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Inhalt

1	Benign diseases of the gynecology	2
2	Oncology	2
2.1	Endometrial carcinoma	2
2.2	Ovarian Cancer	2
2.3	Cervical carcinoma	2
2.4	Vulvar carcinoma	3
2.5	Vaginal carcinoma	3
2.6	Breast carcinoma	3
3	Oncological case presentation	4
4	Mammography	4
5	Sterility, desire for children, endocrinology	4
6	Urogynecology and urodynamics	4
7	Inflammatory diseases (infectiology)	5
8	Emergencies	5
9	Sexual Assault	5
10	Work from gynecology	5
11	Obstetrics	5
12	Psychosomatic/pregnancy-associated diseases	6
13	Obstetric phantom	6
14	emergencies in the delivery room	7
15	Pharmacotherapy in pregnancy and lactation: Seminar	7

The student should be knowledgeable in the following topics of gynecology and obstetrics:

1 Benign diseases of the gynecology

- Benign diseases of the breast; knowledge of history, symptoms, diagnostics, therapy of benign tumors of the breast (e.g. fibromas, lipomas)
- Benign tumors of the internal genitals
- Knowledge about history, symptoms, diagnostics, therapy of uterus
- myomatosus
- Endometriosis: knowledge about history, symptoms, diagnostics, therapy
- Association between endometriosis and sterility Treatment options (surgical, hormonal, pain therapy)

2 Oncology

- Take the oncological history, including all additional clinically relevant aspects, and draw the appropriate diagnostic and therapeutic conclusions
- explain the pathogenesis, classify the disease histopathologically, interpret the symptoms and correlate them accordingly
- finally, to incorporate interdisciplinary aspects into the treatment plan

2.1 Endometrial carcinoma

- Epidemiology
- Risk factors
- Clinic (symptoms, complaints)
- Diagnostics
- Therapy:
 - Fertility-preserving option in T1a G1
 - Surgical therapy stage-dependent
 - Radiotherapy

Prognosis

2.2 Ovarian Cancer

- Epidemiology
- Risk factors
- Clinic (symptoms, complaints)
- Diagnostics
- Therapy:
 - Surgical therapy depending on stage
 - Adjuvant chemotherapy
- Prognosis

2.3 Cervical carcinoma

- Epidemiology
- Precancerous lesions: CIN I - III
- Screening Cytological smear
- Risk factors

- Prophylaxis (HPV: vaccination)
- Clinic
- Diagnostics
- Therapy:
 - Surgical therapy depending on stage
 - Radiotherapy
- Prognosis

2.4 Vulvar carcinoma

- Epidemiology
- Risk factors
- Precancerous lesions: VIN I - III
- Clinic
- Therapy:
 - Surgical therapy depending on stage

2.5 Vaginal carcinoma

- Epidemiology
- Risk factors
- Precancerous lesions: VAIN I - III
- Clinic
- Therapy:
 - Surgical therapy ◦ Radiotherapy

2.6 Breast carcinoma

- comprehensive education in all aspects of this special disease pattern
- the epidemiological background of this most frequent cancer disease of women
- should be explained
- to recognize the risk factors of women for breast cancer within the gynecological anamnesis e.g. hormone intake or family history.
- principles of prevention and screening should be mentioned
- the clinical and morphological symptoms of breast cancer should also be listed
- be able to explain the most important histological forms and define the pathological staging, define the pathological staging
- distinguish between benign changes, such as a fibroadenoma or breast inflammation and breast carcinoma can be differentiated. In addition, the focus is on the various therapeutic options of breast carcinoma.
- the options of surgical therapy, radiotherapy, chemotherapy, hormonal therapy, antibody therapy, etc. should be presented, for which knowledge of prognostic and predictive factors is required.
- The palliative therapy of breast carcinoma represents a special challenge. The student should also be able to enumerate the possible therapeutic measures for this and be able to name the most important principles
- supportive measures and the option of psycho-oncological care with the aim of maintaining the highest possible quality of life.

3 Oncological case presentation

- take a gynecological medical history
- to specifically inquire about and evaluate the symptom of PMB
- to describe the connection between hormone replacement therapy and the genesis of endometrial carcinoma
- Conduct patient interviews to accompany the diagnostic and therapeutic status of the treatment
- to determine the standard treatment for endometrial carcinoma according to the AGO guidelines
- to explain a fractionated abrasion, incl. the essential complications

4 Mammography

- to name and explain the examination methods in breast diagnostics
- to explain the clinical differentiation criteria between benign and malignant processes
- explain the aim of mammography screening
- define mammographic focal findings and differentiate calcifications
- explain the use of the standardized mammography reporting and documentation system BI-RADS in practice.

5 Sterility, desire for children, endocrinology

- Causes, diagnostics and therapy of infertility/desire to have children
- Causes and diagnostics of primary/secondary amenorrhea
- Methods and side effects of contraception
- Female cycle and abnormalities

6 Urogynecology and urodynamics

- to inquire about the relevant complaints of urinary incontinence in an anamnesis interview
- to know the most important forms of urinary incontinence in women and to distinguish and define them from each other
- know which diagnostic methods can be used to confirm the diagnosis
- to be able to interpret the possible results of the diagnostic measures in a rudimentary way
- to explain the mechanism of continence
- to list the causes for the occurrence of urinary incontinence
- to name the therapeutic options for urinary incontinence
- to describe the relevant symptoms of the different forms of incontinence (stress incontinence
- forms of incontinence (stress incontinence, urge incontinence, mixed forms) and
- inquire about and classify the symptoms of descensus

- the possible diagnostic examination methods of urogynecology (gynecological examination, stress test, padtest, perineal sonography, cystoscopy, urodynamic measurement with uroflow, profilometry, cystomanometry) and be able to provide examples of conservative and operative forms of therapy for incontinence and descensus.

7 Inflammatory diseases (infectiology)

- Inflammatory diseases of the breast
- Knowledge about anamnesis, symptoms, diagnostics, therapy of mastitis puberalis and non puperalis
- Inflammatory diseases of the external genitals
- Knowledge of history, symptoms, diagnostics, therapy of fungal and bacterial infections in the area of vulva and vagina
- Sexually transmitted diseases
- Knowledge of history, symptoms, diagnostics, therapy of known sexually transmitted diseases (esp. gonorrhea, syphilis, herpes, ulcus molle, chlamydia, cytomegaly, trichomonas, HPV infection).

8 Emergencies

- Explain the clinic, diagnosis, and differential diagnosis and therapeutic measures of common gynecologic emergencies.

9 Sexual Assault

- Identify the acute consequences of physical, sexual, and psychological violence on women and children
- to conduct a conversation with victims of violence
- name the chronic consequences of violence on physical and mental health
- to show victims of violence further possibilities of help

10 Work from gynecology

- Identify and name the clinical relevance of a paper and question the opportunities and limitations of clinical evidence, explain characteristic study design and sources of error, define internal and external validity, enumerate frequencies to differentiate and classify, name survival time analyses

11 Obstetrics

- To have basic knowledge of the process of pregnancy, e.g., duration of pregnancy, onset of viability, limits of preterm birth, lung maturation, etc.
- Pre-existing health conditions that could affect the regular course of a pregnancy should be learned. This includes risk factors such as family strains, own diseases, allergies, medication intake.

- In particular, the course of previous pregnancies and births should be inquired about, with special attention to complications.
- Basic knowledge of examinations during pregnancy, such as anamnesis, palpation, standard ultrasound and CTG.
- In addition to somatic processes, the student should also consider psychosomatic relationships in the course of pregnancy
- Recognize and classify bleeding in pregnancy as a pathological event. A distinction must be made between bleeding in early pregnancy as an expression of a possible miscarriage, extrauterine pregnancy or pathological changes in the cervix uteri. The clinic and differential therapeutic measures of bleeding in early pregnancy must be able to be explained
- Know the causes of bleeding in late pregnancy
- Know the clinical signs, accompanying symptoms, diagnostic and
- and therapeutic measures for the different clinical pictures must be
- be able to explain
- Abortions
- Extrauterine pregnancy
- Premature birth
- placenta praevia
- premature abruption of the placenta
- peripartum hemorrhage

12 Psychosomatic/pregnancy-associated diseases

- Know hyperemesis in early pregnancy as one of the most important psychosomatic disorders in pregnancy.
- Appreciate the importance of psychosomatics in obstetrics and gynecology
- to know a basic framework for communication with the difficult patient
- to know the symptoms of the most important diseases caused by pregnancy (gestosis, preeclampsia, HELLP syndrome, gestational diabetes)
- to know the necessary diagnostic and therapeutic steps for the recognition and
- to know the necessary diagnostic and therapeutic steps to recognize and observe the course of the disease and to assess their value

13 Obstetric phantom

- To understand the process of birth on the phantom (lowering of the head and birth mechanism). To recognize the relevant obstetric findings by palpation examination:
- Cranial position with level and guide point Assessment of arrow suture.
- final pelvic position transverse position
- assisted birth in the case of breech presentation, suction cup birth and forceps birth with
- assistance can be performed by the patient

14 emergencies in the delivery room

- to ask for and recognize anamnestic risk constellations for emergency situations mentioned below
- recognize the clinical symptoms of the most important emergency situations in the delivery room (placental abruption, acute fetal asphyxia, prolapsed umbilical cord, atonic uterine hemorrhage) and explain their pathophysiology
- to name the most important measures of clinical and instrumental diagnostics in the context of the graded diagnostics of the above-mentioned emergency situations
- to classify CTG tracings as inconspicuous, suspicious or pathological
- explain the therapeutic options

15 Pharmacotherapy in pregnancy and lactation: Seminar

- Risks to the fetus from exogenous noxious agents during pregnancy Pathological-anatomical terms to describe malformations (anomalies, dysplasias, dysmelia - genetic, inherited, acquired)
- Knowledge of malformations and malformations due to biological (infectious), chemical (drugs, industrial chemicals), physical (radionuclides) causes
- Risks due to drug intake by the mother in S+S
- Knowledge about teratogenic and embryo- or fetotoxic effects of drugs
- Knowledge of the diffusion and transport barriers for substance transport ("placental barrier")
- Changes in pharmacodynamics and pharmacokinetics in S+S
- Knowledge of physiological changes in fluid balance, in the metabolism of the mother
- Knowledge about physiological changes ("maturation") in the metabolism of the newborn (child)
- Precautions