

Syllabus for Licensing Examination of M.Sc. Medical / Clinical Embryology



Nepal Health Professional Council

Bansbari, Kathmandu

Table of Content

S.N.	Topic	Marks
1	Theory	
	A. Basic skill in laboratory (BSL)	5 %
	B. Basic Reproductive Biology Module	10 %
	C. Andrology Module	10%
	D. Embryology Module	10 %
	E. Assisted Reproductive Technology	10%
	F. Clinical Module	5 %
2	Diagnostic and Treatment Options (Clinical Protocols)	
	A. Clinical andrology and semenology	10 %
	B. Embryology	10%
	C. Assisted Reproductive Technology	10%
	D. Cytogenetics	10%
	E. Laboratory management, quality control & ethics	10 %
	Total	100

1. Theory

A. Basic skill in laboratory (BSL)

- Good laboratory practice, personal attitude, communication and confidentiality
- Laboratory mouse: handling, experimentation and maintenance of colony
- Monitoring estrous cycle, superovulation and mating
- Animal handling, injection and dissection
- Reading research papers, documentation of research data and presentation
- Journals in Reproduction, online resources in Embryology
- Statistical evaluation of data
- Washing and preparation of glassware for culture work
- Microscopes: principles, application and care
- Waste disposal
- Sterilization and disinfection
- Laboratory chemicals: handling, preparation, storage, stability and hazard
- Handling of equipment and maintenance
- Pipetting & troubleshooting

B. Basic Reproductive Biology Module

- Structure of eukaryotic cell
- Meiotic and mitotic cell division
- Somatic and germ cell
- Regulation of cell cycle
- Research methodology I
- Research methodology II
- Ethics in research
- Anatomy of male reproductive system
- Anatomy of female reproductive system
- Histology and function of male reproductive system
- Histology and function of female reproductive system
- Hormones: mechanism of action and regulation
- Reproductive hormones
- Endometrial & Implantation Endocrinology
- Advanced Hormonal concepts & Biomarkers
- Genomics, proteomics & metabolomics
- Structure of spermatozoa, oocyte and embryo
- Spermatogenesis
- Epididymal sperm transport and maturation
- Regulation of spermatogenesis
- Menstrual cycle
- Oogenesis
- Folliculogenesis
- Sperm transport in male

- Sperm, oocyte and embryo transport in female
- Follicle and embryo transport in female
- Capacitation
- Acrosome reaction
- Sperm-zona interaction
- Fertilization
- Errors in fertilization
- Physiology of implantation
- Hormonal regulation of implantation
- Fundamentals of immunology
- Immunological basis of infertility
- Regulation of gene expression
- Introduction to human genetics
- Genetic abnormalities in male reproduction
- Genetic abnormalities in female reproduction
- Epigenetics in reproduction
- Stem cell Biology and Regenerative Medicine
- Reproductive toxicology – male
- Reproductive toxicology – female
- Role of apoptosis in development
- Early morphogenesis and patterning
- Impact of microbial contaminants on gametes and embryos development in Andrology and IVF laboratory.
- Bioinformatics in IVF

C. Andrology Module

- Setting up of an Andrology laboratory
- Safety in Andrology laboratory
- Quality control in andrology
- Semen analysis
- Computer assisted semen / sperm analysis (CASA)
- Biochemistry of spermatozoa and seminal plasma
- Predictive value of semen analysis
- Antisperm antibodies
- Sperm wash techniques
- Seminal microbiology and virology
- Semen cryopreservation, donation and banking
- Therapeutic insemination procedures
- Sperm fertilizing ability testing
- Sperm DNA integrity testing: clinical utilities
- Male contraception
- Testicular disorders and infertility
- Disorders of erection and ejaculation

- Clinical approach to Patients /couples consultation and counseling on semen quality, Sperm disorders and potential treatment approaches.
- Semen /sperm abnormalities and their treatment options like: Different types of Sperm washing, cell sorting (Microfluidics), using theophylline/Pentoxifylline, IUI, Conventional IVF, ICSI, PICSI, IMSI, etc.
- Ethics and ethical issues in Andrology

D. Embryology Module

- Oocyte abnormalities, selection and treatment
- Early embryo and blastocyst development
- Role of maternal and paternal factors on embryo development
- Embryonic genome activation
- Embryo metabolism – I
- Embryo metabolism – II
- Embryo grading
- Assessment of embryo viability
- Development of gonads
- Gastrulation and neurulation
- Placenta
- Cell to cell communication in embryo development
- Teratogenesis
- Twinning
- Therapeutic cloning
- Embryonic stem cell
- Metabolomic screening of embryos to enhance successful selection
- Ethical issues in embryology
- Multi-nucleation in embryos
- Clinical counseling on ovarian follicular development and oocyte-related abnormalities.
- Follicles / oocytes and embryo abnormalities and their treatment options like: LAH, calcium ionophore, Spindle microscopy etc.

E. Assisted Reproductive Technology (ART) Module

- Setting up of an ART laboratory
- Laboratory management, quality control and ethics
- Supply Chain, Disaster Management & Preventive Maintenance
- ART services, key performance indicators (KPIs) & ART research methodology in IVF
- Bioethics & Legal Compliances in IVF/ART
- Clinical consultation on sperm, oocyte abnormalities, ART treatment strategies, and embryo quality and embryo transfer.

- Intrauterine Insemination (IUI)
- In vitro fertilization (IVF)
- Intracytoplasmic sperm injection (ICSI) & PICSi
- Intra morphologically selected sperm injection (IMSI)
- Embryo culture system
- Culture medium
- Embryo grading
- Laser assisted hatching (LAH)
- Embryo cryopreservation
- Oocyte cryopreservation
- Ovarian and testicular tissue cryopreservation
- Ethical issues in semen banking
- Metabolomics and its applications in ART
- In vitro maturation (IVM)
- Health economics in ART
- Air quality in IVF lab
- Oxidative stress in assisted reproduction
- Embryo transfer
- Principles of aseptic procedures
- In vitro systems and their improvement
- Quality control procedures
- Embryo biopsy techniques
- Preimplantation genetic screening/diagnosis (PGS / PGD)
- Preparation of guidelines for IVF / ART
- National & International guidelines for IVF / ART
- Laboratory protocols & troubleshooting
- Risk management in IVF lab
- Data management and interpretation

F. Clinical Modules

- Infertility counseling
- Male factor infertility
- Ultrasound (including Doppler) and its application in ART
- Superovulation regimes
- Ovarian hyperstimulation and its management
- Oocyte pickup, embryo transfer and embryo reduction
- Luteal phase support

2. Diagnostic and Treatment options (Clinical Protocols)

A. Andrology and Semenology: “WHO Laboratory Manual guidelines for examination & processing of human semen”, 6th Edition

- **Routine Semen Analysis (Macroscopic & Microscopic):**
 - Macroscopic: assessment of sample liquefaction time, appearance, volume measurement, viscosity (consistency) and p^H testing.
 - Microscopic: Sperm concentration & count, assessment of different types of motility, motility index, vitality, Hypo-osmotic swelling (HOS) test, sperm morphology, functional sperms, velocity and to evaluate strict criteria for normal vs abnormal head, necks, mid-piece, and tails, trial wash
- **Advanced Diagnostic and Functional Andrology**
 - Sperm DNA Fragmentation (SDF) Assays: Sperm Chromatin Dispersion (SCD) test or TUNEL assay, and other advance assays related to sperm qualities.
 - Differential morphology, trial wash, DFI etc., to decide the potential treatment options
 - Leukocytospermia Quantification: Staining and quantification of round cells vs white blood cells using peroxidase (Endtz) test.
 - Anti-sperm antibody (ASA) screening: Performing screening assays such as the Mixed Antiglobulin Reaction (MAR) test or immunobead test.
 - Retrograde Ejaculation Analysis: Processing and isolating sperm from post-ejaculatory urine samples.
 - Protamine Replacement:
 - Cromomycin A3 (CMA3) Staining: A fluorescent dye that competes with the protamines to bind to DNA. Higher fluorescence (CMA3)-positive) shows low protamine levels and poor chromatin packaging.
 - ✓ Aniline Blue Staining: A dye that stains basic proteins to detect excessive residual histones. It highlights incomplete chromatin maturation and failed replacement.
 - ✓ Protamine 1 and 2 (P1:P2): Measure ratio of protamine 1 and protamine 2 by high-performance liquid chromatography (HPLC) which is often abnormal in infertile men.
 - ✓ Mass Spectrometry: Advance Proteomic analysis used in research setting to detect specific protamine isoforms and post-translational modification like Phosphorylation
- **Sperm Preparation & Processing Techniques**
 - Density Gradient Centrifugation (DGC): Preparing discontinuous layers (e.g., 40 /45 % and 80/90 %) to isolate high-quality, motile sperm from contaminated or poor –quality ejaculate.
 - Swim –up techniques: Standard direct swim-up from semen or from a washed pellet for normozoospermic samples.
 - Processing Difficult Samples: Specialized protocols for processing severe oligozoospermia, teratozoospermia, or highly viscous samples.

- Surgical Sperm Retrieval Processing: Extraction isolation of viable sperm from testicular tissue (TES/TESE) or epididymal fluid (PESA/MESA).
- Cryopreservation & Bio-banking
 - Sperm freezing Protocols: Proper mixing ratios with glycerol-based cryoprotectants, vapor phase freezing, and plunging into liquid nitrogen.
 - Specialized Freezing: Techniques for cryopreserving single or low numbers of sperm (e. g., microdroplets or specialized carriers).
- Laboratory Management & Quality Control (QC)
 - Equipment Calibration: Daily calibration and temperature tracking of heating blocks, microscopes and centrifuges.
 - Internal Quality Control: Utilizing preserved beads or running duplicate controls for manual counting validation.
 - Safety and Hazard management: Handling potentially infectious samples, enforcing universal bio-safety precautions, and managing liquid nitrogen safety.

B. Embryology:

- **Laboratory Setup, Ambient Control & QA**
 - Incubator Calibration: Hands-on monitoring and validation of temperature, CO₂, O₂ level using external gas analyzers and digital thermometers.
 - Workstation and IVF room Validation: Verifying laminar flow velocity, HEPA filter efficiency, and VOC levels using specific air-quality meters, air particles in IVF room, etc.
 - Culture Dish Preparation: Preparing micromanipulation, conventional IVF, and culture drops under sterile mineral oil overlay with proper equilibration times.
- **Follicles and Oocytes Processing and Handling**
 - Follicles Retrieval (OPU Processing): Scanning follicular aspirates under a stereozoom microscope to isolate cumulus-oocyte complexes (OCCs)
 - Follicles Denudation: Mechanical stripping of cumulus and corona radiata cells using enzymatic (hyaluronidase) and mechanical (Pipetting) methods
 - Maturity Assessment: Microscopic evaluation to grade oocytes as Germinal vesicle (GV) Metaphase I (MI), or mature metaphase II (MII).
- **Fertilization & Micromanipulation (ICSI)**
 - Conventional Insemination: calculating and executing exact insemination concentrations for standard IVF drop setups and maturity of oocyte.
 - Micromanipulator Alignment: Setting up, centering, and calibration holding and injection pipettes on an inverted microscope.
 - ICSI Execution: Practicing sperm selection (PVP) immobilization) and mechanical microinjection techniques on training models.
 - Fertilization Check: Microscopic inspection at 16-18 hours post-insemination to identify normal fertilization (2 PN, two polar bodies) vs abnormal cases (1 PN, 3 PN).
- **Embryo Culture & Morphokinetic Grading: Cleavage Timeline**
 - Zygote to Cleavage-Stage Evaluation (DAY 0 to 2 & 3):
 - 24 to 30 hours: single celled zygote divides mitotically for the first time into 2-cell embryo making the start of cleavage.

- 40-50 hours (Day 2): Cell divides again to form a 4-cell embryo.
- Approx. 72 hours (Day 3): Continued division results in 8-16 cells called Day 3 cleavage cell.
- In approx. 96 hours (Day 4): Structural transition into Blastocyst before uterine implantation.
- Grading blastomere count, cell symmetry, and fragmentation percentages.
- Blastocyst Evaluation (Day 5 & 6): Applying different grading systems to evaluate blastocoel expansion, the inner cell mass (ICM), and trophectroderm (TE).
- Time – Lapse Data Interpretation: Reviewing annotations and morphokinetic milestones using continuous monitoring software.

- **Cryopreservation & Vitrification**

- Embryo Vitrification: Performing precise equilibration steps in increasing concentrations of cryoprotectants (EG/DMSO) and executing ultra-rapid cooling on open or closed carrier systems.
- Warming Protocols: Performing step-down dilution warming steps to remove cryoprotectants safely.
- Survival Assessment: Evaluating post-thaw blastomere survival and blastocyst re-expansion metrics to predicts embryo viability, implantation potential, and live birth rates.

C. Assisted Reproductive Technology (ART) Services and ART Research Methodologies in IVF:

- **Standard Operating Procedures (SOPs) Lab Logistics**

- Patient Workflow Mapping: Simulating end-to-end laboratory sequence from oocyte pickup (OPU) scheduling to embryo transfer or cryopreservation.
- Double Witnessing systems: Completely eliminate sample mixing hazards
 - ✓ Manual dual-signing system
 - ✓ Electronic radio frequency identification (RFID) or
 - ✓ Barcode tracking
- Incident Reporting and Disaster Management: simulating laboratory emergencies, including gas line drops, incubator element failures, power outages, and liquid nitrogen tank leaks.

- **Clinical Documentation, Electronic Health Records (HER) & Auditing**

- Embryology Logbook: hands-on data entry for patient history, stimulation cycles, follicle counts, fertilization outcomes, and developmental tracking sheets.
- **Key performance Indicator (KPI):** Weekly calculation and clinical graphing of essential lab metrics:
 - ✓ Oocyte Denudation Damage Rate: target < 5%
 - ✓ Normal fertilization Rate (2PN): target >75% for ICSI
 - ✓ Blastocyst Development Rate: Target > 50%
 - ✓ Post – Thaw Embryo Survival Rate: Target >75%

ART Research Methodologies in IVF

Experimental Design & Laboratory Models

- **Animal / Alternative Training models:** Utilizing mouse embryos or non-human models (where ethically approved) for micromanipulation training, optimization testing, and media efficacy trials.
- **Media Condition Comparisons:** Designing split-oocyte cohort experiment to test variations in sequential vs single-step culture media behaviors.

Biosensor Validation & Non-Invasive Biomarker Assays

- **Spent Media Analysis:** Collecting and processing micro-droplets of spent embryo culture media for metabolic analysis (e.g., glucose consumption profiling, amino acid turnover) or non-invasive prenatal testing for aneuploidy (niPGT – A).
- **Advance equipment Testing:** Using particle counters, Volatile organic compound (VOC) meters, and ultra-fine pH meters to measure sub-lethal environmental fluctuations across different incubation settings.

Data Management & Biostatistics in ART

- **Statistical Modeling for Clinical Outcomes:** Setting up software arrays (e.g., SPSS, R, or Excel plugins) to compute correlation coefficients between clinical variables (such as maternal age, sperm DNA fragmentation index) and final clinical pregnancy rates.
- **Journal Club & Research Auditing:** Practical cross-examination of contemporary embryology literature, checking control cohort validations, sample size powers, and confounding parameters.

D. Cytogenetics:

- **Preimplantation genetic testing(PGT) Biopsy Techniques:**
 - **Cleavage-stage biopsy (Day 3 Embryos):** mechanical or laser-assisted breaching of the zona pellucida to safely aspirate a single blastomere.
 - **Blastocyst Trophectoderm Biopsy (Day 5/6 Embryos):** Advanced micro-surgical sampling of 5-10 trophectoderm cells without disrupting the inner cell mass (ICM).
 - **Biopsied conditioning:** Rinsing, loading, and cellular lysis of the sampled cells into micro-tubes (TUBING) for downstream genetic analysis
- **Advanced Molecular Cytogenetic (PGT Analysis):**
 - **Next Generation Sequencing Hybridization (FISH):** Interpretation of NGS sequencing library data to screen for embryo aneuploidies(PGT – A), structural rearrangements (PGT – SR), or single gene disorders (PGT – M)
 - **Fluorescence in situ Hybridization (FISH):** Preparation of blastomere slide or lymphocyte, probe hybridization, and signal enumeration under a fluorescence microscope to detect mosaicism or numeric anomalies.
 - **Polymerase chain reaction (PCR) & Karyotyping:** Applied techniques for checking genetic markers, detecting contamination, and tracking targeted inherited conditions.

- **Classical Cytogenetic & Karyotyping:**
 - Slide Preparation & Chromosome spreading
 - Peripheral blood lymphocyte culture
 - G-Banding & Karyotype Analysis
- **Clinical Case interpretation & Reporting**
 - Embryo Mosaicism Decision Matrix: reviewing and interpreting PGT reports to categorize embryos as euploidy, aneuploidy, or deciding transfer priority.
 - ISCN Nomenclature Practice: Writing and deciphering cytogenetic results using the Standard International System for Human Cytogenetic Nomenclature (ISCN).

E. Laboratory management, quality control & ethics

- **Cleanroom Engineering & Air Quality Infrastructure (HVAC / HEPA)**
 - Zoning and pressure Cascades: Practical testing of different air pressure gradients between the patient procedure room (OPU), embryology laboratory (cleanest zone), and washing areas.
 - Volatile Organic Compound (VOC) Management: Measuring and managing ambient molecular contamination using photoionization detectors (PID sniffer meters), practicing VOC – free painting, cleaning, and material entry protocols.
 - Particle Count Validation: Hands-on operation of airborne particle counter to verify ISO Class 7 (Class 10000) and ISO Class 5 (Class 100) work areas. ISO class 5 is 100 times cleaner than ISO class 7 based on maximum allowance of airborne particles per cubic meter.
Particle concentration limits (at $\geq 0.5\mu\text{m}$)
ISO Class 5: Allows a maximum of 3,520 particles per cubic meter (m^3)
ISO Class 7: Allows a maximum of 352,000 particles per cubic meter (m^3).
- **Supply Chain, Disaster Management & Preventive Maintenance**
 - Liquid Nitrogen (LN_2) Tank Infrastructure: Managing dewars, monitoring cryogenic liquid levels, calculating consumption rates, and executing safe tank –to-tank biological material transfers.
 - Emergency Power & Gas Backup Drills: Routine testing of uninterruptible power supply (UPS) systems, automated backup generators, and gas line manifold swap-overs (CO_2 , O_2 , and N_2).
 - Consumable Batch Testing (BIO-assays): Verifying certifications for Embryo Toxicity testing (MEA – Mouse Embryo Assay) and Endotoxin Testing (LAL – Limulus Amoebocyte Lysate) before releasing clinical lots.

Quality Control (QC) & Quality Assurance (QA)

- **Daily Equipment Calibration & Environmental Monitoring**
 - Temperature Mapping: Using high-precision digital probes (calibrated to $\pm 0.1^\circ\text{C}$) to map variations across work surfaces, heating blocks and incubator shelves.
 - Gas & p^{H} Metrics: Measuring incubator gas metrics using external infrared CO_2 / O_2 analyzers. Calibrating benchtop and continuous – monitoring p^{H} meters using standard reference buffers.

- Microscope Alignment: Performing Kohler illumination adjustment and micromanipulator laser alignment checks.
- **Key performance Indicators (KPIs) and Data Auditing**
 - Vienna Consensus Alignment: Setting up laboratory data arrays to track mandatory global benchmarks.
 - Statistical Performance Graphing: Utilizing Levey-jennings chart and moving average rules to detect lab drift or sudden drops in critical milestones (e. g., fertilization rates, blastocyst conversion rates, or clinical pregnancy rates)

Bioethics & Legal Compliance in IVF

- **Double-witnessing & Electronic Traceability**
 - Manual Chain –of –Custody: Executing a **strict two- clinical embryologist** cross-verification protocol for identify validation at every critical gamete transition stage:
 - ✓ Oocyte Retrieval (OPU)
 - ✓ Semen collection and processing
 - ✓ Insemination / Microinjection (ICSI / IMSI)
 - ✓ Embryo transfer (ET)
 - ✓ Cryopreservation (Vitrification & Warming/Thawing)
 - Electronic Tracking Setup: Simulating automated electronic witnessing using barcodes or Radio Frequency Identificaion (RFID) chip tags on culture dishes.
- **Consent, Documentation & legal Boundaries**
 - Audit of Infertility Eligibility: Documenting valid, verified diagnostic files to confirm a clinical infertility diagnosis before starting treatment, according to national medical protocols
 - Identity Dossier Management: verifying legal marriage credentials or passports for international patients to prevent statutory compliance violations.
- **National Regulatory Boundaries (Nepal Context)**
 - Gamete Donation Tracing: Creating secure databases to monitor strict legal thresholds for gamete donor:
 - ✓ Oocyte Donors: Age 20-35, maximum 6 times cycles, minimum 3-months gaps.
 - ✓ Sperm Donors: Age 20-35, Maximum 10 successful live-birth cycles, minimum 15-days collection recovery windows.
 - ✓ In Nepal, the application of Pre-implantation Genetic Testing (PGT) operates under strict ethical, legal, and medical boundaries. Medical guideline and legal frameworks restrict its use to prevent severe genetic disorders, explicitly banning non-medical sex selection.

Recommended Text Books, journals & Research Papers:

1. Eberhard Nieschlag, Hermann M. Behre, Susan Nieschlag (2010). *Andrology: Male Reproductive Health and Dysfunction* (3rd ed.). (Springer).
2. Bruce Alberts, Alexander Johnson, Julian Lewis (2008). *Molecular Biology of the Cell* (5th ed.).
3. Kim E. Barrett, Susan M. Barman, Scott Boitano (2010). *Ganong's review of Medical Physiology* (23rd ed.).
4. David K. Gardner, Robert M. B. Rizk (2011). *Human Assisted Reproductive Technology*
5. David K. Gardner, Michelle Lane, Andrew J. Watson. *A Laboratory Guide to the Mammalian Embryo*.
6. Richard E. Jones, Kristin M. Lopez (2006). *Human Reproductive Biology*, 3rd Edition
7. Arthur C. Guyton & John E. Hall (2006). *Text Book of Medical Physiology* (11th ed.).
8. Jimmy D. Neill and Knobil (2015). *Physiology of Reproduction* (4th ed.). Volume 1 & 2
9. Kay Elder and Brian Dale (2011). *In – Vitro Fertilization* (3rd ed.).
10. Langman's *Medical Embryology* (8th ed.).
11. *THE ASSISTED REPRODUCTIVE TECHNOLOGIES (REGULATION). RULES-2022, ICMR*
12. David K. Gardner (2006). *In Vitro Fertilization: A Practical Approach*
13. Steven D. Fleming and Robert S. King (2003). *Micromanipulation in Assisted Conception: A user's Manual and Troubleshooting Guide*.
14. Zolt Peter Nagy, Alex C. Varghes, Ashok Agrawal. *Practical manual of In vitro Fertilization*.
15. Christopher De. Jonge and Christopher Barratt. *The Sperm Cell: Production, Maturation, Fertilization, Regeneration*.
16. WHO laboratory manual for the Examination and processing of human semen (6th ed.).
17. WHO Laboratory Biosafety manual, 2004
18. Thomas Hunt Morgan. *Embryology and Genetics*
19. G. P. Pal. *Medical Genetics*
20. Richard E. Jones and Kristin H. Lopez *Human Reproductive Biology* (4th ed.).
21. M. Cristina Malgi, Gayle M. Jones et al., (2012) *Atlas of Human Embryology: From Oocyte to Preimplantation Embryos. Journal of Human Reproduction*.
22. Yujing Li (Editor-in-chief) *Journal of Human Genetics & Embryology*
23. Several Journals and online Research Papers.