

Student Name: \_\_\_\_\_

Clerkship Block: \_\_\_\_\_

**Diagnosis & Procedure Check List**

<b>OB Service: Minimum Expected</b>	Minimum #	Date	Date	Date	Date	Date
Labor & Delivery Evaluate patient presenting to L&D/MEU	5					
Intrapartum Care Follow patient in labor	5					
Prenatal Visit	5					
Find FHT's/Interpret fetal tracing	5					
Vaginal delivery	1					
<b>GYN Service: Minimum Expected</b>						
Postop Gyn Follow and manage Postop patient	5					
Ambulatory Gyn Problems Evaluate patients with Gyn complaint	5					
Breast Exam	1					
Contraceptive Counseling	1					
Diagnose and manage vulvovaginal symptoms	5					
<b>Clerkship: Minimum Expected</b>						
Pelvic exam	5					
Pap Smear	1					
Perform & Interpret wet mount	5					