**REVISED TABULATION* OF CASE REQUIREMENTS FOR**
**PART II DIPLOMATE EXAMINATION AND CASES FOR DISCUSSION**

*APPLICANT'S COPY (Revised Tabulation of **TEN VARIED MAJOR Ob-Gyn Procedures for PART II Diplomate Exam**)*
***Cases numbered #1-10: SIX (6) Major Ob and FOUR (4) Major Gyn Cases, IN ARIAL FONT 12 POINTS AND LANDSCAPE VIEW***

| TALLY NUMBER(#). PATIENT'S AGE & OB SCORE (G/P). DATE ADMITTED; DATE DISCHARGED. *HOSP Where procedure was done* | ADMITTING DIAGNOSIS | PRE-OP DX | MANAGEMENT, OPERATION /PROCEDURE. DATE DONE | INDICATION for Mx/ JUSTIFICATION needed, if there is deviation from standard of care | FINAL DX | OUTCOME/ HISTOPATH |
|---|---|---|---|---|---|---|
| Ob1. | | | | | | |
| Ob2. | | | | | | |
| Ob3. | | | | | | |
| Ob4. | | | | | | |
| Ob5. | | | | | | |
| Ob6. | | | | | | |
| Gyn7. | | | | | | |
| Gyn8. | | | | | | |
| Gyn9. | | | | | | |
| Gyn10. | | | | | | |
| | | | | | | |

- Each case should be numbered ***consecutively from #1 to #20*** *(without any patient name as identifier),* <u>including the supporting documents*</u> (the EXACT content of the operative record & the histopath result are typewritten on a separate paper, without patient identifiers); these supporting documents are also numbered consecutively from #1 to #20.
- All dystocia (abnormal labor) cases must include a partogram.

*APPLICANT'S COPY (Tabulation of* ***TEN VARIED MINOR Ob-Gyn Procedures)***
***Cases numbered #11-20: FIVE (5) Minor Ob and FIVE (5) Minor Gyn Cases, IN ARIAL FONT 12 POINTS AND LANDSCAPE VIEW***

| TALLY NUMBER(#). PATIENT'S AGE & OB SCORE (G/P). DATE ADMITTED; DATE DISCHARGED. *HOSP Where procedure was done* | ADMITTING DIAGNOSIS | PRE-OP DX | MANAGEMENT, OPERATION /PROCEDURE. DATE DONE | INDICATION for Mx/ JUSTIFICATION needed, if there is deviation from standard of care | FINAL DX | OUTCOME/ HISTOPATH |
|---|---|---|---|---|---|---|
| Ob11. | | | | | | |
| Ob12. | | | | | | |
| Ob13. | | | | | | |
| Ob14. | | | | | | |
| Ob15. | | | | | | |
| GYN16. | | | | | | |
| GYN17. | | | | | | |
| GYN18. | | | | | | |
| GYN19. | | | | | | |
| GYN20. | | | | | | |
| | | | | | | |

- Each case should be numbered ***consecutively from #1 to #20*** *(without any patient name as identifier),* <u>including the supporting documents*</u> (the EXACT content of the operative record & the histopath result are typed on a separate paper, without patient identifiers); these supporting documents are also numbered consecutively from #1 to #20.

**<u>*FOUR VARIED MAJOR CASES</u> (from the Ten Varied Major Ob-Gyn Procedures tabulated above) are FOR DISCUSSION- <u>TWO (2) VARIED MAJOR Ob & TWO (2) VARIED MAJOR Gyn</u> (w/ *varied* indications, or <u>*NO TWO SIMILAR Indications*</u>)-**

**Note:** Case discussions of the four (4) submitted varied Major Ob-Gyn cases for Part II Oral exam application must have the DISCUSSION PROPER limited to ***one page*** with a minimum of 500 words and a maximum of 600 words; in ARIAL font 12, single space, portrait view.
This discussion should be PATIENT-Focused/Patient-Centered, with an emphasis on the critical issues influencing the decision-making in the case and with correct citation of updated or latest references and evidence from recent literature/journals (dated five years from submission). NO 'COPY-PASTE' allowed.

- END.