopic pregnancy.**

- a. Definition of abortion. Types of abortion, diagnosis and treatment.
- b. Definition of ectopic pregnancy. Types, diagnosis, differential diagnosis and treatment.

#### **Lesson 21: Trophoblastic disease.**

- a. Concept. Epidemiology. Classification. Etiopathogenesis.
- b. Clinic. Diagnosis and differential diagnosis of hydatiform mole.
- c. Treatment. Controls after molar evacuation.
- d. Trophoblastic tumors: Concept. Diagnosis, Treatment.

#### **Lesson 22: Congenital anomalies. Prenatal diagnosis.**

##### **Perinatal hemolytic disease. Non-immune hydrops.**

- a. Concept of congenital anomaly. Epidemiology.
- b. Classification. Diagnostic methods.
- c. Screening for chromosomal anomalies.
- d. Obstetric management. Termination of pregnancy.
- e. Concept of hemolytic disease of the fetus and newborn. Diagnosis. Treatment.
- f. F. Non-immune hydrops: epidemiology, causes, treatment and prognosis.

#### **Lesson 23: Preterm labor. Premature rupture of membranes. Chorioamnionitis.**

- a. Definition of preterm and immature birth. Threat of preterm birth.
- b. Epidemiology and etiopathogenesis. Obstetric

management and treatment of threatened preterm birth. Neonatal morbidity and prevention.

- c. Concept of premature rupture of membranes. Etiopathogenesis. Diagnostic methods. Obstetric management according to gestational age.
- d. Chorioamnionitis concept. Pathogeny. Clinic. Diagnosis. Obstetric management. Maternal-fetal morbidity.

**Lesson 24: Hypertensive disorders in pregnancy. Preeclampsia. Eclampsia.**

- a. Concepts and classification. Etiopathogenesis.
- b. Diagnosis. Prognosis. Treatment. Obstetric management.

**Lesson 25: Fetal growth disorders. Fetal growth restriction. Large for gestational age fetus.**

- a. Concept of placental insufficiency and fetal growth restriction. Etiopathogenesis and classification. Identification of the population at risk. Clinical, biochemical and ultrasound diagnosis. Study of fetal well-being.
- b. Differential diagnosis of the small for gestational age fetus.
- c. Obstetric management. Fetal prognosis.
- d. Definition of large for gestational age fetus. Diagnosis. Prevention. Obstetric management.

**Lesson 26: Disorders of fetal adnexa. Placenta previa.**

- a. Disorders of the umbilical cord. Mild abnormalities of the placenta. Oligohydramnios. Polihydramnios.
- b. Definition of placenta previa. Diagnosis. Clinical findings. Differential diagnosis. Treatment.

**Lesson 27: Placental abruption. Adherent placentas.**

- a. Definition. Diagnosis. Differential diagnosis. Clinical forms of placental abruption. Obstetric management.
- b. Definition. Classification of adherent placentas. Obstetric management.

**Lesson 28: Multiple pregnancy.**

- a. Multiple pregnancy: frequency and etiology.
- b. Classification. Etiopathogenesis and prevention.
- c. Diagnosis and follow-up during pregnancy.
- d. Birth assistance in pregnancies with two and more than two fetuses. Maternal-fetal morbidity.

**Lesson 29: Maternal and perinatal morbidity and mortality. Medical-legal aspects of pregnancy and childbirth.**

- a. Maternal mortality: classification, sources of information. Comparative epidemiology.

- b. Perinatal mortality: concept, rates and classification. Comparative epidemiology with other countries.
- c. Bioethical and legal assessment of feto-maternal morbidity and mortality.

**Reinforcement of the second part: clinical cases**

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**Section III: GYNECOLOGICAL ENDOCRINOLOGY AND REPRODUCTION.**

**Lesson 30: Genital cycle. Neuroendocrine regulation of the cycle. Ovarian steroid biosynthesis.**

- a. Ovarian cycle. Tubal cycle. Endometrial cycle. Vaginal cycle.
- b. Diencephalon-pituitary axis. Other endocrine glands. Neuroendocrine reflexes.

**Lesson 31: Primary amenorrheas. Congenital anomalies of the female genital tract. Alterations in sexual development.**

- a. Etiology. Anomalies of the Müllerian ducts. Rokitansky syndrome.
- b. Gonadal dysgenesis. Alterations in sexual development.

**Lesson 32: secondary amenorrheas.**

**Hyperandrogenisms. Polycystic ovary syndrome.**

- a. Secondary amenorrhea: Classification. Etiology.
- b. Diagnostic systematics in amenorrhea.
- c. Etiological treatment of amenorrhea.
- d. Classification of virilisms, diagnosis and treatment. Polycystic ovary syndrome.

**Lesson 33: Functional hemorrhages. Functional disorders of the Ovary.**

- a. Definition of dysfunctional uterine bleeding. Classification. Etiopathogenesis. Clinical findings, diagnosis and treatment.
- b. Hyperprolactinemia. Etiology, diagnosis and treatment.
- c. Premature ovarian failure. Diagnosis and clinical management. Consequences for women.

**Lesson 34: Physiology of puberty and climacteric.**

- a. Definition of puberty and fertile age. Endocrinology and chronology of puberty.
- b. Definition of climacteric and menopause: climacteric syndrome. Endocrinology of the climacteric

**Lesson 35: Disorders of childhood, puberty and adolescence. Climacteric control.**

- a. Early puberty. Delayed puberty.

- b. Treatment of symptoms and changes associated with climacteric.
- c. Prevention in the climacteric

**Lesson 36: Infertility and sterility. Management of sterility.**

- a. Concept. Classification. Etiology. Diagnosis and examination of the infertile couple.
- b. Treatment of Sterility. Ovulation induction. Assisted Reproduction Techniques.

**Lesson 37: Birth Control (I). Hormonal contraception.**

- a. Concept. Classification of the different contraceptive methods.
- b. Hormonal contraceptives: types and differential characteristics.
- c. Emergency contraception.

**Lesson 38: Birth Control (I). Other methods.**

- a. Rhythm and barrier methods.
- b. IUD: types and indications.
- c. Surgical contraception: hysteroscopic and tubal ligation.
- d. Male contraception.

**Reinforcement of the third part: clinical cases**  
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**Section IV: GENERAL GYNECOLOGY**

**Lesson 39: Lower genital infection. Sexually transmitted diseases. Pelvic inflammatory disease.**

- a. Genital infections: Etiopathogenesis. Propagation routes. Classification and nomenclature.
- b. Fungal vulvovaginitis
- c. Bacterial vaginosis
- d. Sexually transmitted infections: gonorrhea, syphilis, chlamydia.
- e. Pelvic inflammatory disease: concept, etiopathogenesis, clinical findings, diagnosis and treatment.

**Lesson 40: Endometriosis.**

- a. Endometriosis. Concept and classification. Adenomyosis. Etiopathogenesis. Clinical findings. Diagnosis and treatment.

**Lesson 41: Prolapses of the genital apparatus. Urinary incontinence. Urinary and rectal fistulas.**

- a. Support systems of the genital apparatus. Genital prolapses.
- b. Classification of prolapse. Etiopathogenesis. Symptoms. Diagnosis. Treatment.

- c. Urinary incontinence. Definition and types. Diagnosis and treatment.
- d. Genitourinary and intestinal fistulas.

**Section V: BENIGN AND MALIGNANT GYNECOLOGICAL AND BREAST PATHOLOGY.**

**Lesson 42: Diseases of the vulva and vagina.**

- a. Non-neoplastic epithelial disorders: lichen sclerosus. Benign tumors.
- b. Vulvar intraepithelial neoplasia (VIN). Vulvar cancer.
- c. Diseases of the vagina. Benign tumors. Vaginal intraepithelial neoplasia. Vaginal cancer.

**Lesson 43: Diseases of uterine cervix.**

- a. Cervical polyps. Dynamics of cervical repair.
- b. Action of the human papillomavirus (HPV) on the genital tract.
- c. Cervical cancer screening.
- d. Cervical intraepithelial neoplasia (CIN). Etiopathogenesis, diagnosis and treatment.
- e. Invasive cervical cancer: diagnosis, staging and therapeutic management.

**Lesson 44: Uterine diseases.**

- a. Uterine fibroids: Concept. Etiopathogenesis. Classification. Diagnosis and therapeutic management: medical and surgical treatment.
- b. Uterine sarcomas: clinical findings, diagnosis and treatment.

**Lesson 45: Diseases of the endometrium.**

- a. Endometrial polyps. Concept and management.
- b. Endometrial hyperplasia. Types and clinical management.
- c. Endometritis. Uterine synechiae.
- d. Endometrial adenocarcinoma. Types, Clinical findings, diagnosis, staging and therapeutic management.

**Lesson 46: Ovarian tumors (I).**

- a. Benign ovarian tumors: Classification and histological types. Differential diagnosis. Treatment.

**Lesson 47: Ovarian tumors (II).**

- a. Epithelial ovarian cancer. Classification and types. Clinical findings. Diagnosis. Staging. Treatment and prognosis.
- b. Malignant non-epithelial ovarian tumors. Classification and types. Clinical findings. Diagnosis. Staging. Treatment and prognosis.

**Lesson 48: Disorders of the breast (I).**

- a. Anatomy. Physiology. Congenital anomalies.

- b. Breast examination.
- c. Inflammatory disorders.
- d. Benign tumors.

**Lesson 49: Disorders of the breast (II).**

- a. Breast cancer. Classification and types.
- b. Clinical findings. Diagnosis. Breast cancer screening.
- c. Staging. Treatment and prognosis.

**Reinforcement of the fourth part: clinical cases**

**Reinforcement of the fourth part: clinical cases**

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**Reinforcement of the fourth part: clinical cases**

**INTERNSHIP/SEMINARS**

The objective of practical teaching is to provide the student with sufficient skills to be able to successfully undertake the exercise of their profession. During them you will be trained in the different obstetric and gynecological examination methods, as well as in the most fundamental therapeutic guidelines.

At the end of the internship the student must be familiar with:

1. Completion of the medical history.
2. Obstetric and gynecological examinations.
3. Conduction and delivery techniques.
4. More basic obstetric maneuvers.
5. Ability to interpret the most common tests
6. Techniques of minor gynecological surgery.

**There will be three different types of clinical practices:**

**1. Hospital guards.** The students will stay in the clinical service together with the on-call team (staff and residents). Its duration will be 7 hours on weekdays, from 3 to 10 p.m. There will be a minimum of two guards. Its purpose is to become familiar with the most common events that occur during shifts (emergency admission rooms, delivery rooms, operating rooms, etc.).

**2. Rotation through the different units of the clinical service.** Rotations through the different obstetrics and gynecology consultations can be carried out in the context of both the Obstetrics and Gynecology subject and those of Clinical Practice I or Clinical Practice III. In the teaching units of the 12 de Octubre and Infanta Leonor Hospitals they are carried out in the 4th year and within the subject of Clinical Practice I, while in the teaching units of the Gregorio Marañón and Clínico San Carlos Hospitals they are carried out in the 6th year, in the subject Clinical Practice III. Their purpose is to observe the most common exploratory diagnostic procedures and therapeutic

guidelines in the field of Obstetrics and Gynecology. Within the framework of these rotations, workshops are included that are carried out in the fourth year in the four teaching units.

Students will rotate through:

- Gynecology Consultations:
- General gynecology.
- Gynecological oncology.
- Pathology of menopause.
- Functional gynecology.
- Pelvic floor.
- Operating rooms
- Breast pathology.
- Obstetrics Consultations:
- High risk obstetric consultation
- Prenatal diagnosis.
- Ultrasound.
- Hospitalization rooms.
- Delivery rooms.
- Operating rooms.

**3. Workshops and seminars.** They will be taught in groups of 20-25 students. Its main purpose will be the clarification of the different exploratory and diagnostic techniques not explained in the master classes. Emphasis will be placed on the presentation of clinical cases that contribute to the clarification of the most confusing topics. Different simulators will be used to practice in different areas of the specialty (childbirth assistance, examination of the female genital tract and breasts, etc.) as well as for laparoscopy. Attendance at workshops and clinical practices is mandatory; The student who has not participated in at least 80% of them will not be evaluable.

The topics to be presented will be:

- a. Functional and clinical anatomy of the genital apparatus.
- b. Obstetric examination.
- c. CTG registration methods and uterine dynamics.
- d. Assessment of the various methods of monitoring antepartum and intrapartum fetal well-being
- e. Obstetric problems on the pathology of pregnancy and childbirth.
- f. Gynecological examination.
- g. Special examinations in gynecology.
- h. Imaging examination methods: ultrasound, mammography, MRI, etc
- i. Clinical cases on functional disorders, sterility and contraception.
- j. Clinical cases on rare gynecological disorders: gonadal dysgenesis, disorders of sexual development, congenital anomalies, etc.
- k. Clinical cases on vulvar, uterine cervix, endometrial,

ovarian and breast cancer.

**4. Virtual Campus.** The student can carry out autonomous practices on topics considered important in the subject of Obstetrics and Gynecology. They will be clinical cases that will strengthen the syllabus of the subject and that must be previously resolved by the student before being presented in the reinforcement classes.

They will also be able to view the most important lines of research of each teaching unit, both in obstetrics and gynecology, on the Virtual Campus. In this way, students will be able to consider carrying out a TFG with some of these lines of research in the future.

**5. Non-face-to-face teaching of the theoretical teaching of the subject.** If the training cannot take place in person, it will be carried out through the Virtual Campus. During the non-face-to-face period, the contents of the program will be taught in a conventional format but voiced and recorded so that students can review them as many times as they deem necessary. Likewise, some students will be able to present tutored clinical cases online to the rest of their classmates, which will also be recorded on the Virtual Campus, thus ensuring the delivery of the entire program. In addition, email, the Virtual Campus and online group and individual tutoring systems will be used.

### **TUTORING.**

The student will make an appointment with the coordinator of each unit through the UCM email, or with the secretary of the Department of Public and Maternal and Child Health. (Ph. 913941521).

### **EVALUATION CRITERIA.**

Throughout the Course there will be two partial exams that will have two modules: one with 50 multiple choice questions (with four answers and only one valid, subtracting one correct answer for every four failed ones), and another with 10 short questions to be developed. The duration of the exam will be 150 minutes. Each module will have a maximum score of 5 points and the final score will be the sum of both. To pass each partial exam, the grade must be equal to or greater than 6. Both partial exams must be passed to pass the subject. Otherwise, in June the student must pass the failed partial or partials, with a grade equal to or greater than 6. Finally, for the July call, students who have not passed the entire subject up to that point will have to appear to a final exam of the entire

subject, and to pass this exam the student must have at least a grade of 5.5. The June and July exams will have the same format and duration as the midterms. Theoretical knowledge will be taken into account, as well as attendance at on-call sessions, seminars, practices and virtual field. Students with the highest grade will be eligible for Honors.

The evaluation, whether in the form of a partial and/or final exam, in the case of having to do it online, will be like the in-person one, through short multiple choice questions, to compute the evaluable training actions. This exam will be carried out online in the "Virtual Campus Questionnaire Environment of the Moodle Platform", with the same scheme and the same evaluation criteria as the in-person exam. The Google Meet tool will be used to review the exams. Virtual tools that will be used include Google Meet, Teams, quizzes, and required readings.

The Council of the Department of Public and Maternal and Child Health, at its meeting on March 14, 2018, adopted the following agreement in relation to possible fraudulent activities: "Both identity theft and fraudulent copy, action or activity during a exam will lead to failure of the corresponding subject in this call. The use or presence of notes, textbooks, calculators, mobile phones, digital watches or other means that have not been expressly authorized by the teacher in the exam statement will be considered fraudulent activity. In any of these circumstances, the infraction may be the subject of the corresponding informative file and, where appropriate, sanctioning to the UCM Services Inspection.

The Quality Commission, at its meeting on February 23, 2017, approved the attitude to be followed in the event of a voluntary or accidental violation of the rules for conducting the exam and in the event of suspicion of improper use of other people's texts in certain works: "The voluntary or accidental violation of the rules for conducting the exam prevents its assessment, so the offending student will take an oral exam of the subject to establish his or her knowledge of the subject. If intentionality in the deception is confirmed, it will be considered a very serious ethical breach, and the Services Inspection will be informed to take the disciplinary measures that it deems appropriate. Any work that may be considered plagiarism or fraudulent will be invalidated and the Services Inspection will be notified so that it can take the appropriate disciplinary measures."

### **REFERENCES**

- Usandizaga JA, De la Fuente P. Obstetricia y



Ginecología. Edit. Marbán, 2010.

- Cunningham FJ, Leveno KJ, Bloom SL, Dashe JS, Hoffman BL, Casey BM, Spong CY. Williams Obstetrics 25ª ed. Edit. McGraw-Hill, 2018.
- Edmonds DK, Lees C, Bourne T. Dewhurst's Textbook of Obstetrics and Gynecology 9ª ed. Edit. Wiley Online Library, 2018.
- DeCherney AH, Roman A, Nathan L, Laufer N. Current diagnosis and treatment Obstetrics and Gynecology 12ª ed. Edit. McGraw-Hill, 2019.
- Up to Date: <http://www.uptodate.com/>
- Protocolos asistenciales de la Sociedad Española de Ginecología y Obstetricia.

[https://sego.es/Guias\\_de\\_Asiencia\\_Practica](https://sego.es/Guias_de_Asiencia_Practica)