

**MBBS SYLLABUS
AND
CURRICULUM**

PREFACE

The MBBS students coming out of this prestigious Medical University should be competent in diagnosis and management of common health problems of the individual and the community at primary, secondary, tertiary levels using the clinical skills based on history, physical examination and relevant investigations.

The Graduate Medical Curriculum has been prepared to fulfill the vision of this University and it is oriented towards training students in an unique environment preparing them to undertake the duties and responsibilities of a physician of first contact who is capable of looking after the preventive, promotive, curative and rehabilitative aspects of medicine. The students pursuing Graduate Medical curriculum will have the necessary competencies (knowledge, skills & attitudes) to assume the role of a quality health care provider to the people of India and across the world.

The curriculum is framed involving many experts in relevant medical fields incorporating especially the **specific learning objectives, Teaching methodology, “must know, desirable to know and nice to know”** as put forth by Medical Council of India and more importantly it includes the vital **Medical Ethics** to practice in patient care, service and research. It also includes the **integrated teaching** using a problem based learning, evidence based approaches starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both understanding and sharp focus on resolving health care problems. Every attempt has been made to de-emphasize compartmentalisation of disciplines so as to achieve both horizontal and vertical integration in different phases with a mission that our Medical Graduates will outshine and match the International standards.

The Introduction of teaching elements, OSCE / OSPE have also been incorporated which are proven to be an important, innovative, reliable and objective modality of assessment for clinical / practical skills in the changing scenario of Medical Sciences.

Record Book / Log Book becomes a reflective record of student's learning and achievements and faculty contribution towards learning. Every student will be motivated to document what he/she has learnt in the respective department / specialty in the log book and make it as a permanent record. The **revised Record Book/Log Book** should be followed by all the affiliated Medical colleges of this University to bring uniformity in teaching and training of students.

Internship is a phase of training wherein the graduate is expected to conduct actual practice under the supervision of a trained doctor. The learning methods and modalities have to be done during the MBBS course itself with larger number of hands on session and **practice on simulators**.

The Introduction of a restructured curriculum and training program with emphasis on early clinical exposure, integration of basic and clinical sciences, clinical competence and skills and new teaching – learning methodologies will lead to a new generation of medical graduates of global standards.

I want to thank the Academic Officer and the team of Academic, Experimental Medicine & Examination wing and the team of experts from their relevant Medical Specialties of various Medical Colleges in the State for their enthusiastic and energetic efforts to bring this revised syllabus & curriculum.

Dr.S.GEETHALAKSHMI,M.D.,Ph.D.,
VICE-CHANCELLOR.

Comments/feedback are welcome if any and mail it to registrar@tnmgrmu.ac.in

First MBBS

ANATOMY

1.GOAL

The broad goal of the teaching of undergraduate students in Anatomy aims at providing comprehensive knowledge of the gross and microscopic structure and development of the human body to provide a basis for understanding the clinical correlation of organs or structures involved and the anatomical basis for the disease presentations.

2.SPECIFIC LEARNING OBJECTIVES

2A. KNOWLEDGE:

At the end of the course the student shall be able to:

- (a) describe the normal disposition, clinically relevant interrelationships, functional and cross sectional anatomy of the various structures in the body;
- (b) identify and describe the microscopic structure and correlate elementary ultrastructure of various organs and tissues and correlate the structure with the functions as a prerequisite for understanding the altered state in various disease processes;
- (c) describe the basic structure and connections of the central nervous system to analyse the integrative and regulative functions of the organs and systems. The student shall be able to identify the site of gross lesions according to the deficits encountered.
- (d) demonstrate knowledge of the basic principles and sequential development of the organs and systems, recognise the clinical stages of development and the effects of common teratogens. The student shall be able to explain the developmental basis of the major variations and abnormalities.

2B. SKILLS:

At the end of the course the student shall be able to;

- (a) identify and locate describe all the structures of the body and mark the topography of the living anatomy.
- (b) Identify and locate structures in gross Anatomy Sections.
- (c) identify describe, depict normal appearance of the organs and tissues under the microscope;
- (d) Describe the principles of karyotyping and identify the gross congenital anomalies;

- (e) Describe the principles of newer imaging techniques like Ultra sound, MRI, Computerised Tomography Scan, Interpretation of plain and contrast X-rays.
- (f) Describe the clinical basis of some common clinical procedures i.e. intra-muscular and intravenous injection, lumbar puncture, kidney biopsy etc.

2C. INTEGRATION:

From the integrated teaching of other basic sciences, student shall be able to describe the regulation and integration of the functions of the organs and systems in the body and interpret the anatomical basis of disease processes.

Horizontal integration can be done in common with basic science departments, and vertical integration can be done with clinical departments. For example, horizontal integration can be the study of liver along with Physiology and Biochemistry; and vertical integration can be the study of anatomical basis of varicose veins along with General Surgery.

A list of topics for Integration is given below.

3. A.TEACHING HOURS - One example of the duration for each of the Teaching-Learning Methods

For example: Embryology Lectures: Duration = 2 hours per week, each class lasting 45 - 60 minutes.

Lectures - hours	Practicals - hours	Group Discussions - hours	Demonstration - hours	Seminars - hours	Integrated Teaching - hours
General Anatomy -9	General Histology-12	<u>Osteology-</u> (Total 26)	Abdomen-15	8	5
General Embryology-10	Upper Limb Dissection-35	Upper Limb-5	Neuroanatomy-23		
General Histology-10	Lower Limb dissection-40	Lower Limb-5	Genetics-2		
Upper Limb-30	Abdomen dissection-60	Thorax-3	Total-43		
Lower Limb-25	Abdomen Histology-14	Abdomen and Pelvis-3			
Abdomen Gross Anatomy-43	Thorax Dissection-30	Head and Neck-10			
Abdomen Embryology-7	Thorax Histology-4				
Abdomen Histology-14	Head and Neck Dissection-86	Radiology 1 each			

		(Total-5)			
Thorax Gross Antomy-15	Head and Neck Histology-8				
Thorax Histology-4	Neuroanatomy Histology-10	Surface Anatomy 1 each (Total 5)			
Thorax Embryology-4					
Head and Neck Gross Anatomy- 50					
Head and Neck Embryology-7					
Head and Neck Histology -8					
Neuroanatomy-20					
Genetics-3					
Total-259 hours	Total -299 hours	Total -36 hours	Total 43 hours	Total 8 hours	Total 5 hours

Grand Total=650 hours

3B.TEACHING METHODOLOGY

Theory (Teaching-Learning methods)

1. Interactive Lecture (include buzz groups, self-assessment questions, quizzes, MCQs. One minute paper)
2. Didactic Lecture- with a problem solving approach, with discussions of relevant clinical problems.
3. Seminar
4. Symposium
5. Role play and discussion on medical ethics topics
6. Self-directed learning

Practicals

1. Dissection
2. Small Group Discussion - Osteology, Surface marking, OSPE-Genetics, Radiology
3. Demonstrations - Histology slides, Embryology models
4. Case Discussion - Nerve Lesions, e.g. Facial Palsy, Radial Nerve Palsy

4.THEORY SYLLABUS & 5.PRACTICAL SYLLABUS

(1) GENERAL ANATOMY SYLLABUS (12 hours)			
Topic and duration of study	Must Know 60%	Desirable to know 30%	Nice to know 10%
Introduction to anatomy			
Anatomical terminology	▪ An understanding of the various subdivisions of anatomy ▪ Anatomical position ▪ Anatomical planes ▪ Terms of direction, relation, comparison, laterality & movement		
Introduction to bones	▪ Composition of bone and bone marrow ▪ Regional classification of skeleton ▪ Structural classification of bone a. Distribution of spongy and compact bone in the body ▪ Classification of bone according to shape ▪ Classification of bone based on ossification ▪ Parts of a long bone ▪ Blood and nerve supply of a long bone ▪ Special features of a sesamoid bone	▪ Laws of ossification, including direction of nutrient foramen and the growing end of the bone ▪ Exceptions to the laws of ossification ▪	
Introduction to joints	▪ Definition ▪ Classification according to a. Structure- with subtypes and examples of fibrous, cartilaginous and synovial joints b. Mobility		Types of sutures (Unnecessary detail)

	c. Axes of movement ▪ Complex and compound joints ▪ Nerve supply of joints- Hilton's law ▪ Blood supply of joints		
Introduction to the muscular system	▪ Structural classification of muscle ▪ Parts of a skeletal muscle ▪ Differentiate tendon and aponeurosis ▪ General principles about how attachments of muscles affect the joints they cross ▪ Classification of muscle according to action (agonists, antagonists, synergists, fixators)	▪ Classification of muscle according to direction of muscle fibres and shape	Actions of muscles as compared to systems of levers ▪ Shunt and spurt muscles (Unnecessary detail) ▪ Classification of skeletal muscle according to type of contraction (Will be covered in Physiology)
Introduction to the cardiovascular system	▪ Classification into blood vascular system ▪ Differentiate pulmonary and systemic circulation ▪ Layers of any blood vessel ▪ Types of blood vessels a. General differences between arteries and veins b. Functional difference between elastic, muscular arteries and arterioles c. Function of meta-arterioles, precapillary sphincters, arterio-venous anastomoses d. Microvasculature-types of capillaries and their functional significance ▪ Venous return a. Musculo-venous pumps b. Role of valves ▪ Definition and structure of a portal system ▪ Concept of anastomoses and	▪ Concepts of thrombosis, infarction, aneurysm ▪ Concept of lymphoedema and spread of tumors via lymphatics and venous system	

Lymphatic system	collateral circulation ▪ Significance of end-arteries ▪ ▪ Components and function of the lymphatic system a. Structure of lymph capillaries b. Concept that lymphatics accompany blood vessels c. Concept that lymph ultimately drains into the venous system d. Function of lymph nodes in the lymphatic system		

For the following regions (2) Upper limb and (3) Lower limb, (4) Thorax, (5) Abdomen and (6) Head & Neck- General concept of the parts of the bones to which each muscle is attached, and the relation of the fibres to the axes of the joints they cross in order to understand how a muscle causes a particular movement must be taught. Muscles may be discussed as muscle groups.

Wherever clinical conditions are mentioned only the relevant anatomical basis is required.

(2) UPPER LIMB – SYLLABUS (100 hours)			
Topic	Must Know	Desirable to know	Nice to know
Overview	Major segments (e.g. shoulder)		
<u>Bones</u> - Side determination (one feature for each of the opposite directions) - Anatomical position - Identification and description of features of each part - Articulations	Clavicle Unique features Scapula Humerus Ulna Radius	Muscle attachments	
<u>Bones</u>	<u>Articulated hand:</u> - Identify and name the various bones in the articulated hand - Prominent features of carpal bones - Tubercle of scaphoid - Crest of trapezium - Hook of hamate - Parts of metacarpals and phalanges	- Scaphoid fractures and avascular necrosis - Peculiarities of pisiform bone in its development, muscle attachment	
Pectoral Region	<u>Muscles:</u> - Position, name of bones to which attached, nerve supply and actions of pectoralis major, pectoralis minor and <u>Breast:</u> - Location, extent, deep relations - Type of gland, structure - Age changes - Blood supply - Lymphatic drainage - Applied anatomy:	- Attachments of subclavius	<u>Clavipectoral fascia:</u> Position, extent, structures piercing it

	• Cutaneous nerves of upper limb • Dermatomes of upper limb		
Arm and cubital fossa	▪ Muscle groups of upper arm with emphasis on biceps and triceps ▪ Origin, course, relations, branches (or tributaries), termination of nerves and vessels Cubital fossa – boundaries, roof, floor, contents and relations of contents Venepuncture of cubital veins ▪ Saturday night paralysis	- Nerves liable to be involved in fracture of the humerus and clinical manifestations - Anastomosis around the elbow joint	Deep tendon reflexes of biceps and triceps
Front of Forearm and Palm	▪ Muscle <u>groups</u> of forearm with attachments, nerve supply and actions of: ▪ Flexor muscles in the superficial, intermediate and deep layers of the forearm ▪ Origin, course, relations, branches (or tributaries), termination of nerves and vessels ▪ Position for palpation of radial artery pulsations ▪ Flexor retinaculum and its attachments ▪ Carpal tunnel syndrome • <u>Palm and hand</u> - thenar and hypothenar muscles, lumbricals and interossei - Ulnar and median claw hand - Movements of the thumb and muscles involved - Long flexor tendons, fibrous flexor sheaths, ulnar bursa, radial bursa and digital synovial sheaths - Course and branches of blood vessels and nerves in the hand	- Boundaries and contents of fascial compartments and spaces • Dupuytren contracture of palmar aponeurosis • Applied anatomy of fascial spaces • Tenosynovitis	
Back of forearm	▪ Muscle <u>groups</u> of forearm with attachments, nerve supply and actions of: extensor muscles of forearm	▪	

	▪ Origin, course, relations, branches (or tributaries), termination of nerves and vessels ▪ Wrist drop - Compartments deep to extensor retinaculum and contents of each one		
Dorsum of hand	▪ Extensor expansion - formation and muscles attached	▪ Anatomical “snuff box”	
Joints of upper limb	Description of type, articular surfaces, capsule, synovial membrane, ligaments, relations movements, blood and nerve supply of: ▪ Elbow joint (including muscles involved in movements of the joint) ▪ Proximal and distal radio-ulnar joints (including muscles involved in movements of the joint) ▪ Wrist joint (including muscles involved in movements of the joint) ▪ First carpometacarpal joint (including muscles involved in movements of the joint)	Description of type, articular surfaces, capsule, synovial membrane, ligaments, relations movements, blood and nerve supply of: ▪ Sternoclavicular joint ▪ Acromioclavicular joint Dislocation of radial head	Carrying angle ▪ Intercarpal joints ▪ Intermetacarpal joints ▪ Carpometacarpal joints, except first carpometacarpal joint ▪ Metacarpophalangeal joint ▪ Interphalangeal joint
Radiology	▪ Anteroposterior and lateral views of bones and joints of upper limb		
Surface anatomy	▪ <u>Bony landmarks:</u> ▪ Jugular notch, sternal angle, acromial angle, ▪ spine of the scapula - vertebral level of the medial end ▪ Inferior angle of the scapula – vertebral level ▪ <u>Surface projection of:</u> ▪ Axillary artery ▪ Axillary nerve ▪ Cephalic and basilic vein ▪ Brachial artery ▪ Radial artery		▪
Embryology	▪ Basic concept of development of upper limb		

(10) GENERAL HISTOLOGY – SYLLABUS (40 hours)

Topic	Must Know	Desirable to know	Nice to know
	Epithelium		
	Connective tissue proper Loose areolar tissue, dense connective tissue –regular, adipose tissue		
	Cartilage		
	Bone		
	Muscle		
	Blood vessels	Microvasculature	
	Lymphoid tissue		
	Nervous tissue		

(8) GENERAL EMBRYOLOGY – SYLLABUS (8 hours)

Topics	Must know	Desirable to know	Nice to know
Introduction	Terms used in embryology Stages of development		
Mitosis and Meiosis and	Primordial germ cells Concept of Chromosomal abnormalities – numerical / structural Gene mutation		
Gametogenesis	Oogenesis Spermatogenesis		

Uterine and ovarian cycles	Uterine and ovarian cycles Ovulation		
Fertilization and Blastocyst	Definition, Phases of fertilization, Results of fertilization, Contraceptive methods-barrier techniques, contraceptive pills, IUD, vasectomy and tubectomy, Infertility Embryonic and adult stem cells	Assisted reproductive technology – IVF, GIFT, ZIFT, ICSI	
Bilaminar germ disc	• Implantation • Abnormal implantation		
Trilaminar germ disc	• Gastrulation		
Embryonic period	Definition, Neurulation – neural pores and the time of closure, Derivatives of each of the 3 germ layers, Somites	External appearance during 2 nd month Induction and organogenesis	
Foetal membranes and Placenta	Structure, Placental circulation, Function, Placental barrier		Erythroblastosis fetalis and fetal hydrops
Amnion and umbilical cord	Structure and function	Amniotic fluid- hydramnios and oligohydramnios	Umbilical cord anomalies, Amniotic bands
Birth defects	Types of abnormalities – malformation, disruption, deformation, syndrome, Teratogens		
Prenatal diagnosis	Ultrasonography, Maternal serum screening, Amniocentesis, Chorionic villus sampling		
Twinning	Monozygotic and dizygotic twins, Conjoint twins		

(3) LOWER LIMB – SYLLABUS (80 hours)

Topic	Must Know	Desirable to know	Nice to know
Overview	Regions		

Bones - Side determination (one feature for each of the opposite directions) - Anatomical position - Identification and description of features of each part - Articulations	- Hip bone - Femur - ossification of lower end - Patella - Tibia -Ossification of upper end - Fibula - Articulated foot		Neck-shaft angle
Fascia, veins, lymphatics cutaneous nerves of lower limb	- Fascia lata - Intermuscular septa - Venous drainage of lower limb - Varicose veins and deep vein thrombosis - Musculovenous pump - Lymphatic drainage of lower limb including areas draining into inguinal lymph nodes - Dermatomes of lower limb - Cutaneous nerves of lower limb	- Enlarged inguinal lymph nodes - Flexor, extensor and peroneal retinacula	
Front of thigh	- Muscle <u>groups</u> with their attachment, nerve supply and actions - Insertion of psoas major, and quadriceps femoris - Origin, course, relations, branches (or tributaries), termination of nerves and vessels - Boundaries, floor, roof and contents of femoral triangle	- Psoas abscess - Femoral hernia - Palpation of femoral artery - Knee jerk	
Medial side of thigh	- Muscle <u>groups</u> with their attachment, nerve supply and actions - Adductor canal		
Gluteal region	- Muscle <u>groups</u> with their attachment, nerve supply and actions - Insertion of gluteus maximus, medius and minimus - Relations of piriformis and ischial spine - Origin, course, relations, branches (or tributaries), termination of nerves and vessels - Liability of sciatic nerve to injury during gluteal intramuscular injections	- Trendelenburg sign - Pudendal block	
Back of thigh	Muscle <u>groups</u> with their attachment, nerve		

	- supply and actions - Position, name of bones to which attached, nerve supply and actions of hamstrings, - Origin, course, relations, branches (or tributaries), termination of nerves and vessels		
Hip joint	- Description of type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply, bursae around the joint, - Fracture neck of femur	- Dislocation of hip joint - Surgical hip replacement	
Popliteal fossa	- Boundaries, roof, floor, contents and relations of contents - Popliteal pulse - Position, attachments, nerve supply and actions of popliteus		
Front of leg Anterior compartment, Dorsum of foot and Lateral Compartments	- Muscle <u>groups</u> with their attachment, nerve supply and actions of muscles in each compartment - Origin, course, relations, branches (or tributaries), termination of nerves and vessels - Injury to common peroneal nerve and foot drop		
Knee joint	- Description of type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply, bursae around the joint, - Locking and unlocking of the knee joint	- Anastomosis around the knee - Knee joint injuries - Bursitis in knee region - Osteoarthritis	
Back of leg	- Muscle <u>groups</u> with their attachment, nerve supply and actions of muscles in superficial and deep muscle groups - Origin, course, relations, branches (or tributaries), termination of nerves and vessels - Relations of ankle joint “Peripheral heart” - Tendocalcaneus	Ankle jerk	Rupture of calcaneal tendon

Sole of foot	▪ Basic organization ▪ Factors maintaining and importance of arches of the foot	▪ Flat foot, ▪ Club foot ▪ Plantar fasciitis	▪
Joints of lower limb	• Description of type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply, bursae around the: ▪ Tibiofibular joints ▪ Ankle joint	▪ Subtalar and transverse tarsal joints	
Radiology	• AP and Lateral views of bones and joints of lower limb: • Lateral view of the foot-identification of bones of the foot	▪ Shenton's line	
Surface Anatomy	▪ <u>Bony landmarks:</u> ▪ Vertebral levels of highest point of iliac crest, posterior superior iliac spines, iliac tubercle, pubic tubercle, ischial tuberosity, adductor tubercle, ▪ Tibial tuberosity, head of fibula, ▪ Medial and lateral malleoli, ▪ Condyles of femur and tibia, ▪ ▪ Palpation of pulsations of arteries- femoral, popliteal, posterior tibial and dorsalis pedis ▪ ▪ Mid inguinal point ▪ Midpoint of the inguinal ligament ▪ ▪ Femoral artery, vein and nerve, ▪ Saphenous opening ▪ Dorsalis pedis artery, ▪ Sciatic nerve, tibial and common peroneal nerves, deep peroneal nerve, ▪ great and small saphenous veins		▪ Nelaton's line, ▪ Shoemaker's line ▪ Bryant's triangle ▪
Embryology	▪ Basic concept of development of lower limb		

(5) ABDOMEN & PELVIS – SYLLABUS (135 hours)

Topic	Must Know	Desirable to know	Nice to know
Abdominal wall	<u>Planes</u>		

Anterior abdominal wall	Transpyloric, Transtubercular, Subcostal Lateral vertical Linea alba, Linea semilunaris Fascia of anterior abdominal wall Regions and quadrants of abdomen Nerves & blood vessels of abdominal wall <u>Muscles</u> Name of the muscles, direction of fibers, their actions and nerve supply, neurovascular plane Rectus sheath formation, its contents	Abdominal incisions Collateral routes for abdominopelvic venous blood	
Inguinal canal	Superficial inguinal ring, Deep inguinal ring <u>Inguinal ligament</u> Attachment & modifications Extent, boundaries, contents	Attachments of muscles of anterior abdominal wall	
Male external genitalia	Inguinal (Hasselbach's) triangle Inguinal hernia <u>Testis</u> Coverings, internal structure, blood supply, nerve supply, lymphatic drainage, descent of testis, cryptorchidism, ectopic testis <u>Epididymis</u> Parts	<u>Clinical anatomy</u> Varicocoele <u>Penis</u> Parts, components, blood supply and lymphatic drainage Phimosis, Circumcision Lymphatic spread in carcinoma testis and scrotum Cremasteric reflex, Rupture urethra, Ligaments of penis	
Posterior abdominal wall			
Muscles of the back (intrinsic muscles)	Muscles – Name, attachments, nerve supply and action Lumbar plexus – root value, formation & branches Position, nerve supply and action	Thoracolumbar fascia <u>Clinical anatomy</u> Psoas abscess	
Peritoneal cavity	<u>Lesser sac</u> Boundaries and recesses, Epiploic foramen <u>Greater sac</u> Boundaries of subdiaphragmatic spaces Definition of ligaments, omentum and mesentery <u>The mesentery</u> Attachment and contents, Rectouterine pouch,	Duodenal recesses Caecal recesses <u>Clinical anatomy</u> Ascitis, Peritonitis	

	Uterovesical pouch Rectovesical pouch	Subphrenic abscess	
Viscera	Name, position, external and internal features, important peritoneal and other relations, blood supply, nerve supply, lymphatic drainage and applied aspects of: Spleen, Abdominal part of oesophagus Stomach, Liver & its vascular segments Gall bladder, Pancreas, Small intestines Caecum, Appendix, Colon, Kidneys, Ureter Suprarenals, Extrahepatic biliary apparatus	<u>Clinical anatomy:</u> Importance of splenic notch during palpation of spleen Accessory spleens <u>Anatomical basis of</u> ○ Kehr's sign (Referred pain in the left shoulder during splenic infarction) ○ different types of vagotomy in gastric ulcer ○ Liver biopsy – site of needle puncture ○ Referred pain in cholecystitis ○ obstructive jaundice in biliary tract obstruction ○ Referred pain around umbilicus in acute appendicitis ○ Radiating pain of kidney to groin Lymphatic spread in carcinoma stomach – special emphasis on Trosier's sign Clinical importance of Calot's triangle	
Blood vessels & nerves	Veins: Formation, course relations and tributaries of- Portal vein, portosystemic anastomosis ○ haemetemesis, malena, caput medusae in portal hypertension Inferior vena cava, Renal vein <u>Arteries</u> Origin, course, important relations and branches of abdominal aorta, coeliac artery, superior mesenteric artery, inferior mesenteric artery, common iliac artery, external iliac artery Autonomic nervous system Coeliac ganglion	Concept of superior mesenteric plexus, inferior mesenteric plexus, renal plexus, superior hypogastric plexus, inferior hypogastric plexus Reason for preserving 1st lumbar sympathetic ganglion in lumbar sympathectomy	
Diaphragm	Attachments, openings, nerve supply & action	Abnormal openings and diaphragmatic hernia	

Pelvis	<u>Muscles:</u> Levator ani & coccygeus (pelvic diaphragm), Obturator internus, Piriformis <u>Viscera:</u> Position, features, important peritoneal and other relations, blood supply, nerve supply, lymphatic drainage and Clinical aspects of-Urinary bladder & pelvic part of ureter, Rectum, Anal canal Prostate, age changes Seminal vesicle, Vas deferens, Ejaculatory ducts, Male urethra Uterus & its supports, Fallopian tube Ovary, Vagina, Female urethra Blood vessels: Origin, course, important relations and branches of - Internal iliac artery Nerves: Structures palpable during - o Vaginal examination - o Rectal examination Internal and external haemorrhoids Anal fistula	<u>Clinical anatomy</u> Anatomical basis of : - o suprapubic cystotomy - o Urinary obstruction in benign prostatic hypertrophy - o Retroverted uterus - o Prolapse uterus <u>Neurological lesions of the bladder</u> - o Autonomous neurogenic bladder - o Atonic bladder - o Automatic bladder Lobes involved in benign prostatic hypertrophy & prostatic cancer, Vasectomy Tubal pregnancy, Tubal ligation <u>Sacral plexus</u> Branches Pelvic splanchnic nerve	
Perineum	Extent and Subdivisions of perineum Superficial perineal pouch - boundaries and contents Deep perineal pouch – boundaries and contents Perineal body, Perineal membrane Ischioanal / ischioanal fossa, Perianal abscess and anal fissure	<u>Clinical anatomy</u> Perineal tear / episiotomy	
Joints	Curvatures of the vertebral column Type, articular ends, ligaments and movements of: Intervertebral joints, Sacroiliac joints, Pubic symphysis Lumbar puncture: Site, direction of the needle, structures pierced during the lumbar puncture	Scoliosis, lordosis, prolapsed disc, spondylolisthesis, spina bifida	
Cross-sectional anatomy	Cross-section at the level of L1 (transpyloric plane)	Cross-sectional anatomy of abdomen and pelvis	
Microanatomy	<u>Gastro-intestinal system:</u> Oesophagus, Fundus of stomach, Pylorus of stomach, Duodenum, Jejunum, Ileum, Large intestine, Appendix, Liver, Gall bladder, Pancreas, Suprarenal gland <u>Urinary system:</u> Kidney, Ureter, Urinary bladder <u>Male Reproductive System:</u> Testis, vas deferens,	Cardio-oesophageal junction	

	Prostate <u>Female reproductive system:</u> Ovary, uterus, Uterine tube, cervix, Placenta, umbilical cord	Epididymis, seminal vesicle, Uterus - Proliferative and secretory phases of Corpus luteum	
Embryology	Anterior abdominal wall Diaphragm Development and congenital anomalies of: Foregut & spleen, midgut and hindgut Derivatives of dorsal and ventral mesenteries Urinary system Male reproductive system Female reproductive system	Abdominal aorta <u>Embryological basis and clinical presentation of congenital anomalies</u> Achalasia cardia, Congenital hypertrophic pyloric stenosis, Annular pancreas, Errors of rotation of the gut, Errors of fixation, Exomphalos, Gastroschisis, Umbilical hernia, Situs inversus <u>Congenital obstruction:</u> Atresia, Stenosis Meckel's diverticulum, Imperforate anus, Hirschsprung disease (Congenital megacolon), Horseshoe kidney Congenital polycystic kidney, Aberrant renal arteries, Ectopia vesicae, Epispadias Hypospadias, Rectovaginal fistula	Inferior vena cava Portal vein
Osteology	Features of typical and atypical lumbar vertebra, Sacrum <u>Bony pelvis:</u> Anatomical position Define true pelvis and false pelvis Boundaries of pelvic inlet, pelvic cavity, pelvic outlet, Sex determination	Coccyx <u>Bony Pelvis</u> Types <u>Clinical Anatomy</u> Sacralization of lumbar vertebra, Lumbarization of 1 st sacral vertebra	
Radiological anatomy	Plain x-ray abdomen <u>Contrast X-rays:</u> Barium swallow, Barium meal, Barium enema, Cholecystography Intravenous pyelography, Hysterosalpingography, Arteriography	Principles of USG, ERCP, CT abdomen, MRI	

Surface anatomy	Regions and planes of abdomen, Stomach Liver, Fundus of gall bladder, Kidneys, Abdominal aorta , Inferior vena cava, Superficial inguinal ring, Deep inguinal ring, McBurney's point	Spleen, Duodenum Pancreas Ileocaecal junction Root of the mesentery	

(4) THORAX – SYLLABUS (60 hours)

Topic	Must Know	Desirable to know	Nice to know
Osteology	Sternum <u>Ribs</u> ▪ Definition of a true and false rib ▪ Features of a typical rib and 1st rib <u>Thoracic vertebra</u> ▪ Features of a typical thoracic vertebra	▪ Features of 2nd, 11th and 12th ribs ▪ Features of the 1st, 11th and 12th thoracic vertebrae	
Thoracic cage	Boundaries of thoracic inlet, cavity and outlet and structures passing through them		
Walls of thorax	<u>Muscles</u> Extent, attachments, direction of fibres, nerve supply and actions of external intercostal, internal intercostal, innermost intercostal, <u>Typical spinal nerve</u> ▪ Origin, course, relations and branches <u>Anterior and posterior intercostal arteries, veins and lymphatics</u> ▪ Origin, course, relations and branches or tributaries	<u>1st and 2nd intercostal nerves</u> ▪ Origin, course, relations and branches <u>Subcostal nerve</u> ▪ Origin, course, relations and branches	

	<u>Internal thoracic artery</u> ▪ Origin, course, relations and branches		
Pleural cavity	<u>Pleura</u> ▪ Parietal pleura and visceral pleura ▪ Suprapleural membrane ▪ Pleural recesses ▪ Blood supply, lymphatic drainage and nerve supply ▪ <u>Applied anatomy</u> · Pleuritis · Pneumothorax · Pleural effusion · Thoracocentesis <u>Lungs</u> ▪ External features and relations ▪ Difference between hilum and root ▪ Structures which form the root of lung ▪ Description of a bronchopulmonary segment ▪ Blood supply, lymphatic drainage and nerve supply ▪ <u>Applied anatomy</u> · Lung abscess <u>Trachea</u> ▪ Extent, length, relations, blood supply, lymphatic drainage and nerve supply ▪ <u>Applied anatomy</u> · Tracheostomy <u>Bronchi</u> ▪ Relations, blood supply, lymphatic	Bronchial asthma Bronchogenic carcinoma · Lobe of azygos vein	

	- drainage and nerve supply ▪ <u>Applied anatomy</u> · Bronchitis <u>Phrenic nerves</u> ▪ Origin, course, relations and area of supply ▪ <u>Applied anatomy</u>		
Mediastinum	▪ Subdivisions, boundaries and contents of superior, anterior, middle and posterior mediastina		
Middle mediastinum	<u>Pericardium</u> ▪ Subdivisions, sinuses in the pericardium, blood supply and nerve supply ▪ <u>Applied anatomy</u> · Pericardial effusion <u>Heart</u> ▪ External and internal features ▪ Description of the interior of each chamber ▪ <u>Conducting system of heart</u> ▪ Parts, position and arterial supply <u>Coronary arteries</u> ▪ Origin, course and branches ▪ <u>Applied anatomy</u> <u>Venous drainage of heart</u> Coronary sinus · Formation, course, tributaries and termination · Anterior cardiac veins · Venae cordis minimae <u>Nerve supply of heart</u> ▪ Position and components of superficial and deep cardiac plexuses ▪ <u>Blood vessels</u>		Fibrous skeleton of heart

Posterior mediastinum	<u>Oesophagus</u> ▪ External appearance, relations, blood supply, nerve supply and lymphatic drainage ▪ <u>Applied anatomy</u> · Oesophageal varices <u>Thoracic sympathetic chain</u> ▪ Location, extent and relations ▪ Splanchnic nerves <u>Thoracic duct and right lymphatic duct</u> ▪ Extent, external appearance, relations and tributaries <u>Venous drainage of posterior abdominal wall:</u> <u>Azygos vein</u> ▪ Origin, course, relations, tributaries and termination <u>Hemiazygos vein</u> ▪ Origin, course, relations, tributaries and termination <u>Accessory hemiazygos vein</u> ▪ Origin, course, relations, tributaries and termination <u>Descending thoracic aorta</u> ▪ Extent, branches and relations ▪ <u>Vagus nerve in thorax</u>		
Joints of thorax	▪ Type, articular surfaces, capsule, ligaments, nerve supply and movements of manubriosternal, sternocostal, costovertebral, costotransverse and xiphisternal joints ▪ Intervertebral joint ▪ Mechanics of respiration ▪ Types of respiration	Costochondral and interchondral joints	
Microscopic anatomy	▪ Trachea ▪ Lung		

Embryology	▪ Development of pleura ▪ Development of respiratory system <u>Development of heart</u> ▪ Development of the chambers, interatrial and interventricular septa <u>Development of vascular system</u> ▪ Aortic arch arteries ▪ Superior vena cava and inferior vena cava ▪ Coronary sinus ▪ <u>Clinical correlates</u> · Atrial septal defect · Ventricular septal defect · Fallot's tetralogy · Transposition of great vessels · Dextrocardia · Patent ductus arteriosus · Coarctation of aorta ▪ <u>Foetal circulation and changes at birth</u> · Patent ductus arteriosus ▪ <u>Development of oesophagus</u>	Brachiocephalic veins	
Living Anatomy	· Internal thoracic artery · Parietal pleura · Lungs, root of lungs and fissures · Trachea · Heart · Apex beat · Arch of aorta · Oesophagus · Surface projection of valves of heart		
Radiology	· Plain X-ray chest – PA view	CT and MRI of Thorax	
(6) <u>HEAD AND NECK – SYLLABUS</u> (135 hours)			
Topics	Must know	Desirable to know	Nice to know
Osteology	▪ Anatomical position of skull	▪ Concept of bones which	▪

	▪ Identification and locations of individual skull bones in an articulated skull ▪ Features seen in Normas frontalis, verticalis, occipitalis, lateralis and basalis ▪ Cranial cavity- subdivisions, foraminae and structures passing through them ▪ Details of Mandible and Maxilla, ▪ Features of typical and atypical cervical vertebrae	ossify in membranes and cartilage ▪ Frankfort Plane ▪ Parietal, Occipital, Frontal and Temporal bones ▪ Sphenoid,	
Scalp	▪ Layers of scalp, Extent/ attachment of each layer, Surgical importance of each layer, Blood supply, nerve supply and lymphatic drainage		
Superficial dissection of the face	▪ Muscles of facial expression Muscle groups acting upon the angle of the mouth - Attachments of the orbicularis oculi, orbicularis oris and buccinator muscles only ▪ Sensory innervation of the face	- Names of the superficial muscles in the face, with their actions and nerve supply	
Deep dissection of the face	▪ Facial artery: Origin, course and branches ▪ Facial vein: Formation, course and tributaries ▪ Facial nerve: Branches in the face ▪ Lymphatic drainage of the face ▪ Surgical importance of the deep facial vein ▪ Facial palsy		
Parotid Region	▪ Parts, borders, surfaces, contents, relations and nerve supply of parotid gland ▪ Course of parotid duct	▪ Parotitis (mumps) ▪ Parotid abscess ▪ Plane of dissection and main complication of superficial parotidectomy ▪ Frey's Syndrome	
The side of the neck Posterior Triangle	Boundaries and subdivisions of posterior triangle ▪ Boundaries and contents of the subclavian and occipital triangles ▪ Special emphasis on with nerve supply and actions ▪ Sternocleidomastoid with attachments and relations, Wry neck	▪ Erbs palsy ▪ Klumpke's palsy ▪ Injury to accessory nerve during lymph node biopsies ▪ inferior belly of omohyoid scalenus anterior, scalenus	

	Lymphatic drainage of head and neck	medius, levator scapulae	
Dissection of back	▪ Contents of the vertebral canal	▪ Suboccipital triangle: Boundaries and contents ▪ Position, direction of fibres, relations, nerve supply, actions of: Semispinalis capitis, Splenius capitis	
Cranial Cavity	▪ Cranial fossae: structures related and major foramina and structures passing through ▪ Pituitary gland ▪ Dural venous sinuses	▪ Clinical importance of dural venous sinuses	▪ Pituitary tumours
Orbit	▪ Attachments, nerve supply and actions of muscles of eyeball ▪ Nerves and vessels in the orbit ▪ Ciliary ganglion ▪ Horner's Syndrome	▪ Strabismus	▪ Testing of extraocular muscles
Anterior Triangle	▪ Boundaries and subdivisions of the anterior triangle ▪ Boundaries and contents of the muscular, carotid, digastric and submental triangles		
Temporal and Infratemporal regions	▪ Extent, boundaries and contents of temporal and infratemporal fossae ▪ Attachments, direction of fibres, nerve supply and actions of muscles of mastication ▪ Temporomandibular joint	▪ Clinical significance of pterygoid venous plexus ▪ Dislocation of temporomandibular joint	
Submandibular region	▪ Parts, borders, surfaces, relations, nerve supply of submandibular gland ▪ Course and relations of submandibular duct ▪ Submandibular ganglion ▪ Position, relations and nerve supply of sublingual gland	▪ Submandibular stones ▪ Bidigital palpability of submandibular swellings	
Deep structures in the neck	▪ Thyroid gland- location, parts, borders, surfaces, relations, blood supply ▪ Parathyroid glands- location, blood supply ▪ Trachea, Tracheostomy- structures encountered ▪ Subclavian artery- Origin, parts, course,	▪ Thyroid swellings- anatomically relevant clinical features ▪ Awareness of liability of injury to external and recurrent laryngeal nerves during thyroidectomy	

	- branches - Vagus Nerve in the neck- Course and branches - Accessory Nerve- Course and supply - Cervical Sympathetic chain- Components, branches, area of supply - Deep cervical fascia- parts, extent, attachments, modifications - Deep cervical lymph nodes	- Compression of subclavian artery by cervical rib - Fascial spaces of neck - Thymus	
Mouth, Pharynx, Palate	- Subdivisions and contents - Names, position, actions and nerve supply of muscles of palate and pharynx - Palatine tonsil- Position, relations, blood supply - Waldeyer's lymphatic ring- Components and their function - Boundaries and clinical significance of pyriform fossa	- Tonsillitis and tonsillectomy - Adenoids - Paratonsillar abscess	Killian's dehiscence
Cavity of Nose	- Nasal septum - Epistaxis- significance of Little's area - Lateral wall of nasal cavity - Paranasal sinuses concept of referred pain	- Maxillary sinus tumours - Sinusitis	
Larynx	- Cartilages and ligaments - Names, nerve supply and actions of intrinsic and extrinsic muscles of larynx - Sensory innervation and blood supply of larynx	- Laryngitis - Recurrent laryngeal nerve injury	
Tongue	- Names, nerve supply and actions of extrinsic and intrinsic muscles of tongue - Nerve supply and lymphatic drainage of tongue	Hypoglossal nerve palsy	
Organs of hearing and equilibrium	Parts, boundaries, contents, relations, blood supply and nerve supply of external ear, middle ear and Auditory tube	Internal ear, Mastoid Antrum, Otitis externa, Otitis media, McEwan's triangle-Approach to mastoid antrum, Myringotomy	
Eyeball	Parts and layers of eyeball	Cataract, Glaucoma, Central retinal artery occlusion, Intraocular muscles- position, nerve supply and actions	
Prevertebral region and Joints of Head and neck	- Concept of prevertebral muscles - Atlanto-occipital joint		

	▪ Atlantoaxial joint		
Microanatomy	▪ Pituitary gland ▪ Thyroid and Parathyroid gland ▪ Tongue ▪ Tonsil ▪ Epiglottis	Olfactory epithelium, Eyelid, Lip, Salivary glands, Cornea, Retina, Sclero-corneal junction, Optic Nerve, Crista ampullaris, Macula, Cochlea-organ of Corti, Pineal gland	▪ Adult Tooth
Embryology	▪ Face ▪ Palate ▪ Tongue ▪ Branchial apparatus ▪ Pituitary gland ▪ Thyroid gland ▪ Eye	Facial clefts, First Arch Anomalies, Developmental anomalies of tongue, Branchial cysts and fistulae, Ectopic thymic, parathyroid or thyroid tissue, Thyroglossal cyst, Coloboma iridis	
Surface Anatomy	Vertebral levels of: Hyoid bone, Thyroid cartilage, Cricoid cartilage Surface Projection of Thyroid gland, Parotid gland and duct, Pterion, Common carotid artery, Internal jugular vein, Subclavian vein, External jugular vein, Facial artery	Accessory nerve	
Radiology	Plain X ray skull: AP view, Lateral view ▪ Plain X ray cervical spine lateral view ▪ Plain X ray of paranasal sinuses ▪ Carotid angiogram	CT and MRI of Head and Neck	

(7) THE NERVOUS SYSTEM – SYLLABUS (75 hours)

Topics	Must know	Desirable to know	Nice to know
Subdivisions	Subdivisions of nervous system into Central and peripheral nervous system, somatic and autonomic nervous system		
External features	External features of the brain and spinal cord and its meningeal coverings and blood supply		
Spinal cord	a) External and internal features b) Organization of grey matter into nuclei c) Coverings of spinal cord d) Ascending and descending tracts and their functions	Upper and lower motor neuron lesions	Laminar concept,

	e) Upper and lower motor neurons f) Spinal segment and dermatome g) Blood supply h) Modifications of piamater		
Brainstem	External and internal features of		
Cerebellum	Gross features and subdivisions of cerebellum. Deep nuclei, afferent and efferent connections. Cerebellar peduncles	Morphological subdivisions of cerebellum into archi, paleo and neocerebellum, Cerebello-pontine angle tumour, symptoms of cerebellar disease	
Thalamus	Structure, nuclei, connections and functions		
Hypothalamus	Structure, nuclei, connections and functions	Epithalamus,	Circumventricular organs
Cerebrum	Gross features (gyri and sulci) of the cerebral hemisphere – superolateral, Medial and inferior surface, and the subdivisions into lobes, and blood supply. Functional areas and Brodmann's numerals (motor, sensory, visual, auditory, speech, frontal eye field, prefrontal cortex) Horizontal section of cerebrum Midsagittal section of cerebrum		
White fibres of cerebrum	Association, commissural and projection fibres	Anatomical basis of stroke	
Basal nuclei	Components, basic connections and functions)	Parkinson's disease, Chorea, Athetosis, Huntingtons disease	
Ventricles of the brain	Features of lateral, third and fourth ventricle. Choroid plexus, Circulation of Cerebro-Spinal Fluid (CSF).	Subarachnoid cisterns, blood- CSF barrier.	
Limbic system			Limbic system – parts and function Connections of limbic system
Reticular formation and ARAS			Reticular formation and ARAS-General arrangement, zones, basic connections and functions

Cranial nerve nuclei Optic and auditory pathways	Cranial nerve nuclei - location Optic and auditory pathways		Functional columns
Blood supply of brain and spinal cord	Blood supply of brain and spinal cord	Clinical importance of blood supply of brain and spinal cord, Lateral medullary syndrome, Medial medullary syndrome, pontine hemorrhage, Weber's syndrome, posterior circulation stroke, Middle cerebral artery stroke.	
Microanatomy	Transverse sections of spinal cord at cervical, thoracic, lumbar and sacral levels Cerebral cortex Cerebellar cortex Nerve endings Transverse sections of Medulla oblongata at levels of motor decussation, sensory decussation and mid-olivary level Transverse section of Pons at upper and lower pons, Transverse section of Midbrain at superior and inferior colluculi	Neuromuscular junction- Motor end plate	Differentiation between motor and sensory cortex Muscle spindle
Embryology	Formation and histogenesis of the developing neural tube Derivatives, curvatures and cavities of Prosencephalon, Mesencephalon and Rhombencephalon Neural crest derivatives Hypophysis cerebri	Developmental anomalies: hydrocephalus, anencephaly, spina bifida, meningocoele, meningocele,	Development of functional columns

(8) GENERAL EMBRYOLOGY – SYLLABUS (8 hours)

Topics	Must know	Desirable to know	Nice to know
Introduction	Terms used in embryology Stages of development		
Mitosis and Meiosis and	Primordial germ cells Concept of Chromosomal abnormalities –		

	numerical / structural Gene mutation		
Gametogenesis	Oogenesis Spermatogenesis		
Uterine and ovarian cycles	Uterine and ovarian cycles Ovulation		
Fertilization and Blastocyst	Definition, Phases of fertilization, Results of fertilization, Contraceptive methods- barrier techniques, contraceptive pills, IUD, vasectomy and tubectomy, Infertility Embryonic and adult stem cells	Assisted reproductive technology – IVF, GIFT, ZIFT, ICSI	
Bilaminar germ disc	• Implantation • Abnormal implantation		
Trilaminar germ disc	• Gastrulation		
Embryonic period	Definition, Neurulation – neural pores and the time of closure, Derivatives of each of the 3 germ layers, Somites	External appearance during 2 nd month Induction and organogenesis	
Foetal membranes and Placenta	Structure, Placental circulation, Function, Placental barrier		Erythroblastosis fetalis and fetal hydrops
Amnion and umbilical cord	Structure and function	Amniotic fluid- hydramnios and oligohydramnios	Umbilical cord anomalies, Amniotic bands
Birth defects	Types of abnormalities – malformation, disruption, deformation, syndrome, Teratogens		
Prenatal diagnosis	Ultrasonography, Maternal serum screening, Amniocentesis, Chorionic villus sampling		
Twinning	Monozygotic and dizygotic twins, Conjoint twins		
(9) GENETICS - SYLLABUS (5 hours)			

Topic	Must Know	Desirable to know	Nice to know

Chromosomes	- Structure of chromosomes - Classification of chromosomes based on position of centromere		
Karyotyping	- Technique of preparing a Karyotype - Types of banding - Clinical applications of karyotyping - Reading of karyotypes for normal male, female, Trisomies, Turner syndrome, Klinefelter syndrome		Fluorescent in situ hybridisation (FISH)
Sex Chromatin	- Barr bodies and their clinical significance - Lyon hypothesis		
Patterns of Inheritance and pedigree charts	Mendelian laws of inheritance, Common symbols used in construction of pedigree charts, Understand the characteristics of the types of single gene inheritance, Examples of diseases of each mode of inheritance, Interpret pedigree charts for the various modes of inheritance, Multifactorial inheritance with examples	Clinical features of the examples described: Achondroplasia, Cystic Fibrosis, Vitamin D resistant rickets, Hemophilia, Duchene's muscular dystrophy, Sickle cell anaemia	
Chromosomal Aberrations	Causes of chromosomal aberrations Structural aberrations- types and examples Numerical aberrations- types, examples and clinical features True and pseudohermaphroditism Mosaics and chimeras	Clinical features of other examples of chromosomal aberrations: Prader Willi syndrome, Edward syndrome, Patau syndrome	
Prenatal Diagnosis		Methods of prenatal diagnosis- indications, complications Screening maternal blood for diagnosis of neural tube defects and Down syndrome Ultrasound Fetal echocardiography Amniocentesis Chorionic villus sampling Umbilical blood sampling Genetic counseling and ethical issues in prenatal diagnosis	

6.REFERENCES FOR LEARNING (BOOKS)

Gross Anatomy

1. Cunningham's Manual of Practical Anatomy Volumes 1, 2 and 3 15th edition by GJ Romanes
2. Gray's Anatomy 41st Edition 2016 Standring S
3. Clinical Oriented Anatomy 7th edition by Moore KL, Agur AMR and Dalley AF
4. Essentials of Human Anatomy Vols 1, 2 and 3 by AK Datta
5. A Textbook of Human Anatomy, 2000 by T.S. Ranganathan

Neuroanatomy

1. Clinical Neuroanatomy 7th edition 2009 by Richard S. Snell
2. Essentials of Human Anatomy Neuroanatomy 4th edition 2012 by AK Datta
3. Textbook of Clinical Neuroanatomy 2nd edition Vishram Singh
4. Illustrated Textbook of Neuroanatomy 12th edition by GP Pal

Histology

1. Inderbir Singh's Textbook of Human Histology with Colour Atlas and Practical Guide 7th edition, 2014 by Vasudeva Neelam
2. Wheater's Functional Histology: A Text and Colour Atlas, 6th Edition by Barbara Young, Geraldine O'Dowd, Phillip Woodford
3. Textbook of Histology 2008 by GP Pal

Embryology

1. Langman's Medical Embryology 13th edition by T.W. Sadler,
2. Larsen's Human Embryology 5th Edition 2014 by Schoenwolf, Bleyl, Brauer and Francis-West

3. The Developing Human: Clinically Oriented Embryology 9th edition, 2012 by Keith L. Moore
4. Human Embryology 10th edition by IB Singh,
5. Essentials of Human Embryology 6th edition by AK Datta

Genetics

1. Human Genetics 3rd edition 2012 by Gangane SD

7.THEORY EXAMINATION

Total Marks per paper = 50 Marks

3 hours duration and 50 marks each for Paper1 and Paper 2

Paper 1: General Anatomy, General Histology, General Embryology, and Genetics Gross Anatomy of Upper Limb, Lower Limb, Abdomen, Pelvis and Perineum and special histology and special embryology relevant to these regions;

Paper 2: Gross Anatomy of Thorax, Head, Neck, Brain and Spinal Cord and special histology and special embryology relevant to these regions;

Paper 1 and Paper 2:

1 . Essay	1 x 10 Marks	= 10 marks
2. Brief Answers	5 x 4 Marks	= 20 marks
3. Short Answers	10 x 2 Marks	= 20 marks

Total		50 Marks

Histology and Embryology may be included in theory as a part of the essay, short notes and short answers
Marks will be allotted for relevant diagrams which may be part of the essay, short notes and short answers.

8.PRACTICAL EXAMINATION

List of Specimens for Gross Anatomy Practical

Upper Limb

1. Axilla	6. Back of forearm
2. Scapular region	7. Hand
3. Front of arm	8. Shoulder joint
4. Back of arm	9. Elbow joint
5. Front of forearm	10. Wrist joint

Lower Limb

1. Femoral triangle
2. Gluteal region
3. Front of thigh
4. Posterior and adductor compartment of thigh
5. Anterior and lateral compartments of leg
6. Back of leg
7. Sole of foot
8. Dorsum of foot
9. Knee joint
- 10 Ankle joint

Abdomen, Pelvis and Perineum

1. Anterior abdominal wall
2. Posterior abdominal wall
3. Male external genitalia
4. Inguinal canal
5. Liver and extrahepatic biliary apparatus
6. Stomach
7. Duodenum and pancreas
8. Small intestine and large intestine
9. Blood vessels of abdomen and pelvis
10. Diaphragm
11. Female reproductive system

Thorax

1. Thoracic cage
2. Superior mediastinum
3. Heart- external features

4. Heart- chambers
5. Heart – blood supply
6. Lungs
7. Posterior mediastinum
8. Pericardium

Head and Neck

1. Scalp
2. Face and parotid region
3. Posterior triangle
4. Cranial cavity
5. Orbit
6. Anterior triangle
7. Temporal and infratemporal regions
8. Deep structures of the neck
9. Mouth, pharynx and palate
10. Larynx
11. Nasal cavity
12. Dural venous sinuses

Nervous system

1. External surfaces of the cerebral hemisphere
2. Base of the brain
3. White fibres of the cerebrum
4. Ventricles of the brain
5. Coronal section of the cerebrum
6. Horizontal section of the cerebrum
7. Cerebellum
8. Brain stem

List of Slides for Histology Practical *=Nice to Know

Part 1

General Histology

1. Hyaline cartilage	9. Nerve - CS
2. Elastic cartilage	10. Spinal ganglion
3. White cartilage	11. Sympathetic ganglion
4. Bone T.S.	12. Elastic artery
5. Bone L.S.	13. Muscular artery
6. Skeletal muscle	14. Large Veins
7. Smooth muscle	15. Medium sized veins
8. Cardiac muscle	16. Lymph node
	17. Skin- Hairy and Non-hairy
-

Systemic Histology

1. Cardio-oesophageal junction	10. Liver
2. Oesophagus	11. Pancreas
3. Stomach-Fundus	12. Gall Bladder
4. Stomach-Pylorus	13. Spleen
5. Duodenum	14. Kidney
6. Jejunum	15. Urinary Bladder
7. Ileum	16. Suprarenal gland
8. Appendix	17. Penis
9. Colon	18. Testis

19. Epididymis

20. Vas deferens

21. Seminal Vesicle

22. Prostate

23. Ovary

24. Uterus

25. Uterine Tubes

26. Vagina

27. Cervix

28. Placenta

29. Umbilical Cord

30. Mammary gland

Part 2

1. Tongue-(Papillae * identification Nice to Know)

2. Salivary Gland –serous

3. Salivary Gland –Mucous

4. Salivary Gland –Mixed

5. Tonsil

6. Tooth*

7. Olfactory Epithelium*

8. Cornea

9. Retina

10. Sclero-Corneal Junction*

11. Cochlea*

12. Thyroid & Parathyroid

13. Pituitary Gland

14. Trachea

15. Thymus

16. Lung

17. Spinal Cord – Cervical

18. Spinal Cord – Thoracic

19. Spinal Cord - Lumbar

20. Spinal Cord - Sacral

21. Medulla Oblongata - Pyramidal decussation level

22. Medulla Oblongata -Sensory decussation level

23. Medulla Oblongata -Inferior Olivary Nuclear level

24. Pons – Upper

25. Pons - Lower

26. Midbrain – Superior colliculus

27. Midbrain – Inferior colliculus

28. Pineal Gland

29. Cerebrum

30. Cerebellum

Practical Examination

Anatomy:

Practical examination pattern modified as follows.

Spotters

Gross anatomy	---12 x1= 12 marks
Histology	---12x1= 12 marks

Discussion

Gross anatomy-	--2 x 3 = 6 marks
Histology	--2 x 3 = 6 marks

OSPE- *

--2 x 2 = 4 marks

Total

40 marks

SPOTTERS

Gross anatomy-	
Upperlimb	- 2
Lowerlimb	- 2
Abdomen	- 2
Pelvis	-1
Thorax	-2

Head and neck -2
Brain -1

Histology

General – 3
Paper 1 ---5
Paper -2 ---4

Discussion

Gross anatomy

Paper -1 ----1 specimen
Paper –2- ----1 specimen

Histology

General ----1 slide
Systemic ---1 slide.

OSPE* - Two procedural skills stations with a:

(i) Specific Instruction (such as “describe aloud and mark with chalk on the surface of the cadaver the following structure....., and keep the surface of the cadaver ready for the next student”) and a

(ii) Checklist with the details of the steps used to practice surface marking and marks allotted such as:

- a) Accuracy of the points marked - 0.5 marks
- b) Method used to join the points - 0.5 marks
- c) Description of the steps followed - 0.5 marks
- d) Adequate cleaning of the surface - 0.5 marks

VIVA

Osteology – 5marks
Embryology- 5marks
Radiology- 5 marks
Surface anatomy- 5marks.

This will be implemented from August 2017 examination session onwards.

(For Clinical Anatomy and Genetics charts - the anatomical relevance to common clinical conditions should be asked. The number of charts to be made available should be at least 70:

Paper I	-	30 charts
Paper II	-	30 charts
Genetics	-	10 charts

The clinical anatomy charts should include relevant Gross Anatomy, Embryology and Radiology

List of Surface Markings learnt

Upper limb:

Student must be able to demonstrate

- Relevant bony and soft surface landmarks
- Arteries:
 - Axillary
 - Brachial
 - Radial
 - Ulnar
 - Superficial palmar arch
 - Deep palmar arch
- Nerves:
 - Median
 - Ulnar
 - Radial
 - Axillary
- Others:
 - Flexor retinaculum
 - Extensor retinaculum
- Surface landmarks to palpate the following on the surface:

- Brachial pulsations
- Radial pulsations
- Ulnar pulsations
- Ulnar nerve
- Anatomical snuff box/ scaphoid

- Locate the common sites for venipuncture in the upper limb:
 - Median cubital vein
 - Cephalic vein at the wrist
 - Dorsal venous network

Lower limb:

Student must be able to demonstrate

- Relevant bony and soft surface landmarks
- Arteries:
 - Femoral
 - Popliteal
 - Anterior tibial
 - Posterior tibial
 - Dorsalis pedis
- Veins:
 - Great saphenous

- o Femoral
- Nerves:
 - o Femoral
 - o Sciatic
 - o Common peroneal
- Others:
 - o Inguinal ligament
 - o Saphenous opening
 - o Bryant's triangle
- Surface landmarks to palpate the following on the surface:
 - o Femoral pulse
 - o Popliteal pulse
 - o Posterior tibial pulse
 - o Dorsalis pedis pulse

Thorax:

Student must be able to demonstrate

- Relevant bony and soft surface landmarks
- Superior Mediastinum:
 - o Right and left brachiocephalic veins
 - o Superior Vena Cava
 - o Arch of aorta

- o Trachea
- Events occurring at sternal angle
- Organs:
 - o Heart borders and valves
 - o Lung borders and fissures
 - o Pleura
- Surface landmarks to locate the following on the surface:
 - o Apex beat
 - o Auscultatory areas for the heart valves

Abdomen:

Students must be able to demonstrate:

- Relevant bony and soft surface landmarks
- Abdominal planes, abdominal regions and organs located in each region
- Surface projection of the following organs:
 - o Stomach
 - o Liver
 - o Spleen
 - o Fundus of Gall bladder
 - o Base of the appendix

- Morrison's parallelogram for posterior marking of the kidneys
- Blood vessels: Abdominal aorta and Inferior Vena Cava
- Others:
 - Superficial and deep inguinal rings
 - Mc Burney's point
 - Vertebral levels of main events occurring in the abdomen
 - Events occurring at the transpyloric plane
 - Root of mesentery

Head and neck:

Students must be able to demonstrate:

- Relevant bony and soft surface landmarks
- Glands:
 - Parotid gland and duct
 - Submandibular gland
 - Thyroid gland
- Arteries:

- Facial artery
 - Common, internal and external carotid arteries
 - Internal and external jugular veins
 - Subclavian artery and vein
- Nerves:
 - Spinal accessory nerve
 - Vagus
- Others:
 - Vertebral levels of surface landmarks in the neck
 - Pterion
 - Mastoid antrum
- Surface landmarks to palpate the following on the surface:
 - Frontal air sinus
 - Maxillary air Sinus
 - Carotid pulsation
 - Superficial temporal pulsation
 - Subclavian pulsation

10.FORMATIVE ASSESSMENT

- Quarterly (marks need to be submitted three times to the university)

Students should be given feedback on their performance after each of the following **eight units.**

- 1) General Anatomy and Upper Limb
- 2) Lower Limb
- 3) General Histology and General Embryology
- 4) Thorax
- 5) Abdomen
- 6) Head and Neck,
- 7) Brain and
- 8) Genetics

11.INTERNAL ASSESSMENT TEST - UNIT WISE

Each student should be shown as having a mark for each of the eight units mentioned above. These marks should be grouped together and sent to the university on three occasions in one academic year. Based on all these marks the total internal assessment will be finally calculated as Theory and Practical marks which will be the average of the 8 Internal Assessment unit tests:

Theory	20 marks
Practical	15 marks
Records 2.5 x 2 =	5 marks

TOTAL	40marks

- Gross Anatomy Record and Histology Record
- Record books with pre-drawn sketches should not be used

12.MEDICAL ETHICS -

- 1) Respect of the cadaver
- 2) Privacy and confidentiality
- 3) Cultural sensitivity

- 4) Consent
- 5) Autonomy
- 6) Source of cadavers
- 7) Eugenics
- 8) Genetic counselling

13. INTEGRATED TEACHING

- 1) **Vertical Integration-** with the help of clinicians and hospital visits wherever possible
- 2) **Horizontal Integration-** may be considered for topics such as peptic ulcer, diseases of liver and biliary tract, diseases of the kidney, diseases of the central nervous system, myocardial infarction

Clinical Integration for Upper Limb

<u>Topic</u>	<u>Clinical Speciality</u>
Brachial plexus and peripheral nerve injuries	Orthopaedics
Peripheral Pulsations	General surgery/Medicine
Concept of Common fractures and dislocations	Orthopaedics
Concept of growing end of the upper limb bones	Orthopaedics
Surgical approaches for orthopaedic surgery	Orthopaedics
Breast	General surgery

Clinical Integration for Lower Limb

<u>Topic</u>	<u>Clinical Speciality</u>
Nerve injuries	Orthopaedics & Medicine or Neurology
Varicose veins	General surgery
Elephantiasis	General surgery
Peripheral pulsations in relation to living anatomy	General surgery
Demonstration of pulses	
Surgical anatomy of joints of the lower limb	Orthopaedics

Clinical Integration for Abdomen Pelvis and Perineum

<u>Topic</u>	<u>Clinical Speciality</u>
Appearance of abdominal viscera in USG, CT and MRI	Radiology
Inguinal region	General Surgery
Contraception in the male and female	Community medicine/OG
Congenital malformations	Paediatric surgery/paediatrics
Portal hypertension	General Surgery/Gastroenterology
Peptic ulcer	General Surgery/Gastroenterology
Assisted reproduction	Obstetrics and Gynecology

Clinical Integration for Thorax

<u>Topic</u>	<u>Clinical Speciality</u>
Superior mediastinum –thoracic inlet syndrome, scalenus anterior syndrome	General surgery
Pleural effusion, Pneumothorax, Pleural tapping	Medicine / Respiratory Medicine
Pericardial pain, referred pain from heart	Medicine
Tracheo-oesophageal fistula	Paediatric surgery
Appearance of thorax in CT and MRI	Radiology

Clinical Integration for Head and Neck

<u>Topic</u>	<u>Clinical Speciality</u>
Facial nerve palsy	General Medicine
Cataract, Glaucoma, Eyelid infections	Ophthalmology
Surgical anatomy of ENT	ENT

Clinical Integration for Nervous System

<u>Topic</u>	<u>Clinical Speciality</u>
Upper and Lower motor neuron	General Medicine
Hemiplegia	General Medicine
Cerebellar lesions	General Medicine
Appearance of the brain in CT and MRI	Radiology

Clinical Integration for Genetics

<u>Topic</u>	<u>Clinical Speciality</u>
Prenatal diagnosis	OG

14.RECORDS

Gross Anatomy Record and Histology Record

Records with Pre-drawn sketches should not be used.
List of Gross Anatomy diagrams.

<u>Upper Limb</u> Typical spinal nerve Lymphatic Drainage of breast Brachial Plexus Axillary Artery Anastomosis around the scapula Dermatomes of the upper limb Anastomosis around the Elbow Flexor Retinaculum of Wrist Fascial Spaces of Palm Extensor Retinaculum of wrist	<u>Lower Limb</u> Femoral sheath Adductor canal Cutaneous innervation of the dorsum of foot Superior surface of the tibia Anastomosis around the knee

<u>Thorax</u> Subdivisions of mediastinum T.S. of thorax at T3 level T.S. of thorax at T4 level Arterial supply of heart Venous drainage of heart Medial surface of lungs Bronchi and bronchopulmonary segments	<u>Abdomen</u> Regions of abdomen Superficial veins of anterior abdominal wall Lymphatic drainage of skin of abdominal wall Rectus sheath Lesser sac Blood supply, Nerves supply of stomach Lymphatic drainage of stomach Thoracolumbar fascia Anterior & posterior relations of kidney Portosystemic anastomosis Peritoneal reflection in male Peritoneal reflection in female
<u>Head and Neck</u> Layers of the scalp Vessels & nerves of the scalp Muscles of facial expression Cutaneous innervation of head and neck Posterior triangle Cavernous sinus Superior orbital fissure and common tendinous ring Ciliary ganglion and its connections Carotid triangle - boundaries Carotid arteries and nerves in the neck Structures related to hyoglossus Nasal septum Arteries & nerves of nasal cavity	<u>CNS</u> Internal structure of spinal cord showing position of tracts Interpeduncular fossa and attachment of cranial nerves to the anterior surface of the brain stem Arteries on the base of the brain Floor of fourth ventricle Functional areas of cerebrum Blood supply of cerebrum

<u>List of Histology slides to drawn by I MBBS students</u>	
<u>General Histology</u>	
<u>Epithelial Tissue</u>	Blood vessels
- Simple squamous epithelium	- Elastic artery
- Simple cuboidal epithelium	- Medium sized artery and vein
- Simple columnar epithelium	- Large vein
- Pseudostratified cil. columnar epithelium	Glands
- Stratified squamous epithelium	- Unicellular gland (Goblet cell)
- Transitional epithelium	- Simple tubular gland
Connective Tissue	- Serous gland
- Areolar tissue	- Mucous gland
- Adipose tissue	- Mixed gland
- Tendon L.S	-Sebaceous and sweat gland
Cartilage	-Mammary gland
- Hyaline cartilage	Lymphoid Tissue
- Elastic cartilage	- Lymph node
- Fibro cartilage	- Spleen
Bone	- Thymus
- Compact bone L.S.	- Tonsil
- Compact bone C.S.	Nervous Tissue
- Spongy bone	- Nerve C.S
- Developing bone	- Nerve L.S (Osmicatted)
Muscle	- Spinal ganglion
-Skeletal muscle L.S.	- Sympathetic ganglion
-Skeletal muscle C.S.	Integumentary System

- Smooth muscle	- Hairy skin
- Cardiac muscle	- Nonhairy skin
	- Nail
Special Histology	
Gastrointestinal system	- Cornea
- Oesophagus	- Iridio-corneal junction
- Cardio-oesophageal junction	- Retina
- Stomach - fundus	- Optic nerve
- Stomach - pylorus	- Macula
- Duodenum	- Crista
- Jejunum	- Organ of Corti
- Ileum	- Pituitary gland
- Large intestine	- Pineal gland
- Appendix	- Thyroid gland
- Liver	- Parathyroid gland
- Gall bladder	- Tongue – fungiform and filiform papillae
- Pancreas	- Tongue – circumvallate papilla
Genitourinary system	- Epiglottis
- Kidney	- Olfactory epithelium
- Ureter	CNS
- Urinary bladder	Nerve Endings
-Adrenal gland	- Motor end plate
-Testis	- Muscle spindle
-Epididymis	- Meissner's corpuscle and Pacinian corpuscle
-Vas deferens	
-Seminal vesicle	-Spinal cord - cervical
-Prostate	-Spinal cord - Thoracic

-Ovary	-Spinal cord - Lumbar
-Fallopian tube	-Spinal cord - Sacral
-Uterus	- Medulla - Motor Decussation
-Cervix	- Medulla - Sensory Decussation
-Placenta	- Medulla - Mid Olivary Level
-Umbilical cord	-Pons – lower pons
Respiratory System	- Pons - upper Pons
-Trachea	- Midbrain – inferior colliculus
- Lung	- Midbrain - Superior Colliculus
Head & Neck	- Cerebrum – Typical Cortex
- Eyelid	- Cerebellum
- Lip	
- Adult tooth	
- Developing tooth –Bell stage	

Record should be followed as recommended by the University.

PHYSIOLOGY

The goal of learning Physiology is to enable an undergraduate student to have a comprehensive knowledge of the normal functions of the organ systems which facilitates an understanding of the physiological basis of health and disease.

HUMAN PHYSIOLOGY

COMPETENCIES:

At the end of the I MBBS Physiology course, the student must:

- Have an understanding of the functioning of the different organ systems of the human body and their interactions towards maintenance of homeostasis or a constant internal environment.
- Be able to apply the knowledge of physiological processes to comprehend mechanisms of disease and basis of treatment.
- Be able to perform some basic laboratory tests and interpret their results
- Be able to perform clinical examination to assess various organ systems.

ii) OBJECTIVES

a) KNOWLEDGE

At the end of the course the student should be able to:

- (1) Explain the normal functioning of all the organ systems and their interactions for maintenance of a constant internal environment.
- (2) Describe physiological responses and adaptations to changes in internal and external environment.

- (3) Describe the physiological principles underlying pathogenesis and treatment of disease.
- (4) List normal values and acceptable ranges for relevant physiological parameters
- (5) Interpret results of the following laboratory tests:
 - (i) serum electrolytes, pH, osmolarity and blood gases
 - (ii) pulmonary function tests
 - (iii) renal function tests
 - (iv) cardiac function tests
- (6) Diagnose conditions from symptoms and signs and investigative data provided in case scenarios dealing with common disorders of: hematological, musculoskeletal, alimentary, endocrine, reproductive, renal, cardiovascular, respiratory, and neurological systems.

b) SKILLS

At the end of the course the student should have developed skills in/to:

- (1) Basic hematological techniques:
 - (i) use and maintenance of a compound microscope
 - (ii) collection of blood by the finger prick method using aseptic techniques
 - (iii) performance of ESR, total WBC count, Differential count, hemoglobin estimation, PCV, Bleeding and clotting time, blood grouping.
 - (iv) Calculation of hematological indices
- (2) Distinguish between normal and abnormal data derived from the tests mentioned above.
- (3) Perform the following tests and clinical examinations in a normal subject with an understanding of the physiological basis of the examination and the clinical need to do so. The student should be able to:
 - (i) Measure blood pressure, record ECG and perform clinical examination of the cardiovascular system.
 - (ii) perform tests of ventilatory function using spirometer and peak flow meter and perform clinical examination of the respiratory system
 - (iii) do experiments towards understanding the effect of posture and various grades of exercise on cardiorespiratory function.

(iv) perform clinical examination of the abdomen

(v) perform clinical examination of the nervous system including special senses

c) ATTITUDE:

The student must

(i) develop a scientific approach in the practice of clinical medicine

(ii) correlate disease manifestation with derangements of physiological mechanisms and understand rationale of treatment

INTEGRATION

The teaching-learning program should be integrated horizontally and vertically, as much as possible, to enable students to understand the physiological processes in health, derangements in disease and rationale of treatment.

Number of hours:

Lectures + Tutorials: 280

Practicals + OSPE: 160

ECE: 40

480

TOTAL HOURS ALLOCATED FOR PHYSIOLOGY AS PER MCI NORMS

<i>S.No</i>	<i>TOPICS</i>	<i>LECTURE AND TUTORIALS</i>	<i>PRACTICAL AND OSPE</i>	<i>ECE</i>
1	General physiology and body fluids	20 Hours	5 Hours	3 Hours
2	Blood	30 Hours	40 Hours	6 Hours
3	Muscle	15 Hours	5 Hours	3 Hours
4	Gastrointestinal System	15 Hours	12 Hours	3 Hours
5	Endocrine System	30 Hours	15 Hours	3 Hours
6	Reproductive System	20 Hours	5 Hours	2 Hours
7	Excretory System	25 Hours	10 Hours	2 Hours
8	Respiratory System	25 Hours	20 Hours	4 Hours
9	Cardiovascular System	35 Hours	20 Hours	5 Hours
10	Central Nervous System	45 Hours	22 Hours	6 Hours
11	Special senses	20 Hours	6 Hours	3 Hours
	TOTAL HOURS	280 Hours	160 Hours	40 Hours

The teaching learning methods employed will include

Theory

- **Lectures**
- **Tutorials**
- **Small group discussion**
- **Case based learning**
- **Problem based learning**
- **Integrated teaching module**
- **Early Clinical Exposure**

Practical

- **Demonstration of Hematology Experiments**
- **System wise Clinical Examination**
- **OSPE**
- **OSCE**
- **Case Discussion**
- **Charts and calculation**

THEORY AND PRACTICAL SYLLABUS

GENERAL PHYSIOLOGY AND BODY FLUIDS (Lectures + Tutorials 20 hours; Practicals + OSPE 5 hours; ECE: 3 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVES			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Cell Organelles	Will be discussed in Biochemistry and Anatomy				
2	Homeostasis and Feedback System	- Describe the concept of maintenance of internal environment - Recognize that negative feedback is the most common type of physiological control	- State and describe examples of negative feedback - State and describe instances of positive feedback in human physiology		1 Hour	
3	Body Fluids	- List the different body fluid compartments, - state the volume, osmolarity and electrolyte composition of each of the following compartments - Total body water, extracellular, intracellular, plasma, intravascular - Describe the term transcellular fluid - Measurement of volumes of compartments - Describe the Starling's forces that govern fluid exchange across the membranes separating the various compartments - Define Donnan effect and equilibrium - Use the Concept of electro neutrality in the fluid compartments to calculate 'Anion gap' - Define anion gap as the term referring	- Difference between tonicity and osmolarity - Edema and its causes - The dilution principle for measurement of body fluid compartments - Methods of measurement of body fluid compartments	Changes in electrolyte concentration in Vomiting, Diarrhoea, severe dehydration and burns Cause for oedema in Kwashiorkor, Liver failure, glomerulonephritis and filariasis	2 hours	with clinical departments to enable a student to understand the principles of intravenous fluid therapy learn the presentations and management of electrolyte disorders (the causes of fluid and electrolyte disorders may be discussed later in the course) see patients presenting with different types of edema

		to unmeasured anions in plasma.				
4	Cell Membrane	- Describe with diagram the fluid mosaic model - State the composition of cell membrane in terms of lipids and proteins and describe how these are organised			1 Hour	
5	Membrane Transport	- Classify transport mechanisms as Passive and active with examples and differentiate between them. - List and describe the following passive transport processes with examples: - Simple diffusion of respiratory gases through lipid film - Diffusion of ions through ion channels - Sodium, potassium, calcium and chloride channels - Non-gated channels, voltage-gated, ligand-gated channels and mechano-gated channels - Facilitated diffusion - Glucose transporters (GluTs) - Osmosis - Describe the following active transport processes: - Primary active transport: - sodium-potassium pump, - Secondary active transport: sodium-glucose co-transport (SGLT) and sodium-aminoacid co-transport - Describe the following transport processes by formation of membrane vesicles - Endocytosis	Describe the differences between channel and carrier-mediated transport processes State Fick's law of diffusion - Describe the following active transport processes: - Primary active transport: - calcium pumps - plasma membrane calcium pumps (PMCA) and Sarco/endoplasmic reticulum calcium pumps (SERCA) - Proton pumps - V-type H ATPase, H/K ATPase - Secondary active transport: sodium-hydrogen exchangers, sodium-calcium exchangers, Na/2Cl/K symport	State the mechanism of action of botulinum toxin and the basis of botox injections Channelopathies	3 Hours	Teaching may be integrated with Pharmacology and clinical departments to (i) enable a student to have a perspective about blockers of the transporters (channels and carrier proteins) used as therapeutic drugs. Examples: Digoxin, Furosemide, thiazide diuretics, amiloride, omeprazole (ii) understand disorders arising due to mutations of some channels: E.g.: Liddle's syndrome Brugada syndrome Congenital Long QT syndrome

		Exocytosis				
6	Membrane Potential	- Describe the mechanisms involved in genesis of resting membrane potential (RMP) in a prototype cell - Recognise the RMP in a nerve or cardiac cell - Nernst or equilibrium potential 'Equilibrium potential' - Action potentials in neuron, skeletal muscle cell, Sino atrial node and cardiac ventricular cell	- Patch Clamp Technique - Cathode Ray Oscilloscope	Describe the term 'Depolarizationblock' in terms of inactivation of voltage –gated sodium channels during sustained partial depolarization and therefore the inability of the tissue to develop new action potential	2 Hours	With Pharmacology and Anaesthesia to understand (i)The use of drugs causing depolarization blockade (ii))Long QT syndrome as an adverse effect of a number of drugs causing blockade of a K channel called HERG channel

Blood (Lectures + Tutorials 30 hours; Practical + OSPE 40 hours; ECE: 6 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVES			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Introduction	- Describe the normal composition of blood - Describe the composition of plasma - State the difference between plasma and serum.	State the difference between plasma and serum..		1 Hour	
2	Plasma Proteins (Integration with Biochemistry)	- State the site of production, normal range and describe the functions of Albumin - Discuss causes for decrease in serum Albumin levels with specific examples of disease conditions - Explain what is plasma oncotic pressure - Discuss the production, various types and role of Globulins (alpha, beta and gamma globulins)	- Causes for decrease in serum Albumin levels with specific examples of disease conditions - Discuss the significance of albumin/globulin ratio - Explain the cause for oedema in Kwashiorkor, Liver failure, glomerulonephritis and filariasis	- Acute Phase Proteins (Special consideration of Fibrinogen as an acute phase protein) - Describe the significance of C- Reactive protein	2 Hours	With clinical departments to enable a student to examine patients with edema, identify and discuss the mechanism of edema in various disease conditions
3	Erythrocyte Sedimentation Rate (ESR):	- Define and state normal values for ESR in men and women - Describe the factors influencing ESR (fibrinogen particularly) - Discuss the significance of ESR in disease states	Estimate ESR by Wintrobe/Westergren's method of a provided sample of blood and interpret the result		Practical 3 Hours	See evidences for ESR serving as an index of acute phase reaction
4	RBC	- Describe the physical characteristics of red blood cells - List causes and give explanation for physiological variations of the normal	Explain morphological characteristics of individual stages of		2 Hours	

		RBC count • Explain the functions of RBCs • List the changes in sites of erythropoiesis with age • Illustrate the major changes that take place during the stages of erythropoiesis. • Describe the factors regulating/affecting erythropoiesis, • Discuss the normal life span and destruction of RBCs	Erythropoiesis • Define Packed Cell Volume (PCV)/Hematocrit and state normal range for men and women • State the physiological variations in PCV		Practical 3 Hours	
5	Hemoglobin	• State the components of Hb, the various types of Hb and normal range of Hb in men and women • Briefly discuss the synthesis of haemoglobin • what is reduced hemoglobin. • Define and describe cyanosis • Discuss the types of jaundice • Abnormal Hemoglobin	• Estimate and interpret Hb content by Sahli's Acid Hematin method- Estimation of Hb • Abnormal Hemoglobin • Iron metabolism and iron overload • Discuss the synthesis of hemoglobin • Discuss carbon monoxide poisoning and treatment • Discuss Iron metabolism and iron overload	• Role of phototherapy in treating infants with jaundice due to hemolysis	2 Hours Practical 3 Hours	• With biochemistry to discuss about structure and types of Hb • Describe and detect Cyanosis • Describe sickle cell anemia & • Thalassemia • Identify and describe physiological jaundice of new born • Discuss different types of jaundice.
6	Anaemia	• Define anaemia • Classify anaemia based on etiology and morphology • Discuss the principles of treating anemias • Describe major symptoms, signs and effects of anemia	• State the normal reticulocyte count and its significance • Define reticulocyte response • Calculate and interpret red cell indices	• Discuss the principle and indications for Bone Marrow Transplantation	2 Hours	• With medicine departments to see patients with anemia and enable a student to • discuss causes and effects of anemia • Identify signs of

						anemia in a patient List tests to be ordered to diagnose anemia and interpret the test results.
7	Polycythemia	- Define what is Polycythemia - Explain what is Polycythemia rubra vera - Discuss causes for secondary polycythemia - Explain what is relative polycythemia - Discuss the effects of polycythemia	Classification of Polycythemia and its causes	Discuss the principles of treating Polycythaemia	1 Hour	With medicine departments to enable a student to discuss causes and effects of polycythaemia
8	Platelet	- Describe the formation, structure, life span & removal of platelets - State the normal platelet count - Describe the functions of platelets. - Discuss the causes and effects of thrombocytopenia	Details of the various granules in platelets	Thrombocytopenic Purpura	1 Hour	- With medicine departments to see patients with thrombocytopenia and enable a student to - Discuss causes and effects of thrombocytopenia
9	Hemostasis	- Describe the processes involved in hemostasis such as: - vasoconstriction - Platelet plug formation - Clotting or coagulation pathways - Clot retraction - Describe anticlotting and fibrinolytic mechanisms in the body - List anticoagulants and their mechanism of action - Explain various causes for abnormal hemostasis - List the clotting factors and Explain	- Explain various causes for abnormal hemostasis - Perform and interpret simple tests of hemostasis like bleeding time by Duke's method and clotting time by capillary method of Wright on oneself. - Explain and Interpret tests such as platelet count, Prothrombin Time, Activated Partial Thromboplastin Time	- Explain Arachidonic acid metabolism - COX pathway (and lipooxygenase for completion) - Explain the role of Prostaglandins (and leukotrienes) - Discuss the role of Thrombolysis in therapeutics - Explain Disseminated	2 Hour Theory 3 Hours Practical	With Medicine Department to see patients with abnormal hemostasis and enable the students to discuss causes and effects of abnormal hemostasis

11	WBC	• State the normal Total and Differential count • Classify types of WBC as granulocytes, agranulocytes • Describe the morphology and functions of neutrophils, eosinophils, basophils, mast cells; Lymphocytes, monocytes. • Perform and interpret total leucocyte on their own blood / provided blood using aseptic precautions • List Conditions in which total leucocyte counts is increased or decreased. • List conditions in which counts of each type of WBC are increased or decreased • Describe the various cells that constitute the monocyte- macrophage system and state their function	• Make a peripheral blood smear on their own blood / provided blood • Perform and interpret the differential leucocyte count using aseptic precautions	• Monocyte-macrophage system and state their function	2 Hours theory 6 Hours Practical	• With medicine - altered total and differential counts • Brief introduction to hematological malignancies • Bone marrow transplantation
12	Leucopoiesis	• Outline the process of maturation of white blood cells			1 Hour	
13	Immunity	• Classify immunity and state the differences between innate and acquired immunity • Discuss the cells and mechanisms involved in innate immunity • Name the lymphoid organs in the body and outline the development of T and B cells • Classify acquired immunity and mention the cells involved in acquired immunity • Describe the cells and mechanisms involved in cell mediated immunity • Describe the cells and mechanisms	• Classify immunoglobulins and state their functions • Explain primary and secondary immune response • Illustrate the role of Complement system in immunity	• Name important cytokines. • State their source and functions • Auto Immune Disease Immunodeficiency Syndrome • Organ transplant and • Immunosuppression	5 Hours	• To integrate with medicine to discuss and observe patients with Immunodeficiency syndromes, • Autoimmune diseases • To integrate with dermatology to discuss and observe patients with • Allergy and

		involved in humoral immunity				- Hypersensitivity - To integrate with nephrology to discuss immune response related to - Organ Transplantation and immunosuppressive therapy
14	Lymph	- Describe the formation and composition of lymph - Illustrate the lymphatic circulation. - Discuss functions of lymph.	Discuss the pathophysiology of lymphedema		1 Hour	Integrate with surgery to discuss and observe patients with lymphedema (filariasis, Ca Breast with upper arm edema)

Autonomic nervous system (Lecture 2 Hours)

No	Topic	SPECIFIC LEARNING OBJECTIVES			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Organization	• Sympathetic and parasympathetic divisions • Pre-ganglionic neuron • Post-ganglionic neuron	• B type nerve fibres • Unmyelinated C fibres		2 Hours	
2	Sympathetic division	• Thoraco-lumbar outflow • Ganglia close to vertebral column • Post ganglionic neurons longer – travel along vessels to reach viscera • Adrenal medullary cells are neuroendocrine cells				
3	Parasympathetic division	• Cranio-sacral outflow • Supply to organs in head - through oculomotor, facial and glossopharyngeal nerves • Supply to thoracic and upper abdominal viscera- through the vagus • Supply to lower abdominal and Pelvic viscera- through S2, S3 and S4 sacral nerves • Ganglia are within or close to the organ of supply • post-ganglionic neurons are short				
4	Chemical transmission	• Acetylcholine - all pre-ganglionic neurons, post-ganglionic parasympathetic neurons, sympathetic post-ganglionic neurons that	• Acetylcholine has shorter duration of action due to the degradation by acetylcholinesterase • Nor-epinephrine has a			

		innervate sweat glands, • All other sympathetic post-ganglionic neurons secrete nor-epinephrine	longer duration of action Otto Loewi's experiment			
5	Acetylcholine	• Removal by acetylcholinesterase • Receptors • Muscarinic receptors - distribution and difference in action through these receptors • Nicotinic receptors – distribution	• Muscarinic blocker – atropine • Ganglion blocker - hexamethonium			
6	Catecholamines	• Receptors • alpha 1 – vasoconstriction • alpha 2 • beta 1 increases heart rate • beta 2 – bronchodilation • beta 3	• pheochromocytoma • Vanillyl mandelic acid • Nor-epinephrine has greater affinity for alpha receptors and epinephrine has greater affinity for beta receptors			
7	General functions	• Sympathetics - fight or flight respons	• Walter Cannon • Walter Cannon			
8	Eye	• Parasympathetic – Accommodation, miosis • Sympathetic accommodation, miosis □ Sympathetic - mydriasis				
9	Heart	• SA node • Parasympathetic - decreases heart rate – muscarinic receptor • Sympathetic - Increases heart rate - beta 1 receptors • Atria & Ventricle • Parasympathetic - decreases				

		force of contraction • Sympathetic - increases force of contraction - beta 1 & 2 receptors • AV node and Purkinje fibers • Parasympathetic - decreases conduction velocity • Sympathetic - increases conduction velocity - beta 1 & 2 receptors				
10	Lungs	• Parasympathetic – bronchoconstriction • Sympathetic -Dilation - beta 2				
11	Vessels	• Arterioles • Sympathetic - vasoconstriction - α 1 & 2 • Veins • Sympathetic - constriction - α 1 & 2				
12	Stomach and Intestine	Parasympathetic o Increases motility & secretion o Relaxes sphincters □ Sympathetic o Decreases motility & secretion o Contracts sphincters				
13	Gall Bladder	• Parasympathetic – contraction • Sympathetic – relaxation				
14	Urinary Bladder	• Detrusor • Parasympathetic – contraction • Sympathetic – relaxation				

		• Sphincter • Parasympathetic – relaxation • Sympathetic – contraction				
15	Male Organ	• Erection – parasympathetic • □ Ejaculation – Sympathetic				
16	Skin	• Pilomotor - Sympathetic – contraction • Sweat glands • Parasympathetic - generalized dilute secretion				
17	Liver	• Sympathetic - glycogenolysis				
18	Pancreas	• Exocrine • Parasympathetic increases secretion • Sympathetic –decreases	• Endocrine • Sympathetic - decreases			
19	Salivary Gland	• Parasympathetic - profuse watery secretion • Sympathetic - thick viscous secretion rich in enzyme				
20	Lacrimal Gland	• Parasympathetic – secretion				
21	Adipose Tissue		• Sympathetic - lipolysis			
22	Drugs		• Atropine, Neostigmine, physostigmine • Propranolol, Salbutamol • Isoprenalin, dopamine			
23	Higher Control	• Hypothalamus, Medulla – RVLM	• Head ganglion - Sherrington			

Muscle (Lectures + Tutorials 15 hours; Practicals + OSPE 5 hours; ECE: 3 hours)

No	Topic	SPECIFIC LEARNING OBJECTIVES			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Skeletal Muscle Morphology	- Describe and draw the structure of sarcomere marking actin filament, myosin filament, I band, A band, H band, Z line and sarcomere - Describe the functions of contractile and regulatory proteins involved in muscle contraction - Draw and describe the structure of the sarco-tubular system	Describe the functions of other structural proteins like Titin, Desmin etc	Role of Dystrophin in muscle Dystrophies	2 Hours	Muscular dystrophy (Neurology/P MR)
2	Neuromuscular junction	- Draw and Describe the structure of the neuromuscular junction - Describe the events involved in neuromuscular transmission - Describe the pathophysiology of diseases affecting the neuromuscular junction like myasthenia gravis - Describe the mechanism of action cholinesterase inhibitors - Motor Unit	- Pseudocholinesterase Lambert-Eaton Syndrome - Organophosphorus poisoning - EMG.	Neuromuscular Blockers	2 Hours	Succinyl choline and depolarization block – (Anaesthesia) Therapeutic use of Botox Myasthenia Gravis – (Neurology) Organophosphorus Poisoning (Medicine)
3	Muscle Contraction	- Describe the molecular Basis of muscle contraction, events involved in excitation contraction coupling. - Explain the types of Muscle contraction - Describe the sliding filament theory of muscle contraction	Describe the physiological basis of the length-tension	- Types of Muscle fibres - Energy sources in muscle - Denervation hypersensitivity - Describe the	2 Hours	Rigor Mortis (Forensic Medicine)

		• Role of ATP and calcium pumps in the mechanism of relaxation of the muscle • Describe the Factors affecting the force of contraction	relationship.	concept of oxygen debt		
4	Smooth Muscle	• Structure, distribution, types, molecular mechanism of contraction	• Comparison between smooth, skeletal and cardiac muscle		1 Hour	
5	Factors modulating smooth muscle contraction And Properties	• List the various factors that modulate smooth muscle contraction like stretch, sympathetic nervous system, circulating substances etc. • Describe the special properties of smooth muscle like latch-bridge mechanism and plasticity	•		1 Hour	Cystometrogram (PMR, Urology)

Gastrointestinal System (Lectures + Tutorials 15 hours; Practicals + OSPE 12 hours; ECE: 3 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVES			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Salivary Gland	- Name the Salivary Glands - Functions of saliva. - Describe the regulation of salivary secretion	Deficient salivation – Xerostomia	- Formation of saliva - Composition of saliva	1 Hour	
2	Enteric nervous system	- State the location and components of the enteric nervous system. - Explain the functions of the Myenteric plexus and Meissner's plexus - Explain the effect of the autonomic nervous system on the enteric nervous system	Explain the physiological basis of Congenital Megacolon		1 Hour	
3	Mouth and oesophagus	- Explain the process of mastication - Outline the process of Deglutition. - State the importance of lower oesophageal sphincter	Achalasia Cardia	Gastro-esophageal reflux disease (GERD)	1 Hour	Reflux esophagitis (Medicine)
4	Gastric secretion	- Describe the composition and functions of gastric secretion - Describe the mechanism of gastric acid secretion - State the role of chief cells and parietal cells - Describe the different phases of gastric secretion - Discuss regulation of gastric secretion - Explain the importance of mucus-bicarbonate barrier - Explain the cause of acid peptic disease	- State an example of proton pump inhibitor and histamine receptor blocker - Explain the reason for Pernicious anemia - Physiological basis for the use of proton pump blockers and histamine receptor blockers for peptic ulcers	- Gastric Function Tests - Role of H.Pylori in peptic ulcers	2 Hours	APD Cases shown in Medicine Department
5	Liver and gall bladder	- Explain the portal system - Describe the functions of liver	Explain the pathophysiology of	Explain the consequences of		Integrated teaching with Anatomy to

	(Horizontal Integration)	- Describe the composition and functions of Bile - Explain Micelle formation and its functions - Explain what is emulsification of fat - Explain the process of Entero-hepatic circulation	- Portal Hypertension - Ascites - Gall Stone - Jaundice	liver Failure	1 Hour	understand the functional Anatomy of Liver With Biochemistry to discuss LFT With Medicine – Liver Failure With Surgery – Jaundice
6	Gall Bladder	- State the factors regulating bile secretion - Explain the function of Gall Bladder - Explain how concentration of Bile	State the composition of gall stones and factors involved in the formation of gall stones	- State what is ERCP and when it is performed - State what is Cholecystectomy and what are the indication of the same	1 Hour	Integrated with Surgery to discuss about Gall Stones
7	Pancreatic secretion	- List the Enzymes present in pancreatic juice and explain their functions - Explain the regulation of secretion the role of enterokinase	Reason for the alkaline pH of pancreatic secretion and its importance	- what is pancreatitis - Explain Steatorrhea	1 Hour	
8	Small Intestine	- Explain the functional anatomy of the small intestine - Discuss the secretions of small intestine and their functions - Describe how small intestinal secretion regulated	Enterokinase Malabsorption syndrome	Cholera	1 Hour	
9	Gastric Motility	- Explain the process of mixing of food in the stomach - Explain the factors influencing gastric motility and gastric emptying - Describe the mechanism of vomiting	- Explain the Chemoreceptor trigger zone - Discuss the role of Anti-emetics	Dumping syndrome	1 Hour	
10	Movements of small intestine	- Describe peristalsis - Explain the stimuli and factors which influence peristalsis - Describe 'segmentation contractions'	State what is basic electrical rhythm of the gastrointestinal tract and it's role	Define paralytic ileus	1 Hour	

		and 'mixing contractions' and their functions				
		• Explain what is Migrating Motor Complex				
11	Large intestine & Movements of Large Intestine	• Explain the functions of large intestine and formation of faeces • What is segmentation and mixing contractions of large intestine • Explain Defecation Reflex	• State the importance of dietary fibre • Constipation • What is Gastro colic reflex	• Pathophysiology of Hirschprung's Disease	1 Hour	
12	Digestion and Absorption	• Digestion and Absorption of carbohydrates • Digestion and Absorption of proteins • Digestion and Absorption of fat	• Glucose Transporters • Fat soluble vitamins • Function of short chain fatty acids	• Lactose Intolerance	1 Hour	
13	Iron Absorption	• Absorption of Iron	• Transferrin, Ferritin • Hemosiderin • Hemosiderosis			
14	GI Hormones	• Source of Hormones • Functions and regulation of secretion of Gastrin, Cholecystokinin and Secretin			1 Hour	
15	Water Movement in Intestine	• Physiological basis of treatment of Diarrhoea	Cholera – Increased chloride and water secretion			

Endocrinology (Lectures + Tutorials 30 hours; Practicals + OSPE 15 hours; ECE: 3 hours)						
NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Introduction to Endocrinology	- Define Hormone - Classify and list the hormones based on chemical nature - Mechanism of negative and positive feedback regulation of hormone release	Describe the mechanism of action of hormones including the receptors and second messengers	- Hormone measurement - Radioimmuno Assay - ELISA	2 Hours	
2	Hypothalamus	- Describe the relationship between hypothalamus and pituitary including the Hypothalamohypophyseal tract and the hypothalamohypophyseal portal circulation - List the various releasing and inhibiting hormones released by the hypothalamus			1 Hour	
3	Pituitary Gland	- List the various types of secretory cells of Anterior and Posterior Pituitary - List the Hormones secreted by the anterior and posterior pituitary. Growth hormone: - List the important actions of growth hormone, its effects on growth and metabolism - Describe the regulation of growth hormone secretion - List important stimuli that increases or decreases the secretion of GH Prolactin: - Describe the actions and regulation of prolactin secretion - List the features of excess Prolactin secretion	- Describe the physiological basis and important features of abnormalities of growth hormone secretion like - Gigantism, acromegaly and pituitary dwarfism - Describe the mechanism of action of Growth hormone (JAK-STAT Pathway) - Explain how Insulin like growth factor (IGF) or Somatomedin mediates the actions of growth hormone	- Plasma Levels, - Plasma Protein Binding, and Metabolism - Prolactinoma	2 Hours	Clinical cases of Hyper and Hypo secretion can be demonstrated Pituitary tumours case with symptoms can be shown

		• Antidiuretic hormone (ADH) • Explain the synthesis, release and mechanism, functions and regulation of actions of ADH • Discuss the disorders of ADH secretion - Diabetes Insipidus • Oxytocin • Explain the synthesis, release mechanism, functions and regulation of Oxytocin\List the functions of Oxytocin • Role in milk ejection reflex and parturition	• Types of Diabetes Insipidus • Panhypopituitarism • Shehan's Syndrome • Postpartum Pituitary Necrosis	• Syndrome of inappropriate hypersecretion of antidiuretic hormone (SIADH)	1 Hour	Role of Oxytocin in labour and post partum haemorrhage (Obstetrics)
4	Thyroid Gland (Horizontal and Vertical Integration)	• Explain the functional Anatomy of Thyroid Gland • List the steps involved in the synthesis of thyroid hormones • Explain the mechanism of release of Thyroid Hormone • Explain the transport actions of thyroid hormone • Describe the regulation of thyroid hormone secretion • List the causes and features of Hypo secretion of thyroid hormones - Myxedema and Cretinism, Goitre and features of Hypothyroidism • List the causes and features Hypersecretion of thyroid hormones – Gigantism and Acromegaly • Calcitonin • Secretion and action of Calcitonin	• Explain the physiological basis for Simple Goitre • List the differences between dwarfism and cretinism	• Describe the important thyroid function tests and its clinical use	3 Hours	Cases of Hypo and Hyperthyroidism can be shown

5	Parathyroid Gland	• Parathormone • Discuss the actions of parathyroid hormone • Describe the causes and features of hyper/hypoparathyroidism • Describe Calcium Homeostasis • Vitamin D (Calcitriol) • Mention the sources, synthesis mechanism of action and • List the features of vitamin D deficiency in children and in adults – Rickets and Osteomalacia • Calcitonin • Actions of calcitonin	• List the different types of cells present in the Parathyroid Gland • Describe the secretion of parathyroid hormone • Explain the regulation of secretion of parathyroid hormone • Differences between Tetanus and Tetany	• List the causes of secondary hyperparathyroidism • Recognize its emerging role as an immunomodulator.	2 Hours	Case of Tetany can be shown Cases of Rickets and Osteomalacia can be shown
6	Adrenal Gland	• List the hormones secreted by the different layers of Adrenal Cortex • Describe the Functional Anatomy of Adrenal Cortex • Describe the mechanism of action, functions and regulation of action of Mineralocorticoids, Glucocorticoids and sex steroids • Discuss the causes and features of Cushing's Syndrome and Addison's Disease • Adrenal medulla: Synthesis and physiological effects of epinephrine and nor-epinephrine on various systems of the body • Factors that regulate the secretion of adrenal medullary hormones	• Disorders produced by the deficiency of enzymes involved in adrenocortical hormone synthesis • Diseases related to Mineralocorticoids • Conn's Syndrome • Aldosterone Escape • Atrial Natriuretic Peptide (ANP)	• Discuss the causes of • Cushing's Syndrome • Adrenal Tumour • Adrenal Hyperplasia, • Secondary Hyperaldosteronism • List the features of Pheochromocytoma	3 Hours 1 Hour	Indications for steroid therapy, adverse effects of steroid therapy and tapering of steroid therapy(Integration with Medicine) Cases of Cushing's Disease and Addison's Disease can be shown Medical uses of adrenaline and dopamine
7	Endocrine Pancreas	• Name the different cells present in the Islets of Langerhans • Physiological stimulus for Insulin secretion • List the target cells of Insulin and the cells that do not require insulin action	• Describe the steps in biosynthesis of Insulin and the origin of the C-peptide (Connecting peptide) • Diabetes Mellitus:	• Compare and contrast Type I and Type II Diabetes Mellitus and their complications • Mention the clinical feature of Diabetes Mellitus	2 Hours	Glucose tolerance test and role of HbA1C (Biochemistry) Mechanism of action of insulin

		- for glucose uptake • Mention the mechanism of action of Insulin on its receptor • List the important actions of insulin • List the various factors that regulate insulin secretion • Describe the features of hypersecretion of Insulin and Hypoglycemia • Glucagon • List the important actions of glucagon	• Discuss the Pathophysiology of Diabetes mellitus • List the hormones that raise blood sugar level	• List the features of hypoglycemia and the counter regulatory hormones • Diabetic Ketoacidosis	1 Hour	and oral hypoglycemic agents (pharmacology) Diabetic ketoacidosis and principles of treatment of Diabetes Mellitus (medicine)
8	Other Endocrine Glands	• Pineal gland • Mention the role of hypothalamus and melatonin on circadian rhythm • Thymus • Local Hormones			1 Hour	
9	Atrial Natriuretic Peptide (ANP)	• List the important actions of ANP				

Reproductive Physiology (Lectures + Tutorials 20 hours; Practicals + OSPE 5 hours; ECE: 3 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Sex Determination	• Differentiate between Genetic sex, Gonadal sex and phenotypic sex. • Describe the role of SRY gene and testis determining factor in development of gonads • Describe the role of testosterone and Mullerian inhibiting substance in the development of male and female internal genitalia	• Discuss the role of dihydrotestosterone in the development of external genitalia	• Describe the cause and features of abnormalities of sex differentiation • (Klinefelter's syndrome • Turner's syndrome • XXX superfemale • Female – Pseudo hermaphroditism • Male – Pseudo hermaphroditism – androgen resistance)	1 HOUR	
2	Male Reproductive Physiology	• Describe the functional anatomy of the male reproductive tract (Testis seminiferous tubules, Sertoli cells, Leydig cells, Blood Testis barrier, Epididymis, Vas deferens, Seminal vesicle, Prostate gland). • Describe the blood- testis barrier and its function • Discuss factors that regulate Spermatogenesis • Describe the structure of spermatozoa • Describe the source, mechanism of action and functions of testosterone and dihydrotestosterone • State the source and functions of inhibin	• Outline the steps involved in spermatogenesis • State the composition of semen and recognize use of semen analysis as a test to evaluate infertility • Discuss about abnormalities of the male reproductive system: • Hypogonadism • Cryptorchidism			

		• Discuss the hypothalamic and pituitary control on testicular function and Feed back control of testicular hormones on hypothalamus and pituitary • Describe the role of prostate, seminal vesicles in reproductive function • Describe the mechanisms that cause erection and ejaculation • State what is capacitation and discuss the changes that occur during capacitation	•	•		
3	Puberty Menopause Pituitary Gonadotropins (FSH,LH) and Prolactin	• Describe the mechanism of action functions and regulation of secretion of pituitary gonadotropins and prolactin • Explain the changes that occur during puberty and describe the mechanism of onset of puberty • Define menopause and describe the physiological changes during menopause	• Discuss causes of precocious and delayed puberty	• Discuss the problems associated with Menopause	1 Hour 1Hour	

4	Female reproductive system	- Describe the Functional anatomy of the female reproductive system - Outline the stages of Oogenesis - State differences between oogenesis and spermatogenesis - Describe the development of ovarian follicles (Stages of follicle development, ovulation, luteinisation, luteal regression) - Describe the control of follicular development, ovulation and luteinisation (role of FSH, estrogen and LH) - Describe the process of follicle attrition - List the hormones produced by the ovary - Illustrate the synergistic role of thecal and granulosa cells in steroidogenesis - Discuss the mechanism of action and functions of estrogen and progesterone - Describe the feedback regulation of ovarian function - Describe the physiological changes occurring in ovaries, uterus, cervix , vagina and breast during a menstrual cycle - Discuss and illustrate the hormonal changes during the menstrual cycle (changes in FSH, LH, estrogen and progesterone)	- Differences between oogenesis and spermatogenesis is - Discuss the physiological basis of use of synthetic estrogens and progestins as oral contraceptives - Describe the mechanism of ovulation - State the tests for ovulation and their physiological basis - Common causes of anovulatory cycles (physiological, PCOD) - Protein hormones produced by the ovary and state their source and functions - Identify common causes of anovulatory cycles (physiological, PCOD)	Define: - Menorrhagia, - Dysmenorrhea, - Amenorrhea, and - Premenstrual syndrome - Discuss role of selective estrogen receptor modulators - List important causes of male and female infertility - Assisted Reproductive Techniques (IVF) - Abnormalities leading to infertility - Assisted Reproductive Technics (IVF) (Gynaecology)	3 Hours	- Investigation for male and female infertility

7	Physiology of Pregnancy	- Outline the process of fertilization, implantation and placental formation - Discuss the importance of corpus luteum of pregnancy - Discuss the functions of placenta. - Discuss the secretion and function of hCG from the placenta. - Describe the role of hormonal and mechanical factors influencing labor - Describe the changes that occur in the various organ systems in the mother during pregnancy	- Physiological basis of immunological tests for pregnancy based on hCG - Parturition - Source and functions of relaxin - Describe the fetoplacental unit		1Hour	•
8	Lactation	- Describe the Role of estrogen and progesterone in breast development - Describe the mechanism that causes initiation of lactation after delivery - Describe the role of Prolactin and prolactin inhibitory factor (Dopamine) in lactation - Describe the Milk ejection reflex	- Role prolactin inhibitory factor (Dopamine) in lactation - Discuss the effect of lactation on menstrual cycle	- Gynacomastia - Composition of human milk - Prolactinomas - Role of bromocriptine in prevention of lactation	1Hour	•
9.	Contraception	- Classify contraceptive methods - Describe the physiological basis of the various methods of contraception	Details of contraceptives devices, side effects	•	1 Hour	contraceptive devices and procedures (Gynaecology)

Excretory system (Lectures + Tutorials 25 hours; Practicals + OSPE 10 hours; ECE: 3 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Functional Anatomy of Kidney Structure of Nephron	- Describe the gross Anatomy of Kidney - Describe the structure of the cortical and Juxtamedullary nephrons - Describe the salient features of Renal circulation - Describe the structure of the juxtaglomerular apparatus.			1 Hour	Histology of Kidney (Anatomy)
2	Glomerular filtration and renal blood flow	- Describe the structure of glomerular capillary membrane and the factors affecting glomerular filtration - Measurement of GFR Renal Blood Flow - Discuss the factors determining and regulating renal blood flow and the mechanisms of autoregulation of renal blood flow - Explain Tubulo-glomerular feed back Juxtaglomerular Apparatus - Explain the structure of Juxtaglomerular Apparatus Discuss the role of Juxtaglomerular Apparatus in Autoregulation of GFR and RBF (TG Feedback) and the regulation of blood pressure via the Renin-AT-Aldosterone axis.	- Concept of Renal Clearance - Inulin Clearance – to measure GFR - PAH clearance to measure RBF - Creatinine Clearance to assess GFR	Proteinuria/ Albuminuria / Hemoglobinuria	2 Hours	
3	Proximal Convoluted tubules (PCT)	Describe the reabsorption of sodium, chloride and water in the proximal tubule Describe the functioning of the	The concept of the transport maximum for glucose, renal threshold,			

		important sodium transporters in PCT – sodium-glucose, sodium-aminoacid co-transporters and sodium-hydrogen exchanger in the luminal border, sodium-potassium pump in the basolateral border. • Describe the mechanism of glomerulotubular balance • Discuss the renal handling of glucose, bicarbonate and amino acids in the PCT • Recognize the almost complete reabsorption of glucose, bicarbonate and amino acids in the PCT • Describe the role of Carbonic anhydrase, the sodium-hydrogen exchanger in luminal border, and the bicarbonate transporter in basolateral border in bicarbonate reabsorption in the PCT	types of glycosuria (diabetes mellitus, renal, alimentary) • Describe the action of parathormone on PCT		1 Hour	
4	Loop of Henle	• Distinguish between permeability characteristics of the two limbs of loop of Henle. • Describe the role of the Na/2Cl/K transporter and the sodium potassium pump in the thick ascending limb (TAL) • Describe the function of the Function of LOH in the creation of hyperosmolar medullary interstitium (MI) by the two mechanisms : • Active transport of salt in TAL segment • Counter current multiplication of the active transport • Describe the role of the vasa recta in maintaining the hyperosmolarity of the medullary interstitium by counter-current exchange.	• Mechanism of action of Loop diuretics (Furosemide) as due to blockade of Na/2Cl/K transporter		1 Hour	

5	Distal Convoluted tubules (DCT)	- Describe the regulated reabsorption of sodium (aldosterone) via Epithelial sodium channels (ENaC) and Na/Cl symporter in luminal border - Describe the regulated secretion of potassium (aldosterone) via potassium channels in luminal border - Describe the generation of bicarbonate including factors affecting this. - Describe the role of the Phosphate and ammonia as buffers in the formation of urine - Describe the action of Atrial Natriuretic peptide	- Mechanism of diuretic action of thiazide and amiloride - Action of Atrial Natriuretic peptide. 'Aldosterone escape'.	Features of hyperaldosteronism and the occurrence of metabolic alkalosis	1 Hour	
6	Collecting duct (CD)	- Describe the role of ADH in regulated water absorption - Describe the role of the hyperosmolarity of the medullary interstitium, created by the Loop of Henle in producing a gradient for water absorption. - Describe the role of ADH in urea absorption, abetting the hyperosmolarity of MI. - Describe the role of aquaporins in water absorption.			1 Hour	
7	Concentration of Urine	Countercurrent Mechanism - Countercurrent Multiplier - Countercurrent Exchanger - Role of Urea	Bartter's Syndrome			
8	Regulation of osmolarity, Na⁺ and K⁺ levels	- Describe the role of osmoreceptors in sensing body fluid osmolarity. - Describe the mechanism of sensing thirst. - Describe the role of ADH, Aldosterone, Angiotensin II and ANP in sodium and water balance.	- List common causes and effects of hypo and hyper natremia - List common causes and effects of hypo and hyperkalemia	- Discuss the importance of the intracellular shifts of potassium - Discuss the use of insulin/glucose infusions to treat	1 Hour	

		• Discuss the effect of aldosterone in the renal handling of K^+ at DCT • Discuss the relationship between K^+ concentrations and the pH of blood.		hyperkalemia		
9	Regulation of Acid base balance	• Describe the different buffer systems in the body • Explain the respiratory regulation of acid base balance • Describe the role of the kidney in regulation of acid base balance	• Explain the concept of Anion gap • List common conditions that can lead to primary acid base disorders.	• Identify Primary acid base disturbances i.e. • Respiratory acidosis, • Respiratory alkalosis • Metabolic acidosis, • Metabolic alkalosis from Arterial blood gas and serum electrolyte values	1 Hour	
10	Micturition	• Describe the innervation of Bladder and reflex pathway of micturition. •	• Explain the use of a cystometrogram to diagnose urinary problems		1Hour	
11	Renal Function Tests	• List the abnormal constituents in urine • Recognize the normal urinary volume • Discuss the significance of the presence of albumin in urine • Discuss the role of serum creatinine in the measurement of renal function	• Concept of Anion gap	• Sigre Anderson Curve	1 Hour	

Respiratory system (Lectures + Tutorials 25 hours; Practicals + OSPE 20 hours; ECE: 6 hours)						
NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Functional Anatomy	- Functional Anatomy of the respiratory tract - Functions of nose and para-nasal sinuses - Conducting zone and respiratory zone - Pulmonary vasculature - Structure of alveolus & alveolo-capillary membrane	Examination of RS		1 Hour Practical	
2	Muscles of Respiration	- Muscles of Inspiration and Expiration - Accessory Muscles of respiration			1 Hour	
3	Surface Tension Surfactant	- Surface Tension in air liquid interface - Law of Laplace - Role of surfactant	Respiratory Distress Syndrome			
4	Mechanics of respiration Pulmonary Ventilation	- State the normal respiratory rate and define inspiration & expiration - List the muscles of inspiration, expiration & accessory muscles of respiration - Describe the movements of chest wall and the changes in chest wall dimensions produced by respiratory muscles - Recognise the difference between quiet breathing and forceful breathing - Discuss the factors affecting airflow between the atmosphere and alveoli - State the recoil nature of Lungs and			3 Hours	

		- normal subject - Record FEV₁, FVC and calculate the FEV₁/FVC ratio in a normal subject - Interpret altered values of absolute lung volumes, peak expiratory flow and FEV₁/FVC ratio in restrictive and obstructive lung diseases - Define minute ventilation, anatomical dead space, physiological dead space & alveolar ventilation - Discuss the effect of changes in respiratory rate and tidal volume on alveolar ventilation	- Helium dilution method - Whole body plethysmography - Measurement of dead space			
6	Alveolar Ventilation	- Total ventilation = Tidal Volume x Respiratory Rate - Dead Space and Classification - Alveolar Ventilation - Factors affecting alveolar ventilation	Measurement of Dead Space		1 Hour	
7	Pulmonary Circulation	- State the normal rate of pulmonary blood flow & normal range of pulmonary blood pressures - Discuss the special features of pulmonary circulation, pulmonary veins, pulmonary vascular resistance, its response to hypoxia			1 Hour	
8	Ventilation perfusion Ratio (V/Q Ratio)	- Explain the regional differences in perfusion, ventilation & V/Q ratio in the lungs - State normal values of V/Q ratio and recognize that physiological dead space is associated with high V/Q and 'physiological shunt' is associated with low V/Q.	Type I respiratory failure	- State the physiological mechanisms operating to keep the lungs dry - Pulmonary hypertension - Pulmonary embolism - Cor-pulmonale	1 Hour	
9	Gas Exchange	Discuss the factors that affect rate of gas exchange at lung & tissue level, with application to clinical conditions	Define Type I respiratory failure and state the common causes			

		• State Fick's law of diffusion • Discuss normal composition of atmospheric, tracheal and alveolar air and recognize the conditions which can affect it • Discuss the normal partial pressures of gases in blood entering and leaving lung • Explain oxygen uptake and carbon-dioxide elimination by lungs & tissues and state the normal rates of the same • Define respiratory exchange ratio and state its normal values • State normal time taken for gas equilibration & its application in exercise • State the physiological causes for normal alveolar-arterial oxygen difference • Explain the dependence of carbon dioxide elimination on ventilation • Define physiological shunt	• Explain Type I respiratory failure due to unequal V/Q distribution even when total ventilation and perfusion may be normal • State the Alveolar gas equation and discuss its application • Recognize that arterial PCO₂ is equal to alveolar PCO₂ and that arterial PCO₂ can be used in the alveolar gas equation • State the causes for abnormal Alveolar – arterial oxygen difference • Distinguish between intrapulmonary and extrapulmonary right to left shunts.		1 Hour	
10	Transport of Oxygen	• Explain the forms of oxygen transport in blood • Discuss hemoglobin affinity for oxygen • Explain & illustrate oxygen-hemoglobin dissociation curve and discuss the factors affecting it and the physiological advantages of the curve • Explain Bohr effect • Discuss oxygen carrying capacity of blood • Differentiate between oxygen content of blood & % oxygen saturation of hemoglobin • Define hypoxemia and hypoxia; explain the physiological basis of	• State the physiological basis of oxygen therapy as treatment for the different types of hypoxias	• State what pulse oximetry measures	2 Hours	

		types of hypoxia with examples Define cyanosis and differentiate between conditions in which it occurs and may not occur				
11	Transport of Carbon dioxide	- Explain the forms of carbon dioxide transport in blood - Explain the role of chloride shift and Haldane effect			1 Hour	
12	Regulation of Respiration	- Express the concept of the sensors, central controller in brain & effectors in the respiratory control system - Describe the location and functions of the respiratory centres in brain; describe the current explanation for the basic rhythm of respiration - Describe the effects of neural inputs on respiration in terms of the voluntary cortical control, motor cortical input, limbic input, peripheral afferent inputs (Hering breuer reflexes, J receptor input, proprioceptor input, and other peripheral inputs) - Express the aim of chemical control of respiration; explain the role of peripheral and central chemoreceptors; explain the feedback control of ventilation to regulate gas exchange & maintain normal levels of arterial blood gases and pH - Discuss and compare the influence of arterial carbon dioxide and oxygen on ventilation in health and in disease - Describe Cheyne-stokes breathing, state its causes, explain the physiological and pathophysiological mechanisms that produce it; state the abnormality in Biot's breathing - Demonstrate the effect of apnoea &	- State the normal values of arterial blood gases (ABG) and interpret altered values - Define hypercapnoea and hypocapnoea - State the causes of asphyxia	- State the causes of respiratory acidosis and alkalosis - Define Type II respiratory failure and mention its causes	3Hours	3 hours practicals for expts on stethography

		hyperventilation on respiration; demonstrate the effect of breathing through a tube and the effect of speech & cough on respiration				
13	Physiological adaptations in special environments (High Altitude, Deep Sea Diving and Gravity)	• State the physiological effects of zero gravity • State the physiological basis of Caisson's disease & Nitrogen narcosis • State the physiological adaptations occurring at high altitude • Physiological effects of zero gravity • Aviation Physiology			1 Hour	
14	Exercise	• Describe the effects of exercise on the respiratory system and explain the physiological basis of these effects; explain the physiological need for these changes • Define VO_2 max and oxygen debt			1 Hour	
15	Pulmonary Function Tests	• Spirometry • Arterial Blood Gas Analysis • Peak Flow Meter • Pulseoxymetry			1 Hour	
16	Miscellaneous	• List the Non-Respiratory functions of lung • State the physiological mechanism of cough, sneeze and gag reflexes			1 Hour	
17	Clinical examination of respiratory system	• Demonstrate the methods of Clinical examination of the respiratory system • Recognize normal Clinical findings of respiratory system examination • State the abnormal findings that may be present in a patient and list the common clinical conditions in which these abnormalities occur and the physiological explanations for these abnormalities if any	• Pathology & clinical features of • Pleural effusion • Pneumothorax • Pneumonia, consolidation • Fibrosis • Collapse • Bronchiectasis		3 Hours Practical	

Cardiovascular system (Lectures + Tutorials 35 hours; Practicals + OSPE 20 hours; ECE: 6 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Functional anatomy of heart	Describe the functional anatomy of the heart, with respect to its chambers, valves, input and output vessels, AV ring and electrical discontinuity, Conducting system, Coronary supply	Examination of CVS		1 Hour Practical	
2	Conducting system of Heart SA Node	- Describe the following: - Contour of SA node action potential with a diagram, depicting the various phases (4, 0 and 3) - Prepotential (phase 4 depolarization) - Currents responsible for generation of SA node action potential: The funny current (I_f), T-type calcium current (ICa_T), L-type calcium current (ICa_L)	- Intrinsic rate of the SA node and influence of autonomic nervous system, hormones and temperature. - Sinus arrhythmia, sinus bradycardia, sinus tachycardia - Record respiration with a stethograph or respiration belt transducer, as well as ECG or pulse simultaneously, to demonstrate respiratory sinus arrhythmia.			
3	Atrial Cell	Recognize that AP in atrial cell is similar to ventricular cell (fast AP)				
4	Ventricular Cell	- Describe the contour of the ventricular action potential with the aid of a diagram Describe the ionic currents responsible for phases 0,1,2,3,4 of the ventricular action potential - State the differences between the SA node action potential (slow AP) and the	Be able to describe the mechanisms by which calcium is extruded from cytoplasm to terminate systole – the role of the Plasma membrane calcium ATPase and sodium-	- Be able to correlate Starling's law with sarcomere length and actin-myosin interaction - Identify the relationship between		

		ventricular cell action potential (fast AP). - Describe how the action potential leads to an increase in cytosolic calcium concentration - Describe excitation-contraction coupling - State the basic concepts of the sliding filament theory of contraction	calcium exchanger (NCX)	heart failure and sarcomere length		
5	Cells of conducting pathway		- State the type of: - AV node AP - similar to SA nodal cell (slow AP) - His Bundle cell: fast AP - Purkinje fibres: fast AP			
6	Properties of Cardiac Muscle	- Automaticity - Excitability - Conductivity - Contractility				
7	Cardiac Cycle	- Describe with a diagram, the chronological relationship of the following events shown on the same time axis: - ECG - Valvular events - Heart sounds - Pressure curves: Left ventricular pressure, Atrial pressure and aortic pressure - Ventricular Volume curve:	- Concept of Murmurs - Timing of Murmurs - State the timing of murmurs in various valvular and congenital heart defects - Cardiac Catheterization			
8	Stroke Volume	Discuss the determinants of stroke volume	Recognize echocardiography as a method of measuring stroke volume			
9	ECG	Describe the electrocardiogram as a surface recording of electrical changes occurring on the external surface of the heart during the passage of an action	- List the ECG changes in the following conditions: - Myocardial ischemia - Myocardial infarction	- Heart Block - Ischemia - Infarction changes	1Hour Theory	With medicine for reading normal and abnormal ECGs

		potential. • Describe the 12 Leads in which ECG is recorded. • State the rationale of recording from multiple leads. • Identify the lead which is commonly used to monitor patients continuously. • Describe the P, QRS, T and U waves of an ECG in lead II configuration and describe the electrical events responsible for these waves • Describe PR and QT intervals and state what they represent • Describe the significance of ST segment being on the isoelectric line in a normal ECG • Record an ECG in a human subject in all 12 leads • Calculate rate from a normal ECG tracing • Identify if every QRS complex is preceded by a P wave and if every P wave is followed by a QRS complex • State in what conditions the above will not happen	• Hyperkalemia • Ventricular tachycardia • State the causes for PR prolongation • Describe the types of Heart block as represented by ECG changes • Arrhythmias • Vector cardiogram • Calculation of axis • His bundle electrogram		1Hour ECG recording to be shown	
10	Properties of cardiac muscle: Automaticity	• Describe the function of the sinoatrial node as the pace-maker of the heart • Describe the determinants of heart rate and the neural and chemical regulation of heart rate • Describe the ionic currents responsible for rhythm-generation in the SA node	• Understand that there is redundancy in pace-maker function – if the sinus node fails, there are alternate sites of rhythm generation • Arrhythmias		1 Hour	
	Excitability and Refractoriness	• Define refractory period, describe its relation to the duration of the ventricular action potential, and state its physiological significance.	• Describe refractory period in terms of properties of voltage-gated sodium channels • State factors which cause			

			- prolongation of action potential duration • Define Long QT syndrome			
	Conductivity	• Describe the normal mode of conduction of the cardiac impulse	• Alternate conducting pathways • Define the causes of arrhythmias in terms of abnormal site of rhythm-generation or re-entry			
	Contractility	• Describe the determinants of force of contraction of the ventricle in terms of - o Preload (Starling's law) - o Afterload - o Inotropic status (contractility) - o Frequency (or heart rate), (Bowditch phenomenon or Force-frequency relation) • Discuss the clinically measurable parameters reflecting preload, afterload and force of contraction of the heart • Describe Starling curves or ventricular function curves	• Discuss Ejection fraction (EF) as a measure of cardiac contractility (inotropic status). • State the different modes of and indications for Cardiac catheterization • State how echocardiography may be used as a non-invasive means to assess cardiac function			
11	Cardiac Output	• Definition of Stroke Volume, Cardiac Index, EDV, ESV, and EF • Discuss the determinants of cardiac output • Describe the regulation of cardiac output • Discuss high output and low output states	• Methods of Measuring Cardiac Output	• Discuss high output and low output states	2 Hours	
12	Heart Rate	• Innervation of Heart – Parasympathetic and Sympathetic • Normal Values • Regulation of Heart Rate • Factors affecting Heart Rate			1 Hour	
13	Vascular Physiology	• Describe the function of Aorta and large Arteries as elastic, windkessel vessels • Describe what would happen to pulse	• Discuss the role of capillaries as exchange vessels	• State what would happen to pulse volume (as assessed		

		pressure in case of thickening and loss of elasticity of aorta • Describe the role of arterioles as resistance vessels • Describe the term Total Peripheral resistance (TPR) • Discuss the determinants of TPR and the relationship of TPR to blood pressure and cardiac output. • Discuss the role of arteriolar resistance as a determinant of blood flow to a specific organ • Discuss the determinants of arteriolar resistance in terms of Poiseuille's equation • Identify that the arteriolar diameter is the major determinant of arteriolar resistance • Discuss the global and local factors affecting arteriolar diameter and therefore the TPR, blood pressure and blood flow – vasodilator and vasoconstrictor mechanisms • Discuss the physiological role of endothelium-derived relaxing factor (EDRF) or Nitric oxide (NO)	• Describe the Starling's forces determining fluid movement across the capillary membrane • Describe the function of Veins as capacitance vessels • Define the term Venous return (VR) and discuss its role as preload • Describe the determinants of VR • Discuss the significance of assessing jugular venous pulse • Discuss the interactions between Right atrial pressure, VR and Cardiac output (CO)	by taking the radial pulse) in case of thickened arteries • Discuss the physiological/pathophysiological role of the following vasoactive substances: Histamine, bradykinin, serotonin, thromboxane A₂, prostacyclin, Endothelin • Describe Venous return curves • Describe the interaction of Venous return and Cardiac output curves • Discuss the clinical significance of monitoring of CVP	2 Hours	
14	Blood Pressure	• Define the following terms: • Mean arterial blood pressure, Systolic pressure, Diastolic pressure, pulse pressure • Describe the determinants of blood pressure • Discuss the short-term (neural and hormonal) and long term (renal) mechanisms regulating blood pressure (with special reference to shock and exercise). • Demonstrate the method of	• Hypertension • Hypotension		1 Hour Theory	

		measurement of blood pressure using a sphygmomanometer. - Describe the principle of measuring blood pressure by sphygmomanometry - Discuss other methods of measuring blood pressure by sphygmomanometer			1 Hour Practical	
15	Cardiovascular autonomic reflexes	- Describe the physiological role of the following reflexes, their receptors, specific stimuli, afferent and efferent neural pathways, and the responses. - Baroreceptor reflexes - Chemoreceptor reflexes - Vasovagal syncope - Cushing's reflex - Bainbridge reflex - Bezold Jarisch reflex	Define Diving reflex		1 Hour	
16	Effects of exercise on cardiovascular system	- Discuss the effects of exercise on the cardiovascular system - Demonstrate the effects of mild to moderate and high intensity exercise on the blood pressure and heart rate in a normal subject			1 Hour Theory 1 Hour Practical	
17	Regional circulations	Features and regulation of the following circulations: - Coronary - Cerebral - Renal circulation - Auto-regulatory mechanisms (myogenic factors and Tubuloglomerular feedback) - Pulmonary (its pressures, hypoxic vasoconstriction) - Splanchnic - Cutaneous circulation and temperature regulation - Skeletal muscle - Recognize the importance of	- Discuss the term Coronary artery disease - Define the following terms: Transient Ischemic attacks (TIA), Stroke, Cerebrovascular accidents (CVA) - List the effects of gravity and acceleration on CVS - Discuss the physiology of Fetal circulation before and after birth		3 Hours	

		sympathetic regulation versus local metabolic factors in the regulation of the regional circulations mentioned above.				
18	Hypertension	- State the normal ranges for systolic and diastolic blood pressures in the various age groups - Define hypertension	Discuss the risk factors for essential hypertension and causes of secondary hypertension		1 Hour	
19	Hypotension (Shock)	- Define the term 'Shock' or Cardiovascular shock - State the different types of shock - Discuss the pathophysiology of the following types of shock: Hypovolemic, cardiogenic, Distributive (septic, anaphylactic, neurogenic) Obstructive	Describe the term Vasovagal syncope			
20	Heart Failure	- Define the term cardiac failure or heart failure. - State the clinical features of left heart failure and right heart failure. - Define the term congestive cardiac failure	- State some causes of heart failure - Discuss the physiological basis of treatment of heart failure		1 Hour	
21	Myocardial infarction or heart attack	- Define the following terms: - Angina - Ischemia - Myocardial infarction or heart attack - Discuss the major ECG changes in: - Myocardial ischemia - Myocardial infarction				
22	Valvular diseases		- State the causes for stenosis and regurgitation of the valves - State the murmurs associated with the various valvular defects			
23	Congenital heart diseases		State the hemodynamic abnormalities and murmurs in ASD, VSD, PDA			

Central nervous system (Lectures + Tutorials 45 hours; Practicals + OSPE 22 hours; ECE: 6 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
1	Organization of the nervous system	☐ CNS ☐ PNS - o Somatic NS - o Autonomic NS - o Enteric NS			1 Hour	
2	Neural Tissue	• State the cell types present in the nervous system • Describe the morphology of different types of neurons and neuroglia • Describe the process of myelination and its significance • Differentiate between white matter and grey matter. • Define the terms 'nuclei' and 'ganglia'.			1Hour	
3	Nerve Fibres	• Define the term 'Peripheral nerve'. • State the types of fibres in a mixed peripheral nerve. • Describe Ehrlanger & Gasser's classification of peripheral nerve fibres • Describe nerve injury, degeneration and regeneration of injured fibres	• Numerical classification of sensory fibres • Mechanism of axoplasmic transport • ☐ Wallerian degeneration		1 Hour	With medicine or neurology to see cases of peripheral neuropathy With anaesthesia to study mechanisms of local or regional anaesthesia
4	Electrical properties of the nerve cell membrane	• Describe the ionic basis of Resting membrane potential of a nerve cell. • Describe the term electrotonic potentials with reference to: • 'receptor or generator potential' in a sensory receptor	• 'excitatory or inhibitory post-synaptic potentials (EPSP and IPSP)' in a post-synaptic neuron • 'end-plate potential' at the neuromuscular	• Strength-duration curve - Rheobase voltage, chronaxie & utilization time • Define the concept of depolarisation	1 Hour	

		• ‘excitatory or inhibitory post-synaptic potentials (EPSP and IPSP)’ in a post-synaptic neuron • ‘end-plate potential’ at the neuromuscular junction • Define the term ‘Action potential’ and describe the currents responsible for the different phases of the action potential in the neuron. • Describe the process of transmission of action potential in unmyelinated and myelinated neurons • Describe the phenomenon of saltatory conduction in a myelinated neuron. • List the factors affecting conduction velocity in a nerve.	junction	block in terms of the properties of voltage-gated sodium channels. • Define the mechanism of action of local anaesthetics.		
5	Synapses	Define the terms electrical & chemical synapse Describe the morphological features of a chemical synapse – pre and post synaptic neurons List the morphological types of chemical synapse – axosomatic, axodendritic and axoaxonic Describe the process of synaptic transmission. List the events in the pre-synaptic neuron, culminating in release of neurotransmitter. Describe the events in the post-synaptic neuron – Excitatory and inhibitory post-synaptic potentials, Summation (spatial and temporal) of synaptic inputs at the axon hillock, formation of action potential.	• Define the following properties of synapse: • One-way conduction • Synaptic delay • Convergence and Divergence of synapses • Spatial summation • Temporal summation • Define the term synaptic plasticity • Describe the differences between Pre-synaptic and post-synaptic inhibition. • Define the term Pre-synaptic facilitation	• Define synaptic fatigue • Define the following synaptic phenomena Occlusion & subliminal fringe effects	2 Hours	
6	Neurotransmitters	• List the important small molecule neurotransmitters in the CNS and their receptors: • Glutamate and its ionotropic receptors:	• State whether the action of each of the above neurotransmitters on the various receptors is excitatory or inhibitory.	• Glutamate-induced excitotoxicity - Organic brain syndromes – Schizophrenia,	1 Hour	

		- NMDA, and non-NMDA - GABA - Glycine - Dopamine - Serotonin or 5-HT - Acetylcholine - Noradrenalin	- State the major excitatory neurotransmitter in the CNS - State the inhibitory neurotransmitters of the CNS. - State the mechanism of inhibition. - Denervation hypersensitivity - Criteria for a substance to be called a neurotransmitter	Depression (Psychiatry)		
7	Introduction to CNS	- Anatomical parts of CNS - Functional divisions				
8	Sensations	Classify the types of sensations (sensory modalities)	Describe the common attributes of sensory information – modality, location, intensity and duration		1 Hour	
9	Sensory receptors	- Differentiate between usage of the term 'Receptors' i.e., sensory receptors versus neurotransmitter or ligand receptors. - List the sensory receptor for each modality of sensation - Touch receptors - Receptors for proprioception - Pain and temperature receptors	- Define rapidly adapting and slowly adapting receptors - Describe the mechanism of sensory transduction taking a particular receptor as example (e.g., pacinian corpuscle, hair cells of inner ear, rods and cones, muscle spindle etc)		1 Hour	

	Pathway for crude touch (Anterior Spinothalamic tract) Pain and Temperature (Lateral Spinothalamic Tract) Sensations from face	inverse stretch reflex arcs Receptors for crude touch, pain and temperature : Mechanoreceptors, Nociceptors and Thermoreceptors Major pain pathway: • I order neurons – end in spinal cord; Lissauer's tract; substantia gelatinosa • Fast pain through Aδ fibres and slow pain through C fibres • II order neurons cross over – forming lateral spinothalamic tract • III order neurons – thalamocortical, end in Post-central gyrus. • Pathway for sensations from face				
	Physiology of Pain	Briefly describe receptors for pain. • Describe the pathway for transmission of pain from receptors to the cortex. • Define the following terms: Substantia gelatinosa, Lissauer's tract, fast pain, slow pain. • State the type of peripheral nerve fibres carrying fast pain and slow pain respectively. • Describe the following phenomena: • Referred pain • Peripheral sensitization of pain • Central sensitization of pain – (wind-up) – role of glutamate and NMDA receptors • Dissociated anaesthesia • Phantom limb pain • Describe descending pain control pathways: from Periaqueductal grey, Locus ceruleus and Nucleus Raphae magnus	• Describe the gate control theory of pain • Discuss the principle of using pain balms and Acupuncture for pain relief. • List the endogenous opioids and the types of Opiate receptors. • Describe the role of endogenous opioids in pain transmission	• List a few opiates used to treat pain.	2 Hours	

10	Motor system	- Describe the features of organization of the motor system. - Define UMN & LMN	- Arrangement of LMNs in the anterior horn 'Motor homunculus'			
	Descending Motor Tracts	- List the descending tracts involved in motor control. - Describe origin, course, termination and functional role of the Pyramidal tracts. State why the pyramidal tracts are called so. - Describe the role of corticobulbar tracts. - List the extrapyramidal descending tracts. - State the origin, termination and physiological role of the following extrapyramidal tracts: - Rubrospinal - Pontine reticulospinal - Medullary reticulospinal - Lateral vestibulospinal - Describe the influence of the extrapyramidal tracts on spinal motor neurons & spinal reflexes - Describe the effects of lesion of the pyramidal and extrapyramidal tracts respectively on spinal motor neurons, spinal reflexes & muscle tone	- Describe the physiological basis and the clinical significance of - Decerebrate posture - Decorticate rigidity		3 Hours Theory	1 Practical session (3 hrs for examination of the motor system)
11	UMN and LMN Lesions	- Describe the features and Physiological basis of Upper motor neuron & lower motor neuron lesion. - Describe the features of: - Hemisection of spinal cord at a given level (e.g. T8, L3 etc) - Brown Sequard syndrome - Complete transection of spinal cord at a given level.	- Define the following terms: Hemiplegia, quadriplegia, paraplegia - Hemiparesis, quadriparesis & paraparesis	- Definition of terminology: - o Transient ischemic attacks - o Stroke - o Cerebrovascular accidents - Neurogenic bladders		Clinical cases can be shown

12	Reflexes	- Define the term 'reflex'. - Describe the components of a reflex arc with a diagram. - Classify reflexes: - based on the location of receptors (deep and superficial) - Based on number of synapses in the reflex arc (mono, di or polysynaptic) - Describe in detail, the stretch reflex and its physiological significance. - List the other terms which are commonly used to refer to the stretch reflex. - Identify that the clinically tested deep reflexes (or tendon jerks) are stretch reflexes. - Differentiate between alpha and gamma motor neurons. - Name the receptor for the stretch reflex and describe its basic structure with a diagram. State the functional role of gamma motor neurons. - State the effects of supraspinal influences on the stretch reflex - Describe the effects of UMN lesions. - Describe the effects of LMN lesions. - Describe the inverse stretch reflex arc. State the stimulus and response for the inverse stretch reflex. - Describe the functional role of Golgi tendon organ. - Describe the physiological basis of "Clasp-knife" rigidity - Describe the flexion withdrawal reflex. State its functional role? - Describe the afferent, efferent pathways and the centre of integration for the	- Alpha-gamma co-activation - Physiological basis for Jendrassik's maneuver - Crossed extensor reflex - Importance of using a painless stimulus to elicit plantar response - Central excitatory state & irradiation of stimulus in spinal cord - Mass reflex & its use in spinal cord injury patients o Postural reflexes other than stretch reflex and crossed extensor reflex: o Brain stem reflexes: Righting reflexes (Midbrain) o Labyrinthine righting o Neck righting o Body on head righting o Body on body righting - Vestibular or Labyrinthine reflexes (Medulla) - o Vestibulospinal or tonic labyrinthine reflex (TLR) - Vestibulocollic reflex - Vestibuloocular reflex (VOR) - o Vestibular placing reaction - Tonic neck reflexes (upper cervical cord)	Tonic neck reflexes (upper cervical cord) - Symmetrical tonic neck reflex (STNR) - Other Primitive reflexes: - Sucking reflex - Rooting reflex - Grasp reflex - 6 months - Plantar – Babinski – 1 year Should not remain active beyond 6-12 months of life. If they do, and they are not integrated, they can interfere with voluntary control of specific movements and result in immature patterns of movement (eg. Cerebral palsy) - The primitive reflexes may re-emerge in an adult after brain injury	2 Hours Theory 1 Practical session (3 hrs for examination of reflexes)	Pediatrics Neurology Medicine PMR Study of patients with postural abnormalities as a result of primitive reflexes being expressed.

		following superficial reflexes: Corneal, conjunctival, Abdominal, cremasteric • State the rationale in assessing superficial reflexes, while examining the nervous system. • Describe flexor and extensor plantar reflexes. • Recognize the importance of using a painless stimulus to elicit plantar response • Describe Babinski's sign and state its clinical significance. • List the physiological conditions, where plantar response is extensor. • Demonstrate how to elicit the clinically significant superficial and deep reflexes in normal subject.				
13	Cerebellum	• Describe the structure of cerebellum, its somatotopic organization, deep cerebellar nuclei, afferent pathways, internal connections, efferent pathways. • Name the afferent and efferent fibres of cerebellum • Describe the functions of cerebellum.	• Describe the features of cerebellar lesions • Describe cerebellar function tests.	• Cerebellar lesions	3 Hours 1 Hour Practical	Anatomy: Structure, connections and blood supply to cerebellum Medicine Neurology
14	Basal ganglia	• Define the term basal ganglia. • List the nuclei forming the basal ganglia. • List the following: • Input nuclei – which receive afferents from cortex • Output nuclei – which send output to thalamus and spinal cord • Describe the internal connections between input and output nuclei – give details of the direct pathway and indirect pathway.	• Describe the features of Parkinson's disease. • Describe the pathophysiological basis of Parkinson's disease.		2Hours	

		- Describe the origin and termination of the nigro-striatal pathway. State the neurotransmitter in this pathway. - Describe the physiological role and clinical significance of the nigrostriatal pathway.				
15	Reticular formation	- Describe the organization of the reticular formation and its physiological role. - Describe the ascending Reticular Activation System	- List the neurotransmitters of various nuclei of RF. - Give an outline of afferent & efferent connections		1 Hour	
16	Thalamus	- List the groups of thalamic nuclei - Give an outline of connections of thalamus - List the functions of thalamus.	List the important features of thalamic syndrome		1 Hour	
17	Hypothalamus	- List the major regions and functions of hypothalamus. - Connections of hypothalamus - Describe the functions of the hypothalamus	Hypothalamic Obesity		1 Hour	
18	Limbic system	- State the components of Limbic system - Describe the physiological role of the limbic system Recognize the importance of Papez's contributions - Recognize the central role of amygdala.	- New concept of the Limbic System – Emphasis on amygdala. - Kluverbucy Syndrome - Shamrage	- Recognize differences between the new concept of Limbic circuit and Papez's circuit. - Identify nuclei involved in addiction	1 Hour	
19	Cortex	- Identify the major somatic and special sensory, motor & association areas in the cortex. - Recognize the somatotopy of the motor and somatic sensory areas (homunculi) - Recognize the phenomena of hemispheric specialization (dominance), handedness.	Define the role of corpus callosum – inter-hemispheric transfer of information	- Sperry's Split Brain Experiments - Dyslexia - Prefrontal Lobotomy - Define the following terms: - hemi-neglect syndrome - cortical	1 Hour	

				blindness • synaesthesia		
20	EEG	- State the physiological basis of EEG, types of EEG waves, - Uses of EEG			1 Hour	
21	Sleep	- Define the various stages of a sleep cycle. - Distinguish between NREM and REM sleep.	Sleep Disorders - Hypersomnolence - Obstructive sleep apnea - Insomnia	Theories of sleep – Wakw Cycle	1 Hour	
22	Language & speech	- Define the role of Wernicke's & Broca's areas in language & speech - Define aphasia and state the site of lesion in motor and sensory aphasia			1 Hour	
23	Learning and memory	- Describe the classification of learning and memory - Describe the following phenomena of implicit or Non-declarative learning: - Non-associative – Habituation Sensitization - Associative – Classical conditioning Operant conditioning - Define Explicit or declarative memory. - Define the term synaptic plasticity - Describe the synaptic phenomenon associated with Short term memory. - Describe the phenomenon leading to long-term memory. - Describe the role of hippocampus in memory formation. - Describe the role of cerebellum in motor learning.	List Alzheimer's disease and Korsakoff's psychosis as disorders of learning and memory		1 Hour	
24	CSF	Describe the composition, Secretion, Circulation, Drainage and Functions	- Papilledema - Hydrocephalus			

		• Define Blood Brain Barrier • Define Blood CSF barrier			1 Hour	
25	Cranial Nerves	•	• Examine the integrity of the cranial nerves I-XII in a normal subject		2 Practical session (6 hrs)	

Special Senses (Lectures + Tutorials 20 hours; Practicals + OSPE 6 hours; ECE: 3 hours)

NO	TOPIC	SPECIFIC LEARNING OBJECTIVE			TEACHING HOURS	CLINICAL INTEGRATION
		MUST KNOW	DESIRE TO KNOW	NICE TO KNOW		
EYE						
1	Functional anatomy	- List the structures within the eyeball - Name the extraocular muscles and describe their functions - Describe the functions of Iris, Ciliary body, Intra-ocular muscles, Lens, Aqueous humor, Vitreous body and Optic nerve - Describe the formation and drainage of aqueous humour	State the normal range of intraocular pressure		1 Hour	
2	Optics of eye	- List the structures through which light passes before falling on the retina - State the important refracting surfaces of the eye and the extent of contribution of each to image formation. - State that the image formed on the retina is inverted and diminished in size. - Describe the role of crystalline lens in focusing the light rays and describe the changes that happen while focusing a near object – accommodation reflex - List the common refractive errors – Myopia, hypermetropia, presbyopia and astigmatism - Describe the cause for the refractive errors and explain their correction	- Concept of the „reduced eye“ - Accommodative power of lens and near point of vision "Reduced eye"		1 Hour	Ophthalmology: To observe testing of refraction To observe the use of tonometer To get familiar with case charts of refractive errors To observe examination of fundus using Ophthalmoscope Observe perimetry
3	Retina	List the retinal cells contributing to the visual pathway. (photoreceptors,	Cone & rod density distribution in retina			

		- bipolar cells and ganglion cells) - Describe optic disc, macula lutea and fovea as important structural features in the retina - Classify photoreceptors – Rods and cones - List major structural and functional differences between rods and cones - Demonstrate visual acuity on a subject using Snellen's chart	Convergence of synapses		1 Hour	Ophthalmology: To observe testing of visual acuity
4	Photo transduction	- Visual pigments "Dark current" – at rest in the photoreceptors - Hyperpolarizing receptor potential in rods & cones in response to light - Transmission of Action potential to the optic nerve.	- Decomposition of rhodopsin - biochemical steps involved - Neurotransmitters involved - Wavelengths of light best absorbed by pigments		1 Hour	
5	Light & Dark adaptation	Describe the changes that happen during dark and light adaptation	Nyctalopia			
6	Colour vision	- Name the types of photoreceptors responsible for colour vision - Classify cones based on their spectral sensitivity - List the types of colour blindness - Describe theories of colour vision - Demonstrate the use of Ishihara's chart to check for colour blindness	- Color constancy and Purkinje shift - Theories of color vision		1 Hour	
7	Optic Pathway	- Draw and describe the optic pathway from the photoreceptors to the visual cortex - Describe the visual field defects produced by lesions at various levels of the pathway	List the conditions producing pupillary constriction & pupillary dilatation		1 Hour	
8	Pupillary Reflexes	- Describe the pupillary light reflex pathway - Differentiate between direct and consensual pupillary light reflexes	- Describe the accommodation reflex pathway - List the features of	Conditions producing pupillary constriction & pupillary dilatation	1 Hour	

		• Demonstrate direct and consensual light reflexes on a subject provided	Horner's syndrome Explain Argyll-Robertson pupil			
9	Eye Movements	• List the extraocular muscles and describe their actions • Name the cranial nerves innervating the extraocular muscles • List the types of eye movements (saccadic, smooth pursuit, vergences)	• Saccadic & smooth pursuit movements • Opto-kinetic reflexes		1 Hour	
EAR						
1	Functional anatomy of the ear	• List different parts of the ear. • Mention functions of outer ear • Describe the role of middle ear in impedance matching • List structures within the inner ear and specify their functions • Describe the importance of attenuation reflex			1 Hour	
2	Inner Ear Function of cochlea	• Draw the cross-section of cochlea with all 3 three scalae. • Describe the 'travelling wave theory' of hearing • Describe the function of basilar membrane in frequency discrimination - 'Place principle' of hearing	• Volley effect or Frequency principle of hearing		1 Hour	
3	Sound	• Physics of sound • Concept of the Decibel scale	• Noise - as an occupational hazard		1 Hour	
4	Sensory transduction in cochlea	• Recognize the importance of endocochlear potential and sensory transduction in the cochlea.				
5	Processing of auditory signals	• Describe the auditory pathway	• Describe the mechanisms underlying sound localization and masking effect of sounds	• Describe the concept of tonotopic maps	1 Hour	
6	Assessment of hearing	• Define an audiogram • Identify a normal air-conduction and bone-conduction tracing		• Principle of hearing aids	1 Hour	

		- Identify conductive hearing loss and sensory neural hearing loss using audiogram - Describe the principle of Rinne's and Weber's test				
7	Deafness	Types of deafness - Conductive & Neural	- Audiogram - Distinguish between conductive hearing loss and sensory neural hearing loss based on audiogram	Speech Audiometry	1 Hour	
VESTIBULAR APPARATUS						
1	Functional anatomy of vestibular apparatus	List the structures which make up vestibular apparatus and their functions			1 Hour	
2	Mechanism of stimulation vestibular hair cell	- Describe the mechanism of stimulation of otolith organs - deflection of hair cells using gravitational force/inertial force of otolith membrane - Describe the mechanism of stimulation of semicircular canals - deflection of hair cells using inertial force of endolymph			1 Hour	
3	Vestibular pathway	- Describe the connections of vestibular nucleus to the cortex and cerebellum - Describe the projections through vestibulospinal tracts - Describe the functions of Vestibular system - Maintenance of balance, equilibrium and posture	- Connections to cranial nerve nuclei controlling - Eye movements - Vestibulo-ocular reflex - Head & neck movements		1 Hour	
4	Tests of Vestibular function		- Identify nystagmus in a patient - Caloric test - Rotation in a Barany chair	Meniere's disease	1 Hour	
SMELL						
1	Microscopic anatomy of	Describe the arrangement of olfactory sensory neuron within the olfactory	List the types of cells within the olfactory bulb	Pheromones		

	olfactory epithelium and olfactory bulb	epithelium	Describe the connections of olfactory sensory neurons with cells in the olfactory bulb		1 Hour	
2	The olfactory pathway	Describe the olfactory pathway from the olfactory sensory neurons to the cortex			1 Hour	
TASTE						
1	Receptors for Taste	Describe the arrangement of taste cells within taste buds and organization of taste buds within papillae.			1 Hour	
2	Basic qualities of taste sensation	- The student must be able to: - List the four basic qualities of taste sensation - Demonstrate how to test for the four basic qualities of taste sensation	List umami as the fifth taste sensation			
3	Taste pathway	Draw and describe the taste pathway from the anterior two-third and posterior one-third of the tongue to the gustatory cortex				

REFERENCE LEARNING BOOKS

Text Book of Medical Physiology by Guyton and Hall – A South Asian Edition

Ganong's Review of Medical Physiology

Text Book of Physiology by Dir.Prof.A.K.Jain (Volume I & II)

Understanding Medical Physiology – A Text Book for Medical Students by RL Bijlani and S Manjunath Best &

Taylor's Physiological Basis of Medical Practice by O.P.Tandon and Y.Tripathi

Text Book of Human Physiology by Sarada Subramanyam A

Text Book of Practical Physiology by CL Ghai

Manual of Practical Physiology by Dir.Prof.A.K.Jain

THEORY EXAMINATION

Theory Examination - Pattern of Question Paper I and II

1	Essay	1 x 10 marks	= 10 marks
1.	Brief Answers	5 x 4 Marks	= 20 marks`
2.	Short Answers	10 x 2 Marks	= 20 marks
Total			----- 50 Marks -----

Physiology Practical Examination Including OSCE, OSPE and Viva

Practical : Total 40 marks

I Haematology : 16 marks (Major -10 marks, Minor 6 marks)

Major experiment

1. Total RBC Count
2. Total Leukocyte count
3. Differential count
4. Absolute Eosinophil count

(Students can be taught to dilute the blood, charge the chamber, focus the counting grid and one sample square can be counted and the steps for calculation to be mentioned correctly. They need not count all squares)

Minor

experiment

- 1.Hemoglobin Estimation
- 2.Blood Grouping
- 3.Bleeding Time and Clotting Time
- 4.ESR or PCV

Suggestion:

(To avoid mouth sucking in doing hematology experiments with RBC and WBC pipettes instead, automated micro pipettes can be used)

II Clinical Examination : 20 marks (CNS-10marks +CVS/RS–5marks+Clinical discussion or chart–5 marks) (One question from CNS Examination for 10 marks and one question from CVS/RS for 5 marks)
(Clinical Discussion includes giving a case scenario pertaining to the First M.B.B.S. level and student should identify the disease with the given data)
Charts will have a picture and two or three questions to be relevant to the picture given

III OSPE (2 Skilled stations): 2x2=4 marks (1 station in Hematology and one in clinical examination)

VIVA : (20 marks)

General Physiology, Blood, Muscle, Digestive system	- 6 marks
Endocrinology, Reproduction, excretory system	- 4 marks
Cardiovascular system, Respiratory system	- 4 marks
Central nervous system and Special senses	- 6 marks

INTERNAL ASSESSMENT (40 marks) (Theory 20 & Practical 15 + Record 5)

- Theory to assess knowledge - Periodic Test in the first week of Oct, Dec, Jan, Mar and May (5 test totally) and Model Exam Paper I & II in June last week.
- Practical to assess skill - One Practical Exam in Hematology and one in clinical examination. Model Practical in June.
- Viva to assess communication - Viva marks to be included in internal assessment calculation.

MEDICAL ETHICS

Privacy and confidentiality of Students

Ethical Issues

INTEGRATED TEACHING

2 vertical and 3 horizontal integration to be done in each Academic Year

e.g. Horizontal – Gastric secretion, Liver, Kidney

Vertical – Anemia, Jaundice and Hemiplegia

RECORD

Record should be followed as recommended by this university

BIOCHEMISTRY

Goals and objectives given below are as per the Medical Council of India Regulations on Graduate Medical Education, 1997.

GOAL

The broad goal of the teaching of undergraduate students in biochemistry is to make them understand the scientific basis of the life processes at the molecular level and to orient them towards the application of the knowledge acquired in solving clinical problems.

SPECIFIC LEARNING OBJECTIVES

a. KNOWLEDGE

At the end of the course, the student should be able to:

- (1) describe the molecular and functional organization of a cell and list its subcellular components;
- (2) delineate structure, function and inter-relationships of biomolecules and consequences of deviation from normal;
- (3) summarize the fundamental aspects of enzymology and clinical application wherein regulation of enzymatic activity is altered;
- (4) describe digestion and assimilation of nutrients and consequences of malnutrition;
- (5) integrate the various aspects of metabolism and their regulatory pathways;
- (6) explain the biochemical basis of inherited disorders with their associated sequelae;
- (7) describe mechanisms involved in maintenance of body fluid and pH homeostasis;
- (8) outline the molecular mechanisms of gene expression and regulation, the principles of genetic engineering and their application in medicine;
- (9) summarize the molecular concepts of body defence and their application in medicine;
- (10) outline the biochemical basis of environmental health hazards, biochemical basis of cancer and carcinogenesis;
- (11) explain the principles of various conventional and specialized laboratory investigations and instrumentation analysis and interpretation of a given data;
- (12) suggest experiments to support theoretical concepts and clinical diagnosis.

b. SKILLS:

At the end of the course, the student should be able to :

- (1) make use of conventional techniques/instruments to perform biochemical analysis relevant to clinical screening and diagnosis;
- (2) analyze and interpret investigative data;
- (3) demonstrate the skills of solving scientific and clinical problems and decision making;

c. INTEGRATION

The knowledge acquired in biochemistry should help the students to integrate molecular events with structure and function of the human body in health and disease.

TEACHING HOURS:

Theory classes: Total: 115 hours

<i>Seria I no.</i>	<i>Topic</i>	<i>Number of hours</i>
1.	Cell	2 hours
2.	Enzymes	5 hours
3	Chemistry and metabolism of carbohydrates	15 hours
4	Chemistry and metabolism of lipids	15 hours
5	Chemistry and metabolism of proteins	15 hours

6	Vitamins	10 hours
7	Nucleotide chemistry and metabolism	6 hours
8.	Integrated metabolism	3 hours
9	Bioenergetics	3 hours
10	Homeostatic mechanisms in the body (pH, water and electrolyte balance)	4 hours
11	Immunology	2 hours
12	Minerals	5 hours
13	Haem metabolism	6 hours
14	Function tests	4 hours
15	Molecular biology	12 hours
16.	Metabolism of xenobiotics	2 hours
17.	Oxidative stress	1 hour
18.	Nutrition	3 hours
19.	Importance of and ethical issues in laboratory medicine	2 hours
	Total	115 hours

TEACHING METHODOLOGY

Lectures, tutorials, small group discussions, integrated teaching modules, use of charts (paper-based clinical scenarios) for case discussions, practical exercises and demonstrations

THEORY SYLLABUS FOR FIRST YEAR M.B.B.S.

Note: The syllabus has been prepared keeping in mind the requirements of a doctor at the end of the MBBS course. It is also to emphasize that the teaching of Biochemistry needs to continue throughout the clinical phase of training of the MBBS students, when they will be in a better position to make correlations between derangements in biochemical processes and disease conditions. The content of the syllabus has been divided into 3 categories: “must know”, “desirable to know” and “nice to know”.

Total number of hours recommended: 112

	TOPIC	MUST KNOW	DESIRABLE TO KNOW	NICE TO KNOW	TEACHING HOURS RECOMMENDED
1.	CELL				2 hours
	Cell and cellular organelles	Basics of structure of a eukaryotic cell. Overview of cellular organelles and their functions (mitochondria, nucleus, ribosomes, proteasomes, lysosomes, endoplasmic reticulum and golgi apparatus)	Functions of peroxisomes. Markers of sub- cellular organelles		
2.	ENZYMES				5 hours
	Nomenclature and classification	Systematic and recommended nomenclature.	IUBMB classification of enzymes - main classes of enzymes only (names, definition, general reaction catalysed and one example for each class)		
	Properties of enzymes	Mechanism of action of an enzyme with regard to its effect on activation energy of a reaction. Concept of active site in enzymes. Specificity of enzymes: reaction and substrate specificity, with an example for each. Cofactors - metals and coenzymes (definition, examples of coenzymes) and	Lock and key and induced fit models of enzyme-substrate binding		

		examples of enzymes that require them			
	Factors that influence enzyme activity	Effect of pH (concept of optimal pH with examples). Effect of temperature (concept of optimal temperature). Effect of substrate concentration (Michaelis-Menten equation [no derivation of equation required], concept of K_m and V_{max}). Effects of enzyme and product concentration.			
	Inhibition of enzymes	Types of enzyme inhibition - competitive, non-competitive, suicide inhibition. Effects of competitive and non-competitive inhibition on K_m and V_{max} of the enzyme. Examples of commonly used drugs that act by competitive inhibition of enzymes. Examples of non-competitive enzyme inhibition – organophosphorus/cyanide poisoning			
	Isoenzymes	Definition and examples Clinical significance of elevated plasma levels of isoenzymes of creatine kinase (CK)	Isoenzymes of lactate dehydrogenase (LDH) and ALP		

	Diagnostic and therapeutic enzymes (clinically useful enzymes)	Aspartate aminotransferase (AST), alanine aminotransferase (ALT), alkaline phosphatase (ALP), lactate dehydrogenase (LDH), creatine kinase (CK) and amylase as markers of various disease conditions. Plasma markers of myocardial infarction and liver damage. Examples of enzymes used in treatment and indications for their use.	Clinical utility of 5-nucleotidase and gamma-glutamyl transferase		
	Regulation of enzyme activity		Overview of mechanisms involved in regulating the activity of enzymes: allosteric activation and inhibition, covalent modifications (phosphorylation and dephosphorylation), induction and repression; concept of feedback inhibition Process of regulation of glycogen metabolism may be used as an example to explain the mechanisms of enzyme regulation, as listed above.		
3	CHEMISTRY AND METABOLISM OF CARBOHYDRATES				15 hours
	Chemistry of carbohydrates	Overview of classification of carbohydrates, with physiologically important examples and functions of each of these. Benedict's test for reducing sugars. Components of physiologically important disaccharides and polysaccharides.	Concept of deoxy and amino sugars and their functions. Heteropolysaccharides (heparin, hyaluronic acid, chondroitinsulphate, heparansulphate, dermatan sulphate) and their importance in the body.		

		Homopolysaccharides – starch, glycogen and cellulose			
	Digestion of carbohydrates	Examples of common dietary carbohydrates and the foods that they are present in. Enzymes involved in digestion of carbohydrates. Sources, sites and actions of the enzymes that digest carbohydrates. End products of digestion and their absorption. Rationale for the composition and use of oral rehydration solution (ORS) in the treatment of dehydration. Lactose intolerance. Importance of dietary fibre.			
	Glucose transporters	Types, functions, tissue specificity and physiological relevance			
	Glycolysis	Definition, importance, cellular site and pathway involved (with emphasis on the importance of the pathway, sites of utilization and generation of energy and irreversible reactions involved). Importance of aerobic and anaerobic forms of glycolysis. Energetics. Concept of substrate level phosphorylation. Overview of regulation of glycolysis.			

		Rapaport- Leubering shunt and its physiological importance. Concept of lactic acidosis and common causes and conditions in which it occurs. Importance of inhibition of enolase by fluoride in blood samples collected for glucose estimation.			
	Citric acid cycle/ Krebs' cycle / tricarboxylic acid (TCA) cycle	Pyruvate dehydrogenase as a link between glycolysis and Krebs' cycle (no details of reaction mechanism required). Definition, importance, cellular site, pathway (including intermediates and enzymes involved, but excluding details of reactions involved). Concept of anaplerosis, amphibolic nature of Krebs' cycle. Energetics.		Overview of regulation of pathway (no details required).	
	Pentose phosphate pathway (PPP)	Importance of pathway - ribose for nucleic acid synthesis and NADPH for synthesis of various lipids, maintenance of reduced form of iron in haemoglobin, reduced glutathione and its importance in maintaining red cell membrane integrity. Clinical relevance of the deficiency of glucose-6-phosphate dehydrogenase (G6PDH).	Definition, cellular site and overview of pathway, showing starting material and products (intermediates not required).		

	Glycogenesis	Physiological importance of glycogen in the body (including role of glycogen in the liver and in the muscle). Overview of pathway of synthesis (starting material, action of glycogen synthase and branching enzyme and the end product).	Glycogen storage disorders		
	Glycogenolysis	Physiological importance of glycogen breakdown in the body. Overview of pathway of breakdown in the liver and muscle (starting material, action of glycogen phosphorylase and debranching enzyme and products obtained).	Role of insulin and glucagon in reciprocal regulation of glycogenesis and glycogenolysis (details of reactions involved in regulation not required). Examples of glycogen storage diseases (Von Gierke's disease and McArdle's disease) may be used to illustrate functions of glycogen in the liver and muscle and the reasons for different manifestations of the diseases.		
	Gluconeogenesis	Definition, substrates used, physiological importance, sites in the body and in cell where the pathway occurs. Overview of pathway with key intermediates and enzymes. Importance of Cori's cycle and glucose-alanine cycle.	Concept of reciprocal regulation of glycolysis and gluconeogenesis (no details required). Role of insulin and glucagon in regulation.		
	Uronic acid pathway			Overview of pathway showing starting material (glucose) and product	

				(glucuronic acid). Importance of glucuronic acid in conjugation of bilirubin and drugs and synthesis of heteropolysaccharides. Essential pentosuria	
	Metabolism of galactose	Dietary sources of galactose. Overview of pathway by which galactose is metabolized (showing the sites of 3 main enzymes involved). Eventual fate of galactose in the body. Galactosemia (definition, causes, biochemical basis of clinical manifestations and rationale of treatment).			
	Metabolism of fructose	Dietary sources of fructose. Overview of pathway by which fructose is metabolized (showing entry into glycolysis and formation of triacylglycerol). Importance of fructose in seminal fluid.		Disorders of fructose metabolism	
	Minor pathways of carbohydrate metabolism	Polyol pathway and its importance in pathogenesis of complications of diabetes mellitus.			

	Regulation of blood glucose levels	Factors maintaining blood glucose levels - role of dietary carbohydrates, role of hormones (insulin, glucagon, glucocorticoids and catecholamines) and roles of liver and kidney.			
	Diabetes mellitus	Types and pathogenesis of diabetes mellitus. Concept of insulin resistance. Metabolic derangements and clinical features. Diagnostic criteria (ADA criteria). Concept of impaired fasting glucose and impaired glucose tolerance. Gestational diabetes – definition and diagnosis Acute and chronic complications of diabetes mellitus. Pathogenesis of diabetic ketoacidosis.		Pathogenesis of chronic complications of diabetes mellitus.	
	Laboratory investigations in diabetes mellitus	Blood glucose estimations (fasting and post-prandial). Glycated haemoglobin (HbA1c). Urinalysis for detection of glucose, ketone bodies and proteins in urine. Detection and importance of microalbuminuria. Role of glucose tolerance test in diagnosis of diabetes mellitus.			

		Indications for and interpretation of results of glucose tolerance test (OGTT), including use in gestational diabetes mellitus (GDM). Serum lipid profile in diabetics.			
	Hypoglycemia	Definition, importance, causes, clinical manifestations.			
4	CHEMISTRY AND METABOLISM OF LIPIDS				15 hours
	General features of lipids	Definition of a lipid. Properties with regard to solubility and hydrophobicity. Important functions of lipids in the human body. Concept of importance of lipids in causation of disease (atherosclerosis with subsequent myocardial infarction and stroke; obesity, cholelithiasis, etc).			
	Classification of lipids	Major types of lipids in the body (classification into simple, complex and precursor or derived lipids). Relevant examples of each type and the importance of each type in the body.			
	Fatty acids	Concept of system of nomenclature (concept of systematic names and symbols), with C and n numbering of fatty acids. Classification system based on chain length, degree of saturation (saturated and mono- and polyunsaturated fatty			

		acids), and nutritional requirement. Concept of saturated fatty acids in animal fat and unsaturated fatty acids in plant fats. Names of essential fatty acids and their functions. Importance of $\omega 3$ and $\omega 6$ fatty acids (dietary sources and their health benefits).			
	Simple lipids (fats)	Concept of importance of saturated and unsaturated fats in one's diet (including hydrogenation of oils). Basic concept of cis and trans forms of fatty acids and the health hazards of trans fats. Basic concept of mono, di- and triacylglycerols and where they are found in the body.			
	Derived lipids – steroids	Functions of cholesterol Health hazards associated with high blood levels of cholesterol.			
	Complex lipids	Lipoproteins - definition, general structure, types, components of each type, function of each type, role of apoproteins, importance in health and disease.	Phospholipids (definition, types, components, amphipathic nature, functions, clinically relevant examples) Importance of each type of phospholipid: phosphatidylcholine (including importance of surfactant in health and disease, concept of lecithin/sphingomyelin [L/S] ratio),	Glycolipids - definition, types, components, functions, examples. Basic concepts of cerebroside and gangliosides and importance of each type in the body. Basic concept	

			phosphatidylinositol and sphingomyelin Liposomes (definition, structure and importance)	of abnormalities in lipids in demyelinating diseases and sphingolipidosis	
	Miscellaneous	Micelles (definition, structure and importance). Biological membranes (structure and importance).	Basic concepts of transport mechanisms across membranes		
	Metabolism of lipids				
	Digestion of lipids	Names of main lipids present in the diet. Enzymes responsible for digestion of lipids and their sources and sites of action. Role of bile in lipid digestion and absorption. End-products of lipid digestion. Process of absorption of lipids. Steatorrhoea. Salient features of formation, metabolism and physiological importance of chylomicrons.			
	Fate of fatty acids				
	Fatty acid oxidation	Importance of oxidation of fatty acids in the body. Types of oxidation of fatty acids. Beta-oxidation of even chain fatty acids (site, activation of a fatty acid, the role of carnitine, steps	End-products of beta- oxidation of odd chain fatty acids. Alpha oxidation of fatty acids.	Conditions where fatty acid oxidation is impaired.	

		involved and energetics of the process).			
	Biosynthesis of fatty acids (lipogenesis)	Conditions under which it occurs and sites involved. Starting material and end products of fatty acid synthesis. Source of acetyl CoA. Regulatory role of acetyl CoA carboxylase. Overall reaction catalyzed by fatty acid synthase (individual enzymes and reactions not required). Importance of NADPH in the pathway and its sources. Role of the nutritional state and insulin as factors that regulate synthesis of fatty acids			
	Metabolism in the adipose tissue		Metabolism in the adipose tissue with regard to lipogenesis and lipolysis (conditions where it occurs, and products obtained) and its regulation by hormones, including enzymes involved		
	Metabolism of ketone bodies	Names of the ketone bodies and their importance. Pathway of ketogenesis and utilization of ketone bodies and sites where these occur. Factors that favour ketone body formation. Causes and clinical importance of			

		ketoacidosis.			
	Metabolism of cholesterol	Functions of cholesterol. Sources of cholesterol in the body (dietary and endogenous). Importance of HMG CoA reductase in the regulation of biosynthesis of cholesterol. Importance of maintaining normal cholesterol levels in blood and ways to reduce blood cholesterol levels (including mechanism of action of statins and other lipid lowering agents). Bile acids (names, source and functions). Enterohepatic circulation of bile acids.	Cellular site of biosynthesis of cholesterol. Basic overview of biosynthesis of cholesterol (showing starting material, HMG CoA [HMG CoA synthase], mevalonate [action of HMG CoA reductase] and formation of cholesterol, without showing any other intermediates). Overview of synthesis (including regulatory enzyme).	Role of lipids in formation of gall stones.	
	Metabolism of lipoproteins	Association of high levels of LDL with atherosclerosis. Anti-atherogenic effect of HDL	Brief overview of metabolism of VLDL, LDL and HDL (including reference values). Lipoprotein (a) Dyslipidemias – causes (with emphasis on secondary causes of dyslipidemia and familial hypercholesterolemia) and consequences. Risk factors for atherosclerosis and coronary artery disease; prevention of coronary artery disease.		

			Overview of metabolic syndrome.		
	Eicosanoids	Names and functions of various eicosanoids. Role of aspirin as an anti-platelet agent.	Mechanism of action of NSAIDs and their effect as anti-inflammatory agents	Therapeutic uses of prostaglandins.	
	Phospholipids	Clinical relevance of lecithin-sphingomyelin (L/S) ratio in amniotic fluid	Biochemical defect and clinical features of Niemann-Pick's, Tay- Sach's and Gaucher's disease.	Sites of action of various phospholipases . Sphingolipidosis other than the examples specified.	
	Miscellaneous	Role of liver in lipid metabolism. Fatty liver (causes, including role of lipotropic factors, and consequences).			
5	CHEMISTRY AND METABOLISM OF PROTEINS				15 hours
	Amino acids	Classification based on nutritional requirement and metabolic fates. Peptide bond formation by amino acids. Reaction with ninhydrin as a general reaction for all amino acids (details of reaction not required).	Classification of amino acids based on side chain		
	Peptides and proteins	Structural organization of proteins - primary, secondary, tertiary and quaternary structures. Denaturation of proteins – definition, agents causing denaturation and consequences (loss of biological activity of protein). Overview of structure-function relationship of haemoglobin, myoglobin and collagen.	Oxygen dissociation curve of haemoglobin; Bohr effect.		

		Hemoglobinopathies: sickle cell anaemia and thalassemia			
	Digestion and absorption	Mechanism of activation of enzymes involved in the digestion of proteins in the stomach and small intestine (conversion of zymogens to active proteases) – proteolytic enzymes of the gastric and pancreatic secretions. Role of gastric acid in protein digestion. Overview of amino acid absorption.	Disorders associated with amino acid absorption (cystinuria/Hartnup's disease).		
	General pathways of amino acid catabolism	Overview and biochemical importance of the processes of transamination and oxidative deamination. Enzymes and coenzymes involved in the above processes.			
	Ammonia metabolism	Sources of ammonia in the body. Urea cycle - overview of reactions involved, including regulatory enzyme. Role of glutamine in detoxification of ammonia in the brain. Hepatic coma (hepatic encephalopathy); biochemical basis of clinical features Reference range for blood urea and blood urea nitrogen (BUN).	Overview of disorders of the urea cycle		

	Metabolism of individual amino acids	Functions of individual amino acids. Important specialized products from tyrosine – melanin, catecholamines, thyroid hormones. Formation of tyrosine from phenylalanine. Pathogenesis, clinical features, diagnosis and treatment of phenylketonuria.	Metabolism of methionine and homocysteine Roles of folic acid, vitamin B₁₂ and pyridoxine in their metabolism. Role of homocysteine as a risk factor for cardiovascular diseases. Important specialized products from glycine (glutathione, creatine, creatinine, haem and purines) and tryptophan (serotonin, melatonin and niacin). Neurotransmitters derived from amino acids (glutamate – gamma-amino butyric acid [GABA], histidine [histamine], arginine [nitric oxide]).	Uncommon disorders of amino acid metabolism: maple syrup urine disease (MSUD), alkaptonuria, tyrosinemias, methymalonyl aciduria, disorders of glycine metabolism, etc. Importance of neonatal screening for inborn errors of amino acid metabolism. Principle of the technique of chromatography	
	Plasma proteins	Functions of albumin. Examples of specialized transport proteins present in plasma. Reference values of total proteins and albumin. Common clinical conditions in which plasma protein levels are abnormal and the reasons why these changes occur (malnutrition, cirrhosis of the liver, nephrotic syndrome, chronic renal failure, multiple myeloma). Importance of the albumin: globulin ratio (A: G ratio). ‘ Normal value for the A:G ratio	Classification of plasma proteins, based on electrophoretic mobility.	Principle of the technique of electrophoresis	

		and common clinical conditions in which the ratio is abnormal.			
6	VITAMINS				10 hours
	General properties of vitamins	Definition, classification, comparison of clinically relevant features of fat- and water-soluble vitamins. Concepts of hypo- and hypervitaminosis and recommended dietary allowances (RDA).			
	Fat-soluble vitamins				
	Vitamin A	Dietary sources. Various forms of vitamin A and their functions Precursor form. Biochemical functions. Role in Wald's visual cycle. RDA Deficiency – causes, manifestations and treatment.	Hypervitaminosis A		
	Vitamin D	Dietary sources of vitamin D. Synthesis in the body and conversion to calcitriol. Biochemical functions. Role in calcium absorption in small intestine, calcium homeostasis and bone mineralization. RDA Deficiency (rickets and osteomalacia) – causes, manifestations, biochemical findings in blood			
	Vitamin E	Dietary sources Role as an antioxidant. Relationship to action of glutathione peroxidase. RDA Deficiency leading to fragility of RBCs.			
	Vitamin K	Sources. RDA. Deficiency – causes, manifestations (including hemorrhagic disease of the new born).	Biochemical role in gamma carboxylation reactions. Vitamin K cycle. Basis of action of warfarin and other dicumarol derivatives.		

	Water-soluble vitamins			
	Thiamine	Dietary sources. Functions (coenzyme form, physiologically important reactions for which it is required). RDA Deficiency (beri-beri) – causes and manifestations Wernicke-Korsakoff syndrome - causes, clinical features		
	Riboflavin	Dietary sources. Functions (coenzyme forms, physiologically important reactions for which they are required). RDA Deficiency – causes and manifestations.		
	Niacin	Sources (including from tryptophan). Functions (coenzyme forms, examples of physiologically important reactions for which they are required). RDA Deficiency – causes and manifestations of pellagra.		

	Pyridoxine	Dietary sources. Functions (coenzyme form, physiologically important reactions for which they are required, including transamination and decarboxylation of amino acids). RDA. Deficiency – causes and manifestations. Rationale for supplementation in treatment of tuberculosis.		
	Pantothenic acid	Sources, functions and RDA		
	Biotin	Sources. Role in carboxylation reactions. Examples of important enzymes that require biotin.		
	Folic acid	Dietary sources. Functions (coenzyme forms, physiologically important reactions for which they are required).	Role of folic acid in one-carbon metabolism (one-carbon donor reactions (e.g., serine	

		RDA Relationship with vitamin B₁₂ and concept of “folate trap”. Deficiency – causes and manifestations (megaloblastic anemia). Importance of supplementation in peri-conceptual period. Folate antagonists (action of methotrexate, aminopterin and sulphonamides).	hydroxymethyl transferase), one-carbon acceptor reactions (methionine synthase, thymidylate synthase and de novo purine synthetic pathway).		
	Vitamin B₁₂	Dietary sources. Absorption and role of intrinsic factor of Castle. Functions (coenzyme forms, reactions for which they are required). Role in folic acid metabolism (concept of “folate trap” in B₁₂ deficiency) RDA Deficiency – causes and manifestations (megaloblastic and pernicious anemia). Importance of combined B₁₂ and folic acid administration in treatment of megaloblastic anemia.			
	Vitamin C	Dietary sources. Functions (in collagen synthesis, iron absorption and as an anti-oxidant). RDA. Deficiency – causes and manifestations of scurvy.		Role of vitamin C in the conversion of tyrosine to catecholamines, cholesterol to bile acids and in catabolism of tyrosine.	
	Vitamin-like substances Lipoic acid			Role in reactions involving pyruvate dehydrogenase and alpha-ketoglutarate dehydrogenase.	

7	NUCLEOTIDE CHEMISTRY AND METABOLISM				6 hours
	Nucleotide chemistry	Purine and pyrimidine bases found in DNA and RNA. Definition and types of	Examples of synthetic analogues of purine and pyrimidine bases and nucleosides used		

		nucleosides and nucleotides. Functions of physiologically important nucleotides.	as therapeutic agents (anti-cancer drugs, anti-viral drugs and allopurinol).		
	Nucleotide metabolism	Role of folic acid in purine synthesis. Overview of the pathway of degradation of purines to form uric acid, including role of xanthine oxidase. Hyperuricemia and gout (causes, clinical features, principles of treatment, including mechanism of action of allopurinol and probenecid).	Names of compounds required for purine and pyrimidine synthesis. Salvage pathway for purine bases and nucleosides. Lesch- Nyhan syndrome (cause and biochemical basis of clinical features). Mechanism of action of methotrexate and 5-fluorouracil, as examples of drugs used in cancer chemotherapy.	Overview of the pathway of de novo synthesis of purine nucleotides (names of only starting material and end products - AMP and GMP - required). Overview of pathway of de novo synthesis of pyrimidine nucleotides, showing only starting material, rate-limiting enzyme and end products. Disorders of pyrimidine metabolism: orotic aciduria	
8.	INTEGRATED METABOLISM				3 hours
		Overview of metabolism in the fed and fasting states	Overview of metabolism in liver, brain and adipose tissue		
9	BIOENERGETICS				3 hours
	Role of ATP	Role of ATP as the “energy currency” of the cell.		Role of high energy phosphates in energy capture and transfer e.g., role of creatine phosphate in muscle.	

	The respiratory chain and oxidative phosphorylation	Sources of reducing equivalents in the cell (NADH and FADH₂). Role of mitochondria as the “power house” of the cell. Substrate level and oxidative phosphorylation. Schematic representation of the electron transport chain. Role of the respiratory chain as an electron transporter and a proton pump. Chemiosmotic theory of oxidative phosphorylation. Amount of ATP synthesized when NAD and FAD act as hydrogen acceptors.		Transport of cytosolic NADH into the mitochondria (mitochondrial shuttle systems). Examples of inhibitors of electron transport chain (carbon monoxide, cyanide) and uncouplers of oxidative phosphorylation (free fatty acids, thyroxine, thermogenin). Role of brown fat (non-shivering thermogenesis and role of uncoupling protein/ thermogenin). Overview of complex V (ATP synthase).	
10	HOMEOSTATIC MECHANISMS IN THE BODY				4 hours

	Acid base balance	Definitions of acid, base and buffer. Normal pH of body fluids and importance of maintaining normal pH Sources of hydrogen ions in the body. Mechanisms involved in regulation of pH Buffers of body fluids Henderson – Hasselbalch equation. Role of buffers (with emphasis on the bicarbonate buffer system) Role of the lungs and kidneys in maintaining acid- base balance. Simple acid-base disorders: Major causes and clinical features of: • Metabolic acidosis (including importance of anion gap) and alkalosis • Respiratory acidosis and alkalosis. Arterial blood gases (ABG) analysis and interpretation of results. Compensatory mechanisms in metabolic/respiratory acidosis/alkalosis.			

	Fluid and electrolyte balance	Distribution of water in various body compartments. Intra- and extracellular fluid composition (sodium and potassium) Blood volume and osmolality. Major causes and clinical features of dehydration. <i>Sodium:</i> Normal levels in the blood. Physiological functions. Regulation of sodium homeostasis (including the role of renin-angiotensin-aldosterone system). Major causes, clinical features of hyponatremia and hypernatremia <i>Potassium:</i> Normal levels in the blood. Physiological functions. Regulation of potassium homeostasis. Major causes and clinical features of hypokalemia and hyperkalemia.	Regulation of osmolality– role of anti-diuretic hormone (ADH).		
11	IMMUNOLOGY				2 hours
	Immunology	Introduction to immunoglobulins Types, properties and functions of different classes of immunoglobulins. Multiple myeloma – biochemical abnormalities and laboratory diagnosis.			
12	MINERALS				5 hours
		Concept of macro and micro minerals and examples. Sources and daily requirement.			
	CALCIUM	Normal blood levels. Functions of calcium. Role of vitamin D in absorption of calcium. Regulation - role of parathyroid hormone (PTH), calcitonin and			

		vitamin D in calcium homeostasis. Important causes, clinical features, laboratory diagnosis of hypocalcemia and hypercalcemia Osteoporosis and osteomalacia - major causes, clinical features.			
	Iron	Sources and daily requirement. Distribution of iron in the body. Functions of iron. Absorption of dietary iron in the duodenum - overview of role of divalent metal transporter-1 (DMT-1), duodenal cytochrome b (dcytb), hephaestin, ferroportin. Storage and transport (role of ferritin and transferrin). Causes, clinical features of iron deficiency anemia.	Iron overload conditions, e.g., hereditary haemochromatosis.		
	Copper	Biochemical functions of copper. Role of ceruloplasmin. Genetic basis, clinical features of Wilson's disease.	Biochemical basis of Menke's disease		
	Zinc	Functions of zinc. Causes and clinical features of zinc deficiency.			
	Magnesium and manganese: Iodine: Flouride: Selenium	Sources and daily requirement of iodine. Functions of iodine. Causes and clinical features of iodine deficiency. Sources and daily requirement of fluoride. Functions of fluoride. Causes and clinical features of fluorosis. Functions of selenium	Functions of magnesium and manganese.		
13	HAEM METABOLISM				6 hours
	Heme synthesis	Importance of haem (heme-containing proteins – hemoglobin, myoglobin, cytochromes).	Heme synthesis and its regulation in the liver and bone marrow.		

		Porphyrias: Definition, biochemical basis of clinical features of porphyrias (neurological features and photosensitivity). Acquired porphyria: lead poisoning.			
	Heme degradation	Degradation of haem and fate of bilirubin. Hyperbilirubinemia – causes and role of laboratory investigations in the differential diagnosis of jaundice. Jaundice in the newborn	Congenital disorders of conjugation and excretion of bilirubin – Crigler-Najjar syndrome, Dubin-Johnson syndrome, Gilbert's syndrome and Rotor's syndrome.		
14	FUNCTION TESTS:				4 hours
	Renal function test:	Functions of the kidney Clinical importance of blood urea and serum creatinine levels in renal disease.			
		Estimation of GFR: Creatinine clearance and its importance. Nephrotic syndrome – major clinical features and laboratory diagnosis.	Proteinuria – types (glomerular, tubular and overflow proteinuria) and characteristic proteins present in urine in each type. Microalbuminuria and its importance. Concepts of tests to assess tubular function – measurement of plasma and urine osmolality	Renal tubular acidosis. Lab investigations in acute kidney injury and chronic kidney disease Laboratory tests to diagnose pre-renal, renal and post-renal causes of acute renal failure.	
	Liver function tests	Functions of the liver. Major causes of liver dysfunction. Tests done to assess liver			

		function in clinical practice: 1. Tests to assess ability to detoxify and excrete substances: conjugated and unconjugated bilirubin (van den Bergh's test), blood ammonia levels. 2. Tests to assess biosynthetic functions: total protein and serum albumin levels, prothrombin time 3. Markers of liver injury: alanine transaminase (ALT) and aspartate transaminase (AST) 4. Marker of cholestasis: alkaline phosphatase (ALP). Differential diagnosis of jaundice, based on liver function tests.			

	Thyroid function test:	Regulation of secretion of thyroid hormones.		Importance of estimation of TSH in assessment of thyroid function. Measurement of total and free thyroxine levels. Role of TSH and free thyroxine in laboratory diagnosis of hypothyroidism and hyperthyroidism	
	Adrenal function tests			Hormones produced by the adrenal cortex and medulla. Regulation of secretion of adrenocortical	

				hormones. Basic tests done for the laboratory diagnosis of adrenal hypofunction and hyperfunction (serum and urine cortisol)	
15	MOLECULAR BIOLOGY				12 hours
	The cell cycle, DNA and RNA structure	Watson and Crick model of DNA structure (including simple diagrammatic representation of the salient features of DNA structure). Types and functions of different types of RNA. Overview of organization of DNA in a chromosome.		Overview of the cell cycle Differences between nuclear and mitochondrial DNA.	
	DNA replication and repair	Overview of the process of DNA replication in eukaryotes Roles of DNA polymerase, helicase, primase, topoisomerase and DNA ligase Diagrammatic representation of the events at the replication fork Okazaki fragments and its importance in replication.	Inhibitors of DNA replication as anti-cancer drugs. Overview of role of major DNA repair mechanisms – mismatch repair, base excision repair, nucleotide excision repair and double strand break repair. Diseases associated with abnormalities of DNA repair systems – xeroderma Pigmentosa and hereditary non-polyposis colon cancer (HNPCC).	Importance of telomeres and telomerase	

	Transcription	Structure of a gene - concepts of exons and introns, promoter, enhancers/repressors and response elements. Overview of the process of transcription in eukaryotes – initiation, elongation and termination Post-transcriptional processing – capping, tailing and splicing.			
	Translation and genetic code:	Genetic code - definition. Characteristics of the genetic code – universal, unambiguous, degenerate, without punctuation (continuous/commaless). Basis of degeneracy of the genetic code (wobble hypothesis). Components of eukaryotic ribosomes. Structure of tRNA (diagram of clover leaf model of tRNA structure) and its function in protein synthesis. Function of aminoacyl tRNA synthase.	Overview of the process of translation – initiation, elongation and termination Inhibition of prokaryotic translation by antibiotics. Post-translational modifications – examples.		
	Mutations and regulation of gene expression	Mutations: Definition. Mutagens- examples of physical, chemical and biological mutagens. Types of mutations. point mutation (deletion, insertion, substitution – transition and transversion, frame shift mutation, - missense mutation, nonsense mutation and silent mutation - chromosomal mutations (deletion, inversion and	Relationship of mutations with specific diseases – eg, sickle cell anemia and chronic myeloid leukemia.	Prokaryotes: The operon concept in prokaryotes (using Lac operon as an example). Eukaryotes: Overview of regulation of initiation of eukaryotic transcription: role of general and gene-specific transcription	

		translocation).		factors	
	Recombinant DNA technology and techniques in molecular biology:	Importance and applications of recombinant DNA technology Importance and applications of Polymerase chain reaction (PCR)	Restriction endonucleases. Vectors for cloning – plasmids and phages. Genomic and cDNA libraries. Principles and applications of techniques in molecular biology: (Southern, northern and western blotting, restriction fragment length polymorphism [RFLP]) Applications of recombinant DNA technology in medicine. General principles of production of therapeutic proteins, e.g., insulin Gene therapy Diagnosis of genetic diseases and genetic counseling Forensic investigation	Human genome project DNA fingerprinting DNA sequencing Microarrays Fluorescent in-situ hybridization (FISH) DNA vaccines Transgenic animals	

16.	METABOLISM OF XENOBIOTICS				2 hours
		Xenobiotics- definition and examples Biochemical importance of the two phases of xenobiotic metabolism Conjugation reactions: Biochemical role of conjugation reactions (with suitable, clinically relevant examples) - glucuronidation,	The cytochrome P450 enzyme system - Functions - Properties (especially induction by drugs) Overview of metabolism of alcohol. Health hazards associated with alcohol consumption.		

		sulfation, conjugation with glutathione, acetylation.	Metabolic alterations induced by alcohol metabolism.		
17.	OXIDATIVE STRESS				1 hour
				Concepts of reactive oxygen species (ROS), free radicals and oxidative stress and antioxidants. Mechanisms of generation of reactive oxygen species (ROS) in cells. Role of antioxidants – vitamin E and glutathione. Role of antioxidant enzymes – glutathione peroxidase, superoxide dismutase	
18.	NUTRITION				3 hours
		Importance of various macro and micro-nutrients in diet. Components and importance of each type in diet. Concept of balanced diet and glycemic index of food. Importance of dietary fibre. Basal metabolic rate. Specific dynamic action (thermogenic effect of food) and respiratory quotient Common sources of saturated, polyunsaturated and monounsaturated fats in diet and	Calorific value of various macronutrients. Principles of calculation of energy requirements of a person.	Dietary protein quality – biological value and net protein utilization. Concept of nitrogen balance.	

		their impact on health. Importance of trans fats Concept of limiting amino acids and supplementary action of dietary proteins. Protein-energy malnutrition (PEM): marasmus and kwashiorkor - causes and main differences. Obesity (including calculation and interpretation of body mass index [BMI]; health risks associated with obesity)			
19.	IMPORTANCE OF LABORATORY MEDICINE ETHICAL ISSUES IN LABORATORY MEDICINE				2 hours
		The concept that laboratory testing should respect principles of medical ethics (non-maleficence, beneficence, patient autonomy, informed consent, respect for patient, etc)		Ensuring quality and integrity of laboratory services, role and responsibilities when participating in clinical research, optimal use of resources, confidentiality of laboratory results, use of results from screening and testing programs, etc.	

PRACTICAL SYLLABUS

Estimation of important biochemical analytes in blood (glucose, creatinine, urea, uric acid and total protein)

Identification of abnormal constituents in urine; interpretation of the findings and correlation of the findings with pathological states

Tests (including dipstick tests) to detect abnormal constituents in urine include heat coagulation test, sulphosalicylic acid test and Heller's test for proteins, Benedict's test for reducing sugar, benzidine test for blood, Rothera's test for ketone bodies, Hay's test for bile salts and Fouchet's test for bile pigments

Interpretation of laboratory results in the context of a patient's presenting complaints.

Principles of spectrophotometry (including the Beer-Lambert Law)

Principles of electrophoresis (with specific reference to separation of serum proteins) and paper chromatography

Practical classes: Total: 125 hours

<i>Seria l no.</i>	<i>Topic</i>	<i>Number of hours</i>
1.	Estimations of biochemical analytes	40
2.	Qualitative tests	20
3	Demonstrations	15
4	Charts and integrated teaching	25
5	Small group discussions/tutorials	25
	Total	125 hours

INTERNAL ASSESSMENT : (40 marks)

(Theory 20 marks + Practical 15 marks + Record 5 marks)

Theory - To access knowledge.

Practical - To access skill.

Vivo voce - To access communication.

Internal Assessment test will be conducted on 3rd Saturday.

Given below is a division of topics for periodic assessments.

Unit I - September

Cell and chemistry carbohydrates, lipids and proteins

Unit II - October

Enzymes and vitamins

Unit III - December

Metabolism of carbohydrates and biological oxidation and electron transport chain

Unit IV - January

Metabolism of lipids

Unit V - February

Metabolism of proteins and metabolism of heme

Unit VI - April

Organ function tests, acid–base homeostasis and associated disorders, water and electrolyte balance and associated disorders

Unit VII - May

Nutrition, minerals and metabolism of xenobiotics

Unit VIII - June

Chemistry and metabolism of nucleotides and molecular biology

Model exam -1st week of July

RECOMMENDED TEXTBOOKS

The most recent editions of the following books are suggested.

1. Text book of Biochemistry for Medical Students by DM Vasudevan, SreeKumari S and Kannan Vaidyanathan
2. Medical Biochemistry by AR Aroor
3. Principles and Applications of Biochemistry in Medicine by Rafi
4. Biochemistry – Lippincott's Illustrated Reviews

5. Harpers Illustrated Biochemistry

Theory Examination - Pattern of Question Paper I and II

Essays	1 X 10 Marks	=	10 Marks
Brief Answers	5 X 4 Marks	=	20 Marks
Short Answers	10 X 2 Marks	=	<u>20 Marks</u>
TOTAL			<u>50 Marks</u>

PRACTICAL EXAMINATION (Total: 40 marks)

1. A short paper-based clinical scenario will be given to each student. The student will be asked to estimate one of the relevant analytes (glucose, creatinine, urea, uric acid and total protein) in a serum sample provided and asked to interpret this in the context of the given clinical scenario. The clinical relevance and metabolism of the analytes estimated will be discussed. (12 marks)

2. Clinical case histories and laboratory results with 3 clinical charts

Students will be expected to interpret laboratory results supplied, with reference to the history of the patient and to make a provisional diagnosis. (12 marks)

3. Identification of abnormal constituents in urine

Students will be expected to carry out of relevant tests and interpret and discuss their results (12 marks)

4. Objective structured practical exercise (OSPE) (2 stations x 2 marks each = 4 marks)

Only performance stations may be kept. Suggested questions for OSPE are given below.

- Perform a test to identify the presence of bile salts in the given sample.
- Perform a test to demonstrate the presence of areducing sugar /protein/ ketone bodies in the given sample.
- Demonstrate the presence of heat-coagulable proteins in the given sample.

VIVA VOCE: 20 marks

The viva voce is meant to assess understanding, comprehension and applications of the subject and not rote memory.

The topics in Biochemistry will be divided into 4, as detailed below, for the viva voce. Each examiner will assess the students in one of these areas and will award marks out of 5.

<i>Seria I no.</i>	<i>Topics</i>	<i>Marks</i>
1.	Carbohydrates, cell, biological oxidation and vitamins	5 marks
2.	Proteins, enzymes, plasma proteins, function tests, metabolism of xenobiotics, basics of immunology	5 marks
3	Lipids, minerals, nutrition, metabolism of haem, oxidative stress	5 marks
4	Nucleic acids, molecular biology, water and electrolyte balance, acid- base balance	5 marks

5		
	Total marks	20 marks

RECORD BOOKS

It is suggested that students be issued a printed Biochemistry Record Notebook in which they are expected to write only the observations, inferences and calculations of experiments they do in the practical classes conducted.

INTEGRATED TEACHING:

Suggested topics that may be used for integrated teaching:

Clinically important enzymes, plasma markers of myocardial, infarction and liver and renal damage, rationale of oral rehydration solutions, lactose intolerance, galactosemia, diabetes mellitus, ketoacidosis, dyslipidemias, atherosclerosis and coronary artery disease, liver disease, haemoglobinopathies, phenylketonuria, hyperuricemia and gout, deficiencies of vitamins A, D, K, B₁₂, thiamine, pyridoxine and folic acid, acid-base and electrolyte disorders, disorders of calcium homeostasis, iron deficiency anemia, iodine deficiency, disorders of bilirubin metabolism, renal and thyroid function tests, protein-energy malnutrition.

RECORD

Record should be followed as recommended by the University.

This Syllabus and Curriculum is applicable for the First
MBBS Students admitted from the academic year
2016-2017 and appearing for the Examination from
August 2017 session onwards

THE TAMILNADU DR.M.G.R. MEDICAL UNIVERSITY,
CHENNAI 600032.



M.B.B.S. DEGREE COURSE

SYLLABUS FOR SECOND PROFESSIONAL M.B.B.S.

PATHOLOGY

REVISED (NONSEMESTER) REGULATIONS 2010 - 2011

I. GOALS AND SPECIFIC LEARNING OBJECTIVES

I) GOAL

The broad goal of the teaching of undergraduate student in Pathology is to provide the students with a comprehensive knowledge of the mechanisms and causes of disease, in order to enable him/her to achieve complete understanding of the natural history and clinical manifestations of disease.

II) SPECIFIC LEARNING OBJECTIVES

a) Knowledge

At the end of the course, the student should be able to:-

1. Describe the structure and ultra structure of a sick cell
2. Mechanisms of cell degeneration.
3. Cell death and repair and be able to correlate structural and functional alterations.
4. Describe the mechanisms and patterns to tissue response to injury such that she/he can appreciate the patho-physiology of disease processes and their clinical manifestations.
5. Explain the patho-physiological processes which govern the maintenance of homeostasis.
6. Mechanisms of their disturbance and the morphological and clinical manifestations associated with it.
7. Correlate normal and altered morphology (gross and microscopic) of different organ systems in common diseases to the extent needed for understanding of disease processes and their clinical significance.

b) Skills

At the end of the course, the student should be able to:-

1. Describe the rationale and principles of technical procedures of the diagnostic laboratory tests
2. Interpretation of the results
3. Perform simple bed-side tests on blood, urine and other biological fluid samples
4. Draw a rational scheme of investigations aimed at diagnosing and managing patients with common disorders
5. Understand biochemical/physiological basis of tests to understand the disturbances that occur as a result of disease in collaboration with pre-clinical departments.
6. Understand the need and methodologies for proper interpersonal relationships between the diagnostic wing and patient care wing of the hospital.
7. Understand the need for quality control in such tests.

c) Integration

At the end of training he/she should be able to integrate the knowledge of

1. Normal tissue morphology,
2. Causes of Disease,
3. Relationship of various causative factors (social, economic and environmental),
4. Tissue changes due to such diseases,
5. Effect of such changes on the patients well being,
6. Easy, Accurate and Low Cost Methods of Diagnosis of such diseases
7. Long term implications of the disease on the patient and community.
8. Natural history of such diseases as prevalent in India, especially in the local region of the Teaching Hospital.

II. TEACHING METHODOLOGY

No	Teaching Method	Detailed Time Distribution	Minimal Number of Hours to be Dedicated
1	Didactic Lectures		110 Hours
	a. General Pathology	40 Hours	
	b. Systemic Pathology	40 Hours	
	c. Hematology	15 Hours	
	d. Clinical Pathology	15 Hours	
2	Practical Demonstrations		100 Hours
	a. General Pathology	20 Hours	
	b. Systemic Pathology	50 Hours	
	c. Hematology	10 Hours	
	d. Clinical Pathology	20 Hours	
3	Integrated Teaching		40 Hours
	a. Systemic Pathology	30 Hours	
	b. Hematology	10 Hours	
4	Clinical Interaction & Lab Work		20 Hours
	Clinical Pathology	8 Hours	
	Blood Banking	3 Hours	
	Cytology	3 Hours	
	Histopathology	3 Hours	
	Autopsy & Museum	3 Hours	
5	Short Term Student Research		10 Hours
6	Internal Assessment Tests		20 Hours
	Theory	12 Hours	
	Practicals	6 Hours	
	Communicative Skills Assessment (Viva Voce & OSPE)	2 Hours	
	TOTAL		300 Hours

NB:

- Each Lecture class will be of one hour duration only
- Each Practical class will be for 2 hours duration only

III.THEORY SYLLABUS

A. Introduction to Pathology with specific references to

- a. History of Pathology with special mention of pioneers
- b. Evolution of Pathology with special mention of the role of Autopsy in development of Modern pathology and its present day importance.
- c. Role of a Pathologist in a Hospital and importance in diagnosis.

B. Cell injury and Adaptations:

- a. Causes and Mechanism of cell injury and the macroscopic and microscopic features of reversible & irreversible cell injury
- b. Definition and types of necrosis and characteristics of each type of necrosis with examples
- c. Apoptosis - definition, examples, its mechanism, morphological changes and its difference from necrosis
- d. Definition of gangrene - different types with morphology and examples
- e. Adaptations –
 1. Definitions of Hyperplasia, Hypertrophy, Atrophy, Metaplasia, Dysplasia, Hypoplasia with examples.
 2. Differences between - Hypertrophy and Hyperplasia, Atrophy and Hypoplasia
- f. Calcification – Types and Importance
- g. Basics of Cellular Ageing

C. Inflammation & Repair

- a. Acute Inflammation
 - i. Definition of acute inflammation and its causes
 - ii. Vascular phenomenon of inflammation Cellular phenomenon - chemotaxis, phagocytosis and formation of exudates
 - iii. Chemical mediators of inflammation - list, histamine, complement, arachidonic acid metabolites, brief mention of coagulation cascade
 - iv. Morphological types of acute inflammation with examples
 - v. Clinical & hematological manifestations and outcome of acute inflammation
- b. Chronic inflammation –
 - i. Definition, examples, morphology, cells of chronic inflammation with emphasis on epithelioid cells & giant cells
 - ii. Granuloma- definition pathogenesis & description of a granuloma with special emphasis on tuberculous granuloma Other types of granuloma - Syphilis, Sarcoidosis and Leprosy
 - iii. Giant cells - different types, morphology & examples
- c. Tissue repair, regeneration and fibrosis –
 - i. Cell cycle and different types of cells
 - ii. Normal cell growth and Regeneration - role of growth factors and extracellular matrix
 - iii. Repair - role of collagen, formation and morphology of granulation tissue, angiogenesis and fibrosis
 - iv. Wound healing - first and second intention
 - v. Factors affecting wound healing
 - vi. Complications of wound healing
 - vii. Healing in bone and specialized tissue
 - viii. Disorders of Growth - Mechanisms of Causation - Hyperplasia, Hypertrophy, Atrophy, Metaplasia, Dysplasia, Hypoplasia.

D. Hemodynamic disorders, thrombosis and shock

- a. Hyperemia and congestion - definition and morphology
- b. Normal hemostasis - mechanism and pathways

- c. Thrombosis - definition, pathogenesis, causes, morphology and fate - Differences between Thrombophlebitis and Phlebothrombosis - Differences between Antemortem Thrombus and Postmortem Clot,
- d. Embolism & Infarction: definition, types, pathogenesis with examples
- e. Oedema - definition, types, pathogenesis with examples
- f. Differences between Transudate and Exudate
- g. Shock: definition, types, pathogenesis, clinical manifestations and examples
- E. Neoplasia**
 - a. Definition (Willis'), Classification and Nomenclature
 - b. Characteristics of a malignant neoplasm
 - c. Differences between - Benign and Malignant neoplasm, Carcinoma and Sarcoma
 - d. Spread of a malignant tumor - Routes with example, Mechanisms of spread
 - e. Metastasis – Definition, Mechanisms and Significance
 - f. Carcinogenesis - what is a carcinogen? Why carcinogenesis is a genetic event? Different types of carcinogens and their mechanism of action – Physical, Chemical & Biological Carcinogenesis.
 - g. Molecular biology and genetics of carcinogenesis
 - h. Immunology of Tumors
 - i. Systemic changes due to neoplasia - paraneoplastic syndrome
 - j. Clinical Features of Neoplasia
 - k. Diagnosis of Neoplasia
- F. Genetics and chromosomal disorders –**
 - a. DNA structure,
 - b. Mutations - definition, types, pathogenesis with examples
 - c. Mendelian disorders - definition, types, pathogenesis with examples
 - d. Chromosomal structural alterations, karyotypic and cytogenetic disorders - definition, types, pathogenesis with examples
 - e. Diagnosis of genetic diseases – Specific references to PCR, FISH, Recombinant DNA Technology and Human Genome Project
- G. Immune diseases**
 - a. Hypersensitivity reactions,
 - b. Graft rejection
 - c. Autoimmune disorders - mechanism, SLE, Rheumatoid arthritis
 - d. Immunodeficiency Disorders – Classification & Etiopathogenesis
 - e. An Overview of AIDS - pathophysiology, clinical manifestations, diagnosis,
 - f. An Overview of Amyloidosis - pathophysiology, clinical manifestations, diagnosis
- H. Environmental pathology** — definition, types, pathogenesis with examples with specific reference to Tobacco, Alcohol, Pneumoconiosis and Radiation
- I. Infectious diseases:**
 - a. General Host Factors, Immunology, Toxicity of Organisms
 - b. Mycobacterial diseases: tuberculosis and leprosy
 - c. Bacterial diseases: pyogenic, typhoid, diphtheria, gram -ve infections, bacillary dysentery, syphilis
 - d. Viral: polio, herpes, rabies, measles, rickettsial, chlamydial infections
 - e. Fungal disease and opportunistic infections
 - f. Parasitic diseases: malaria, filaria, amoebiasis, kala azar, cysticercosis, hydatid
 - g. AIDS: etiology, modes of transmission, pathogenesis, pathology, complications, diagnostic procedures and handling of infected materials and health education
 - h. Prions Diseases – Classification, pathobiology, clinical manifestations, diagnosis
- J. Nutritional Disorders**
 - a. Protein Energy Malnutrition – Marasmus, Kwashiorkor
 - b. Vitamin Deficiency Disorders
 - c. Obesity
 - d. Rare Metal Deficiencies

K. Metabolic disorders

- a. Jaundice - definition, bilirubin metabolism, classification, lab. Diagnosis,
- b. Diabetes Mellitus - Definition, Classification, Physiology of insulin metabolism, Pathophysiology, Complications, Diagnosis
- c. Gout - definition, classification, pathophysiology, diagnosis
- d. Storage disorders
 - i. Classification of storage diseases
 - ii. Familial hypercholesterolemia,
 - iii. Lysosomal & Glycogen storage Disorders

L. Hematology:

- a. Physiology of Normal Marrow, Ferrokinetics and Erythropoiesis,
- b. Red Cell disorders -
 - i. Definition,
 - ii. Classification of anemia - Morphological & Etiological
 - iii. Iron deficiency anemia - causes, pathogenesis, clinical manifestations and lab diagnosis
 - iv. Megaloblastic anemia - causes, pathogenesis, clinical manifestations and lab diagnosis
 - v. Aplastic anemia - causes, pathogenesis, clinical manifestations and lab diagnosis
 - vi. Hemolytic anemia - causes, pathogenesis, clinical manifestations and lab diagnosis including childhood, inherited, immune and microangiopathic hemolytic disorders
 - vii. Thalassemia- types, pathogenesis, genetics, clinical features, lab diagnosis
 - viii. Structural hemoglobinopathies - Sickle cell disease, G6PD deficiency
 - ix. Other red cell disorders – polycythemia
- c. Leucocyte disorders –
 - i. Definition,
 - ii. Classification of Leukemia(FAB & WHO)
 - iii. Acute leukemia - causes, morphology, lab diagnosis
 - iv. Chronic leukemia - causes, morphology, lab diagnosis
 - v. Leukemoid reaction - types, morphology, differentiation from leukemia, lab diagnosis
 - vi. Myelodysplastic syndrome - definition, classification and morphology, lab diagnosis
 - vii. Benign disorders - leucocytosis, leucopenia etc. lab diagnosis
- d. Bleeding disorders –
 - i. Thrombocytopenia - causes, common types, approach for lab diagnosis
 - ii. ITP - causes, types, lab diagnosis
 - iii. Coagulation disorders - causes, approach for lab diagnosis
 - iv. Hemophilia - cause, types, lab diagnosis
 - v. DIC - causes, pathogenesis, features and lab diagnosis
- e. Other hematological diseases
 - i. Plasma cell disorders Hematological manifestations of some important diseases and lab diagnosis
- f. Blood groups and Blood Transfusion
 - i. Different blood groups and their Clinical significance
 - ii. Determination of blood groups
 - iii. Significance of reverse grouping and cross-matching
 - iv. Blood donation - collection, preservation, tests performed
 - v. Indications of Blood Transfusion
 - vi. Transfusion reactions – diagnosis
 - vii. Rational use of blood - including component therapy

M. Cardiovascular Pathology

- a. Atherosclerosis:-Definition, risk factors, etiopathogenesis, gross and microscopic description, complications and clinical correlation.

- b. Diseases of blood vessels: Hypertension:- Relate the mechanisms of the disease to the clinical course and sequelae. Develop an index of suspicion for vasculitides and aneurysms – overview of classification and morphology of vasculitides and aneurysms.
- c. Ischaemic heart disease:- Incidence, risk factors, Pathogenesis, morphological changes, clinical course, complications and investigations.
- d. Congenital heart disease:- Correlate the anatomical malformations of disorders to the clinical consequences of the disease.
- e. Rheumatic heart disease:- Incidence, etiopathogenesis, morbid anatomy, histopathology, lesions in the organs, clinical course and sequelae.
- f. Endocardial and pericardial diseases:- Infective endocarditis - Pathogenesis, morphology, differential diagnosis of cardiac vegetations, aetiology and basic morphology of different forms of pericarditis.
- g. Cardiomyopathies:- Recognize the disorders as part of differential diagnosis in primary myocardial diseases.
- h. Pericardial Diseases – Pericarditis
- i. Tumours of Heart – Classification & Morphology

N. Respiratory Pathology

- a. Structure of bronchial tree and alveolar walls, normal and altered.
- b. Inflammatory diseases of bronchi: chronic bronchitis, bronchiectasis Pneumonias:- Aetiology, classification, gross, histopathological description in different forms and complications.
- c. Lung Abscess and Bronchiectasis:- Etiopathogenesis, morphological appearances and complications.
- d. Chronic Bronchitis and Emphysema:- Pathogenesis, types of emphysema, definition of chronic bronchitis, morbid anatomy and cardiac sequelae.
- e. Occupational lung diseases:- Types, etiopathogenesis, gross anatomical differences between different forms and sequelae.
- f. Interstitial Lung Diseases:- Classification, Etiopathogenesis, morphological appearances and complications
- g. Pulmonary Vascular Disorders:- Classification, Etiopathogenesis, morphological appearances and complications
- h. Tumours of lung and pleura:- Classification, aetiology, gross appearances, histological description of important forms, natural history, pattern of spread,
- i. Para neoplastic syndromes and secondary pathology.

O. Gastro Intestinal Pathology:

- a. Lesions of oral cavity and salivary glands:- Differential diagnosis of swelling of salivary glands, oral cancer - etiopathogenesis, gross and histopathological descriptions.
- b. Pathology of Oesophagus: Barretts esophagus, Etiopathogenesis, morphological features of carcinoma oesophagus.
- c. Pathology of Stomach: Gastritis and Peptic Ulcer - Definition of peptic ulcer, etiological factors, gross and microscopic appearances and sequelae. Overview of aetiology and types of gastritis. Tumours: Classification and morbid anatomy and histopathology of gastric carcinomas; Lymphomas - etiological factors, gross and microscopic appearances
- d. Pathology of Intestine:
 - i. Malabsorption Syndrome, Ulcers of Intestines:- Etiological classifications, Morphological appearances of typhoid, tubercular, amoebic ulcers and bacillary dysentery. Differential diagnosis of different forms of ulcers.
 - ii. Idiopathic Inflammatory Bowel disease:- Enumerate similarities and differences between the two component disorders viz., Crohn's disease and ulcerative colitis.
 - iii. Tumours of upper GIT:- Overview of carcinoid tumours of GIT. Tumours of lower GIT:- Pathology of carcinoma colon. Intestinal polyps & GI stromal tumours. GI Lymphomas – Classification, etiological factors, gross and microscopic appearances
- e. Pathology of Liver: Viral Hepatitis:- Aetiology, clinical source and enzymology, salient histological features and sequelae. Alcoholic liver disease:- Pathogenesis, morphological manifestations and

correlation with clinical features. Cirrhosis:- Classification, Etiopathogenesis, Morphology and Differential diagnosis. Tumours of liver, Etiopathogenesis and Pathology of Hepatocellular carcinoma.

f. Pathology of Pancreas and gall bladder:-

- i. Pancreatitis – etiopathogenesis and Pathology; Tumours of Pancreas and gall bladder - etiopathogenesis and Pathology; Diabetes mellitus:- Classification, pathogenesis of system involvement, sequelae and complications.
- ii. Gall Bladder – Cholecystitis – Clinical features and morphology; Gall stones – Classification and etiopathogenesis

P. Diseases of Kidney:

- a. Acute nephritis and rapidly progressive GN:- Understand and integrate clinical and pathologic features of these syndromes.
- b. Nephrotic syndrome:- Integrate clinical and pathological features of this disorder.
- c. Special Causes of Renal Diseases – SLE, Amyloidosis, Diabetes Melitus, Hypertension, Hypercalcemia & Hyperparathyroidism,
- d. Renal failure:- Definitions, criteria, aetiology, systemic manifestations and investigations. Etiopathogenesis & Morphology of Acute Tubular Necrosis, Acute and Chronic Renal Failure, Acute and Chronic Glomerulonephritis.
- e. Obstructive Uropathy: Etiopathogenesis & Morphological Changes
- f. Renal Stones: Etiopathogenesis & Morphology
- g. Pyelonephritis and interstitial Nephritis:- Aetiology, Pathogenesis of Pyelonephritis acute and chronic morphological features and clinical correlation.
- h. Acute Papillary Necrosis: Etiopathogenesis & Morphology
- i. Tumours of kidney and Pelvis:- Classification, Morphological features, clinical course including Para neoplastic syndromes of common tumours.

Q. Pathology of Male Genital Tract:

- a. Benign Adenomyomatous Hyperplasia of Prostate: Etiopathogenesis & Morphology
- b. Tumours of testis and Prostate:- Classification, salient morphological features of most common tumours and clinical course.
- c. Pathology of Intertility

R. Pathology of Female Genital Tract:

- a. Adenomyosis and Endometriosis: Etiopathogenesis & Morphology
- b. Female Infertility: Etiopathogenesis & Morphology
- c. Disorders of Endometrial Morphology and Menstrual Cycle - Etiopathogenesis & Morphology
- d. Tumours of Cervix and Uterus:- Etiopathogenesis, salient morphological features, dysplasia and role of cytological screening.
- e. Tumours of Ovary and Trophoblastic tissue:- Classification and morphological description of important types.

S. Pathology of Breast:

- a. Non-neoplastic and Neoplastic lesions of the breast:- Classification, morphological features and grading of carcinoma breast and differential diagnosis of breast swellings. Prognostic factors in Breast Cancers

T. Pathology of Lymphoreticular System:

- a. Non-neoplastic lesions of lymph nodes and Spleen:- Aetiology, differential diagnosis, morphological features of common causes of lymphadenopathy, common causes and appearances of splenomegaly.
- b. Hodgkin's Lymphoma:- Definition, classification, salient diagnostic features and clinical course.
- c. Non-Hodgkin's Lymphoma:- Definition, classification, salient diagnostic features and clinical Correlation.
- d. Extra nodal lymphomas.

U. Pathology of Skin and Soft Tissue –

- a. Bullous Lesions of Skin: Classification and morphological features

- b. Pigmented Lesions of Skin: Classification and morphological features
- c. Maculopapular Lesions of Skin: Classification and morphological features with specific reference to Psoriasis, Lichen Planus
- d. Precancerous Lesions of Skin: Classification and morphological features
- e. Tumours of skin Non-pigmented:- Classification, morphological features of most common types and natural history.
- f. Tumours of skin - Pigmented:- Classification, morphological features of common naevi, natural history of malignant melanoma.
- g. Soft tissue tumours:- Classification, morphological features of lipomatous, fibrous and blood vessel tumours. Morphological features of neural, muscle and fibrohistiocytic tumours.

V. Bone & Joints

- a. Non-neoplastic lesions of bone and joints:- Etiopathogenesis and morphological changes of common arthritis and osteomyelitis.
- b. Metabolism of Calcium and Bone: Disorders of Metabolism, Classification and morphological features.
- c. Tumour Like Lesions of Bone: Fibrous Dysplasia and Pagets Disease – Etiopathogenesis and morphological features
- d. Tumours of bone, cartilage and joints:- Classification, radiological and pathological features of important bone tumours (Osteosarcoma, Osteochondroma, GCT and Ewing's sarcoma).

W. Central Nervous System, Peripheral Nervous System & Muscle:

- a. Inflammatory and neoplastic conditions of CNS:- Etiopathogenesis, Pathobiology, Morphological features and differential diagnosis of meningitis. Etiopathogenesis, Pathobiology, Morphological features and differential diagnosis of Encephalitis.
- b. Role of CSF in diagnosis of CNS diseases
- c. Classification, morphological features of important CNS tumours, clinical course and sequelae (Meningioma and Gliomas).
- d. Myopathies:- Differential diagnosis of common muscle disorders.

X. Endocrinology

- a. Lesions of Thyroid:- Differential diagnosis of thyroid nodule. Differential diagnosis of diffuse thyroid enlargements, Differential diagnosis of Thyroid function abnormalities – hypo and hyper thyroidism, Thyroiditis – etiopathogenesis, pathology, classification and complications, Thyroid Tumours – Classification, etiopathogenesis, pathology, diagnosis and prognosis.
- b. Lesions of Adrenal:- Differential diagnosis of adrenal nodule. Differential diagnosis of diffuse adrenal enlargements, Differential diagnosis of adrenal function abnormalities cortical/ medullary – Hyper/Hypo functioning, Adrenalitis – etiopathogenesis, pathology, classification and complications, Adrenal Tumours – Classification, etiopathogenesis, pathology and diagnosis with specific reference to Pheochromocytoma.
- c. Lesions of Pituitary :- Differential diagnosis of pituitary function abnormalities – hypo and hyper, Pituitary Tumours – Classification, etiopathogenesis, pathology, diagnosis and prognosis. Multiple Endocrine Neoplasia - Classification, etiopathogenesis, pathology, diagnosis

Y. Perinatal and Pediatric Pathology

- a. Developmental Disorders:- Differential diagnosis of IUGR / Small for Gestational Age Foetus; Differential diagnosis of Still Birth, Differential diagnosis of Neonatal Death, Differential diagnosis of Neonatal Jaundice, Differential diagnosis of Sudden Infant Death / SIDS; Differential diagnosis of Neonatal Septicemia, Differential diagnosis of Neonatal Anemia, Differential diagnosis of Neonatal Convulsions.
- b. Hyaline Membrane Disease – etiopathogenesis, pathology and complications.
- c. Cystic Fibrosis – Etiopathogenesis, pathology, diagnosis and prognosis.
- d. Hemolytic Disease of New Born: Etiopathogenesis, pathology, and complications
- e. Pediatric Tumours – Classification, etiopathogenesis, pathology and diagnosis with specific reference to Wilms Tumour, Neuroblastoma, Retinoblastoma, Embryonal Rhabdomyosarcoma and Ewings Sarcoma.

- f. Lesions of Pituitary :- Differential diagnosis of pituitary function abnormalities – hypo and hyper, Pituitary Tumours – Classification, etiopathogenesis, pathology, diagnosis and prognosis. Multiple Endocrine Neoplasia - Classification, etiopathogenesis, pathology, diagnosis
- Z. Developments in Pathology:** Recent Trends in Pathology with specific reference to
 - a. Immunocyto/histochemistry
 - b. Immunofluorescence
 - c. Flowcytometry
 - d. Image Analysis & Digital Morphometry
 - e. DNA Microarray Technology and Laser MicroDissection
 - f. Computers and Automation, Telepathology & Virtual Pathology

IV. PRACTICAL SYLLABUS

The Clinical Pathology Teaching is to be done as [a] Bed Side and Hospital Lab based demonstrations and evaluation sessions. [b] Departmental practical classes of 2 hours duration each. The Clinical Pathology classes shall be drawn from the time allotted in the first clinical year – clinical posting schedules.

The procedures to be demonstrated and practiced are:-

A] Clinical Pathology – Blood

1. Anticoagulants and their use - practice
2. Drawing of blood, Preparation of Smears and Staining of Smears – practice
3. Using the microscope - practice
4. Differential Leucocyte Count of Blood Smears– practice
5. Reporting of Peripheral Smear - practice
6. Hemoglobin estimation by acid hematin method – practice
7. Blood grouping – ABO & Rh – practice
8. ESR by Westergreen pipette – demonstration
9. Total count of WBC, RBC and Platelets by Neubauer chamber – demonstration
10. Hemoglobin estimation by Drabkin's method – demonstration
11. PCV by Wintrobe's tube – demonstration
12. Bleeding time, Clotting time, Prothrombin time, APTT – demonstration
13. Osmotic Fragility Test, Coombs Tests and Sickle Test - demonstration
14. Use of Automated Cell Counters and Coagulations Analysers - demonstration
15. Reporting Peripheral Blood and Bone marrow – typical stained slides to be provided (**List Appended - Table 2A**)

B] Clinical Pathology – Urine and Body Fluids

1. Urine – assessment of the physical characters, To measure specific gravity and pH– practice
2. Urine – chemical tests for Protein, Reducing substances, blood, bile salts, bile pigments and Ketone bodies- practice
3. Use of different stix and their interpretation - demonstration
4. Microscopic examination of urine – practice
5. Automated Urine Analysis - demonstration
6. CSF – demonstration of cell type in a normal CSF sample and a case of pyogenic meningitis
Preservation and Preparation of smears
7. Ascitic and Pleural Fluids - demonstration of cell types, Preservation and Preparation of smears
8. Semen Analysis - demonstration of cell types, Preservation and Procedures

C] Histopathology & Cytopathology

1. Preservation and Transport of Specimens - demonstration
2. Laboratory Techniques in Histopathology - demonstration
3. Laboratory Techniques in Cytopathology - FNAC, Pap Smears, Fluid Cytology– demonstration
4. H & E staining and other special staining – demonstration
5. Demonstration of Histopathology slides – along with tutorial classes in systemic pathology– typical stained slides to be provided (**List Appended - Table 1**)
6. Demonstration of Cytology slides – along with tutorial classes in systemic pathology – typical stained slides to be provided (**List Appended - Table 2A**)
7. Demonstration of Gross Specimens – along with tutorial classes in systemic pathology – typical specimens to be provided (**List Appended - Table 2B**)

List of Slides and Specimens for Histopathology, Cytology, hematology and Gross Specimens have been appended herewith. The list is only a guideline of the minimal requirements.

Table 1 HISTOPATHOLOGY SLIDES

NO	DIAGNOSIS	NO	DIAGNOSIS
1	FATTY CHANGE LIVER	30	AMOEBIC COLITIS
2	LEIOMYOMA WITH HYALINE DEGENERATION	31	ILEUM - TYPHOID ULCER
3	KIDNEY – AMYLOID	32	STOMACH - CHRONIC PEPTIC ULCER
4	LYMPH NODE - CASEOUS NECROSIS	33	LIVER – HCC
5	KIDNEY - INFARCT (COAGULATION NECROSIS)	34	LIVER- CIRRHOSIS
6	ACUTE ULCERATIVE APPENDICITIS	35	CRESCENTIC GLOMERULONEPHRITIS
7	PYOGENIC MENINGITIS	36	CHRONIC GLOMERULONEPHRITIS
8	LEPROMATOUS LEPROSY – SKIN	37	KIDNEY - CHRONIC PYELONEPHRITIS
9	TUBERCULOID LEPROSY – SKIN	38	KIDNEY - RCC
10	ACTINOMYCOSIS ABSCESS	39	KIDNEY – WILMS TUMOUR
11	GRANULATION TISSUE	40	UTERUS - LEIOMYOMA
12	TUBERCULOUS LYMPHADENITIS	41	UTERUS – ADENOMYOSIS
13	LUNG – CVC	42	BENIGN PROSTATIC HYPERPLASIA
14	LIVER - CVC	43	TESTIS – SEMINOMA
15	SPLEEN –CVC	44	PRODUCTS OF CONCEPTION
16	ARTERY – RECENT / ORGANISED THROMBUS	45	HODGKIN'S LYMPHOMA
17	SKIN - PAPILLOMA	46	BRAIN - MENINGIOMA
18	SQUAMOUS CELL CARCINOMA	47	BONE - OSTEOGENIC SARCOMA
19	ADENOCARCINOMA - COLON	48	BONE - CHONDROMA
20	LYMPH NODE – METASTASIS	49	BONE – OSTEOCLASTOMA
21	SKIN – CAPILLARY HAEMANGIOMA	50	SKIN - MELANOMA AND NEVUS
22	CAVERNOUS HAEMANGIOMA	51	BREAST – FIBROADENOMA
23	BENIGN CYSTIC TERATOMA (DERMOID CYST)	52	BREAST - CARCINOMA
24	HASHIMOTO'S THYROIDITIS	53	THYROID - COLLOID GOITRE
25	HEART - RHEUMATIC MYOCARDITIS	54	THYROID - PAPILLARY CARCINOMA
26	HEART - HEALED INFARCT	55	SKIN - BASAL CELL CARCINOMA
27	AORTA – ATHEROSCLEROSIS	56	SOFT TISSUE - SCHWANNOMA
28	LUNG – BRONCHIECTASIS	57	SOFT TISSUE – NEUROFIBROMA
29	LUNG - FIBROCASEOUS TUBERCULOSIS	58	SOFT TISSUE - LIPOSARCOMA

Table 2A: HEMATOLOGY & CYTOLOGY SLIDES

NO	DIAGNOSIS	NO	DIAGNOSIS
1	ACUTE MYELOBLASTIC LEUKAEMIA (AML)	12	FNAC BREAST - FIBROADENOMA
2	ACUTE LYMPHOBLASTIC LEUKEMIA (ALL)	13	FNAC BREAST – DUCTAL CARCINOMA
3	CHRONIC MYELOID LEUKEMIA (CML – CHRONIC PHASE)		FNAC LYMPHNODE – GRANULOMATOUS LYMPHADENITIS
4	CHRONIC LYMPHOCYTIC LEUKEMIA (CLL)	14	FNAC LYMPHNODE –METASTATIC DEPOSIT
5	NEUTROPHILLIA	15	FNAC THYROID – COLLOID GOITRE
6	EOSINOPHILIA	16	FNAC THYROID – PAPILLARY CARCINOMA
7	LYMPHOCYTOSIS	17	FNAC SOFT TISSUE – LIPOMATOUS LESION
8	IRON DEFICIENCY ANAEMIA	18	ASCITIC FLUID – POSITIVE FOR MALIGNANCY - ADENOCARCINOMA
9	MACROCYTIC ANAEMIA	19	PAP SMEAR – PREGNANCY SMEAR
10	SMEAR WITH MICROFILARIA/PLASMODIUM	20	PAP SMEAR – ESTROGENIC SMEAR
11	PLASMA CELL MYELOMA - MARROW	21	PAP SMEAR – ATROPHIC SMEAR

Table 2B: GROSS SPECIMENS

DIAGNOSIS	DIAGNOSIS	DIAGNOSIS
GP: AMYLOIDOSIS KIDNEY/ SPLEEN	GIT: AMOEBIC COLITIS	CARCINOMA LARYNX
GP: INFARCT KIDNEY	GIT: POLYPS	MAXILLARYTUMOURS
GP: FATTY CHANGE LIVER	GIT: ADENOCARCINOMA – COLON	MANDIBULAR TUMOURS
GP: DRY GANGRENE FOOT	GIT: ILEUM - TYPHOID ULCER	THYROID – ADENOMA
GP: WET GANGRENE	GIT: AMOEBIC LIVER ABSCESS	HASHIMOTO'S THYROIDITIS
GP: INFARCT SPLEEN / INTESTINE	GIT: LIVER ACUTE DIFFUSE NECROSIS	MULTINODULAR GOITRE
GP: CASEAOUS NECROSIS	GIT: CIRRHOSIS	PAPILLARY CARCINOMA
GP: CHRONIC INFLAMMATION	GIT: HEPATOMA	MEDULLARY CARCINOMA
GP: ACUTE APPENDICITIS	GIT: LIVER METASTASIS	BONE: OSTEOGENIC SARCOMA
GP: ABSCESS KIDNEY / LIVER	GIT: INTESTINE GANGRENE	BONE: EWINGS SARCOMA
GP: MYCETOMA - FOOT	GIT: OESOPHAGUS CARCINOMA	BONE: CHRONIC OSTEOMYELITIS
GP: LIVER – CVC	GIT: CHRONIC GASTRIC ULCER	BONE: OSTEOCLASTOMA
CVS: AORTA – ATHEROMA	GIT: STOMACH – CARCINOMA	CNS: ABSCESS
CVS: ATHEROMA & CALCIFICATION	GIT: INTESTINE - ULCER	CNS: MENINGIOMA / GLIOMA
CVS: THROMBUS - ARTERY / VEIN	GIT: STRICTURE INTESTINE	CNS: HAEMORRHAGE / CVA
CVS: RHEUMATIC CARDITIS	GUT: WILM'S TUMOUR	L/RET: TB LYMPHADENITIS
CVS: VENTRICULAR HYPERTROPHY	GUT: CARCINOMA - URINARY BLADDER	L/RET: LYMPHOMA
CVS: PERICARDITIS	GUT: SCC - PENIS	L/RET: SPLEEN - INFARCT
CVS: MITRAL STENOSIS	GUT: SEMINOMA - TESTIS	SKIN – MALIGNANT MELANOMA
CVS: AORTIC STENOSIS	GUT: TERATOMA TESTIS	SST: PAPILLOMA SKIN
CVS: BACTERIAL ENDOCARDITIS	GUT: BENIGN PROSTATIC HYPERTROPHY	SST: SQUAMOUS CELL CA
CVS: SYPHILITIC AORTITIS	GUT: POST PARTUM UTERUS	SST: BASAL CELL CA
CVS: HEART - HEALED INFARCT	GUT: UTERUS- LEIOMYOMA	SST: LIPOMA
RS: LUNG - MILIARY TB	GUT: ADENOMYOSIS	BREAST – FIBROCYSTIC DISEASE
RS: FIBROCASEOUS TB	GUT: ENDOMETRIAL POLYP	BREAST - FIBROADENOMA
RS: LOBAR / BRONCHOPNEUMONIA	GUT: CERVICAL POLYP	BREAST – DUCTAL CARCINOMA
RS: BRONCHOGENIC CARCINOMA	GUT: CARCINOMA CERVIX	BREAST – MEDULLARY CA
RS: LUNG – ABSCESS	GUT: CYSTADENOCARCINOMA OVARY	BREAST – PHYLLODES TUMOUR
RS: FIBROCASEOUS TB	GUT: TERATOMA OVARY	
RS: LUNG - CVC	GUT: ACUTE PYELONEPHRITIS	
RS: METASTASIS - LUNG	GUT: SHRUNKEN GRANULAR KIDNEY	
	GUT: FLEA BITTEN KIDNEY	
	GUT: KIDNEY STONES	
	GUT: RENAL CELL CARCINOMA KIDNEY	

V. REFERENCED LEARNING

Text Books:

- a) Robbins Pathological Basis of Disease – Kumar, Abbas & Fausto VIII Ed
- b) Text book of Pathology by Harsh Mohan
- c) Degruchi's Text Book of Haematology

Reference Books:

- a) Anderson's text book of Pathology Vol I & II
- b) Oxford text book of Pathology Vol. I, II & III
- c) Pathology by Rubin and Farber

VI. PRACTICAL EXAMINATIONS

II MBBS UNIVERSITY PRACTICAL EXAMINATIONS IN PATHOLOGY PATTERN AS COMMUNICATED BY THE UNIVERSITY VIDE REFERENCE:ACAD-1(1)/10763/2010 DATED 3.9.2010				
No	Name of Test Session	No of Cases	Time	MAX Marks
I	<u>CLINICAL INTERPRETATION SKILLS</u> A detailed clinical history with lab reports of histopathology, cytology, hematology and / or autopsy to given and discussed.	2	40 mts	20
II	<u>SPOTTERS:</u> 10 cases (6 Histopathology slides, 4 specimens) will be given with a pertinent question regarding the case to answer	10	20 mts	20
III	<u>HISTOPATHOLOGY & CYTOLOGY:</u> 6cases (3 Histopathology + 3 Cytology Slides) detailed history should be given and student asked to write a description and diagnosis.	6	30 mts	12
IV	<u>HEMATOLOGY:</u> 4 Slides & detailed history should be given and student asked to write a description and diagnosis	4	20mts	8
V	<u>GROSSING OF SPECIMENS:</u> 5 cases and detailed history should be given and student asked to write a description and impression	5	10 mts	10
VI	<u>CLINICAL PATHOLOGY—URINE:</u> A sample of urine and a brief history should be given and student asked to note the physical and find one abnormal chemical constituent and discuss.	1	30 mts	10
VII	<u>CLINICAL PATHOLOGY—BLOOD:</u> A sample of blood and smear study with a brief history should be given and student asked to do a DC and Hemoglobin Estimation and discuss.	2	30 mts	20

VI. VIVA & OSPE EXAMINATIONS

No	Session	Time per station	Marks
1	Viva Voce – 2 stations of 1 Internal & 1 External examiner of 25 marks each	5mts	50marks
2	OSPE – 2 stations of 1 Internal & 1 External with 5 skills each	5mts	50marks

**THE TAMIL NADU Dr.M.G.R.MEDICAL UNIVERSITY
CHENNAI - 600 032.**

**SECOND M.B.B.S. DEGREE COURSE
REVISED (NON-SEMESTER) REGULATIONS - 2005**

CONTENTS

SL.No.	Description	Pg.No.
1.	Short Title and Commencement	04
2.	General Considerations & Teaching Approach	04
3.	Course of Study	06
4.	Curriculum	07
5.	Medium of Instruction	07
6.	Submission of Laboratory Record Note Books	08
7.	Working days in an academic year	08
8.	Internal Assessment	08
9.	Attendance required for admission to examination	09
10.	Regulations for condonation of lack of attendance	10
11.	“University Examinations”	10
	(1) Commencement of Examination	10
	(2) Timing of Examination	10
	(3) Exemption in passed subjects	10
	(4) Carryover of failed subjects	10
12.	Revaluation of Answer Papers	11
13.	Re-admission after break of study	11
14.	Migration / Transfer of candidates	11

:2:

SL.No.	Description	Pg.No.
15.	Curriculum – Syllabus for	
	i) Pathology	15
	ii) Microbiology	31
	iii) Pharmacology	42
	iv) Forensic Medicine	50
16.	Pattern of Examinations	
	i) Pathology	29
	ii) Microbiology	39
	iii) Pharmacology	48
	iv) Forensic Medicine	53
17.	Marks qualifying for a Pass	
	i) Pathology	30
	ii) Microbiology	41
	iii) Pharmacology	49
	iv) Forensic Medicine	54
18.	Community Medicine	55
19.	(1) Annexure I [Regulations 14 (iii)]	13
	(2) Annexure II [Regulations 14 (iv)]	14

**THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
CHENNAI**

**REGULATIONS FOR THE BACHELOR OF MEDICINE AND
BACHELOR OF SURGERY DEGREE COURSE**

In exercise of the powers conferred by Section 44 of the Tamil Nadu Dr. M.G.R. Medical University, Chennai, Act, 1987 (Tamil Nadu Act 37 of 1987), the Standing Academic Board of the Tamil Nadu Dr. M.G.R. Medical University hereby makes the following regulations:

1. SHORT TITLE AND COMMENCEMENT

These regulations shall be called “REGULATIONS FOR THE SECOND M.B.B.S. DEGREE COURSE – 2005 (NON-SEMESTER) OF THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY, CHENNAI”.

These regulations are applicable to the students who are admitted to the First M.B.B.S. Degree course from the academic year 2005 - 2006 onwards and promoted to second M.B.B.S. Degree course.

The regulations framed are subject to modification as made by the Standing Academic Board from time to time.

2. GENERAL CONSIDERATIONS AND TEACHING APPROACH

1. Graduate medical curriculum is oriented towards training students to undertake the responsibilities of a physician of first contact who is capable of looking after the preventive, promotive, curative and rehabilitative aspects of medical care.
2. With a wide range of career opportunities available today a graduate has a wide choice of career opportunities. The training, though broad based and flexible, should aim at providing an educational experience of the essentials required for health care in our country.
3. To undertake the responsibilities of various service situations, it is essential to provide adequate placement training tailored to the needs of such services. To avail of opportunities and engage in professional activities the graduate shall endeavour to acquire basic training in different aspects of medical care.
4. The importance of community aspects of health care and of rural health care services is to be emphasized. This aspect of education and training of graduates should be adequately recognised in the prescribed curriculum. Adequate exposure to such experiences should be available throughout in all the three phases of graduate medical education and training. This has to be further intensified by providing exposure to field practice areas and training during the internship period. The aim of the period of rural training during internship is to enable the fresh graduates to function effectively under such settings.

5. The educational experience should emphasize health and community orientation instead of only disease and hospital orientation concepts of modern scientific medical education are to be adequately dealt with.
6. Enough experience must be provided for self learning. The methods and techniques that would ensure this must become a part of the teaching-learning process.
7. The medical graduate of modern scientific medicine shall endeavour to become capable of functioning independently in both urban and rural environment. He/She shall endeavour to master the fundamental aspects of the subjects taught and all common problems of health and disease avoiding unnecessary details of specialization.
8. The importance of social factors in relation to the problem of health and disease should receive proper emphasis throughout the course. To achieve this purpose the educational process should also be community based rather than only hospital based. The importance of population control and family welfare planning should be emphasized throughout the period of training with the importance of health and development duly emphasized.
9. Adequate emphasis is to be placed on cultivating logical and scientific habits of thought, clarity of expression and independence of judgement, ability to collect and analyse information and to correlate the facts.
10. The educational process should be placed in a historical background as an evolving process and not merely as an acquisition of a large number of disjointed facts without a proper perspective. The history of Medicine with reference to the evolution of medical knowledge both in this country and in the rest of the world should form a part of this process.
11. Lectures alone are generally not adequate as a method of training and a means of transferring information and even less effective at skill development and in generating the appropriate attitudes. Every effort should be made to encourage the use of active methods related to demonstration and first hand experience. Students shall be encouraged to learn in small groups through peer interactions so as to gain maximal experience through contact with patients and the communities in which the patients live. While the curriculum Objectives often refer to areas of knowledge of science, they are best taught in a setting of clinical relevance with hands on experience for the students to assimilate and make this knowledge a part of their own working skills.
12. The graduate medical education in clinical subjects should be based primarily on teaching in out-patient and emergency departments and within the community including should be suitably planned to provide training to graduates in small groups.
13. Clinics should be organized in small groups of preferably not more than 10 students so that a teacher can give personal attention to each student with a view to improving his skill and competence in handling of patients.
14. Proper records of the work should be maintained which will form a basis for the students internal assessment. They should be available to the inspectors at the time of inspection of the college by the Medical Council of India.

15. Maximal efforts have to be made to encourage integrated teaching between traditional subject areas using a problem based learning approach starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both understanding and resolving a problem. Every attempt must be made to avoid compartmentalization of disciplines so as to achieve both horizontal and vertical integration in different phases.
16. Every attempt is to be made to encourage students to participate in group discussions and seminars to enable them to develop personality, character, expression and other faculties which are necessary for a medical graduate to function either in solo practice or as a team member/leader when he begins his independent career. A discussion group should not have more than 20 students.
17. Faculty members should avail of modern educational technology while teaching the students. To attain this objective Medical Education Units/Departments should be established in all Medical colleges for faculty development and providing learning resource material to teachers.
18. To derive maximum advantage out of this revised curriculum the vacation period of students in one calendar year should not exceed one month during the 4 ½ years Bachelor of Medicine and Bachelor of Surgery (MBBS) Degree Course.

3. COURSE OF STUDY

(1) Every student shall undergo a period of certified study extending over 4 ½ academic years followed by one year of compulsory rotating internship. The First MBBS course shall commence in August of an academic year.

(2) The period of 4 ½ years is divided into three phases as follows:

(a) Phase-I (I MBBS) (One Year) consisting of Preclinical subjects (Human Anatomy, Physiology including Bio-Physics, Bio-Chemistry and introduction to Community Medicine including Humanities). Besides 60 hours for introduction to Community Medicine including Humanities, rest of the time shall be somewhat equally divided between Anatomy and Physiology Plus Bio-chemistry combined (Physiology 2/3 and Bio-Chemistry 1/3).

(b) Phase-II (II MBBS) (1 ½ years) consisting of Para clinical/clinical subjects.

During this phase teaching of Para-clinical subjects shall be done concurrently.

The Para-clinical subjects shall consist of Pathology, Pharmacology, Microbiology, Forensic Medicine including Toxicology and part of Community Medicine.

The clinical subjects shall consist of all those detailed below in Phase III.

Out of the time for Para-clinical teaching approximately equal time shall be allotted to Pathology, Pharmacology, Microbiology and Forensic Medicine and Community Medicine combined. (1/3 Forensic Medicine 2/3 Community Medicine).

- (c) Phase-III (III MBBS) (Two years) – Continuation of study of clinical subjects from Phase II.

The clinical subjects to be taught during Phase II and III are Medicine and its allied specialities, Surgery and its allied specialities, Obstetrics and Gynaecology and Community Medicine.

Besides clinical posting the rest of the teaching hours should be divided between didactic lectures, demonstrations, seminars, group discussions etc. in various subjects. The training in Medicine and its allied specialities will include General Medicine, Paediatrics, Tuberculosis and Chest, Skin and Sexually Transmitted Diseases, Psychiatry, Radio-diagnosis, Infectious diseases etc. The training in Surgery and its allied specialities will include General Surgery, Orthopaedic Surgery including Physiotherapy and Rehabilitation, Ophthalmology, Oto-Rhino-Laryngology. Anesthesia, Dentistry, Radio-therapy etc. The Obstetrics & Gynaecology training will include family medicine, family welfare planning etc.

- (3) The first year (approximately 240 teaching days) shall be occupied in the Phase I (Pre-clinical) subjects.

No student shall be permitted to join the Phase II (Paraclinical/clinical) group of subjects until he / she has passed in all the Phase I (Pre-clinical) subjects.

After passing pre-clinical subjects, 1 ½ years shall be devoted to para-clinical subjects. Phase II will be devoted to Para-clinical and clinical subjects, along with clinical postings. During clinical phase (Phase III) preclinical and para-clinical teaching shall be integrated into the teaching of clinical subjects wherever relevant.

4. CURRICULUM

The curriculum and the syllabi for the course shall be as specified in these Regulations.

5. MEDIUM OF INSTRUCTION

English shall be the medium of instruction for all the subjects of studies and for examinations.

6. SUBMISSION OF LABORATORY RECORD NOTE BOOKS

At the time of practical/clinical examination each candidate shall submit to the Examiners his/her laboratory note books duly certified by the Head of the Department as a bonafide record of the work done by the candidate.

The practical record shall be evaluated by the concerned Head of the Department (Internal Evaluation) and the practical record marks shall be submitted to the University 15 days prior to the commencement of the theory examinations.

The candidate may be permitted by the examiners to refer to the practical record book during the practical examination in the subject of Biochemistry only. No other materials, handwritten, cyclostyled or printed guides are allowed for reference during the practical examinations.

In respect of failed candidates, the marks awarded for records at previous examinations will be carried over to the next examinations. If a candidate desires, he/she may be permitted to improve his/her performance by submission of fresh records and the students should be informed of the same by suitable display.*

7. WORKING DAYS IN AN ACADEMIC YEAR

Each academic year shall consist of not less than 240 working days.

8. INTERNAL ASSESSMENT**

- a) The Internal Assessment Marks for those students who passed the I MBBS examination in August and entering the II MBBS in October, shall be sent at the end of January, June & December for 60 Marks (Theory – 30 Marks; Orals – 10 Marks and Practical – 20 Marks) and the aggregate of final Internal Assessment marks at the end of next January for 80 marks (Theory & Orals – 40 marks; Practical – 20 marks; Assignment – 10 marks & Record – 10 marks).

b) ARREAR BATCH ENTERING II MBBS IN APRIL:

The Internal Assessment Marks for those students who passed the I MBBS examination in February and entering the II MBBS in April, shall be sent at the end of July, December & June for 60 marks (Theory – 30 Marks; Orals – 10 Marks and Practical – 20 Marks) and the aggregate of final Internal Assessment marks at the end of next July for 80 marks (Theory & Orals – 40 marks; Practical – 20 marks; Assignment – 10 marks and Record – 10 marks).

*XXVII SAB dated 07-07-2004 /**30th SAB dated 28.12.2005 –w.e.f August 2006 Examination onwards

The aggregate of Final Internal Assessment Marks submitted at the end of January/July for 80 marks shall be taken by the University as Internal Assessment Marks & a minimum of 35% marks is mandatory for permitting the candidates to sit for the University examinations.

c) Internal Assessment Marks For Forensic Medicine *

The Internal Assessment for 30 marks (Theory – 15 + Oral - 5 & Practical 10 marks) shall be sent to the University once in six months. The final Internal Assessment including Record & Assignment (Theory & Practical 20 marks; Record & Assignment 10 marks) shall be sent to the University.

d) A failed candidate in any subject should be provided an opportunity to improve his/her internal assessment marks by conducting a minimum of two examinations in theory and practical separately and average be considered for improvement.

e) The internal assessment marks (both in written and practical taken together) should be submitted to the University endorsed by the Head of the institutions fifteen days prior to commencement of the theory examinations.

f) A candidate should obtain a Minimum of 35% of marks in internal assessment in a subject to be permitted to appear for the University examination in that subject** .

9. ATTENDANCE REQUIRED FOR ADMISSION TO EXAMINATION

- a) No candidate shall be permitted to any one of the parts of MBBS Examinations unless he/she has attended the course in the subject for the prescribed period in an affiliated institution recognised by this University and produces the necessary certificate of study, attendance and progress from the Head of the Institution.
- b) A candidate is required to put in minimum 80%* of attendance as per recent MCI Norms in both theory and practical/clinical separately in each subject before admission to the examination.
- c) A candidate lacking in the prescribed attendance in any one subject in the first appearance shall be denied admission to the entire examinations.
- d) Failed candidates who are not promoted to the next phase of study are required to put in minimum 80% attendance during the extended period of study before appearing for the next examination.
- e) Attendance earned by the student should be displayed on the Notice Board of the College at the end of every three months and a copy of the same should be sent to the University and parents of the students concerned.

*35th SAB dated 20/05/2008 with effect from August 2008 examinations onwards

** XXVII SAB held on 07.07.2004

10. REGULATIONS FOR CONDONATION OF LACK OF ATTENDANCE **::

Condonation of shortage of attendance upto a maximum of 5 % * in the prescribed minimum attendance for admission to an examination vests with the discretionary powers of the Vice-Chancellor. A candidate lacking in attendance should submit an application in the prescribed form and remit the stipulated fee 10 days prior to the commencement of the theory examination. The Head of the Department and Head of the Institution should satisfy themselves on the reasonableness of the candidates request while forwarding the application with their endorsement to the Controller of Examinations who would obtain the Vice-Chancellor's approval for admission to the examination. No application would be considered if it is not forwarded through proper channel.

Condonation for lack of attendance shall be taken up for consideration under the following circumstances:

- a) Any illness afflicting the candidate.(The candidate should submit through the Head of the Institution. Medical Certificate from a registered Medical Practitioner soon after he returns to the Institution after treatment). Any candidate going on leave on medical grounds should report to the University as well as to the college immediately within 3 weeks for record.
- b) Any unforeseen tragedy in the family. (The parent/guardian should give in writing the reason for the ward's absence to the Head of the Institution).
- c) Participation in NCC/NSS and other co-curricular activities representing the institution or University. (The Head of the Institution should instruct the concerned officers in-charge of the student activities in their institution to endorse the leave application).
- d) Any other leave the Head of the Institution deems reasonable for condonation.

11. UNIVERSITY EXAMINATIONS

(1) COMMENCEMENT OF EXAMINATIONS* :

- (a) August 1st / February 1st.

* 35TH SAB dated 20/05/2008/ ** with effect from August 2008 examinations onwards.

(b) Theory examinations not to be held on Saturdays and Sundays. If the date of commencement of the examination falls on a public holiday, the next working day will be the date of commencement of examination.

(2) TIMING OF EXAMINATIONS

- a) Phase – I: Professional examination : at the end of one academic year.
- b) Phase – II: Professional examination : at the end of 1 ½ years from the commencement of Phase II.
- c) Phase – III – Part-I examination : at the end of one year of Phase III.
- d) Phase – III – Part-II (Final Professional) examination : at the end of 2 years of Phase III.

(3) EXEMPTION IN PASSED SUBJECTS

Candidates who fail in an examination but obtain pass mark in any subject shall be exempted from re-examination in that subject.

(4) CARRY OVER OF FAILED SUBJECTS

- (a) Passing in First MBBS Professional examination is compulsory before proceeding to Phase II training.
- (b) A student who fails in the II MBBS professional examination shall be permitted to carry the failed subjects to Phase III of the MBBS course but shall not be allowed to appear in III MBBS Professional Part I examination unless he/she passes all the subjects of the II MBBS Professional examination. Passing in II MBBS Professional examination is compulsory before entering Part II of Phase III (final year) of the course.

* XXVII SAB dated 07.07.2004

© Passing in III MBBS Professional (Part 1) examination is not compulsory before entering for Part II training; however passing of III MBBS Professional (Part I) is compulsory for being eligible to appear for III – MBBS Professional (Part II) examination.

12. REVALUATION OF EXAMINATION ANSWER PAPERS**

There is no provision for revaluation of answer papers. However, retotalling is only allowed in the failed subjects.

13. RE-ADMISSION AFTER BREAK OF STUDY

A separate Regulation book is available for all the Under-graduate and Post-graduate courses of this University, which is covering for the candidates admitted from the academic year 2003-2004 onwards.

14. MIGRATION / TRANSFER OF CANDIDATES:

Migration of Students from one Medical College to another Medical College in India shall be granted only in exceptional cases to the most deserving among the applicants for good sufficient reasons and not on routine grounds. The number of students migrating to/from any one Medical College shall be kept to the minimum which shall in any case not exceed the limit of 5 % of its sanctioned intake in one academic year. There shall be no migration on any ground from one Medical College to another located in the same city.

(2) Migration of students from one college is permissible only if both colleges are recognized by the Central Government under Section 11(2) OF THE Indian Medical Council Act, 1956 and further subject to the condition that it shall not result in increase in the sanctioned intake capacity for the academic year concerned in the respective medical college.

(3) The applicant candidate shall be eligible to apply for migration only after qualifying in the first professional MBBS examination. Migration during clinical course of study shall not be allowed on any ground.

** Deleted 31st SAB dated:29.06.2006

Classification of successful candidates – deleted in 31st S.A.B. dt:29.06.2006.

(4) For the purpose of Migration, an applicant candidate shall first obtain 'No Objection Certificates' from the college where he is studying for the present, the University to which it is affiliated to, the college to which migration is sought and the University to which that college is affiliated to. He shall submit his application for migration within a period of one month of passing (declaration of results) of the first professional MBBS examination along with the said 'No Objection Certificates' to the Director, Medical Education of the State where the College/institutions including Deemed Universities to which migration is sought is situated or to the Head of the Institution in case migration is sought to a Central Government institution. The Director, Medical Education of the State concerned or the Head of the Central Government institution, as the case may be, shall take a final decision in the matter as to whether or not to allow migration in accordance with the provisions of these Regulations and communicate the same to the applicant student within a period of one month from the date of receipt of the request for migration.

(4) A student who has joined another college on migration shall be eligible to appear in the II professional MBBS examination only after attaining the minimum attendance in that college in the subjects, lectures, seminars etc. required for appearing in the examination prescribed under Regulation 12(1)

Note – 1: The State Governments/ Universities / Institutions may frame appropriate guidelines for grant of No Objection Certificate or migration, as the case may be, to the students subject to provisions of these regulations.

Note – 2: Any request for migration not covered under the provisions of these Regulations be referred to the Medical Council of India for consideration on individual merits by the Director (Medical Education) of the State or the Head of Central

Government Institution concerned. The decision taken by the Council on such requests shall be final.

Note - 3: The College /Institutions shall send intimation to the Medical Council of India about the number of students admitted by them on migration within one month of their joining. It shall be open to the Council to undertake verification of the compliance of the provisions of the regulations governing migration by the College at any point of time.”

5. In order to streamline the migration of II MBBS students from one Medical college to another Medical college, the University has proposed the following regulations for the Migration of II MBBS students:-

- 1) Both the Medical Colleges shall be institutions recognized by the Medical Council of India.
- 2) The applicant shall submit No Objection Certificate from the college where he/she is studying for the present and the transferee Medical College.
- 3) The candidate should have passed first professional MBBS examination.
- 4) The application for Migration, complete in all respects, should be submitted to all authorities concerned within a period of one month of passing the first professional MBBS examination.
- 5) Migration during clinical course of study will not be considered by the University.
- 6) Issue of N.O.C for all Migration/Transfers are subject to the approval of the Vice-Chancellor.

- 7) The candidate has to obtain and furnish a letter from the Dean of the transferee Medical college that the number of students migrating to/from the concerned Medical college has not exceeded the limit of 5% of its sanctioned intake in that particular academic year.
- 8) The candidates are not eligible for mutual transfer from one Medical College to another Medical College. The request for Mutual transfer shall be rejected summarily.
- 9) The following compassionate grounds shall be considered for the purpose of migration
 - a. Death of a supporting guardian.
 - b. Illness of the candidate causing disability.
 - c. Disturbed conditions declared by Government in the Medical College area.
 - d. Any other **EXTRA ORDINARY Reason** at the Discretion of the Governing Council Members of this University.
- 10) Candidate seeking transfer on personal grounds or without valid reasons will not be entertained.

II. M.B.B.S. MICROBIOLOGY PRESCRIBED TEACHING HOURS - 250 Hrs.

GOAL :

The broad goal of the teaching of undergraduate students in Microbiology is to provide an understanding of the natural history of infectious diseases in order to deal with the etiology, pathogenesis, laboratory diagnosis, treatment, control and prevention of infections in the community, immune system in health and disease.

OBJECTIVES :

A) Knowledge

At the end of the course, the student will be able to :

- 1) State the normal flora of the human body and describe the host parasite relationship.
- 2) List the pathogenic microorganisms (bacteria, viruses, parasites, fungi and describe the Pathogenesis of the disease produced by them.
- 3) State or indicate the modes of transmission of pathogenic and opportunistic Organisms and their sources including insect vectors responsible for transmission of infection.
- 4) Acquire basic knowledge of normal immune system, abnormalities, identification of conditions of immunological importance.
- 5) Describe the mechanisms of immunity to infections.
- 6) Acquire knowledge on suitable antimicrobial agents for treatment of infections and scope of immune – therapy and different vaccines available for prevention of communicable diseases.
- 7) Apply methods of disinfection and sterilization to control and prevent hospital and community acquired infections.
- 8) Recommend laboratory investigations regarding bacteriological examination of food, water, milk and air.
- 9) To acquire knowledge of safe handling and disposal of infectious waste.
- 10) Acquire basic knowledge of laboratory diagnosis, treatment, control and prevention of infections.
- 11) Acquire basic knowledge of microbial physiology and genetics.
- 12) Investigation of outbreaks including collection of samples.

B) SKILLS:

At the end of course, the student will be able to

- 1) operate and use the light compound microscope.

- 2) to employ aseptic and sterile precautions while performing simple invasive procedures such as venepuncture etc.
- 3) collect and transport appropriate clinical materials with necessary precautions for the laboratory diagnosis of infectious diseases.
- 4) to perform common laboratory techniques (as given below) for the direct demonstration of microorganisms from clinical materials and interpret their findings. These should include :-

- (a) Saline and iodine preparations and concentration methods for demonstration of trophozoites, Ova or cysts in stool samples.
- (b) Prepare and stain peripheral blood for screening malarial parasites and microfilariae.
- © Prepare a smear and perform Gram stain on body fluids, urine and pus specimens.
- (d) Prepare a smear and perform Ziehl – Neelsen stain for demonstration of mycobacteria especially from sputum.
 - Interpret results of microbiological tests including antimicrobial testing for the diagnosis of common infectious diseases.
 - Report and interpretation of serological tests for diagnosis of infectious diseases

C) INTEGRATION:

The student will be integrated with the knowledge of Microorganisms and their pathogenicity, host response, laboratory diagnosis and epidemiology, control of diseases in the community by proper immunization procedures.

SYLLABUS

General Microbiology, Immunology and Systemic Bacteriology

1. GENERAL MICROBIOLOGY

History and mile stone in microbiology

Scope of Medical Microbiology

Microscopy

Staining of bacteria

Bacterial morphology and classification

Nutrition and growth of bacteria

Culture media and cultivation of bacteria.

Identification of bacteria (and bacterial classification).

Bacterial genetics

Sterilisation & Disinfection

Antimicrobials and Chemotherapy & Antimicrobial Sensitivity Testing.

Normal Microbial flora

Microbial pathogenicity and immunity

II. IMMUNOLOGY

Host response (immunity)

Structures and functions of Immune system

Cells of immune system

Immune response/immunity

Antigen

Antibody

The complement system

Antigen antibody reactions

Molecular techniques in diagnostic microbiology

Hypersensitivity

Auto immunity

Histo compatibility complex
Transplantation immunity
Tumour immunity
Immuno deficiency diseases
Immuno hematology
Immunoprophylaxis against infectious diseases

III. SYSTEMATIC BACTERIOLOGY

Staphylococcus

Streptococcus

Neisseriac

Corynebacteria

Bacillus

Clostridium

Nonsporing anaerobes

Mycobacteria

Actinomycetes and Nocardia

Coliform Bacteria – Escherichia coli & Klebsiella

Proteus

Salmonella

Shigella

Yersinia

Pasteurella & Francisella

Hoemophilus

Bordetella

Brucella

Vibrio Cholerae

Helicobacter, Aeromonas, Pleisiomonas

Pseudomonas and other non-fermenters

Spirochaetes

Rickettsiae

Chlamydia

Mycoplasma

Miscellaneous bacteria

Virology, Mycology, Parasitology and Applied Microbiology

I. PARASITOLOGY

Introduction

Classification

General Principles of diagnosing parasitic infections and treatment of parasitic infections.

Protozoology

Rhizopoda- Pathogenic and non – pathogenic amoebae

Mastigophora – Intestinal, blood and tissue Mastigophora

Sporozoa – Plasmodium, Toxoplasma, Isospora

Ciliate – Balantidium coli

Opportunistic Protozoan parasites.

- Helminthology – Platyhelminths – Cestodes and Trematodes
- Nematelminths –Nematodes
- Medically important insect vectors and ectoparasites

VIROLOGY

A. GENERAL VIROLOGY

- Morphology of viruses
- Replication of viruses
- Cultivation of viruses
- Classification of viruses
- Assay of viruses
- Identification of viruses and Lab diagnosis
- Genetics of viruses
- Pathogenesis and Host response to viral infections
- Antiviral agents
- Bacteriophage

B. SYSTEMIC VIROLOGY

DNA VIRUSES

- Pox viruses
- Adeno
- Herpes
- Papova
- Parvo

RNA VIRUSES

- Picorna
- Orthomyxo
- Paramyxo

- Rota Viruses
- Rhabdo Viruses
- Hepatitis Viruses
- Arbo viruses
- Retro Viruses
- Slow Viruses / Prion
- Oncogenic Viruses
- Miscellaneous viruses
- Recent Advances – SARS, BIRD FLU

GENERAL MYCOLOGY

Economic importance and harmful effects of fungi – Mycotoxins

Classifications of fungi

Pathogenesis and Lab diagnosis of mycotic infections.

SYSTEMATIC MYCOLOGY

Superficial mycosis

Cutaneous mycoses

Sub cutaneous mycoses

Systemic mycoses

Opportunistic mycosis and common lab contaminants

Antifungal agents

APPLIED CLINICAL MICROBIOLOGY

Collection, transport and storage, disposal of specimens

Organ specific infections

Central nervous system infections

Respiratory infections – Upper / Lower

Urinary tract infections

Gastro intestinal infections – acute / chronic including food poisoning

Infections of bones and joints, & Dental Infections

Genital tract infections and congenital infections

Infections of the Eye, ear and skin

Infection of CVS

Systemic infections / Syndromes – PUO, Septicemias

Zoonotic infections

Environmental sanitation tests (food, water, milk and air)

Hospital infections (Prevention and control)

Basic molecular biology in relation to diagnosis of infectious diseases.

- Investigations of outbreak - As Community health officer - PHC level.
- Operation theatre sterility
- Hospital waste management
- Emerging & Re-emerging infections.

PRACTICALS

Staining – Smear preparation Grams stain

Special Stains – Acid fast staining, Ponders, and Capsule (Demon only) staining.

Demonstration of Hanging drop

Demonstration of culture media / methods

Demonstration of sterilization techniques

Applied Exercises

Systematic – Identification of the pathogen from the given clinical material based on Staining property, cultural characters, biochemical and serological tests.

Immunology – Interpretation of the given Immunological test, Agglutination – Slide, tube and Passive agglutination (Latex etc.)

Precipitation – VDRL

Gel diffusion

ELISA

Mycology – Identification of the given fungus by cultural morphology and wet mount preparation / staining.

Virology – ELISA

Haemagglutination and Haemagglutination inhibition

Parasitology – Stool examination for ova and cyst, Saline and iodine preparation, Direct and concentration techniques.

Blood smear for malarial parasite, Microfilaria and other parasite.

Identification and interpretation of the parasites (Adult and larval forms).

Demonstration of unconventional parasites by special staining methods.

EVALUATION**INTERNAL ASSESSMENT :****80 Marks ***

Theory	:	40 Marks
Practical	:	20 Marks
Record	:	10 Marks
Assignment	:	10 Marks]**

(Any one of the following is compulsory) @

- a) Symposium/Seminar
- b) Short project work
- c) Problem based learning
- d) Quiz on prescribed topics

Total : 80 Marks

UNIVERSITY EXAMINATION PATTERN**THEORY**

Two papers of 3 hours duration - 100 marks each.

Paper I – General Microbiology, Immunology & Systematic Bacteriology – 100marks

Paper II – Virology, Mycology, Parasitology & applied Microbiology – 100 marks

 *XXVII SAB dated 7.7.2004/ ** XXIX SAB dated 5.8.2005 – from August 2005 onwards
 @ XXVIII SAB dated 22.12.2004 from August 2005 onwards

PATTERN OF QUESTION PAPER * :

	<u>Marks</u>	<u>Time/Minutes</u>
10 Short Answer Questions (10 x 2)	20	} (3 hrs.)
2 Essay questions (2x15)	30	
10 Short Notes (10x5)	50	

Total :	100	(3 hrs)

Practical Examination :**80 marks**

Gram Staining (Pus/Urine/CSF)	20 marks
Sputum for AFB	20 marks
Parasitology (Stool)	20 marks
Spotters (10x2)** (2 Marks per spotter i.e. one mark for identification and one mark for two salient features about the spotter)	20 marks

 Total : 80 marks

Practical Examination :

Maximum of 20 candidates / day of practical is desirable.

Viva :**40 marks**

* MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

** 31st SAB dated 29.6.2006

Marks qualifying for Pass :

50% in Theory	:	100 / 200
50% in Theory including Viva	:	120 / 240
50% in Practical	:	40 / 80
35% in internal assessment	:	28 / 80

Total 50% aggregate	:	200 / 400

**II M.B.B.S.
PHARMACOLOGY
PRESCRIBED TEACHING HOURS : 300 Hrs.**

GOAL:

The broad goal of the teaching of undergraduate students in Pharmacology is to inculcate a rational and scientific basis of therapeutics.

OBJECTIVES :

A) **KNOWLEDGE :**

At the end of the course, the student shall be able to:

- (1) Describe the pharmacokinetics and pharmacodynamics of essential and commonly used drugs:
- (2) List of indications, contraindications, interactions, and adverse reactions of commonly used drugs:
- (3) Indicate the use of appropriate drug in a particular disease with consideration to its cost efficacy and safety for
- (4) Individual needs
- (5) Mass therapy under national health programmes.
- (6) Describe the pharmacokinetic basis, clinical presentations., diagnosis and management of common poisonings.
- (7) List the drugs of addiction and recommend the management.
- (8) Classify environmental and occupational pollutants and state the management issues.
- (9) Indicate causation in prescription of drugs in special medical situations such as pregnancy, lactation, infancy and old age.
- (10) Integrate the concept of rational drug therapy in clinical pharmacology.
- (11) State the principles underlying the concept of “Essential Drugs”.
- (12) Evaluate the ethics and modalities in the development and introduction of new drugs.

B) SKILLS :

At the end of the course, the student shall be able to :

- (1) Prescribe drug for common ailments.
- (2) Recognize adverse reactions and interactions of commonly used drugs.
- (3) Observe experiments designed for study of effects of drugs, bio-assay and interpretation of the experimental data.
- (4) Scan information on common pharmaceutical preparations and critically evaluate drug formulations.

C) INTEGRATION :

Practical knowledge of use of drugs in clinical practice will be acquired through integrated teaching with clinical departments and pre-clinical departments.

PHARMACOLOGY SYLLABUS

1. GENERAL PRINCIPLES

- a) Pharmacokinetics
- b) Pharmacodynamics
- c) Principles of therapeutics
- d) Concepts of essential drugs and rational drug therapy
- e) Special aspects of drugs in pregnancy, perinatal pediatric and geriatric pharmacology.
- f) Ethics and modalities of new drug developments
- g) Adverse reactions to drugs and common drug interactions.
- h) Gene therapy.

2. DRUGS ACTING AT SYNAPTIC AND NEURO EFFECTOR JUNCTION

- a) Cholinergic and anticholinergic drugs
- b) Adrenergic and adrenergic blockers
- c) Drugs acting at Neuromuscular Junction and autonomic ganglia.

3. OCULAR PHARMACOLOGY

4. DRUGS ACTING ON CENTRAL NERVOUS SYSTEM

- a) General anesthetics
- b) Local anesthetics

- c) Hypno sedatives
- d) Drugs and treatment of psychiatric disorders – psychosis, depression and mania
- e) Drugs in the therapy of epilepsies
- f) Drugs in the therapy of migraine
- g) Drugs in central nervous system degenerative disorders
- h) Opioid analgesics and antagonists
- i) Drug addiction and treatment.

5. AUTACOIDS

- a) Histamine, Bradykinin, 5 HT and their antagonists
- b) Lipid derived autacoids
- c) Analgesic – antipyretic and anti inflammatory agents.

6. DIURETICS AND OTHER AGENTS AFFECTING RENAL CONSERVATION OF WATER

7. DRUGS ACTING ON CARDIOVASCULAR SYSTEM INCLUDING BLOOD

- a) Drugs used for treatment of Myocardial ischemia, heart failure
- b) Anti arrhythmic drugs
- c) Anti hypertensives
- d) Lipid lowering drugs
- e) Drug Therapy of shock
- f) Haemopoietic agents (growth factors, minerals and vitamins)
- g) Anticoagulants, Thrombolytic and antiplatelet drugs

8. DRUGS ACTING ON RESPIRATORY SYSTEM

- a) Pharmacotherapy of cough
- b) Pharmacotherapy of bronchial asthma

9. THERAPEUTIC GASES

10. DRUGS AFFECTING GASTROINTESTINAL FUNCTION

11. CHEMOTHERAPY

- a) Chemotherapy of microbial diseases
- b) Chemotherapy of parasitic infections
- c) Chemotherapy of neoplastic diseases
- d) Antiseptics and disinfectants

12. DERMATOLOGICAL PHARMACOLOGY

13. DRUGS USED FOR IMMUNOMODULATION

14. ENDOCRINE PHARMACOLOGY

- a) Hypothalamic and pituitary hormones
- b) Thyroid and antithyroid drugs
- c) Adreno corticosteroids and their antagonists
- d) Gonadal hormones and inhibitors
- e) Pancreatic hormones, and antidiabetic drugs
- f) Agents that effect bone mineral homeostasis

15. ENZYMES IN THERAPY

16. VITAMINS

17. TOXICOLOGY

- a) Principles of toxicology and treatment of poisoning.
- b) Heavy metals and antagonists
- c) Non metallic environmental toxicants.

SYLLABUS IN PRACTICAL PHARMACOLOGY

- a) Prescription writing for common ailments
- b) Prescription audit
- c) Patient Oriented Problems relating to common adverse drug reaction and drug interactions.
- d) Observation of experiments designed for study of effects of drugs.
- e) Critical evaluation of drug formulations
- f) Dosage calculations
- g) Pharmaco economic problems
- h) Interpretation of clinical pharmacology data
- i) Knowledge of basic principles of Pharmacy and drug delivery systems

PHARMACOLOGY PRACTICAL EXAMINATION DESIGN

PRACTICAL : 80 Marks

A)	<u>PRACTICAL - I</u> – 90 MINUTES	Marks
1.	Prescription writing	10
2.	Prescription audit/critical evaluation of drug formulation	10
3.	Clinical problem solving exercises (Therapy oriented problems of adverse reaction and interaction of commonly used drugs)	10
4.	Dosage calculation including Pharmaco-economics	10
		---- 40 Marks

PRACTICAL - II – 90 MINUTES

1.	Objective Structural Practical Exercise (OSPE) Designed to test the knowledge in Selection, administration and effects of drugs/Observation of Experiments designed for study of effects of drugs in animals.	20
2.	Qualitative/Quantitative experimental pharmacology charts	10
3.	Interpretation of Clinical pharmacology problems/data	10
		----- 40 Marks
	Total Marks	----- 80 Marks -----

OSPE Examples

- To demonstrate how to give an IV injection.
- To prepare for administration of a test dose of penicillin
- To demonstrate an inhaler's use.
- To demonstrate instillation of drops - eye, nose, ear etc.
- To interpret experimental observations and results.

Maximum of 20 candidates / day of practical is desirable.

ORAL (VIVA) EXAMINATION : 40 Marks.

Examiner 1:-

10 Marks

Topics :

General Principles.

Neuro effector junction and drugs action at synaptic.

Ocular Pharmacology.

Drugs acting on Central Nervous System.

Examiner 2:-

10 Marks

Topics :

1. Autacoids
2. Diuretics and other agents affecting renal Conservation of water
3. Drugs acting on cardio - Vascular system including blood.
4. Drugs acting on respiratory system
5. Therapeutic gases
6. Drugs affecting gastrointestinal function

Examiner 3:-

10 Marks

Topics :

1. Chemotherapy
2. Dermatological pharmacology
3. Drugs used for immunomodulation

Examiner 4:-

10 Marks

Topics :

1. Endocrine Pharmacology
2. Enzymes in therapy
3. Vitamins
4. Toxicology

TOTAL =

40 Marks

EVALUATION

INTERNAL ASSESSMENT :

80 Marks *

Theory	:	40 Marks
Practical	:	20 Marks
Record	:	10 Marks
Assignment	:	10 Marks }**

(Any one of the following is compulsory) @

- a) Symposium/Seminar
- b) Short project work
- c) Problem based learning
- d) Quiz on prescribed topics

Total : 80 Marks

UNIVERSITY EXAMINATION PATTERN

UNIVERSITY EXAMINATION PATTERN :

Two papers of 3 (three) hours duration - 100 marks each.

Paper – I : Pharmacology I 100 Marks

Paper – II : Pharmacology II 100 Marks

Note :

No segregation of syllabus for each paper. Both papers to be set by the same examiner to avoid repetition of questions.

PATTERN OF QUESTION PAPER ***:

	<u>Marks</u>	<u>Time/Minutes</u>
10 Short Answer Questions (10x2)	20	}
2 Essay questions (2x15)	30	} (3 hrs)
10 Short Notes (10x5)	50	}

Total :	100	----

 *XXVII SAB dated 7.7.2004/ ** XXIX SAB dated 5.8.2005 – from August 2005 onwards
 @ XXVIII SAB dated 22.12.2004 from August 2005 onwards
 *** MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

PRACTICAL EXAMINATION : 80 Marks.

VIVA (Oral) : 40 Marks.

Marks qualifying for a pass :

50% in Theory	:	100 / 200
50% in Theory including Viva :		120 / 240
50% in Practical	:	40 / 80
35% in Internal Assessment :		28 / 80

Total 50% aggregate :		200 / 400

**FORENSIC MEDICINE PRESCRIBED TEACHING HOURS – 100 Hrs.
(INCLUDING MEDICAL JURISPRUDENCE AND TOXICOLOGY)**

GOAL :

The goal of teaching Forensic Medicine to undergraduate student is to impart knowledge of legal procedures involved in practice of medical profession and to apply the knowledge of medical science for the purpose of executing justice in courts of law. Further the teaching will help the students to know of medical ethics and etiquette to be followed during the practice of medicine.

OBJECTIVES :

(A) KNOWLEDGE

At the end of the course the student shall be able to:

appear in a court of law as a Registered Medical Practitioner and give evidence in cases of Homicide, Assault, Sexual offences, Alcoholic intoxication, Drug dependence and other cases requiring medical opinion.

Practice medicine in the society following medical ethics and etiquette as prescribed by the Indian Medical Council.

(B) SKILL

- 1) To conduct autopsy on medico-legal cases and issue postmortem certificate. To examine cases of wound (Assault, Homicide etc.,) at the hospital and issue required medico-legal certificate (wound certificate)
- 2) To treat cases of poisoning and issue certificate to court and police.

(C) INTEGRATION

The student will be able to integrate and apply knowledge of Anatomy, Physiology, Biochemistry, Pathology, Microbiology, Medicine, Surgery and Obstetrics & Gynaecology for the purpose of legal procedures and execution of justice.

SYLLABUS

**FORENSIC MEDICINE-INCLUDING MEDICAL JURISPRUDENCE AND
TOXICOLOGY**

1. IDENTIFICATION

Definition and data to establish identity-race, religion, sex, age, stature, complexion and features, external peculiarities, anthropometry, dactylography, and poroscopy-superimposition technique-Forensic odontology-Medico-legal importance of age and sex.

2. THANATOLOGY (DEATH)

Types of death-modes of death and their patho-physiology-causes of death, classification and medico-legal aspects of natural death

3. POST MORTEM CHANGES

Signs of death and changes following death and their medico-legal importance-Adipocere, mummification, embalming-Estimation of post mortem interval (time of death)-Presumption of death and survivorship.

4. VIOLENT ASPHYXIAL DEATHS

Classification-Hanging, Strangulation by ligature Throttling, Smothering, Gagging, Overlaying, Burking, Choking, Drowning and Sexual asphyxia

5. DEATH DUE TO COLD, HEAT, ELECTRICITY AND RADIATION.

6. ANAESTHETIC AND OPERATIVE DEATHS.

7. MECHANICAL INJURIES (WOUNDS).

Classification and mechanism of wound production - Abrasions, Contusions, Incised wounds, Chop wounds, Stab wounds and Lacerated wounds and their medico-legal Importance, Firearms classification and cartridges.

Firearm wounds by different firearms and their medico-legal importance – Bomb explosion Wounds.

Regional injuries on the body and medico-legal importance.

Medico- legal aspects of wounds – Issue of medico – legal certificates for legal purposes.

Homicide & types of homicide.

Simple and Grievous injuries – causes of death from wounds

8. IMPOTENCE AND STERILITY

Definition, causes, and medico-legal importance.

Sterilization and Artificial insemination and their medico-legal importance.

9. VIRGINITY, PREGNANCY AND DELIVERY

Definition, diagnosis and medico-legal importance, Pseudocyesis, Super fecundation, Superfaelation Legitimacy and Paternity and their medico-legal importance.

10. SEXUAL OFFENCES

Classification- Rape – definition, examination of victim and the accused – Incest, Unnatural sexual offences, types and their medico-legal importance. Sexual Perversion – types and their medico-legal importance – Indecent assault.

Examination of seminal fluid.

11. ABORTION

Definition, classification, methods of procuring abortion, diagnosis and evidences of abortion, medico-legal questions arising in suspected cases of abortion. Medical Termination of Pregnancy Act.

12. INFANTICIDE

Definition, still birth, dead birth and live birth signs of live birth and autopsy in suspected case of infanticide

Causes of death and medico-legal importance. Abandoning of infants, concealment of birth, Battered baby syndrome, Cot death.

13. EXAMINATION OF BLOOD STAINS AND HAIR AND SUSPECTED BIOLOGICAL AND FIBRES STAINS.

14. ORGANISATION OF FORENSIC SCIENCE LABORATORY

Locard's principle; Lie detection, Narcoanalysis, Hypnosis.

15. FORENSIC PSYCHIATRY

Delusion, Hallucination, Illusion, Impulse, Obsession, Delirium, Lucid interval Classification of unsoundness of mind and medico – legal aspects. Restraint of the insane.

16. MEDICO-LEGAL AUTOPSY

Protocol, Technique, Postmortem report.

Examination of set of bones.

Exhumation.

17. TOXICOLOGY

General consideration-Law on poisons, classification of poisons. Diagnosis of poisoning in the live and dead. Duties of the medical practitioner in suspected case of poisoning. General principles of treatment of poisoning

Corrosive poisons, Non-metallic poisons, Insecticides and weed killers, Metallic poison, Organic irritant poison, someferous poisons, Inebriants, Deliriants, spinal poisons, food poisoning, cardiac poisons, Aspyxiants, war gases Curare, Conium. Drug dependence and Addiction.

18. MEDICAL JURISPRUDENCE

Legal Procedure – Inquests, subpoena, Conduct money, Procedure of Criminal trial, Record of evidence, types of evidence, Medical evidence, types of witness.

19. MEDICAL LAW AND ETHICS

Laws governing medical profession :-

Indian Medical Council and State Medical Council organisations, functions, and powers – Rights and privileges of Registered Medical Practitioner. Infamous Conduct. Professional negligence (malpractice)

20. DUTIES OF MEDICAL PRACTITIONER

Doctrine of Reipsa Loquitor, Contributory negligence, vicarious responsibility consent, Euthanasia.

EVALUATION

INTERNAL ASSESSMENT : 30 Marks.

	<u>Marks</u>
Theory & Practical :	20
Record & Assignment*:	10

Total :	30 Marks

UNIVERSITY EXAMINATION PATTERN

THEORY :

One paper of 3 hours duration and 100 marks.

PATTERN OF QUESTION PAPER:*

	Marks	Time/Minutes
10 Short Answer Questions (10x2)	20	} (3 Hours)
2 Essay questions (2x15)	30	
10 Short Notes (10x5)	50	
	-----	-----
Total	<u>100 marks</u>	<u>3 hours.</u>

* MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

PRACTICAL – I : 15 Marks

- 1) Age estimation by Dental examination.
- 2) Age estimation by Radiological examination.
- 3) Examination of a case of drunkenness & issue of drunkenness certificate.
- 4) Examination of given cluster of Bones & issue of Medico legal certificate.

PRACTICAL - II : 35 Marks**1) Fetal Examination & opinion**

or

Postmortem certificate & opinion - 5 marks

2) Accident Register copy - 5 marks

3) Viscera packing - 5 marks

4) Opinion on Sexual offences - 5 marks

5) Photograph & opinion - 5 marks
 (hanging, injuries, drowning & other
 Related Forensic Medicine Subject).

6) Spotters

a) Pathology specimen	}	-	10 marks
b) Forensic specimen			
c) Instruments / Weapons			
d) Toxicology seed / Chemical Poison			
e) Toxicology plant			

35 marks
-----**TOTAL (PRACTIAL – I + PRACTICAL – II) = 50 Marks.****VIVA : 20 Marks****Marks Qualifying for a Pass:**

50% in Theory	:	50 / 100
50% in Theory & Viva	:	60 / 120
50% in Practical	:	25 / 50
35% in Internal Assessment	:	11 / 30

Total 50% aggregate	:	100 / 200

II MBBS–COMMUNITY MEDICINE
PRESCRIBED TEACHING HOURS– 200 Hrs.
(INCLUDING 8 WEEKS POSTINGS OF 3 Hrs. EACH)

SYLLABUS SEMESTER 3 TO 5

	<u>Lectures</u>	<u>Practicals</u>	<u>Total</u>
1. CONCEPTS IN COMMUNITY HEALTH	4 hrs.	-	4 hrs.
Health Dimensions. Positive Health. Determinants Of Health, Ecology of Health. Right to Health. Indicators of Health. Health situation in India, National Health Policy. Natural History of Disease. Concepts of Disease Control. Levels of prevention & Intervention. Functions of a Community Physician. WHO. Disease Cooling System.			
2. ENVIRONMENT AND HEALTH	10 hrs.	12 hrs.	22 hrs.
Introduction to environment. Sources of Water Pollution. Water Purification. Water quality. WHO – Standards. Surveillance of Drinking Water quality. Harrock's Test. Water sampling. Air Pollution. Indices of Thermal Comfort, Monitoring Air Pollutants. Control and prevention of pollution. Standards of ventilation. Good Lighting and standards, Noise pollution and control. Radiation sources and control. Air temperature Measurement. Heat streets Indices, effects and Control cold streets. Humidity precipitation. Housing standards. Solid wastes. Disposal Excreta disposal methods. Modern sewage treatment			
2. MEDICAL ENTOMOLOGY & PARASITOLOGY	2 hrs.	9 hrs.	11 hrs.
Anthropoid Borne Diseases and transmission. Bionomics of Mosquito. Mosquito Control Measures. Housefly, Tse-tse fly. Lice. Fleas. Flea indices. Ticks and Mites. Cyclops. Control measure. Insecticides.			
Rodents and Disease. Control measures. Entomology demonstrations.			

3. NUTRITION AND HEALTH	10 hrs.	9 hrs.	19 hrs.
Definitions & concepts. Proximate Principles, Nutrients. Deficiency Diseases. Assessment. Prevention, Sources. Requirements. Nutrition Profile of Foods. Energy and Requirements. Recommended Daily Allowance. Protein assessment. Dietary Goals. Community Nutrition Problems. LBW, PEM, IDD. Fluresis. Anemia. Nutritional Status Assessment. Nutritional Surveillance. Growth Monitoring. Nutritional Status indicatory. Ecology of malnutrition. Prevention. Food Surveillance. Food toxicants. Food Borne diseases. Food adult iteration National Nutrition Programmes Nutrition Assessment schedule. Nutrition problem Exercises.			
5. HEALTH EDUCATION & COMMUNICATION	2 hrs.	3 hrs.	5 hrs.
Definition, Objectives, Approaches and Principles of Health Education Practices Of Health Education. Planning & Evaluation. Administrations and Organizations in India. Health Education Demonstration in a community.			
6. PRIMARY HEALTH CARE	4 hrs.	6 hrs.	10 hrs.
Concepts, Health care systems. Levels of Health Care. PHC-Elements. Principles. Health for All Goals. Health Problems of India. National Health Policy. Primary Health care in India. PHC-Community Health Centre. Health Insurance. Voluntary Health Agencies. National Health Programmes			
7. INTERNATIONAL HEALTH SYSTEMS	2 hrs.	-	2 hrs.
Historical development of Health Organisations. WHO-objective. Structure, Functions. U.N. Agencies. Bilateral Agencies, N.G. Agencies.			

8. PRINCIPLES OF EPIDEMIOLOGY	8 hrs.	15 hrs.	23 hrs
Aims. Disease frequency. Distribution, Determinants. Clinical epidemiology. Basic measurements in Epidemiology, Rates and Ratios Standardisation. Epidemiological methods. Description, Analytical, experimental Epidemiology. Association and causation. Uses of Epidemiology Immunity. Infectious Diseases Epidemiology. Investigation of epidemic. Disinfection. Disease prevention and Control. Immunizing Agents. Epidemiological problems.			
9. SCREENING FOR DISEASES	2 hrs.	9 hrs.	11 hrs.
Concepts. Uses, Criteria, Sensitivity Specificity. Borderline problems. Epidemiological problems.			
10. MEDICAL STATISTICS	2 hrs.	18 hrs.	20 hrs.
Health information systems. Components, uses, services. Population Health Data Surveys. Elementary Statistical Methods. Tabulation. Charts, Statistical Averages, Measures of dispersion, Normal Distribution. Chi-Square Test. Correlation and progression. Statistical problems.			
11. EPIDEMIOLOGY OF COMMUNICABLE DISEASES	10 hrs.	21 hrs.	31 hrs.
Chicken Pox. Measles, Influenza, Diphtheria, Pertusis, Meningitis, Tuberculosis, Mumps, Rubella, Acute Respiratory infections. Small Pox Eradication. Poliomyelitis, Cholera. Viral Hepatitis. Amoebiasis, Ascariasis Ancylostamiosis. Dracunculosis. Food Poisoning, Typhoid, Acute diarrhoea Diseases. Malaria, Filaria, Dengue, Rabies, Yellow fever, Japanese Encephalitis, KFD, Brucellosis, Plague, Human Salmonellosis, Trachoma			

Tetanus, Leprosy, STD, AIDS, Yaws, Leishmaniasis. Hytad Diseases, Typhus Ricke tsiat, Zoonosis, Taeniasis. Emerging Infectious Diseases, Epidemiological exercises. Clinic-Social Case studies	-	21 hrs.	21 hrs.
Family Health Survey, Survey * and Community diagnosis	-	21 hrs.	21 hrs.
		56 hrs. 144 hrs.	200 hrs.

**BLOCK POSTINGS – I (III SEMESTER) –
TOTAL 72 HOURS**

Sl.No	Exercises	
01.	Environment Health Model and Demonstration	..6 hours
02.	Entomology specimens demonstration	..6 hours
03.	Parasitology, Bacteriology specimens	..6 hours
04.	Insecticides, Disinfectants and Rodenticides.	..3 hours
05.	Nutrition specimens	..6 hours
06.	Meteorological instruments	..3 hours
07.	Environment Health and statistical problems	..3 hours
08.	Water and Nutrition problems	..3 hours
09.	Epidemiological exercises	..6 hours
10.	Introduction to Clinico-Social case studies	..6 hours
11.	Family Health Survey, Methodology and Community diagnosis	..6 hours
12.	Community Survey	..6 hours
13.	Pure statistics methodology	..6 hours
14.	End posting evaluation – Theory	..3 hours
15.	End post evaluation – Practicals	..3 hours
	Total Block Posting I	<u>..72 hours</u>

**BLOCK POSTING – II (IV SEMESTER)
TOTAL 72 HOURS**

01.	Demography and statistical problems	..6 hours
02.	Demonstration – Vaccines cold chain equipment	..6 hours
03.	Statistical and Epidemiological problems	..6 hours
04.	Visit to a P.H.C.	..3 hours
05.	Visit to a sub-centre	..3 hours
06.	Health education demonstration in urban slum population	..3 hours
07.	Community Survey in urban population	..6 hours
08.	Data Analysis and write up	..6 hours

09. Clinic Social Case studies – ANC., PNC., Medical termination of pregnancy case, protein-energy malnutrition, Scabies, Fungal infection, Diarrhoeal disease, Upper respiratory infection, leprosy, Tuberculosis, STD, Filariasis, Obesity, Post Polio Paralysis Hypertension, Diabetes, Cancer early stage, family planning case counselling	..15 hours.
10. Project report analysis and preparation	..12 hours
11. End posting evaluation – Practicals	.. 3 hours
12. End posting evaluation – Theory	.. 3 hours
Total Block posting – II	<u>..72 hours</u>

**THE TAMIL NADU Dr.M.G.R.MEDICAL
UNIVERSITY, CHENNAI-600 032.**



**FINAL M.B.B.S. DEGREE COURSE
(NON-SEMESTER) REGULATIONS – 2005**

CONTENTS

SL.No.	Description	Pg.No.
1.	Short Title and Commencement	01
2.	General Objectives & Teaching Approach	01
3.	Course of Study	04
4.	Internal Assessment	08
6.	University Examination:	09
	(1) Commencement of Examination	09
	(2) Timing of Examination	10
	(3) Exemption in passed subjects	10
	(4) Carryover of failed subjects	10
7.	Revaluation of Answer Papers	10
8.	Attendance required for admission to examination	11
9.	Regulations for condonation of lack of attendance	11
10.	Re-admission after break of study	12
11.	Migration / Transfer of candidates	12
12.	Fixation of duration for completion of course	12
13.	Curriculum – Syllabus for:	
	i) Ophthalmology	13
	ii) E.N.T.	18
	iii) Community Medicine	24
	iv) Medicine	43
	v) Surgery	63
	vi) Obstetrics and Gynaecology	86
	vii) Paediatrics	101

SL.No.	Description	Pg.No.
14.	Pattern of Examinations:	
	i) Ophthalmology	16
	ii) E.N.T.	22
	iii) Community Medicine	41
	iv) Medicine	60
	v) Surgery	84
	vi) Obstetrics and Gynaecology	99
	vii) Paediatrics	113
15.	Marks qualifying for a Pass:	
	i) Ophthalmology	17
	ii) E.N.T.	23
	iii) Community Medicine	42
	iv) Medicine	62
	v) Surgery	85
	vi) Obstetrics and Gynaecology	100
	vii) Paediatrics	114
16.	Internship	115
	Proforma-I (Assessment of Internship)	138
	Proforma-II (for re-admission after condoning the CRRI break)	139

**THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
CHENNAI**

**REGULATIONS FOR THE BACHELOR OF MEDICINE AND
BACHELOR OF SURGERY DEGREE COURSE**

In exercise of the powers conferred by Section 44 of the Tamil Nadu Dr. M.G.R. Medical University, Chennai Act 1987 (Tamil Nadu Act 37 of 1987) the Standing Academic Board of the Tamil Nadu Dr. M.G.R. Medical University hereby makes the following regulations.

SHORT TITLE AND COMMENCEMENT

These Regulations shall be called “REGULATIONS FOR THE THIRD M.B.B.S. DEGREE COURSE (NON-SEMESTER) OF THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY, CHENNAI”.

These regulations are applicable to the students who are admitted to the First MBBS degree course from the academic year 2005-2006 onwards and promoted to III MBBS Degree Course .

These regulations are subject to modification as made by the Standing Academic Board from time to time.

I. GENERAL OBJECTIVES AND TEACHING APPROACH :

1. Graduate Medical curriculum is oriented towards training students to undertake the responsibilities of a general practitioner who is capable of looking after the preventive, promotive, curative and rehabilitative aspects of Medical care.
2. With a wide range of career opportunities available today a graduate has a wide choice of career opportunities. The graduate training should be broad based and provide the essential knowledge and skills required for basic health care in our country.

3. To undertake the responsibilities of various service situations, it is essential to provide adequate placement training tailored to the needs of such services. To avail of opportunities and engage in professional activities the graduate shall endeavour to acquire basic training in different aspects of medical care.
4. The importance of the community aspects of health care and of rural health care services is to be emphasized by exposure to such experiences in all the three phases of graduate medical education and training. This has to be further intensified by providing exposure to field practice areas and training during the internship period. The aim of the period of rural training during internship is to enable the fresh graduates to function effectively under such settings.
5. The educational experience should emphasize health and community orientation instead of only disease and hospital orientation or being concentrated on curative aspects.
6. Enough experience must be provided for self learning. The methods and techniques that would ensure this must become a part of the teaching – learning process.
7. The medical graduate of modern scientific medicine shall endeavour to become of functioning independently in both urban and rural environments. He / She shall endeavour to master the fundamental aspects of the subjects taught and all common problems of health and disease avoiding unnecessary details of specialization.
8. The importance of social factors in relation to the problem of health and disease should receive proper emphases through out the course. To achieve this purpose the educational process should also be community based rather than only hospital based. The importance of population control and family welfare planning should be emphasized throughout the period of training.
9. Adequate emphasis is to be placed on cultivating logical and scientific habits of thought, clarity of expression and independence of judgement, ability to collect and analyse information and to correlate the facts.

10. The educational process should be placed in a historical background as an evolving process and not merely as an acquisition of a large number of disjointed facts without a proper prospective. The history of Medicine with reference to the evolution of medical knowledge both in this country and in the rest of the world should form a part of this process.
11. Lectures alone are generally not adequate as a method of training and a means of transferring information and are even less effective at skill development and in generating the appropriate attitudes. Every effort should be made to encourage the use of active methods related to demonstration first hand experience. Students shall be encouraged to learn in small groups through peer interaction and to gain maximal experience through contact with patients and the communities in which the patients live. While the curriculum objectives often refer to areas of scientific knowledge, they are best taught in a setting of clinical relevance with hands on experience for the students to assimilate this knowledge and make it a part of their own working skills.
12. The Graduate medical education in clinical subjects should be based primarily on coaching in the wards and in outpatient and emergency departments as well as within the community including peripheral health care institutions. The wards and out-patient departments should be suitably planned to provide training to graduates in small groups.
13. Clinics should be organized in small groups of preferably not more than 10 students so that a teacher can give personal attention to each student with a view to improving his skill and competence in handling of patients.
14. Proper records of the work should be maintained which will form a basis for the student's internal assessment. They should be available to the inspectors at the time of inspection of the college by the Medical Council of India.
15. Maximal efforts have to be made of encourage integrated teaching between traditional subject areas using a problem based learning approach starting with clinical or community cases and exploring the

relevance of various preclinical and paraclinical disciplines in both understanding and resolving a problem. Every attempt must be made to avoid compartmentalization of disciplines and to achieve both horizontal and vertical integration throughout the M.B.B.S. Course.

16. Every attempt is to be made to encourage students to participate in group discussions and seminars to enable them to develop personality, character, expression and other faculties which are necessary for a medical graduate to function either in solo practice or as a team member / leader when he begins his independent career. A discussion group should not have more than 20 students.
17. Faculty members should avail of modern educational technology while teaching the students. To attain this objective Medical Education Units / Departments should be established in all medical colleges for faculty development and providing learning resource material to teachers.
18. To derive maximum advantage out of this revised curriculum the vacation period of students in one calendar year should not exceed one month during the 4½ years of Bachelor of Medicine and Bachelor of Surgery (M.B.B.S.) Degree Course.

II. COURSE OF STUDY

1. **Duration :** Every M.B.B.S. student shall undergo a period of certified study extending over 4 ½ academic years followed by one year of Compulsory Rotating Resident Internship. After completing the first two phases of the course comprising a minimum period of 2 ½ academic years, the student shall commence the Third Phase of the Course. The Third M.B.B.S. consists of two academic years and is divided into two parts of one year each.
2. **Working Days :** Each academic year shall consist of approximately 240 teaching days. Each day shall comprise of 8 college working hours including one hour interval. The clinical posting shall be done in the forenoon session. Rest of the teaching hours should be divided between didactic lectures, clinical demonstrations, seminars, symposia, group discussions, etc., in various subjects.

3. **Curriculum :** During phase III of the M.B.B.S. course - the Clinical subjects of Medicine, Paediatrics, Surgery, Ophthalmology, Otorhinolaryngology, and Obstetrics & Gynaecology are taught besides community medicine.

Part I :

At the end of one year of study in phase III, the candidate shall be examined in three subjects namely Ophthalmology, Otorhinolaryngology, and Community Medicine in the part I examination of III M.B.B.S.

Part II :

At the end of 3 ½ years of study in phase II and phase III, the candidate shall be examined in four subjects namely Medicine, Surgery, Obstetrics & Gynaecology and Paediatrics in the part II examination of III M.B.B.S.

The details of the curriculum and syllabi prescribed for the subjects of the III M.B.B.S. degree course are as specified in these regulations.

4. **Record Note Books :** Every student must maintain a record of the practical / clinical work assigned to him / her in the record note books. These shall be submitted periodically to the respective Professors. At the end of the course, the practical / clinical case record note books shall be submitted to the heads of the departments who shall evaluate and include the marks in the Internal Assessment. Records need not be submitted at the University practical examination.

In respect of failed candidates, the marks awarded for records at the first attempt may be carried over to the next examination attempt.

If a candidate desires, he/ she may be permitted to improve on the performance by submission of fresh record note books.

5. **Integration :** Each of the clinical departments shall provide integrated teaching calling on pre-clinical, para-clinical and other clinical departments to join in exposing the students to the full range of disciplines relevant to each clinical area of study. Problem oriented approach shall be emphasized.

6. Teaching Schedule for clinical subjects (Phases II and III).

A. THEORY CLASSES :

Didactic lectures, demonstrations and seminars etc. in addition to clinical postings as under. The Clinical lectures should be held from 4th Semester onwards. Lectures in Community Medicine, E.N.T. and Ophthalmology shall be conducted in III M.B.B.S. Part – I.

❖ General Medicine	:	300 Hours.
❖ Paediatrics	:	100 Hours.
❖ T.B. and Chest	:	20 Hours.
❖ Psychiatry	:	20 Hours.
❖ Skin and S.T.D.	:	30 Hours.
❖ Community Medicine	:	50 Hours.
❖ Anaesthesia	:	20 Hours.
❖ General Surgery	:	300 Hours.
❖ Orthopaedics (Including Physical Medicine)	:	100 Hours.
❖ Ophthalmology	:	100 Hours.
❖ E.N.T.	:	70 Hours.
❖ Radiology	:	20 Hours.
❖ Dentistry	:	10 Hours.
❖ Obstetrics & Gynaecology	:	300 Hours.
Inclusive of Family Welfare		

NOTE:

This period of training is the approximate minimum suggested. Adjustments may be made as required depending on availability of time. Extra time available may be devoted to other sub-specialities.

This period of training does not include the University examination period.

B. CLINICAL POSTINGS :

The clinical posting shall be for 3 hours daily during the forenoons.

At the beginning of the clinical course, i.e. on entry into Phase II, the whole batch shall be given an introductory course in clinical methods of 2 weeks each in Medicine and Surgery.

Subsequently in each of the 7 semesters (half years) of the 31/2 year clinical course (i.e. Semesters 3, 4 and 5 in II M.B.B.S., 6 and 7 in III M.B.B.S. Part I and 8 and 9 in III M.B.B.S. part II), the students shall be posted in small batches by rotation in various clinical departments as per the chart below :

PERIOD OF CLINICAL POSTINGS IN WEEKS

SUBJECTS	3 rd Semester	4 th Sem.	5 th Sem.	6 th Sem.	7 th Sem.	8 th Sem.	9 th Sem.	Total Weeks
General*** Medicine	6	-	2	-	4	6	6	24
Paediatrics	-	2	-	2	2	4	-	10
T.B. & Chest Diseases	-	2	-	-	-	-	-	2
Skin & S.T.D.	-	2	-	2	-	2	-	6
Psychiatry	-	-	4	-	-	-	-	4
Radiology*	-	-	-	-	2	-	-	2
General**** Surgery	6	-	4	-	2	6	6	24
Anaesthesiology	-	-	-	-	-	-	2	2
Orthopaedics**	-	-	4	4	-	-	2	10
Ophthalmology	-	4	-	4	2	-	-	10
Ear, Nose & Throat	-	4	-	4	-	-	-	8
Obst. & Gynae. Including Family Welfare Planning *****	2	4	4	-	4	4	6	24
Community Medicine	4	4	-	4	-	-	-	12

Casualty	-	-	-	2	-	-	-	2
Dentistry	-	-	-	-	2	-	-	2
Total (in weeks)	18	22	18	22	18	22	22	142

NOTE : Clinical methods in Medicine & Surgery for whole class will be for 2 weeks each respectively at the start of 3rd Semester.

- * The posting includes training in Radio Diagnosis and Radio-therapy where existent.
- ** This posting includes exposure to Rehabilitation & Physiotherapy.
- *** This posting includes exposure to Laboratory Medicine & Infectious diseases.
- **** This posting includes exposure to dressing.
- ***** This includes Maternity Training & Family Medicine and the 3rd Semester posting shall be in Family Welfare Planning.

III. INTERNAL ASSESSMENT

1. III MBBS PART I (ENT,OPHALMOLOGY & COMMUNITY MEDICINE) : **

Two tests for Part I Internal Assessment viz. one test during the period of clinical posting and another test shall be conducted before the University Examinations. The Internal Assessment Marks shall be submitted to the University within 15 days after the exams. Assignments completed by candidates as home work or vacation work may also be considered.

The aggregate of Final Internal Assessment Marks shall be submitted during first week of January/July .

** 31st SAB dt: 29.06.2006

2. III MBBS PART II (MEDICINE, SURGERY, OBSTETRICS & GYNAECOLOGY AND PAEDIATRICS): *

Three tests for Part II Internal Assessment within the period of two years viz. one test shall be conducted during first year and another two tests shall be conducted during second year. The Internal Assessment Marks shall be submitted to the University within 15 days after the exams. Marks awarded for maintenance of records should be included in the internal assessment.

The aggregate of Final Internal Assessment Marks shall be submitted during first week of January/July.

3. A failed candidate in any subject should be provided an opportunity to improve his / her internal assessment marks by conducting a minimum of two examinations each in theory and practical separately and the average be considered for improvement.
4. The internal assessment marks awarded both in written and clinical separately should be submitted to the University endorsed by the Head of the institution atleast fifteen days prior to the commencement of the theory examinations.
5. A candidate should obtain a Minimum of 35%** of marks in internal assessment in a subject to be permitted to appear for the University examination in that subject.

IV. UNIVERSITY EXAMINATIONS

1. COMMENCEMENT OF EXAMINATION: ***

- a. August 1st / February 1st .
- b. Theory examinations not to be held on Saturdays & Sundays. If the date of commencement of the examination falls on a public holiday, the next working day will be the date of commencement of examination.

* 31st SAB dt: 29.06.2006

*XXVI SAB dt. 16-12-2003 / *** XXIX SAB dt:05.08.2005

2. TIMING OF EXAMINATIONS :

III M.B.B.S. Part I examination shall be conducted at the end of one academic year of study in phase III.

III M.B.B.S. Part II examination shall be conducted at the end of two academic years of study in phase III.

3. EXEMPTION IN PASSED SUBJECTS :

Candidates who fail in an examination but pass in one or more individual subjects shall be exempted from re-examination in the passed subjects.

4. CARRY OVER OF FAILED SUBJECTS :

- a. A student who fails in the II M.B.B.S. examination at the end of phase II shall be permitted to carry the failed subjects to phase III of the M.B.B.S. course but shall not be allowed to appear in III M.B.B.S. Part I examination unless he / she passes all the subjects of the II M.B.B.S. examination. Appearing for III M.B.B.S. Part I examination is compulsory before entering Part II of Phase III i.e., the final year of the course.
- b. Passing in III M.B.B.S. Part I examination is not compulsory before entering for Part II training; however passing of III M.B.B.S. Part I examination is compulsory for being eligible to appear for III M.B.B.S. Part II examination.

5. REVALUATION OF ANSWER PAPERS :

There is no provision for revaluation of answer papers. However, retotalling is allowed in the failed subjects.

Classification Of Successful Candidates - Deleted from 31st SAB dated: 29.6.2006

VI. ATTENDANCE REQUIRED FOR ADMISSION TO EXAMINATION

1. No candidate shall be permitted to any one of the parts of III M.B.B.S. Examinations unless he / she has attended the course in the subject for the prescribed period in an affiliated institution recognized by this University and produce the necessary certificate of study, attendance and progress from the Head of the Institution.
2. A candidate is required to put in a minimum of 75%* attendance in both theory and practical / clinical classes separately in each subject before admission to the examination.
3. Attendance earned by the student in theory and practical / clinical classes separately in each subject shall be certified by the respective heads of the departments and forwarded by the head of the institution so as to reach the University atleast fifteen days prior to the commencement of the theory examinations.
4. A candidate lacking in the prescribed attendance in any one subject in the first appearance shall be denied admission to the entire examinations (Part I or Part II as the case may be).
5. Any candidate who does not appear for an examination due to lack of attendance shall be permitted to appear at the next exam session if he puts in a minimum of 75% attendance in the extended period of study.
6. Failed candidates who are not promoted to the next phase of study are also required to put in a minimum of 75% attendance during the extended period of study before appearing for the next examination.

VII. REGULATIONS FOR CONDONATION OF LACK OF ATTENDANCE

There shall be no condonation of lack of attendance for the course.

*XXVI SAB dt. 16-12-2003.

VIII. RE-ADMISSION AFTER BREAK OF STUDY

A separate Regulation Book is available for all the U.G. / P.G. Courses of this University, for the candidates admitted from the academic year 2003-04 onwards.

IX. MIGRATION / TRANSFER OF CANDIDATES

Migration from one Medical College to another Medical College is not permitted during the Third M.B.B.S. degree course.

X. FIXATION OF DURATION FOR COMPLETION OF COURSE :*

The duration for completion of the course shall be fixed as double the time of the course and the students have to pass within the said period; otherwise, they have to get fresh admission.

This will apply to the students admitted from the academic year 2003-04 onwards.

*XXV SAB dt. 25-06-2003.

Syllabus for III M.B.B.S. Part – I

OPHTHALMOLOGY – Paper–1 (80 marks)

Departmental Objectives :-

At the end of training in the subject of Ophthalmology, a MBBS student should be able to :

Identify the abnormal conditions of the eye.

Diagnose various eye diseases which are most prevalent in the country.

Manage various eye conditions like conjunctivitis, sty, chalazion and foreign body.

Recognise and give medical treatment of anterior segment diseases.

Identify the national objectives and be an active participant in the National Programme for Prevention and Control of Blindness.

Recognise the ophthalmic manifestations of systemic diseases.

COURSE CONTENTS**MUST KNOW :**

- 1) Aetiology, clinical features and treatment of conjunctival infections, allergies, pterygium, xerosis and trachoma.
- 2) Aetiology, clinical features, complications and treatment of corneal ulcers, keratomalacia and other scleral and corneal inflammations.
- 3) Basic principles of keratoplasty, eye donation and corneal blindness.
- 4) Aetiopathogenesis and complications of ectropion, entropion, ptosis, lagophthalmos, symblepharon and lid inflammations.
- 5) Aetiology, clinical features and treatment of lacrimal sac infections and causes of epiphora.
- 6) Classification, clinical features, diagnosis and treatment of various forms of congenital and senile cataract.

- 7) Classification, aetiology, clinical features, complications and management of various forms of uveitis.
- 8) Classification, aetiology, clinical features and management of various glaucomas.
- 9) Differential diagnosis of 'Red eye'.
- 10) Classification, clinical features and treatment of various refractive errors and presbyopia.
- 11) Types of blindness and their causes.
- 12) Objectives of National Programmes of Prevention and Control of Blindness, Trachoma Control Programme and vision 2020.
- 13) Aetiology, clinical features and treatment of common retinal disorders including vascular occlusions, inflammation and detachment.
- 14) Differentiate senile cataract and Open Angle Glaucoma.
- 15) Determine visual activity.
- 16) Test colour vision.
- 17) Use of Ophthalmoscope.
- 18) Examine anterior segment of eye.
- 19) Distant direct ophthalmoscopy for diagnosis of cataract.

DESIRABLE TO KNOW :

- 1) Types of ocular trauma, clinical features, complications and management including sympathetic ophthalmia.
- 2) Aetiology, clinical features and management of optic nerve disorders including differentiation of papilloedema and optic neuritis.
- 3) Aetiology, clinical features, and management of orbital diseases; common causes of proptosis.

- 4) Ocular manifestation of systemic diseases including diabetes, hypertension, tuberculosis, leprosy, anaemia, AIDS and pregnancy – induced hypertension.
- 5) Ocular side effects of systemic drugs.
- 6) Aetiology, clinical features and principles of treatment of vitreous diseases e.g., haemorrhage, degeneration, liquefaction, endophthalmitis.
- 7) Recent advances in ophthalmology – types and scope of lasers, intraocular lens implantation.
- 8) Determine field of vision.
- 9) Take conjunctival swab.
- 10) Remove extraocular foreign body.
- 11) Perform epilation of cilia.
- 12) Incise and drain lid abscess.

NICE TO KNOW :

- 1) Ocular manifestations of common neurological disorders.
- 2) Aetiology, symptoms, diagnosis and principles of treatment of strabismus.

Clinical Posting:

4 weeks in II MBBS
 6 weeks in Prefinal MBBS
 Preceding University Examination.

First 4 Weeks: Basic sciences related to ophthalmology like ocular, Anatomy, Physiology, Biochemistry, Neurology, Examination Technique and orientation to Minor O.T.

Next 6 Weeks: Clinical Ophthalmology, including ward & Theatre postings Community ophthalmology.

EVALUATION :**INTERNAL ASSESSMENT :*****40 marks**

Theory	20 marks
Clinical	20 marks

Total	40 marks

OPHTHALMOLOGY ***

	No. of Questions	Marks
Essay	2 x 15 =	30
Short Notes	10 x 5 =	50
Short Answers	10 x 2 =	20

	Total =	100

CLINICAL:		
Long Case	1 x 20 =	20
Short Case	2 x 10 =	20

		40

VIVA		20

Instrument	6 marks	
Refraction	6 marks	
Comm.Oph.	4 marks	
Sys.Oph.	4marks	

		160

Internal Assessment		40

		200

* XX SAB dated:18-08-2000;

*** 38th Meeting of the Standing Academic Board held on 19.11.2009 with effect from February 2010 examination.

Guidelines for Clinical & Viva :

- 1) In all the subjects of III M.B.B.S Part-I, the No. of candidates examined per day shall not normally exceed 30.
- 2) There shall be Four examiners (2 External & 2 Internal) to conduct the Clinical & Viva Examinations.
- 3) For Viva : Two sets of examiners shall examine separately on different portions of the Syllabus.

MARKS QUALIFYING FOR A PASS :

50% in Theory	-	40 / 80
50% in University clinical including viva	-	40 / 80
35% in Internal Assessment	-	14 / 40
Total 50% aggregate	-	100 / 200

SYLLABUS FOR THIRD MBBS PART-I

OTORHINOLARYNGOLOGY – Paper-2 (80 marks)

Departmental Objectives:

At the end of the course, the student will be able to:

Diagnose and manage the common ENT diseases and emergencies.

Adopt the rational use of commonly used drugs, keeping in mind their adverse reactions.

Suggest common investigative procedures and interpret their results.

COURSE CONTENTS

I. EAR

MUST KNOW :

- 1) Bacterial flora, specific antibiotic therapy of upper respiratory infection.
- 2) Surgical anatomy: external, middle and inner ear.
- 3) Physiology of hearing and vestibular function.
- 4) Examination of the Ear: Tuning fork test: hearing assessment in children – broad outline; referred pain in the ear.
- 5) Deafness: types and causes.
- 6) Diseases of the external ear: perichondritis; otitis external; cerumen; foreign body.
- 7) Diseases of the middle ear: acute and chronic suppurative otitis media.
- 8) Audiometry – pure tone; Impedence, Peadiatric Audiometry functional examination of inner ear.

- 9) Nonsuppurative otitis media.
- 10) Facial nerve.
- 11) Deaf mutism.
- 12) Complications of otitis media: Mastoiditis (acute and chronic); lateral sinus thrombosis; labyrinthitis; otogenic brain abscess; mastoidectomy – Principles.

DESIRABLE TO KNOW :

- 1) Otosclerosis; Cholesteatoma.
- 2) Vestibule, caloric test, positional nystagmus test.
- 3) Meniere's disease.
- 4) Brainstem Audiometry – Cochlear implants.

II. NOSE AND PARANASAL SINUSES

MUST KNOW :

- 1) Surgical anatomy and physiology of the nose and paranasal sinuses.
- 2) Symptoms of nasal diseases.
- 3) Methods of examination of the nose and paranasal sinuses.
- 4) Diseases of the nasal septum: deviation of nasal septum and principles of management; polyp of the septum.
- 5) Epistaxis and foreign bodies in nose. - CSF Rhinorrhoea
- 6) Nasal allergy – nasal polyposis.
- 7) Inflammation of the nose: furunculosis of vestibule of the nose, acute rhinitis.

- 8) Inflammatory diseases of paranasal sinuses: acute and chronic maxillary sinusitis, frontal sinusitis. Ethmoidal sinusitis and complications.
- 9) Atrophic rhinitis, rhinosporidiosis, rhinoscleoma.
- 10) Nasal Septum Perforations.

DESIRABLE TO KNOW :

- 1) Outline of management of benign and malignant tumors of nose and paranasal sinuses.
- 2) Endoscopic sinus surgery.

III. PHARYNX

MUST KNOW :

- 1) Anatomy of the pharynx – methods of examination – Nasopharynx Oropharynx and Laryngopharynx.
- 2) Diseases of the pharynx: adenoids; acute and chronic pharyngitis; diphtheric pharyngitis; acute follicular tonsillitis and differential diagnosis: chronic tonsillitis; tonsillectomy – indication; peritonsillar abscess; retropharyngeal abscess.
- 3) Dysphagia including acid ingestion management.
- 4) Oesophageal Diverticulum.

DESIRABLE TO KNOW :

- 1) Broad outline of management of juvenile angiofibroma, and malignant tumors of oropharynx.
- 2) Submucous Fibrosis.

IV. LARYNX

MUST KNOW :

- 1) Anatomy and functions of the larynx and methods of examination.

- 2) Hoarseness of voice; stridor; differential diagnosis of respiratory obstruction and its management including Paralysis of Vocalcords.
- 3) Inflammatory lesions of the larynx. eg: acute laryngitis.
- 4) Vocal cord nodules; laryngeal diphtheria.
- 5) Benign and malignant tumors of larynx: classification and management.
- 6) FB larynx and trachea.
- 7) Tracheostomy.

DESIRABLE TO KNOW :

Tuberculosis of the larynx and differential diagnosis.

SKILLS

1. Be able to use auroscope, nasal speculum, tongue depressor; tuning fork and head mirror.
2. Conduct CPR (Cardiopulmonary resuscitation) and first aid in newborns, children and adults including endotracheal intubation.
3. Maintain airway (endotracheal intubation / tracheostomy / cricothyroidotomy).
4. Perform syringing of ear.
5. Do nasal packing for epistaxis.

EVALUATION :

INTERNAL ASSESSMENT : *

40 marks

Theory	20 marks
Clinical	20 marks

Total	40 marks

* XX SAB dated 18-08-2000.

PATTERN OF EXAMINATIONS:

THEORY : ONE PAPER OF THREE HOURS DURATION-100 marks.

PATTERN OF QUESTION PAPER :***

E.N.T.

	No. of Questions	Marks
Essay	2 x 15 =	30
Short Notes	10 x 5 =	50
Short Answers	10 x 2 =	20

	Total =	100

CLINICAL:		
Long Case	1 x 20 =	20
Short Case	2 x 10 =	20

	Total =	40
	VIVA	20
X-ray	6 marks	
Instrument	6 marks	
Viva	8 marks	

		160
Internal Assessment		40

		200

Guidelines for Clinical & Viva :

- 1) In all the subjects of III M.B.B.S Part-I, the no. of candidates examined per day shall not normally exceed 30.
- 2) There shall be Four examiners (2 External & 2 Internal) to conduct the Clinical & Viva Examinations.
- 3) For Viva : Two sets of examiners shall examine separately on different portions of the Syllabus.

*** 38th Meeting of the Standing Academic Board held on 19.11.2009 with effect from February 2010 examination.

MARKS QUALIFYING FOR A PASS :

50% in Theory	-	40 / 80
50% in University clinical including viva	-	40 / 80
35% in Internal Assessment	-	14 / 40
Total 50% aggregate	-	100 / 200

SYLLABUS FOR THIRD MBBS PART-I

COMMUNITY MEDICINE – 2 Papers – 120 Marks each

Departmental Objectives :

Aim of teaching by the department is directed towards achievement of the goal of “Health for All”. Towards this end, by the completion of his / her training, the M.B.B.S. student should be :

Aware of the physical, social, psychological, economic and environmental aspect of health and disease.

Able to apply the clinical skills to recognize and manage common health problems including their physical, emotional and social aspects at the individual and family levels and deal with medical emergencies at the community level.

Able to define and manage the health problems of the community he / she serves. To achieve this, he / she shall learn to :

- a. Organise elementary epidemiological studies to assess the health problems in the area. For this, he/she should be able to design a study, collect data, analyse it with statistical tests, make a report and be able to participate in a health information system.
- b. Prioritise the most important problems and help formulate a plan of action to manage them under National Health Programme guidelines including population control and family welfare programme. He/She should be able to assess and allocate resources, implement and evaluate the programmes.
- c. Demonstrate knowledge of principles of organizing prevention and control of communicable and non-communicable diseases.
- d. Organise health care services for special groups like mothers, infants, under-five children and school children.
- e. Organise health care in case of calamities.

Able to work as an effective member of the health team.

Able to coordinate with and supervise other members of the health team and maintain liaison with other agencies.

Able to plan and implement health education programme.

Able to perform administrative functions of health centers.

Able to promote community participation especially in areas of disease control, health education and implementation of national programmes.

Aware of the national priorities and the goals to be achieved to implement primary health care.

COURSE CONTENTS

COMMUNITY MEDICINE – PAPER-I

I. CONCEPTS IN HEALTH

MUST KNOW :

- 1) Definition of health.
- 2) Determinants of health.
- 3) Characteristics of agent, host and environmental factors in health and disease and the multifactorial aetiology of disease.
- 4) Various levels of prevention and modes of intervention with appropriate examples.
- 5) Indices used in measurement of health.
- 6) Health situation in India : demography, mortality and morbidity profile and the existing facilities in health services.

NICE TO KNOW :

- 1) Appreciation of health as a relative concept.
- 2) Disease classification: international classification of diseases.

II. EPIDEMIOLOGY

MUST KNOW :

- 1) Use of basic epidemiological tools to make a community diagnosis.
- 2) Epidemiology : Definition, concept and role in health and disease.
- 3) Definition of the terms used in describing disease, transmission and control.
- 4) Natural history of a disease and its application in planning intervention.
- 5) Modes of transmission and measures for prevention and control of communicable and non-communicable diseases.
- 6) Definition, calculation and interpretation of the measures of frequency of diseases and mortality.
- 7) Common sampling techniques, simple statistical methods for the analysis, interpretation and presentation of data, frequency distribution, measures of central tendency, measures of variability.
- 8) Need and uses of screening tests.
- 9) Accuracy and clinical value of diagnostic and screening tests (sensitivity, specificity, predictive values).
- 10) Planning and investigation of an epidemic of a communicable disease in a community setting.

DESIRABLE TO KNOW :

Principle sources of epidemiological data.

Various types of epidemiological study designs.

NICE TO KNOW :

- 1) Institution of control measures and evaluation of the effectiveness of these measures.
- 2) Application of computers in epidemiology.

III. BIOSTATISTICS

MUST KNOW :

- 1) Sampling.
- 2) Collection, classification and presentation of statistical data.
- 3) Analysis and interpretation of data.
- 4) Obtaining information, computing indices (rates and ratio) and making comparisons.
- 5) Applying test of significance.

NICE TO KNOW :

- 1) The scope and use of biostatistics.
- 2) Use of statistical tables.

IV. ENTOMOLOGY

MUST KNOW :

- 1) Role of vectors in the causation of diseases.
- 2) Clinical features of and mode of transmission of common vector borne diseases (Malaria, Filariasis, dengue, Jap. B. Encephalitis, Kala-azar).
- 3) Methods of vector control.

DESIRABLE TO KNOW :

Advantages and limitations of each method of vector control.

NICE TO KNOW :

Mode of action, dose and application cycle of commonly used insecticides.

V. ENVIRONMENTAL SANITATION

MUST KNOW :

- 1) Concept of safe and wholesome water.
- 2) Requirement of sanitary sources of water (sanitary well).
- 3) Sources, health hazards and control of environmental pollution.
- 4) Standards of housing and the effect of poor housing on health.

DESIRABLE TO KNOW :

- 1) Methods of purification of water with stress on chlorination of water- large scale and small scale purification.
- 2) Disposal of solid waste and liquid waste both in the context of urban and rural conditions in the country.
- 3) Problems in the disposal of refuse, sullage and sewage.
- 4) Concepts of safe disposal of human and animal excreta.
- 5) Influence of physical factors – like heat, humidity, cold, radiation smoke and noise – on the health of the individual and community.

NICE TO KNOW :

- 1) Various biological standards.
- 2) Physical, chemical standards; tests for assessing quality of water.
- 3) Hospital waste management.
- 4) Animal excreta.

VI. EPIDEMIOLOGY OF SPECIFIC DISEASES

The specific objectives of selected communicable diseases of public health importance for which National Disease Control / Eradication Programmes have been formulated are described here. For other diseases, the individual teacher would formulate the objectives while drawing the lesson plans. The idea of formulating objectives for a few diseases is to highlight their importance and to emphasis certain learning outcomes.

Poliomyelitis, Infective hepatitis, ARI, Tuberculosis, Leprosy, Malaria, Filariasis, Kala Azar, STDs HIV & AIDS, Diarrhoeal diseases, Hypertension, Coronary heart disease, Blindness, Mental Health, Diabetics, special emphasis on emerging and reemerging infectious diseases.

MUST KNOW :

- 1) Extent of the problem, epidemiology and natural history of the disease.
- 2) Relative public health importance of a particular disease in a given area.
- 3) Influence of social, cultural and ecological factors on the epidemiology of the disease.
- 4) Control of communicable and non-communicable diseases:
 - a) Case definition, Diagnosing and management (laboratory and treatment).
 - b) Principles of planning, implementing and evaluating control measures for the diseases at the community level bearing in mind the relative importance of the disease.
- 5) Discuss prevention issues with regards to 5 levels of prevention.
- 6) National Programmes.

VII. OCCUPATIONAL HEALTH

MUST KNOW :

- 1) Employees State Insurance Scheme.
- 2) Identification of the physical, chemical and biological hazards to which workers are exposed while working in a specific occupational environment.
- 3) Preventive measures against these diseases including accident prevention.

DESIRABLE TO KNOW :

Various legislations in relation to occupational health.

NICE TO KNOW :

Diagnostic criteria of various occupational diseases.

COMMUNITY MEDICINE – PAPER-II

VIII. NUTRITION

MUST KNOW :

- 1) Common sources of various nutrients.
- 2) Nutritional assessment of individual.
- 3) Common nutritional disorders : protein energy malnutrition, Vitamin-A deficiency, anaemia, iodine deficiency disease, fluorosis, food toxins diseases and their control and management.
- 4) National programmes in nutrition.

DESIRABLE TO KNOW :

- 1) Special nutritional requirement according to age, sex, activity, physiological condition.
- 2) Assessing the nutritional status of the family and the community by selecting and using appropriate methods such as: anthropometry, clinical, dietary, laboratory techniques.

- 3) Diet for individuals and families and special groups.
- 4) Food hygiene and food fortification.

NICE TO KNOW :

Laboratory techniques.

IX. GENETICS AND COMMUNITY HEALTH

MUST KNOW :

Role of genetics in health and preventive measures in inherited disorder.

DESIRABLE TO KNOW :

Population genetics.

NICE TO KNOW :

- 1) Genetic predisposition in common disorders.
- 2) Preventive and social measures – Eugenics, genetic counselling.

X. SOCIOLOGY AND COMMUNITY HEALTH

MUST KNOW :

Social factors influencing health and disease.

DESIRABLE TO KNOW:

Assessment of socio-economic status.

NICE TO KNOW :

- 1) Concepts in sociology.
- 2) Poverty and social security.

XI. HEALTH EDUCATION

MUST KNOW :

- 1) Effective communication with individuals, family and community using tools and techniques of information, education and communication.
 - a) Barriers to effective communication.
 - b) Principles, methods and evaluation of health education.
 - c) Methods of health education – their advantages and disadvantages.
 - d) Selection and use of appropriate media (simple audio-visual aids) for effective health education.

XII. DEMOGRAPHY & FAMILY PLANNING

MUST KNOW :

- 1) Definition of Demography.
- 2) Population Pyramid.
- 3) Stages of the demographic cycle and their impact on the population.
- 4) Definition, calculation and interpretation of demographic indices like birth rate, death rate, growth rate, fertility rates, etc.
- 5) Definition of Family Planning, Different family planning methods and their advantages and shortcomings. Recent advances in contraception.
- 6) Medical Termination of Pregnancy Act.
- 7) National Family Welfare Programme.

DESIRABLE TO KNOW :

- 1) Reasons for rapid population growth in India.
- 2) Need for population control measures and the National Population Policy.

XIII. MATERNAL AND CHILD HEALTH (MCH)

MUST KNOW :

- 1) Magnitude and causes of maternal morbidity.
- 2) Concepts of 'high risk' and 'MCH Package', Child survival and Safe Motherhood, Integrated Child Development Scheme and other existing regional programmes – RCH I & RCH II, IMNCI.
- 3) Under-5 : Morbidity, mortality, high risk and care (perinatal, infant and child).
- 4) Monitoring of growth and development and use of Road to Health Chart and under 5 clinic.
- 5) Organisation, implementation and evaluation of programmes for mothers and children as per National Programme guidelines; supervising health personnel; maintaining records; performing a nutritional assessment; promoting breast feeding.
- 6) Immunization programmes, immunization schedules and cold chain.

DESIRABLE TO KNOW :

Need for specialized services for these groups.

NICE TO KNOW :

Local customs and practices during pregnancy, child birth and lactation.

XIV. SCHOOL HEALTH

MUST KNOW :

- 1) Objectives and activities of the School Health Programme.
- 2) Participation of the teachers in the school health programme including maintenance of records; defining healthful practices; early detection of abnormalities.

XV. COMMUNITY GERIATRICS

MUST KNOW :

- 1) Health of the elderly and preventive measures (e.g., Osteoporosis).
- 2) Care of elderly in organized and unorganized sectors and role of various health care provider including family.

DESIRABLE TO KNOW :

Economic and psychosocial needs of the aged.

XVI. URBAN HEALTH

MUST KNOW :

- 1) Reasons for Urban Health becoming an issue.
- 2) Special health problems in urban areas e.g., homelessness.
- 3) Organization of health services in urban areas including slums.

XVII. MENTAL HEALTH

MUST KNOW :

- 1) Community Mental health services.
- 2) Alcoholism, drug dependence – Epidemiological factors and prevention.

DESIRABLE TO KNOW :

Importance of Mental Health.

XVIII. HEALTH PLANNING AND MANAGEMENT

MUST KNOW :

- 1) Salient features of the National Health Policy.
- 2) Process of health care delivery in India :
 - the health systems and health infrastructure at Centre, State and District levels;
 - the inter – relationship between community development block and Primary Health Centre;
 - the organization, function and staffing pattern of First Referral Unit/Community Health Centers, Primary Health Centres and sub-centre;
 - the job descriptions of health supervisor (male and female), health workers, village health guide, anganwadi workers, traditional birth attendants;
 - the activities of the health team at the primary health centre.
- 3) Management techniques : Define and explain principles of management; explain the three broad functions of management (planning, implementation and evaluation) and how they relate to each other (Planning cycle).
- 4) Appreciate the need for International Health Regulations and Disease surveillance.
- 5) Disease management.
- 6) Concepts in Health Economics – including cost effectiveness, cost benefit.
- 7) Health for all, PHC concepts, principles & element.
- 8) HEALTH COMMITTEES: Bhore, Srivastava, Mudaliar.

DESIRABLE TO KNOW :

- 1) UNICEF, WHO.
- 2) HEALTH COMMITTEE: National Rural Health Commission (NRHM)
- 3) Five year plans.

NICE TO KNOW :

- 1) Constitutional provisions for health in India : Enumerate the three major divisions of responsibilities and functions (concerning health) of the Union and the State Governments.
- 2) Appreciate the role of National and International Voluntary Agencies in health care delivery.

XIX. OTHER SPECIAL GROUPS**MUST KNOW :**

Adolescent.

DESIRABLE TO KNOW :

- 1) Tribal health.
- 2) Children with special needs.

NICE TO KNOW :

- 1) Child guidance clinics.
- 2) Juvenile delinquency.

SKILLS**PART – I : GENERAL SKILLS :****MUST KNOW :**

- 1) Conduction of a clinico-social evaluation of the individual in relation to social, economic and cultural aspects; educational and residential background; attitude to health, disease and to health services; the individual's family and community.

- 2) Recognise common health problems of the community.
- 3) Apply elementary principles of epidemiology in carrying out simple epidemiological studies in the community.
- 4) Carry out health education effectively for the community.

NICE TO KNOW :

1. Assist in management of common health problems of the community.
2. Work as a team member in rendering health care.

PART – II : SKILLS IN RELATION TO SPECIFIC TOPICS :

1. Communication –

MUST KNOW :

- 1) The student should be able to communicate effectively with family members at home.
- 2) Patients at clinics or at home.

DESIRABLE TO KNOW :

Carry out health education for individuals, family or a group

NICE TO KNOW :

Communicate effectively with peers at scientific forums.

2. Team Activity -

DESIRABLE TO KNOW :

Work as a member of the health team in planning and carrying out field work like school health.

3. Environmental Sanitation -

MUST KNOW :

- 1) Chlorination of water; estimate the chlorine demand of water.
- 2) Estimate the residual chlorine of water.

DESIRABLE TO KNOW :

Collect water samples for microbiological evaluation.

4. Communicable and Non-communicable diseases -

MUST KNOW :

- 1) Eliciting clinico-social history and examination of the patient diagnosis and treatment. (It is already a part of general skills).
- 2) Fixing, staining and examining smears – peripheral blood smear for malaria and filariasis, sputum for AFB; slit skin smears for leprosy; Hb estimation; urine and stool examination. (This is more relevant under Microbiology & Clinical pathology).
- 3) Assessing the severity and / or classifying dehydration in diarrhoea, upper respiratory tract infection, dog bite, leprosy, tuberculosis.
- 4) Adequate and appropriate treatment and follow-up of leprosy, tuberculosis, malaria, filariasis, rabies, upper respiratory tract infections, diarrhoea and dehydration.
- 5) Advice on the prevention and prophylaxis of common diseases like tuberculosis, HIV/AIDS vaccine preventable diseases, tetanus, malaria, filariasis, rabies, cholera, typhoid, intestinal parasites.

DESIRABLE TO KNOW :

Take necessary steps in / disease outbreak / epidemics / natural disasters – investigation of epidemic, food poisoning; notification; organizing medical care following disasters.

5. Maternal and Child Health -

MUST KNOW:

- i) Antenatal – examination of the mother; application of the risk approach in antenatal care.
- ii) Intranatal – conducting a normal delivery; early recognition of danger in intranatal period; referral of cases requiring special care.
- iii) Postnatal – assessment of the mother and new born, advice on appropriate family planning method; promotion of breast feeding; advice on weaning.
- iv) Assessment of growth and development of the child – use of the ‘road to health’ card; recording important anthropometric assessments of the child; giving immunization to the child; identifying high risk infants.

6. Statistics -

MUST KNOW :

- 1) Application of sampling techniques.
- 2) Apply appropriate tests of significance to make a correct inference.
- 3) Simple analysis and presentation of data.

7. Nutrition -

MUST KNOW :

- 1) Community survey and clinical diagnosis of nutritional deficiencies :
- Vitamin A deficiency (more skills in Ophthalmology).
- 2) Diagnosis Malnutrition.
- 3) Plan and recommend a suitable diet for the individuals and families bearing in mind local availability of foods, economic status.

DESIRABLE TO KNOW :

- 1) Conducting a diet survey.
- 2) Community survey for Iodine deficiency.

8. Occupational Health -DESIRABLE TO KNOW :

Medical examination of workers. (skills obtained during internship).

NICE TO KNOW :

- 1) Assessment of a work site.
- 2) Recommendation in improving work sites.

9. Health care of the Community – (skills obtained only during internship)DESIRABLE TO KNOW :

- 1) Ensuring community participation in health care.
- 2) Arranging intersectoral coordination where necessary.
- 3) Working in liaison with other agencies involved in health care in various National Health Programmes.

10. Health Management – (skills only during internship)MUST KNOW :

Be an effective team member.

DESIRABLE TO KNOW :

- 1) Guide and train workers.
- 2) Supervision of workers and programmes.

11. Family Planning :- Advice on appropriate methods (during internship).

12. Managerial :- Organise antenatal and under-five clinic (during internship).

EVALUATION :**INTERNAL ASSESSMENT :*****80 marks**

Theory	40 marks
Practical	40 marks

Total	80 marks

PATTERN OF EXAMINATIONS: *****THEORY :****TWO PAPERS OF THREE HOURS DURATION – 100 MARKS EACH**

Paper I shall cover those topics of the syllabus serially numbered from I to VII under course contents.

Paper II shall cover those topics of the syllabus which are serially numbered from VIII TO XIX under course contents.

COMMUNITY MEDICINE (2 Papers) Each 100 marks

	No. of Questions	Marks
Essay	2 x 15 =	30
Short Notes	10 x 5 =	50
Short Answers	10 x 2 =	20

	Total =	100

PRACTICAL: I

Clinical Social Case Discussion	50

PRACTICAL: II

Epidemiological Exercises	4 x 10 = 40
Spotters & Specimen	5 x 2 = 10
VIVA	20

	120
Internal assessment	80

Grand Total

Theory 100 x 2	200
Practical	120
I.A.	80

	400

PRACTICAL EXAMINATION :**60 marks**

Practical I	:	30 marks
Clinical Social case discussion		
Practical II	:	
Epidemiological exercises (2x10):	20 marks	
Spotters & Specimen (5x2)	: 10 marks	
	-----	30 marks

	Total :	60 marks

VIVA 20 marks**Guidelines for Practical Examination :**

- 1) In all the subjects of III M.B.B.S Part-I, the no. of candidates examined per day shall not normally exceed 30.
- 2) There shall be Four examiners (2 External & 2 Internal) to conduct the Clinical & Viva Examinations.
- 3) For Viva : Two sets of examiners shall examine separately on different portions of the Syllabus.

MARKS QUALIFYING FOR A PASS :

50% in Theory	-	120/240
50% in Practical including viva	-	40 / 80
35% in Internal Assessment	-	28 / 80
Total 50% aggregate	-	200/400

* XX SAB held on 18-08-2000.

*** 38th Meeting of the Standing Academic Board held on 19.11.2009 with effect from February 2010 examination.

Syllabus for III M.B.B.S. Part – II

MEDICINE

Departmental Objectives :-

At the end of the clinical postings in General Medicine, the medical student should :

- be able to evaluate each patient as a person in society and not merely as a collection of organ systems.
- have developed an interest in and care for all types of patients.
- recognise differences between normal and abnormal behaviour.
- be able to discern the hopes and fears of patients which inevitably underlie the symptom complexes and know how to handle these emotions, both in the patient and in others.
- possess sound knowledge of common diseases, their clinical manifestations and natural history.
- elicit a good clinical history and physical findings, elucidate the clinical problems based on these and discuss the differential diagnosis.
- requisition relevant laboratory tests and perform common side lab procedures.
- be familiar with common imaging techniques, their advantages, disadvantages and indications; be aware of radiation hazards and measures to protect therefrom.
- outline the principles of management of various diseases, including the medical and surgical procedures available.
- describe the mode of action of commonly used drugs, their doses, side effects, toxicity, indications, contraindications and drug interactions.

- have an open attitude to the newer developments in medicine to keep abreast of new knowledge.
- diagnose and provide competent initial care to medical emergencies.
- refer medical problems to secondary and tertiary care at appropriate times.
- recognize the problems arising in patients of AIDS.
- have an understanding of the art of medicine involving communication with patients, demonstration of empathy, reassurance, patient education and an understanding of the patient's socio-economic circumstances in relation to management.
- learn to be adaptable to new ideas and new situations where resources may be limited.
- possess knowledge to perform certain procedures.
- understand the ethical and legal implications of one's medical decisions.

COURSE CONTENTS

I. CLINICAL METHODS IN THE PRACTICE OF MEDICINE

MUST KNOW :

- 1) Clinical approach to the patient : The art of medicine, doctor-patient relationship, communication skills and doctor's responsibilities.
- 2) Clinical approach to disease and care of patient; Diagnostic possibilities based on interpretation of history, physical findings and laboratory investigations and principles of rational management.

II. COMMON SYMPTOMS OF DISEASE

MUST KNOW :

- 1) Pain : Pathophysiology, clinical types, assessment and management.
- 2) Fever : Pathophysiology of heat regulation, its disturbances, clinical types, clinical assessment and management.
- 3) Cough, expectoration and haemoptysis.
- 4) Dyspnoea, tachypnoea, and cyanosis.
- 5) Common urinary symptoms including dysuria, oliguria, nocturia, polyuria, incontinence and enuresis.
- 6) Oedema and anasarca.
- 7) Shock and cardiovascular collapse.
- 8) Cardiac murmurs, functional and organic, and Palpitation.
- 9) Anorexia, nausea and vomiting.
- 10) Constipation and diarrhoea.
- 11) Haematemesis, malena and haematochezia.
- 12) Jaundice and hepatomegaly.
- 13) Abdominal swelling and ascites.
- 14) Weight loss and weight gain.
- 15) Fainting, syncope and seizures, headache, dizziness and vertigo.
- 16) Paralysis, movement disorders and disorders of gait.
- 17) Coma and other disturbances of consciousness.
- 18) Pallor and bleeding.

19) Enlargement of lymph nodes and spleen.

20) Joint pains and pain in the extremities and back.

III. NUTRITION / EXPOSURE TO PHYSICAL AND CHEMICAL AGENTS

MUST KNOW :

- 1) Nutrition in clinical medicine and dietary management :
 - i. Nutritional requirements.
 - ii. Protein calorie malnutrition in adults.
 - iii. Obesity.
 - iv. Vitamin deficiency and excess.
- 2) Fluid and electrolyte balance; acidosis and alkalosis in particular relevance to vomiting, diarrhoea, uraemia and diabetic ketoacidosis.
- 3) Poisonings : Phenobarbitone, organophosphorous compounds, sedative / hypnotic and others common in the locality.
- 4) Acute and chronic effects of alcohol and their management.
- 5) Venoms, stings, insect bites : Poisonous snakes, insects and scorpions.
- 6) Disturbances of temperature : Heat stroke, heat exhaustion and cold exposure.
- 7) Drowning, electrocution and radiation hazards.

IV. INFECTIONS

MUST KNOW :

- 1) Approach to infectious diseases – diagnostic and therapeutic principles.
- 2) General principles of rational use of antibiotics and other chemotherapy against the following :
 - i. Common gram positive infections.
 - ii. Common gram negative infections.
 - iii. Enteric fever.
 - iv. Cholera, gastroenteritis, food poisoning and dysentery.
 - v. Influenza and other common viral respiratory infections.
 - vi. Rabies.
 - vii. Tetanus.
 - viii. Herpes simplex and herpes zoster.
 - ix. Amoebiasis and worm infestations.
 - x. Malaria, filariasis.
 - xi. Common exanthemata.
 - xii. HIV infection and infections in the immunocompromised conditions.
 - xiii. Common sexually transmitted diseases.
 - xiv. Common fungal infections.
 - xv. Viral encephalitis.

xvi. Tuberculosis.

xvii. Leprosy.

xviii. Brucellosis.

xix. Leptospirosis.

DESIRABLE TO KNOW :

1) Leishmaniasis.

2) Infectious mononucleosis.

V. HAEMATOLOGY

MUST KNOW :

1) Definition, prevalence, aetiological factor, pathophysiology, pathology, recognition, investigations and principles of treatment of :

- i. Anaemias : Iron deficiency, megaloblastic and common haemolytic anaemias (thalassemia, sickle cell and acquired haemolytic).
- ii. Common bleeding disorders (thrombocytopenia and haemophilia).
- iii. Agranulocytosis and aplastic anaemia.

2) Leukaemias.

3) Lymphomas.

4) Blood group and transfusion : Major blood group systems and histocompatibility complex, concepts of transfusion and component therapy; indications for transfusion therapy, precautions to be taken during Blood transfusion, hazards of transfusion and safe handling of blood and blood products.

VI. RESPIRATORY SYSTEM

MUST KNOW :

- 1) Physiology and diagnostic methods : Sputum examination, X-ray chest, pulmonary function tests and bronchoscopy.
- 2) Upper respiratory infections.
- 3) Pneumonias.
- 4) Bronchiectasis and lung abscess.
- 5) Bronchial asthma and tropical eosinophilia.
- 6) Chronic obstructive airway disease and cor pulmonale.
- 7) Acute and chronic respiratory failure.
- 8) Diseases of pleura : pleural effusion, empyema, pneumothorax.
- 9) Pulmonary tuberculosis.
- 10) Neoplasms of lung.
- 11) Common occupational lung diseases.

VII. CARDIOVASCULAR SYSTEM

MUST KNOW :

- 1) Physiology & Clinical symptomatology, E.C.G., X-ray chest and ECHO with reference to common cardiovascular diseases.
- 2) Coronary artery disease.
- 3) Rheumatic fever and rheumatic heart disease.
- 4) Infective endocarditis.
- 5) Hypertension and hypertensive heart disease.

- 6) Acute and chronic heart failure.
- 7) Common congenital heart diseases in adolescents and adults : ASD, VSD, PDA, TOF and Coarctation of Aorta.
- 8) Common cardiac arrhythmias.
- 9) Acute and chronic pericarditis, pericardial effusion and cardiac tamponade.

DESIRABLE TO KNOW :

- 1) Common aortic diseases; peripheral vascular disease : arterial and venous.

VIII. GASTROINTESTINAL TRACT

MUST KNOW :

- 1) Stool examination.
- 2) Acid peptic disease.
- 3) Malabsorption syndrome.
- 4) Acute and chronic hepatitis.
- 5) Cirrhosis of liver.
- 6) Abdominal tuberculosis.
- 7) Pancreatitis.

DESIRABLE TO KNOW :

- 1) Inflammatory bowel disease and irritable bowel syndrome.
- 2) Endoscopy and radiology in reference to common gastrointestinal diseases.

IX. EMERGENCY MEDICINE

MUST KNOW :

- 1) Cardiopulmonary resuscitation.
- 2) Acute pulmonary oedema.
- 3) Hypertensive emergencies.
- 4) Diabetic ketoacidosis and hypoglycaemia.
- 5) Status epilepticus.
- 6) Acute severe bronchial asthma.
- 7) Shock.
- 8) Acute myocardial infarction.
- 9) Upper GI bleed and hepatic coma.
- 10) Diagnosis and management of comatose patient.
- 11) Management of poisoning.

X. NERVOUS SYSTEM

MUST KNOW :

- 1) Cerebrovascular diseases.
- 2) Meningitis : Viral, bacterial and tuberculosis.
- 3) Peripheral neuropathy.
- 4) Epilepsy.
- 5) Extrapyrmidal diseases.
- 6) Common compressive and noncompressive spinal cord syndromes.

- 7) Motor system disease.
- 8) Myasthenia gravis.
- 9) Common myopathies in India.
- 10) Degenerative, nutritional and metabolic diseases of the nervous system.

XI. URINARY SYSTEM

MUST KNOW :

- 1) Acute renal failure.
- 2) Chronic renal failure.
- 3) Glomerulonephritis and nephrotic syndrome.
- 4) Urinary tract infections / pyelonephritis.
- 5) Tubulointerstitial diseases and toxic nephropathies.

XII. CONNECTIVE TISSUE DISORDERS

MUST KNOW :

- 1) Rheumatoid arthritis.
- 2) Degenerative joint disease including cervical spondylosis.
- 3) Systemic lupus erythematosus, systemic sclerosis and other collagen vascular diseases.

DESIRABLE TO KNOW :

- 1) Gout.

XIII. ENDOCRINES

MUST KNOW :

- 1) Diabetes mellitus.
- 2) Hypo and hyperthyroidism; iodine deficiency disorders.
- 3) Cushing's syndrome and Addison's disease; Hyperaldosteronism.
- 4) Pituitary disorders : Gigantism, Acromegaly and Sheehan's syndrome.
- 5) Calcium and phosphorus metabolism : Parathyroid and metabolic bone disease.

XIV. GERIATRICS

DESIRABLE TO KNOW :

- 1) Presentation of diseases in the elderly; Identification of common diseases.
- 2) Diet for the aged; Management of Nutritional disorders.
- 3) Acute medical problems – infections, dehydration, acute confusional states.
- 4) Osteoporosis; Degenerative joint diseases; effects of immobility – prevention of contracture and bedsores.
- 5) Neurological disturbances – management & rehabilitation.

XV. DERMATOLOGY

MUST KNOW :

- 1) Diseases caused by nutritional and environmental factors.
- 2) Infective disorders : Pyodermas, Common Viral and Fungal infections.
- 3) Infestations : Scabies, Pediculosis.

- 4) Allergic disorders : Urticaria, Atopic dermatitis, and contact dermatitis.
- 5) Common drug reactions and eruptions : Erythema multiforme, Toxic epidermal necrolysis and Exfoliative dermatitis.
- 6) Dermatitis and Eczema.
- 7) Alopecia and Hirsutism.
- 8) Sebaceous glands : Structure and Function; Acne, Seborrhoeic dermatitis, Other diseases; Pityriasis capitis.
- 9) Sweat glands : Structure, Function and Diseases; Miliaria, Hyperhidrosis.
- 10) Leprosy : Classification, Pathology, Clinical features, Diagnosis, Reactions, Management, Deformities and Control Programme.
- 11) Psoriasis.
- 12) Lichen Planus.
- 13) Sexually Transmitted Diseases : Genital ulcerative diseases, Genital discharge diseases.
- 14) Dermatological therapy.

DESIRABLE TO KNOW :

Vesiculobullous Diseases : Pemphigus, Pemphigoid and Dermatitis herpetiformis.

NICE TO KNOW :

Melanocyte, Pigment metabolism and disorders of pigmentation; Ichthyosis.

XVI. PSYCHIATRY

MUST KNOW :

- 1) Classification of the different types of psychoses; differences between psychoses and neuroses; difference between functional and organic psychoses.
- 2) Clinical features, diagnosis and management of : Schizophrenia; Bipolar mood disorder and depression; Anxiety disorders and hysteria; Dementia; Alcoholism; Substance abuse.
- 3) Clinical recognition and initial therapy of psychiatric emergencies.

DESIRABLE TO KNOW :

- 1) Eliciting a detailed psychiatric history and conducting a mental status examination; defining, eliciting and interpreting psychopathological symptoms and signs.
- 2) Concepts underlying normal and abnormal human behaviour; principles of learning, memory, personality and intelligence; psychopathology (behavioural sciences).
- 3) Psychogeriatrics.

NICE TO KNOW :

- 1) Historical aspects of the diagnosis and treatment of mental illness; concept of mental health Vs mental illness; classificatory system currently in use in psychiatry.
- 2) Clinical features, diagnosis and management of psychiatric disorders of childhood and adolescence.
- 3) Personality disorders.

XVII. RADIODIAGNOSIS

MUST KNOW :

- 1) Respiratory system : Diagnosis of common conditions like tuberculosis, consolidation, pleural effusion, pneumothorax, lung abscess, collapse, bronchogenic carcinoma and mediastinal masses; Differential diagnosis of mediastinal masses; indications for bronchography, tomography and CT scans.
- 2) Cardiovascular system : Normal topography of heart, cardiomegaly; Common rheumatic heart diseases and pericardial effusion.
- 3) Gastrointestinal system : Diagnosis of acute abdominal conditions like intestinal obstruction and perforation; Indications and contraindications for Barium studies; Differential diagnosis of calcification and stones on plain X-ray; Diagnosis of gastric ulcer / duodenal ulcer / cancer stomach / oesophageal cancer on Barium studies.
- 4) Skeletal System : Diagnosis of common fractures, caries spine, osteomyelitis, nutritional deficiencies like rickets, common bone tumours and diseases of joints.
- 5) Excretory System : Identification of renal calculi; Contrast studies.

SKILLS

1. Obtain a proper relevant history and perform a humane and thorough clinical examination including internal examinations (per – rectal and per – vaginal) and examinations of all organs / systems in adults.
2. Arrive at a logical working diagnosis after clinical examination.
3. Order appropriate investigations keeping in mind their need, relevance and cost effectiveness.

Plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments taking into consideration :-

- a. Patient,
 - b. disease,
 - c. Socio-economic status,
 - d. Institutional / Governmental guidelines.
4. Recognize situations which call for urgent or early treatment at secondary and tertiary centers and make a prompt referral of such patients after giving first aid or emergency treatment.
 5. Assess and manage fluid / electrolyte and acid-base imbalance.
 6. Interpret abnormal biochemical laboratory values of common diseases.
 7. Interpret skiagrams of common diseases.
 8. Identify irrational prescriptions and explain their irrationality.
 9. Interpret serological tests such as VDRL, ASLO, Widal, HIV, Rheumatoid factor, Hepatitis and TORCH infections.
 10. Demonstrate empathy and humane approach towards patients, relatives and attendants.
 11. Demonstrate interpersonal and communication skills befitting a physician in order to discuss the illness and its outcome with patient and family.
 12. Write a complete case record with all necessary details.
 13. Write a proper discharge summary with all relevant information.
 14. Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.
 15. Assess the need for and issue proper medical certificates to patients for various purposes.

16. Adopt universal precautions for self protection against HIV and hepatitis and counsel patients.
17. Perform skin sensitivity tests for drugs and serum.
18. Record and interpret an ECG and be able to identify common abnormalities like myocardial infarction and arrhythmias.
19. Start i.v. line and infusion.
20. Do venous cutdown.
21. Give intradermal / SC / IM / IV injections.
22. Insert and manage a C.V.P. line.
23. Conduct CPR (Cardiopulmonary resuscitation) and first aid in newborns, children and adults including endotracheal intubation.
24. Pass a nasogastric tube.
25. Pass a stomach tube and do stomach wash.
26. Administer enemas.
27. Do lumbar puncture.
28. Do pleural / peritoneal tap.
29. Aspirate liver abscess.
30. Catheterise bladder in both males and females.
31. Relieve tension pneumothorax by inserting a needle.
32. Administer O₂ by mask, catheter and O₂ tent and be able to handle O₂ cylinder.
33. Insert flatus tube.
34. Provide first aid to patients with peripheral vascular failure and shock.

35. Manage acute anaphylactic shock.
36. Manage diarrhoeas / dysenteries; Assess dehydration; prepare and administer oral rehydration therapy (ORT).
37. Manage emergencies of drowning.
38. Manage common poisoning.
39. Manage acute pulmonary oedema and left ventricular failure.
40. Manage acute severe bronchial asthma.
41. Do emergency management of epilepsy and status epilepticus.
42. Do emergency management of comatose patients regarding airway, positioning, prevention of aspiration and injuries.
43. Manage hyperpyrexia.
44. Perform skin scrapings and do a KOH preparation for fungus infections.
45. Prepare slit skin and nasal smear for lepra bacilli.
46. Do staining for STD Cases.
47. Do psychiatric evaluation and recognize common psychiatric illnesses.
48. Use of questionnaires in psychology.
49. Use of intelligence tests.
50. More emphasis on HIV.
51. Emphasis on Tropical Medicine.
52. Emphasis on National Programme like Malaria, RNTCP, DOTs, & ART etc.,

EVALUATION :**INTERNAL ASSESSMENT :*****160 marks**

Theory	60 marks
Record	20 marks

Total (Theory & Record)	80 marks
Clinical	80 marks

Total I.A.	160 marks

PATTERN OF EXAMINATIONS:**THEORY :**

Two Papers of three hours duration 100 marks each.

Paper I – General Medicine.

Paper II – General Medicine

(including Psychiatry, Dermatology,
S.T.D., Tuberculosis & Chest Diseases).

PATTERN OF QUESTION PAPER : **

Essay Questions	-	2 x 15 Marks	= 30 Marks
Short Notes	-	10 x 5 Marks	= 50 Marks
Short Answer Questions	-	10 x 2 Marks	= 20 Marks

		Total =	100 Marks

* XXV SAB held on 25-06-2003.

** MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

PRACTICAL EXAMINATION..... 120 marks

It should consist of :

1. Long Case - One	60 marks
2. Short Case - One	30 marks
3. Spotter – Two	30 marks

Total : 120 marks

VIVA..... 20 marks

Charts.....	5 marks
Instruments	5 marks
X-ray	5 marks
Drug/ECG/CT/VSG...	5 marks

Total 20 marks

GUIDELINES FOR CLINICAL AND VIVA

In all subjects of III M.B.B.S. Part II, the number of candidates examined daily in clinical and viva shall not normally exceed 24.

Clinical I	-	One Long case	-	1 hour	60 marks
Clinical II	-	One Short case	-	15 min.	30 marks
		Two Spotters	-	15 min.	30 marks
Total					120 marks

There shall be four Examiners working as two pairs to conduct the examination for two batches of students.

Viva Voce I – Specimens, drugs, instruments, X-rays, ECG/CT/VSG.

Viva Voce II – Charts and Theory.

Two pairs of Examiners shall conduct the Viva Examination.

MARKS QUALIFYING FOR A PASS

50% in Theory Written	-	100/200
50% in University Clinical	-	60/120
Viva	-	--/20
35% in Internal Assessment		
Theory & Record.....	28/80	
Clinical	28/80	
	-----	= 56/160
Total 50% aggregate	=	250/500

SYLLABUS FOR III M.B.B.S. PART-II

SURGERY

A. GENERAL SURGERY

Departmental Objectives :

At the end of the training, the undergraduate student should be able to :

- a) Diagnose and appropriately treat common surgical ailments.
- b) Identify situations calling for urgent or early surgical intervention and refer at the optimum time to the appropriate centers.
- c) Requisition and interpret basic relevant investigations.
- d) Provide adequate Pre and Post operative and follow up care of surgical patients.
- e) Counsel and guide patients and relatives regarding need, implications and problems of surgery in the individual patient.
- f) Develop adequate and right attitude in dealing with surgical problems of patients.
- g) Provide emergency resuscitative measures in acute surgical situations including trauma.
- h) Organise and conduct relief measures in situations of mass casualties.
- i) Effectively participate in the National Health Programmes especially the Family Welfare Programme.
- j) Discharge effectively medico-legal and ethical responsibilities.
- k) Perform simple routine surgical procedures.

COURSE CONTENTS

1. GENERAL PRINCIPLES

MUST KNOW :

- 1) Wound Healing and Management; Scars: Hypertrophic scar and keloid; First aid management of severely injured.
- 2) Asepsis, antisepsis, sterilization.
- 3) Surgical sutures, knots, drains, bandages and splints.
- 4) Surgical infections and rational use of antibiotics : Causes of infection, prevention of infection, common organisms causing infection.
- 5) Boils, cellulitis, abscess, necrotising fasciitis.
- 6) Tetanus and Gas gangrene : Prevention and treatment.
- 7) Chronic specific infections : Tuberculosis, Filariasis, Leprosy.
- 8) Antibiotic therapy.
- 9) AIDS and Hepatitis B.
- 10) Surgical aspects of diabetes mellitus.
- 11) Bites and stings.
- 12) Universal Precautions.

DESIRABLE TO KNOW :

- 1) Hospital infection.
- 2) Mechanisms and management of missile, blast and gunshot injuries.
- 3) Organ transplantation : Basic Principles.
- 4) Nutritional support to surgical patients.

II. RESUSCITATION

MUST KNOW :

- 1) Fluid and Electrolyte balance.
- 2) Shock : Aetiology, Pathophysiology and Management.
- 3) Blood Transfusion : Indications and hazards.
- 4) Common post operative complications.

III. COMMON SKIN AND SUBCUTANEOUS CONDITIONS

MUST KNOW :

- 1) Sebaceous cyst, dermoid cyst, lipoma, Haemangioma, Neurofibroma, pre-malignant conditions of the skin, Basal cell carcinoma, squamous cell carcinoma, Naevi and malignant melanoma.
- 2) Sinuses and fistulae.
- 3) Pressure sores : Prevention and management.

IV. ARTERIAL DISORDERS

MUST KNOW :

Acute arterial obstruction : diagnosis and initial management; types of gangrene; diagnosis of chronic arterial insufficiency with emphasis on Buerger's disease, atherosclerosis; Investigation in case of arterial obstruction.

DESIRABLE TO KNOW :

Amputations.

NICE TO KNOW :

Vascular injuries : Basic principles of management.

V. VENOUS DISORDERS

MUST KNOW :

1. Varicose veins : diagnosis and management; deep venous thrombosis; diagnosis, prevention, principles of therapy; thrombophlebitis.

VI. LYMPHATICS AND LYMPH NODES

MUST KNOW :

Diagnosis and principles of management of lymphangitis, lymphedema, acute and chronic lymphadenitis; cold abscess; lymphomas; surgical manifestations of filariasis.

VII. BURNS

MUST KNOW :

Causes, prevention and first aid management; Pathophysiology; assessment of depth and surface area, fluid resuscitation.

DESIRABLE TO KNOW :

Skin cover; prevention of contractures.

VIII. SCALP, SKULL AND BRAIN

MUST KNOW :

Wounds of scalp and their management.

DESIRABLE TO KNOW :

Recognition, diagnosis and monitoring of patients with head injury including unconsciousness; Glasgow coma scale; recognition of acute cerebral compression.

XI. ORAL CAVITY, JAW, SALIVARY GLANDS

MUST KNOW :

- 1) Cleft lip and palate; Leukoplakia; retention cysts; ulcers of the tongue.
- 2) Features, diagnosis and basic principles of management of carcinoma lip, buccal mucosa and tongue, prevention and staging of oral carcinomas.
- 3) Salivary Glands: Acute sialoadenitis, neoplasms: diagnosis and principles of management.

DESIRABLE TO KNOW :

Epulis, cysts and tumors of jaw; maxillofacial injuries; salivary fistulae.

X. NECK

MUST KNOW :

- 1) Branchial cyst; cystic hygroma.
- 2) Cervical lymphadenitis : Non specific and specific, tuberculosis of lymph nodes, secondaries in neck.
- 3) Thoracic outlet syndrome : diagnosis.

XI. THYROID GLAND

MUST KNOW :

Thyroid : surgical Anatomy, Physiology, investigations of thyroid disorders; types, clinical features, diagnosis and principles of management of goitre, thyrotoxicosis and malignancies; thyroglossal cyst and fistula.

DESIRABLE TO KNOW :

Thyroiditis, Hypothyroidism.

XII. PARATHYROID AND ADRENAL GLANDS

DESIRABLE TO KNOW :

Clinical features and diagnosis of hyperparathyroidism, adrenal hyperfunction / hypofunction.

XIII. BREAST

MUST KNOW :

- 1) Surgical anatomy; nipple discharge; acute mastitis, breast abscess; mammary dysplasia; gynaecomastia; fibroadenomas.
- 2) Assessment and investigation of a breast lump.
- 3) Cancer breast : diagnosis, staging, principles of management.

XIV. THORAX

DESIRABLE TO KNOW :

- 1) Recognition and treatment of pneumothorax, haemothorax; pulmonary embolism; prevention / recognition and treatment; flail chest; stove in chest; postoperative pulmonary complications.
- 2) Principles of management of pyothorax; cancer lung.

XV. HEART AND PERICARDIUM

NICE TO KNOW :

Scope of cardiac surgery.

XVI. OESOPHAGUS

MUST KNOW :

Dysphagia : Causes, investigations and principles of management.

NICE TO KNOW :

Cancer Oesophagus : Principles of management.

XVII. STOMACH AND DUODENUM

MUST KNOW :

Anatomy, Physiology; Congenital hypertrophic pyloric stenosis; Aetiopathogenesis, diagnosis and management of : peptic ulcer, cancer stomach; upper gastrointestinal haemorrhage with special reference to bleeding varices and duodenal ulcer.

XVIII. LIVER

MUST KNOW :

Clinical features, diagnosis and principles of management of : Amoebic liver abscess, hydatid cyst and portal hypertension.

DESIRABLE TO KNOW :

Surgical anatomy; primary and secondary neoplasms of liver.

XIX. SPLEEN

MUST KNOW :

Splenomegaly : causes, investigations and indications for splenectomy; splenic injury.

XX. GALL BLADDER AND BILE DUCTS

MUST KNOW :

Anatomy, Physiology and investigations of biliary tree; clinical features, diagnosis, complications and principles of management of cholelithiasis and cholecystitis; obstructive jaundice.

NICE TO KNOW :

Carcinoma gall bladder, choledochal cyst.

XXI. PANCREAS

MUST KNOW :

Acute pancreatitis : clinical features, diagnosis, complications and management.

DESIRABLE TO KNOW :

Chronic pancreatitis, cancer pancreas.

XXII. PERITONEUM, OMENTUM, MESENTERY AND RETROPERITONEAL SPACE

MUST KNOW :

Peritonitis : causes, recognition and principles of management intraperitoneal abscesses.

DESIRABLE TO KNOW :

Laparoscopy.

XXIII. SMALL AND LARGE INTESTINES

MUST KNOW :

- 1) Diagnosis and principles of treatment of : Intestinal amoebiasis, tuberculosis of intestine, carcinoma colon; lower gastrointestinal haemorrhage.
- 2) Ulcerative colitis, Premalignant conditions of large bowel.
- 3) Intestinal Obstruction : Types, aetiology, diagnosis and principles of management; paralytic ileus.
- 4) Acute Abdomen : Causes, approach, diagnosis and principles of management.
- 5) Appendix : Diagnosis and management of acute appendicitis, appendicular lump and abscess.

XXIV. RECTUM

MUST KNOW :

Carcinoma of rectum : diagnosis, clinical features and principles of management : indications and management of colostomy.

DESIRABLE TO KNOW :

Prolapse of rectum.

XXV. ANAL CANAL

MUST KNOW :

- 1) Surgical anatomy – Clinical features and management of : fissure, fistula in ano, perianal and ischiorectal abscess and haemorrhoids; Diagnosis and referral of anorectal anomalies.
- 2) Anal carcinoma.

XXVI. HERNIAS

MUST KNOW :

Clinical features, diagnosis, complications and principles of management of : umbilical, inguinal and femoral hernia.

DESIRABLE TO KNOW :

Epigastric hernia; omphalitis; umbilical fistulae; burst abdomen and ventral hernia.

XXVII. GENITO-URNIARY SYSTEM

MUST KNOW :

- 1) Symptoms and Investigations of the urinary tract.
- 2) Investigation of renal mass; diagnosis and principles of management of urolithiasis, hydronephrosis, pyonephrosis, perinephric abscess and renal tumours.
- 3) Renal tuberculosis.
- 4) Causes, diagnosis and Principles of management of haematuria, anuria and acute retention of urine.
- 5) Benign prostatic hyperplasia; diagnosis and management.
- 6) Diagnosis and principles of management of Phimosis, paraphimosis and carcinoma penis.
- 7) Diagnosis and principles of treatment of undescended testis, torsion testis, hydrocoele, haematocoele, pyocoele, epididymoorchitis and testicular tumours.
- 8) Varicocele.

DESIRABLE TO KNOW :

- 1) Carcinoma prostate.
- 2) Principles of management of urethral injuries.

SKILLS

1. Obtain a proper relevant history and perform a humane and thorough clinical examination including internal examinations (per-rectal and per-vaginal) and examinations of all organs / systems in adults and children.
2. Arrive at a logical working diagnosis after clinical examination.
3. Order appropriate investigations keeping in mind their relevance (need based) and cost effectiveness.
4. Plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments taking into consideration :
 - a. Patient,
 - b. Disease,
 - c. Socio-economic status,
 - d. Institutional / Governmental guidelines.
5. Recognize situations which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.
6. Demonstrate empathy and humane approach towards patients, relatives and attendants.
7. Develop a proper attitude towards patients, colleagues and other staff.
8. Demonstrate interpersonal and communication skills befitting a surgeon in order to discuss the illness and its outcome with patient and family.
9. Establish rapport and talk to patients, relatives and community regarding all aspects of medical care and disease.

10. Write a complete case record with all necessary details.
11. Write a proper discharge summary with all relevant information.
12. Write a proper referral note to secondary or tertiary centres or to other surgeons with all necessary details.
13. Assess the need for and issue proper medical certificate to patients for various purposes.
14. Maintain an ethical behaviour in all aspects of medical practice.
15. Appreciate patient's right to privacy.
16. Obtain informed consent for any examination / procedure.
17. Be able to do surface marking of common superficial arteries, veins, nerves and viscera.
18. Assess and manage fluid / electrolyte and acid base imbalance.
19. Adopt universal precautions for self protection against HIV and hepatitis and counsel patients.
20. Start i.v. line and infusion in adults, children and neonates.
21. Do venous cutdown.
22. Give intradermal / S.C. / I.M. / I.V. injection.
23. Insert and manage a C.V.P. line.
24. Conduct C.P.R. (Cardiopulmonary resuscitation) and first aid in newborns, children and adults including endotracheal intubation.
25. Pass a nasogastric tube.
26. Pass a stomach tube and do stomach wash.
27. Perform vasectomy.

28. Perform circumcision.
29. Perform reduction of paraphimosis.
30. Do Proctoscopy.
31. Do injection and banding of piles.
32. Incise and drain superficial abscesses; do dressing.
33. Manage superficial wounds and do suturing of superficial wounds & wound toilet.
34. Remove small cutaneous / subcutaneous swellings.
35. Control external haemorrhage.
36. Catheterise bladder in both males and females.
37. Perform nerve blocks like infiltration, digital, pudendal, paracervical and field block.
38. Relieve tension pneumothorax by inserting a needle.
39. Insert flatus tube.
40. Provide first aid to patients with peripheral vascular failure and shock.
41. Assess degree of burns and administer emergency management.

B. ORTHOPAEDICS

Departmental Objectives :-

At the end of the training, the student should be able to :

Describe the aetiology, pathophysiology, principles of diagnosis and management of common orthopaedic problems including emergencies.

COURSE CONTENTS

I. TRAUMA

DESIRABLE TO KNOW :

- 1) General principles in diagnosis, first aid and treatment methods of closed fractures and open fractures, open reduction including principles of internal fixation and external fixation, their complications. Preservation of amputated parts before transfer.
- 2) General principles of diagnosis and management of non-unions and delayed unions.

II. DIAGNOSIS, FIRST AID AND REFERRAL OF

MUST KNOW :

- 1) Fracture clavicle.
- 2) Anterior dislocation of shoulder.
- 3) Fracture femur neck, trochanter and shaft.
- 4) Haemarthrosis, traumatic synovitis.
- 5) General principles of management of hand injuries.
- 6) Polytrauma.
- 7) Complications of fracture : Fat embolism, Ischaemic contracture, myositis ossificans, osteodystrophy.

DESIRABLE TO KNOW :

- 1) Fracture proximal end, shaft, supracondylar, and internal condylar humerus.
- 2) Posterior dislocation of elbow.
- 3) Fracture shaft of radius and ulna.

- 4) Fracture of distal radius.
- 5) Traumatic dislocation of hip.
- 6) Fracture patella.
- 7) Fracture shaft tibia and fibula.
- 8) Injury to muscles and ligaments (shoulder arc syndrome, tennis elbow, ankle sprain).
- 9) Peripheral nerve injuries.
- 10) Spinal injuries.
- 11) Fracture of olecranon.
- 12) Monteggia fracture dislocation.

III. INFECTIONS OF BONES AND JOINTS

Diagnosis and Principles of Management :-

MUST KNOW :

- 1) Osteomyelitis : Pyogenic, tubercular, fungal (Madurafoot), syphilitic and parasitic infection of bone.
- 2) Arthritis : Septic and tubercular.
- 3) Tuberculosis of the spine.

DESIRABLE TO KNOW :

Leprosy – Principles of corrective surgery.

IV. TUMOURS

Diagnosis and Principles of Management :-

MUST KNOW :

- 1) Benign lesions : Multiple exostosis, Enchondroma, Osteoid osteoma, Simple bone cyst, Osteochondroma.
- 2) Malignant lesions : Osteosarcoma, Ewing's sarcoma, Giant cell tumour, Chondrosarcoma and Secondary deposits.

V. DEGENERATIVE DISEASES

Diagnosis and Principles of Management :-

DESIRABLE TO KNOW :

- 1) Osteoarthritis.
- 2) Spondylosis.
- 3) Degenerative disc diseases.

VI. CONGENITAL ANOMALIES

Diagnosis and Principles of Management :-

DESIRABLE TO KNOW :

- 1) Congenital dislocation hip.
- 2) Congenital talipes equinovarus.
- 3) Pes Planus.

VII. BONE DYSPLASIA

Diagnosis and Principles of Management :-

NICE TO KNOW :

- 1) Osteogenesis imperfecta.
- 2) Achondroplasia.

VIII. NEURO-MUSCULAR DISORDERS

Diagnosis and Principles of Management :-

DESIRABLE TO KNOW :

- 1) Post-polio residual Paralysis.
- 2) Cerebral palsy.

IX. OSTEOCHONDROSES

Diagnosis and Principles of Management :-

DESIRABLE TO KNOW :

Perthe's disease.

X. DEFORMITIES

MUST KNOW :

- 1) Scoliosis – diagnosis and referral.
- 2) Genu Varum and Valgum – diagnosis.

XI. PREVENTIVE ORTHOPAEDICS

**XII. BASIC PRINCIPLES OF PHYSIOTHERAPY,
OCCUPATIONAL THERAPY AND ORTHOTICS / PROSTHETICS**

NICE TO KNOW :

- 1) Physiatric evaluation of common neurological diseases.
- 2) Physiatric evaluation of common orthopaedic conditions.
- 3) Principles of Cardiopulmonary Rehabilitation.

DESIRABLE TO KNOW :

- 1) Principles of Exercise therapy, Electrotherapy and Occupational therapy.
- 2) Principles of Orthotics and Prosthetics.

SKILLS

1. Obtain a proper relevant history, and perform a humane and thorough clinical examination in adults and children including neonates.
2. Arrive at a logical working diagnosis after examination.
3. Plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments.
4. Recognise situations which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.
5. Be able to do surface marking of common superficial arteries, veins, nerves and viscera.
6. Interpret skiagrams of common fractures and dislocations.
7. Apply skin traction.

8. Apply figure of 8 bandage for fracture clavicle.
9. Apply POP slabs / casts and splints.
10. Transport safely victims of accidents including those with spinal injury.
11. Reduce Colle's fracture.
12. Reduce shoulder dislocation.
13. Reduce temporo-mandibular joint dislocation.
14. Perform nerve blocks like infiltration, digital, pudendal, paracervical and field block.

C. RADIOTHERAPY

Departmental Objectives :-

At the end of the training in Radiotherapy, the student should be able to :

- 1) Exhibit awareness of the principles of radiotherapy, the radio-responsiveness of various tumours and management of common cancers like cervical, breast and oral cancers.
- 2) Refer for further consultation at appropriate time without delay.
- 3) State general complications of irradiation and their management.
- 4) List common chemotherapeutic drugs for cancer and their toxicity.
- 5) Implement health education programmes regarding prevention and early diagnosis of tobacco related cancers, cervical cancers and breast cancers.
- 6) Know the general outlines of use of radio-isotopes in diagnosis and therapy.

COURSE CONTENTS

MUST KNOW :

- 1) Physical principles of radiotherapy.
- 2) Principles of cancer chemotherapy.
- 3) Prevention of cancer.
- 4) Early diagnosis of cancer.
- 5) Principles of nuclear medicine.
- 6) Radio-responsiveness of various tumours.
- 7) Common radiation reactions and management.
- 8) Radio-isotopes in diagnosis and therapy.

D. ANAESTHESIOLOGY

Departmental Objectives :

At the end of the training, the student should be able to :

Perform cardio-pulmonary resuscitation with the available resources and transfer the patient to a bigger hospital for advanced life support.

Set up intravenous infusion.

Clear and maintain airway in an unconscious patient.

Administer oxygen correctly.

Perform simple nerve block.

Exhibit awareness of the principles of administration of general and local anaesthetics.

COURSE CONTENTS

MUST KNOW :

- 1) Cardiopulmonary resuscitation (C.P.R.) – basic and advanced, including use of simple ventilators.
- 2) Anatomy of upper airway; sites of respiratory obstruction and management of airway in an unconscious patient.
- 3) The pharmacology of local anaesthetics, their use and how to perform simple nerve blocks like,
 - Infiltration anaesthesia.
 - Digital block.
 - Ankle block.
 - Pudendal and paracervical blocks.

DESIRABLE TO KNOW :

- 1) Various methods of oxygen therapy and its indications.
- 2) Management of complication of regional anaesthesia.
- 3) The principles of administration of general anaesthetics.

SKILLS

1. Start i.v. line and infusion in adults, children and neonates.
2. Do venous cutdown.
3. Insert and manage a C.V.P. line.
4. Conduct C.P.R. (Cardiopulmonary resuscitation) and first aid in newborns, children and adults including endotracheal intubation.
5. Do lumbar puncture.
6. Perform nerve blocks like infiltration, digital, pudendal, paracervical and field block.

7. Administer O₂ by mask, catheter and O₂ tent and be able to handle O₂ cylinder.

EVALUATION:

INTERNAL ASSESSMENT :*

160 marks

Theory	60 marks
Record	20 marks

Total (Theory & Record)	80 marks
Clinical	80 marks

Total I.A.	160 marks

PATTERN OF EXAMINATIONS :

THEORY :

Two Papers of three hours duration 100 marks each :

- Paper I – Section A : General Surgery.
 Section B : Orthopaedics.
 Paper II – Section A : General Surgery.
 Section B : Anaesthesiology,
 Dentistry & Radiology.

PATTERN OF QUESTION PAPER : **

Essay Questions	-	2 x 15 Marks	= 30 Marks
Short Notes	-	10 x 5 Marks	= 50 Marks
Short Answer Questions	-	10 x 2 Marks	= 20 Marks

Total =			100 Marks

* XXI SAB held on 28-2-2001

** MCQ's withdrawn from August 2008 onwards – 35th

GUIDELINES FOR CLINICAL AND VIVA

In all subjects of III M.B.B.S. Part – II, the number of candidates examined daily in clinical and viva shall not normally exceed 24.

CLINICAL :-

Clinical – I (General Surgery)		
One Long case	1 hour	60 marks
Clinical – II Two short cases	30 mts	40 marks
(One General Surgery + One ortho)		
Two Spotters	30 mts	20 marks
(One General Surgery + One ortho)		-----
Total		120 marks

Four Examiners: Three General Surgery, One Ortho (One Professor of General Surgery; One Prof. of Ortho from the same Institution) + two external examiners for General Surgery

VIVA 20 marks

MARKS QUALIFYING FOR A PASS

50% in Theory Written	-	100/200
50% in University Clinical	-	60/120
Viva	-	- /20
35% in Internal Assessment		
Theory & Record.....		28/80
Clinical		28/80
	-----	-
		56/160
Total 50% aggregate	=	250/500

III M.B.B.S. – PART-II

OBSTETRICS AND GYNAECOLOGY

Departmental Objectives :-

At the end of the training in Obstetrics and Gynaecology, the M.B.B.S. student should be able to :

- 1) Appreciate the socio-cultural, economic and demographic factors that influence the practice of Obstetrics and Gynaecology.
- 2) Appreciate the principles of reproductive Anatomy and Physiology.
- 3) Understand the preconception, antenatal, intranatal and postnatal factors including drugs that affect the mother and foetus.
- 4) Recognise the changes and adaptation that occur in the mother during pregnancy, labour and puerperium.
- 5) Impart antenatal care, detect deviations from normal pregnancy and refer risk cases appropriately.
- 6) Manage normal labour, recognise the factors that may lead to complications and refer such cases appropriately.
- 7) Institute primary treatment in Obstetrics and Gynaecological emergencies.
- 8) Resuscitate and take adequate care of the newborn.
- 9) Assist couples with infertility and those requiring contraception.
- 10) Know the aetiopathology and management of menstrual abnormalities.
- 11) Know about the benign and malignant tumours of the genital tract and appreciate the need for screening and prevention.

- 12) Recognise the importance of infections and other diseases of the genital tract and give appropriate treatment.
- 13) Know about the displacements of genital tract and injuries.
- 14) Understand the implications of medicolegal and ethical issues concerning the speciality.
- 15) Acquire communication, decision making and managerial skills.
- 16) Acquire skills to perform Obstetrical and Gynaecological examinations and certain minor investigations and therapeutic operative procedures.

COURSE CONTENTS

A. OBSTETRICS

I. BROAD PERSPECTIVES

MUST KNOW :

- 1) Vital statistics, birth rate, maternal mortality, perinatal and neonatal mortality, live birth, still birth, abortion, period of viability including definitions of all the above.

II. ANATOMY OF THE FEMALE REPRODUCTIVE TRACT

MUST KNOW :

- 1) Basic Anatomy : Relationship to other pelvic organs. Applied Anatomy as related to Obstetric and Gynaecological surgery.

III. PHYSIOLOGY OF CONCEPTION

MUST KNOW :

- 1) Gametogenesis.
- 2) Ovulation, menstruation, fertilization and implantation.

IV. DEVELOPMENT OF FOETUS AND PLACENTA

MUST KNOW :

- 1) Basic embryology, factors influencing foetal growth and development; anatomy of placenta.

NICE TO KNOW :

Teratogenesis, placental barrier.

V. DIAGNOSIS OF PREGNANCY

MUST KNOW :

Clinical features; differential diagnosis; principles underlying the pregnancy tests.

DESIRABLE TO KNOW :

Immunological tests and their interpretation; ultrasonogram.

VI. MATERNAL CHANGES IN PREGNANCY

MUST KNOW :

- 1) Genital tract, cardiovascular system and haematology.
- 2) Respiratory and gastrointestinal system.

VII. ANTENATAL CARE

MUST KNOW :

- 1) Objectives of antenatal care; assessment of period of gestation; detect abnormality with the help of gravidogram; clinical monitoring of maternal and foetal well-being; detect normal foetal pelvic relation (obstetrical palpation); advise regarding nutrition; prescribing in pregnancy; immunization against tetanus; basic investigations.

- 2) Foetal well-being : biophysical monitoring; pelvic assessment.

VIII. COMPLICATIONS OF EARLY PREGNANCY

MUST KNOW :

- 1) Abortions : Definition, Types, Causes; Management of incomplete, inevitable abortion.
- 2) Ectopic Pregnancy : Clinical features; differential diagnosis of acute abdomen; principles of surgical management; causes and conservative management of ectopic pregnancy.
- 3) Hyperemesis Gravidarum : Aetiopathology; Impact on maternal and foetal health; principles of management.
- 4) Gestational Trophoblastic Tumours : Clinical features; differential diagnosis; principles of management; follow up; Laboratory investigations and ultrasonography.

IX. ANTEPARTUM HAEMORRHAGE

MUST KNOW :

- 1) Classification; clinical features; differential diagnosis; principles of management.
- 2) Aetiopathology; ultrasonography; complications and management.

X. ABNORMAL PRESENTATIONS AND CONTRACTED PELVIS

MUST KNOW :

- 1) Causes, salient features; principles of management of occipito-posterior, face and brow presentation;
- 2) Obstructed labour : definition, clinical features, prevention; mechanism of breech delivery.

XI. MULTIPLE PREGNANCIES

MUST KNOW :

- 1) Clinical features; diagnosis and complications; principles of management; investigations.
- 2) Causes; management.

XII. PREGNANCY –INDUCED HYPERTENSION

MUST KNOW :

- 1) Definition; early detection; investigations; principles of management of pregnancy – induced hypertension and eclampsia.
- 2) Aetiopathology; differential diagnosis of convulsions in pregnancy; complications of eclampsia.

XIII. ANAEMIA IN PREGNANCY

MUST KNOW :

Aetiology; classification; diagnosis; investigations; adverse effects on the mother and foetus; management during pregnancy and labour.

XIV. OTHER MEDICAL DISORDERS LIKE HEART DISEASE / DIABETES MELLITUS AND URINARY TRACT INFECTION

MUST KNOW :

- 1) Clinical features; early detection; effect of pregnancy on the disease and impact of the disease on pregnancy.
- 2) Complications of the diseases.

XV. NORMAL LABOUR

MUST KNOW :

- 1) Physiology; mechanism in occipito-anterior presentation.
- 2) Monitoring – Partogram; conduct of labour; pain relief.

XVI. MANAGEMENT OF THIRD STAGE OF LABOUR

MUST KNOW :

- 1) Complications : predisposing factors; prevention; management of atonic post partum haemorrhage.
- 2) Management of injuries to the lower genital tract.

XVII. UTERINE DYSFUNCTION

DESIRABLE TO KNOW :

Classification; recognition of uterine dysfunction; principles of induction and acceleration of labour.

XVIII. FOETAL DISTRESS AND FOETAL DEATH

MUST KNOW :

Clinical features; causes; diagnosis; principles of management; prevention.

XIX. HAEMOLYTIC DISEASE INCLUDING Rh ISO IMMUNISATION

MUST KNOW :

Mechanism; Prophylaxis; foetal complications.

XX. PUERPERIUM**MUST KNOW :**

Physiology; clinical features; complications : recognition and principles of management; prevention of puerperal sepsis.

XXI. BREAST FEEDING**MUST KNOW :**

Physiology of lactation; care of breasts; counselling regarding breast feeding; mastitis and breast abscess.

XXII. CARE OF NEWBORN**MUST KNOW :**

Assessment of maturity; detect asphyxia; principles of resuscitation; common problems.

XXIII. MEDICAL TERMINATION OF PREGNANCY**MUST KNOW :**

- 1) Legal aspects; indications; methods; complications.
- 2) Management of complications.

XXIV. CONTRACEPTION**MUST KNOW :**

Various methods and devices; selection of patients; counselling of couples; side effects; failures and complications.

XXV. OPERATIVE OBSTETRICS

MUST KNOW :

Indications and steps of operation : Caesarean section; assisted breech delivery.

DESIRABLE TO KNOW :

- 1) Indications, technique and complications for episiotomy, vacuum extraction; low forceps, instrumental evacuation; menstrual regulation.
- 2) External cephalic version; cervical cerclage; intra-amniotic instillation.

XXVI. POST-CAESAREAN PREGNANCY

MUST KNOW :

Risks; identification of scar dehiscence.

B. GYNAECOLOGY

I. VAGINAL DISCHARGE - PHYSIOLOGICAL & PATHOLOGICAL

MUST KNOW :

Aetiology; characteristics; clinical recognition; investigation; treatment of common causes; genital hygiene.

II. ABNORMAL & EXCESSIVE MENSTRUAL BLEEDING

MUST KNOW :

Definitions; classification of causes; clinical features; principles of investigation; diagnosis and management.

III. AMENORRHOEA

MUST KNOW :

Causes; principles of management.

IV. DYSFUNCTIONAL UTERINE BLEEDING

MUST KNOW :

Aetiopathology; classification; clinical aspects and diagnosis; principles of investigation and management.

DESIRABLE TO KNOW :

Hormone therapy; management options.

V. FERTILITY AND INFERTILITY

MUST KNOW :

Causes in male and female; Physical examination of both female and male partners; essential investigations and interpretation.

DESIRABLE TO KNOW :

Management options; principles of Assisted Reproductive Technology (ART).

VI. ENDOMETRIOSIS & ALLIED STATES

MUST KNOW :

- 1) Aetiopathology; clinical features; principles of investigation and management.
- 2) Implications on health and fertility.

VII. GENITAL INJURIES & FISTULAE

DESIRABLE TO KNOW :

Causes; prevention; clinical features; principles of management.

VIII. GENITAL INFECTIONS

MUST KNOW :

- 1) STD, AIDS and Pelvic Tuberculosis.
- 2) Infections affecting individual organs.
- 3) Aetiology; Pathology; clinical features; differential diagnosis; principles of basic investigation; medical therapy.

DESIRABLE TO KNOW :

Long term implications; surgical management.

IX. DISPLACEMENTS OF UTERUS

MUST KNOW :

Genital Prolapse : Aetiology; clinical features; differential diagnosis; principles of management; preventive aspects.

X. BENIGN TUMOURS OF PELVIC ORGANS

MUST KNOW :

Ovarian and Uterine tumours : Types; Aetiopathology; clinical features; differential diagnosis; principles of management.

XI. MALIGNANCY OF GENITAL TRACT

MUST KNOW :

- 1) Cancer cervix uteri : Aetiopathology; clinical features; screening procedures; investigations; diagnosis; principles of management.
- 2) Epidemiological aspects.

DESIRABLE TO KNOW :

Management options.

XII. OPERATIVE GYNAECOLOGY

MUST KNOW :

- 1) Indications, technique and complications : Dilatation and Curettage (D & C); Fractional curettage; cervical biopsy.
- 2) Indications and steps of abdominal hysterectomy; surgery for ovarian tumours; vaginal surgery for utero-vaginal prolapse.

DESIRABLE TO KNOW :

Laparoscopy; colposcopy; hysteroscopy; management of postoperative complications.

SKILLS

1. Obtain a proper relevant history and perform a humane and thorough clinical examination including internal examinations (per – rectal and per – vaginal) in adults and children.
2. Arrive at a logical working diagnosis after examination.
3. Order appropriate investigations keeping in mind their need, relevance and cost effectiveness.

4. Plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments taking into consideration :
 - a. Patient.
 - b. Disease.
 - c. Socio-economic status.
 - d. Institutional / Governmental guidelines.
5. Recognise situations which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.
1. Demonstrate interpersonal and communications skills befitting a physician in order to discuss the illness and its outcome with patient and family.
2. Determine gestational age.
3. Maintain an ethical behaviour in all aspects of medical practice.
4. Obtain informed consent for any examination / procedure.
5. Motivate colleagues, community and patients to participate actively in national health programmes.
6. Write a complete case record with all necessary details.
7. Write a proper discharge summary with all relevant information.
8. Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.
9. Assess the need for and issue proper medical certificates to patients for various purposes.
10. Organise antenatal, postnatal, well-baby and other clinics.
11. Plan and manage health camps such as family welfare camp.
12. Adopt universal precautions for self protection against HIV and hepatitis and counsel patients.

13. Do and examine a wet film of vaginal smear for Trichomonas and fungus.
14. Take a pap smear.
15. Take punch biopsy of cervix.
16. Conduct normal vaginal delivery.
17. Do artificial rupture of membranes.
18. Perform and suture episiotomies.
19. Apply outlet forceps.
20. Do post partum tubectomy.
21. Perform MTP in the first trimester and be able to do evacuation in incomplete abortion.
22. Insert and remove IUCD.
23. Be able to diagnose and provide emergency management of antepartum and postpartum haemorrhage.

TOPICS FOR INTEGRATED TEACHING

1. Family Planning.
2. Embryology – integrated foetal growth and development.
3. Acute abdomen.
4. Care of newborn.
5. Prescribing in pregnancy.
6. Nutrition & Anaemia in pregnancy.

7. Physiological changes.
8. Neonatal resuscitation problems.

EVALUATION

INTERNAL ASSESSMENT : *

160 marks

Theory	60 marks
Record	20 marks

Total (Theory & Record)	80 marks
Clinical	80 marks

Total I.A.	160 marks

PATTERN OF EXAMINATIONS :

THEORY : Two Papers of three hours duration 100 marks each.

Paper I – Obstetrics including Social Obstetrics.

Paper II – Gynaecology and Family Welfare.

PATTERN OF QUESTION PAPER : **

Essay Questions	-	2 x 15 Marks	= 30 Marks
Short Notes	-	10 x 5 Marks	= 50 Marks
Short Answer Questions	-	10 x 2 Marks	= 20 Marks

		Total =	100 Marks

* XXV SAB held on 25-06-2003.

** MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

PRACTICAL EXAMINATION..... 100 marks

Viva – voce : 40 marks
(Objective Structural Clinical Examination).

There shall be two pairs of Examiners for two batches of students.

Clinical – I : Obstetrics – One long case – 1 hr. 50 marks

Clinical – II : Gynaecology – One long case – 1 hr. 50 marks

Total 100 marks

Viva – I : Obstetrics 20 marks

Viva – II : Gynaecology and Family Welfare 20 marks

Total 40 marks

The number of candidates examined daily in Clinical & Viva shall not normally exceed 24.

MARKS QUALIFYING FOR A PASS

50% in Theory written - 100/200

50% in University Clinical - 50/100

Viva - -/40

35% in I.A. : Theory + Record : 28/80
Clinical : 28/80 } - 56/160

Total 50% aggregate = 250/500

III M.B.B.S. PART-II

PAEDIATRICS (Including Neonatology)

Departmental Objectives :

The objectives of training the undergraduate students in Paediatrics is to ensure that at the end of the training he / she will be able to :

Diagnose and appropriately treat common paediatric and neonatal illnesses.

Identify paediatric and neonatal illnesses and problems that require secondary and tertiary care and refer them appropriately.

Advise and interpret relevant investigations.

Counsel and guide patient's parents and relatives regarding the illness, the appropriate care, the possible complications and the prognosis.

Provide emergency cardiopulmonary resuscitation to new borns and older children.

Participate in the National programmes effectively.

Diagnose and effectively treat acute paediatric and neonatal emergencies.

Discharge medico – legal and ethical responsibilities.

Perform routine investigative and therapeutic procedures.

Motivate parents to consent for a diagnostic autopsy as well as for Invasive procedures.

COURSE CONTENTS

I. VITAL STATISTICS & NATIONAL CHILDHOOD AND ADOLESCENT PROGRAMMES

MUST KNOW :

- 1) Introduction to Paediatrics with special reference to age related disorders.
- 2) Definition of mortality rates and ratios : infant, perinatal, maternal, and neonatal.
- 3) Causes and prevention of infant, perinatal and neonatal mortality.
- 4) ICDS and IMNCI.

DESIRABLE TO KNOW :

National programmes on maternal and child health, RCH – I and RCH – II Programmes.

II. GROWTH AND DEVELOPMENT

MUST KNOW :

Anthropometric and developmental assessment, normal and abnormal growth and development patterns, interpretation of growth curves and road to health chart.

DESIRABLE TO KNOW :

Psychological and behavioural problems. Approach to a child with growth retardation and short stature.

III. NUTRITION

MUST KNOW :

- 1) Normal requirements of protein, carbohydrate, fat, minerals, vitamins and trace elements for newborns, children, pregnant and lactating mothers.

- 2) Exclusive breast feeding, advantages of breast feeding, infant feeding, weaning diets, planning of preterm nutrition, therapeutic diet chart.
- 3) Recognition and treatment of nutritional deficiency disorders.

DESIRABLE TO KNOW :

- 1) Protein energy malnutrition : classification, causes, management including that of complications.
- 2) National Nutritional and other child health and welfare programmes.
- 3) Management of problems related to lactation failure.
- 4) Hyper – vitaminosis.

IV. IMMUNISATION

MUST KNOW :

- 1) National Immunisation programmes.
- 2) Polio programme.
- 3) Vaccines and vaccine – preventable diseases.
- 4) Principles of immunisation.
- 5) Vaccine preservation and cold chain.
- 6) Indications, contra-indications, adverse reaction and complications.
- 7) Investigations and reporting of vaccine preventable diseases.
- 8) Other newer vaccines– Haemophilus Influenza type b, pneumococcal, meningococcal, Varicella vaccine, Hepatitis A & B., Rubella vaccine, Influenza virus vaccine.

V. INFECTIOUS DISEASES

MUST KNOW :

- 1) Natural history, clinical course, signs, symptoms, investigations, management and prevention of common bacterial, viral, parasitic and fungal infections with special reference to vaccine preventable diseases.
- 2) Tuberculosis, mumps, rubella.
- 3) Typhoid, chicken pox and other common childhood exanthematous diseases, and parasitic infestations like Giardiasis, Malaria.
- 4) Intestinal Helminthiasis.
- 5) Bacterial : Typhoid
Tuberculosis
- 6) Viral : Chicken Pox, Mumps, Common Childhood exanthematous Fevers like measles.
- 7) Others : Giardiasis
Amoebiasis
Malaria
Leptospirosis - Rubella
- Paediatric HIV
- Dengue viral Fever.

DESIRABLE TO KNOW :

- 1) Kala Azar,
- 2) Filariasis.
- 3) Brucellosis.

VI. CENTRAL NERVOUS SYSTEM

MUST KNOW :

- 1) Clinical diagnosis, investigations and treatment of acute CNS infections.
- 2) Meningitis including tuberculosis.
- 3) Encephalitis.
- 4) Seizure disorders.
- 5) Febrile convulsions.
- 6) Rheumatic Chorea.
- 7) Infantile hemiplegia.
- 8) Cerebral palsy.
- 9) Mental retardation.
- 10) Hydrocephalus.

DESIRABLE TO KNOW :

- 1) Post encephalitic sequelae.
- 2) Post meningitic sequelae.
- 3) Microcephaly.

NICE TO KNOW :

Degenerative diseases.

VIII. GASTROINTESTINAL SYSTEM

Clinical diagnosis, relevant investigations and management of :

MUST KNOW :

- 1) Gastro – oesophageal reflux.
- 2) GI bleeding.
- 3) Common hepatic disorders : Acute & chronic Hepatitis.
- 4) Acute and Chronic diarrhea and their complications.
- 5) Hepatosplenomegaly.

DESIRABLE TO KNOW :

- 1) Obstructive Jaundice.
- 2) Portal Hypertension.
- 3) Abdominal tuberculosis.
- 4) Acute abdomen including surgical causes and paralytic Ileus.
- 5) Chronic constipation and rectal bleeding.
- 6) Budd – Chiari syndrome.
- 7) Metabolic disorders like Wilson’s disease.

NICE TO KNOW :

Short gut syndrome.

VIII. GENITOURINARY SYSTEM**MUST KNOW :**

- 1) Clinical features, investigations, complications and management of acute glomerulonephritis; nephrotic syndrome.
- 2) Urinary tract infection – acute and recurrent.

- 3) Acute and chronic renal failure.

IX. CARDIOVASCULAR SYSTEM

MUST KNOW :

- 1) Clinical features, diagnosis, investigation, prevention and treatment of acute rheumatic fever.
- 2) Rheumatic heart disease and complications.
- 3) Recognition of congenital acyanotic and cyanotic heart diseases and management of cyanotic spells.
- 4) Diagnosis and management of congestive cardiac failure.

DESIRABLE TO KNOW :

- 1) Prevention, recognition and treatment of bacterial endocarditis.
- 2) Clinical features, diagnosis, prevention and treatment of pericardial effusion and myocarditis.

X. RESPIRATORY SYSTEM

MUST KNOW :

- 1) Epidemiology, clinical features, investigation and management of acute respiratory infections of upper and lower tract.
- 2) Diagnosis and management of acute bronchial asthma, status asthmaticus, chronic suppurative lung diseases, Bronchiectasis, Bronchopnea, Pneumonitis.
- 3) Diagnosis and appropriate management of foreign body aspiration.

DESIRABLE TO KNOW :

Cystic fibrosis.

XI. ENDOCRINE SYSTEM

MUST KNOW :

1) Clinical recognition, causes, laboratory diagnosis, prevention and management of Hypothyroidism (cretinism).

2) Short Stature.

DESIRABLE TO KNOW :

1) Juvenile diabetes mellitus.

2) CAH (Congenital Adrenal Hyperplasia).

XII. HAEMATOLOGICAL SYSTEM

MUST KNOW :

1) Recognition of clinical features, diagnosis, laboratory investigations and management of Nutritional and Haemolytic Anaemias.

2) Diagnosis and basic investigations of bleeding and coagulation disorders in newborn and older children.

3) Leukaemia.

4) Lymphomas.

XIII. NEONATOLOGY

MUST KNOW :

1) Foetal physiology of normal pregnancy. Identification of antenatal, intrapartum and immediate postnatal risk factors.

2) Definition, Identification and classification of high risk neonate, Neonatal resuscitation, Gestational age assessment and Care of the normal newborn.

- 3) Infection.
- 4) Haemorrhagic Disease of Newborn.
- 5) Respiratory distress syndrome.
- 6) Breast feeding, Baby friendly initiative and Feeding difficulties.
- 7) Birth injuries.
- 8) Anaemia and Jaundice.
- 9) CHD (Congenital Heart Diseases).
- 10) Neonatal seizures.
- 11) Birth asphyxia.
- 12) Management of meconium aspiration syndrome.
- 13) Care of the preterm and low birth weight infant : temperature maintenance, feeding, prevention of complications, appropriate method of transfer to tertiary centre.
- 14) Identification and referral of neonates with congenital malformations like cleft lip, cleft palate, tracheo-oesophageal fistula, diaphragmatic hernia, anorectal anomalies.
- 15) IHPS.(Infantile Hypertrophic pyloric stenosis.)

DESIRABLE TO KNOW :

- 1) Management of neonatal problems : Transient metabolic disorders.
- 2) Minor developmental defects.
- 3) Infants of diabetic mothers.

XIV. GENETIC DISORDERS

MUST KNOW :

Common Genetic Disorders like down's syndrome.

DESIRABLE TO KNOW :

Genetic Counselling.

XV. EMERGENCY PAEDIATRICS

Clinical features, aetiology, laboratory diagnosis, prevention and management of :

MUST KNOW :

- 1) Status asthmaticus.
- 2) Status epilepticus.
- 3) Acute pulmonary oedema.
- 4) Hypertensive emergencies.
- 5) Peripheral circulatory failure due to dehydration, haemorrhage and shock.
- 6) Cardiac failure.
- 7) Cyanotic spells, Scorpion and snake envenomation, and Common poisoning including neem oil, castor oil and accidental kerosene ingestion and RTA in Children.

SKILLS

MUST KNOW :

- 1) Obtain a proper relevant history and perform a humane and thorough clinical examination of all organs / systems in children including neonates.

- 2) Arrive at a logical working diagnosis after clinical examination.
- 3) Order appropriate investigations keeping in mind their need, relevance and cost effectiveness.
- 4) Plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments taking into consideration :
 - a. Patient,
 - b. Disease,
 - c. Soci-economic status,
 - d. Institutional / Governmental guidelines.
5. Recognise situations which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.
6. Monitor growth and development of children and differentiate normal from abnormal.
7. Assess and manage fluid / electrolyte and acid – base imbalance.
8. Manage diarrhoeas / dysenteries : Assess dehydration ; prepare and administer oral rehydration therapy (ORT).
9. Detect and institute corrective measures for nutritional deficiency.
10. Write a complete case record with all necessary details.
11. Write a proper discharge summary with all relevant information.
12. Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.
13. Organise and give training in first aid.

14. Adopt universal precautions for self protection against HIV and hepatitis and counsel patients.
15. Maintain cold chain for vaccines.
16. Perform and read Mantoux test.
17. Start i.v. line and infusion in children and neonates.
18. Give intradermal / S.C. / I.M. / I.V. injection.
19. Pass a nasogastric tube.
20. Manage hyperpyrexia.
21. Conduct CPR (cardiopulmonary Resuscitation) and first aid in all new borns and children including endotracheal intubation

DESIRABLE TO KNOW :

- 1) Demonstrate empathy and humane approach towards patients, relatives and attendants.
- 2) Develop a proper attitude towards patients, colleagues and other staff.
- 3) Maintain an ethical behaviour in all aspects of medical practice.
- 4) Organise antenatal, postnatal, new born and other clinics.
- 5) Motivate colleagues, community and patients to actively participate in national health programmes.
- 6) Insert and manage a C.V.P. line.
- 7) All Neonatal procedures including exchange transfusion.

NICE TO KNOW :

Do venous cutdown.

EVALUATION

INTERNAL ASSESSMENT : *

50 marks

Theory	20 marks
Record	10 marks
Clinical	20 marks

Total	50 marks

UNIVERSITY EXAMINATION PATTERN :

THEORY : One Paper of three hours duration - 100 marks each.

PATTERN OF QUESTION PAPER : **

Essay Questions	-	2 x 15 Marks	= 30 Marks
Short Notes	-	10 x 5 Marks	= 50 Marks
Short Answer Questions	-	10 x 2 Marks	= 20 Marks

		Total =	100 Marks

* XXV SAB held on 25-06-2003.

** MCQ's withdrawn from August 2008 onwards – 35th SAB held on 20.5.2008

PRACTICAL EXAMINATION..... 80 marksOne Hour

1 Long Case	40 mts.	:	40 marks
1 Short Case	20 mts.	:	20 marks
2 Spotters	20 mts. (2x10)		20 marks

Total		:	80 marks

Viva-voce – I :	} :		
(Instruments, Drugs, X-rays, Vaccines, Nutrition)			
Viva-voce – II : Theory.			

Four examiners shall conduct the examination in two pairs for two batches of students.

Two pairs of Examiners shall conduct the Viva voce Examination.

Maximum No. of candidates examined daily in Clinical & Viva shall not normally exceed 24.

MARKS QUALIFYING FOR A PASS

50% of Theory written	-	50/100
35% in Internal Assessment	-	18/50
50% of University Clinical	-	40/80
Viva voce	-	--/20
Total 50% of aggregate	=	125/250

INTERNSHIP

1. GENERAL OBJECTIVE

Internship is a phase of training wherein a graduate is expected to learn actual practice of medical and health care and acquire skills under supervision so that he / she may become capable of functioning independently.

2. SPECIFIC OBJECTIVES

At the end of the internship training, the student shall be able to :

- i. Diagnose clinically common disease conditions encountered in practice and make timely decision for referral to higher level;
- ii. Use appropriately the essential drugs, infusions, blood or its substitutes and laboratory services;
- iii. Manage all types of emergencies – medical, surgical, obstetric, neonatal and paediatric by rendering primary level care;
- iv. Demonstrate skills in monitoring of the National Health Programmes and Schemes, oriented to provide preventive and promotive health care services to the community.
- v. Develop leadership qualities to function effectively as a leader of the health team organized to deliver the health and family welfare service in existing socio-economic, political and cultural environment;
- vi. Render services to the chronically sick and disabled (both physical and mental) and to communicate effectively with the patient and the community.

3. TIME DISTRIBUTION

Time allocation to each discipline is approximate and shall be guided more specifically by the actual experience obtained. Thus a student serving in a district or taluk hospital emergency room may well accumulate skills in Surgery, Orthopaedics, Medicine, Obstetrics and Gynaecology and Paediatrics during even a single night on duty. Responsible authorities from the medical college shall adjust the experience to maximize the intern's opportunities to practice skills in patient care in rough approximation to the time allocation suggested below :-

Compulsory

Community Medicine	:	2 months
Medicine including 15 days of Psychiatry	:	2 months.
Surgery including 15 days of Anesthesia	:	2 months.
Obstetrics and Gynaecology including Family Welfare Planning	:	2 months.
Paediatrics	:	1 month.
Orthopedics including PMR	:	1 month.
ENT	:	15 days.
Ophthalmology	:	15 days.
Casualty	:	15 days.
Elective Postings (1 x 15 days)	:	15 days.

Subjects for Elective Posting will be as follows:

- i. Dermatology and Sexually Transmitted Diseases.
- ii. Tuberculosis and Respiratory Diseases
- iii. Radio -Diagnosis.
- iv. Forensic Medicine
- v. Blood Bank
- vi. Psychiatry

Note: Structure internship with college assessment at the end of the internship.

4. OTHER DETAILS

- i. All parts of the internship shall be done as far as possible in institutions within India, recognized for this purpose by the medical council of India.
- ii. Every candidate will be required after passing the final M.B.B.S. examination to undergo compulsory rotational resident internship to the satisfaction of the college authorities and the medical university for a period of 12 months so as to be eligible for the award of the degree of Bachelor of Medicine and Bachelor of Surgery (M.B.B.S.) and full registration with the Medical Council.
- iii. The University shall issue a provisional M.B.B.S. pass certificate on passing the final examination.
- iv. The State Medical Council will grant provisional registration to the candidate on production of the provisional M.B.B.S. pass certificate. The provisional registration will be for a period of one year. In the event of shortage or unsatisfactory work, the period of provisional registration and the compulsory rotating resident internship may be suitably extended by the appropriate authorities.
- v. The intern shall be entrusted with clinical responsibilities under the direct supervision of senior medical officers. They shall not be working independently.
- vi. Interns will not issue a medical certificate or a death certificate or a medicolegal document.

- vii. In recognition of the importance of hands-on-experience, responsibility for patient care and skill acquisition, internship should be increasingly scheduled to utilize clinical facilities available in the District Hospital, Taluk Hospital, Community Health Centre and Primary Health Centre in addition to the Teaching Hospital.
- viii. The internee should commence the internship as per the postings given by the Dean / Principal of the College immediately on the due date without any delay.
- ix. The internee should undergo the internship continuously without any break in each speciality and to avoid piecemeal training. The internee should have completed not less than 50% of the internship continuously as per the postings ordered by the Dean / Principal of the college concerned initially without any break. If the internee fulfills the above criteria and had a break in internship for the reasons of marriage / maternity and on genuine medical illness supported with documentary evidence for 90 days and above, necessary condonation proposal along with a processing fee of Rs. 500 /- and condonation fee of Rs. 1000 /- per year or part thereof shall be sent to this University and orders obtained therefore before permitting the internee to commence the internship from the beginning of the posting in the speciality in which he / she has not completed and discontinued.
- x. The following criteria are being fixed for the cases for which the University shall condone the break and to order for redoing the full period of internship :-
 - a. Late commencement of internship with a break for less than 90 days,
 - b. If the break is for more than two spells of three months each,
 - c. Piecemeal completion in each speciality,
 - d. Not completed the 50% of postings before the break and the break is 90 days and above.

- xi. No internship transfer is permissible for the CRRI and training has to be undergone in the same College / Institution or Hospital where they have undergone the course.

Provided that where an intern is posted to District / Sub-Divisional Hospital for training, there shall be a committee consisting of representatives of the College / University, the State Government and the District administration who shall regulate the training of such trainee;

Provided further that for such trainee a certification of satisfactory completion of training shall be obtained from the relevant administrative authorities which shall be countersigned by the Principal / Dean of college.

- xii. Adjustment to enable a candidate to obtain training in elective clinical subjects may be made.
- xiii. Each medical college shall establish links with one entire district extending out-reach activities. Similarly, Re-orientation of Medical Education (ROME) scheme may be suitably modified to assure teaching activities at each level of district health system which will be coordinated by the Dean of the medical college.

Out of one year, 6 months shall be devoted to learning tertiary care being rendered in teaching hospital / district hospital suitably staffed with well qualified personnel, 3 months of secondary care in a small District or Taluk Hospital / Community Health Centre and 3 months in Primary Health care out of which 2 months should be in Primary Health Centre with full attention to the implementation of National Health Programmes at the Community level. One month of primary care training may be in the form of preceptorship with a practicing family physical or voluntary agency or other primary health care provider.

- xiv. One year's approved service in the Armed Forces Medical Services, after passing the final M.B.B.S. examination shall be considered as equivalent to the pre – registration training detailed above; such training shall, as far as possible be at the Base / General Hospital.

5. ASSESSMENT OF INTERNSHIP

i. The Intern shall maintain a record of work which is to be verified and certified by the medical teacher under whom he works. Apart from scrutiny of the record of work, assessment and evaluation of training shall be undertaken by an objective approach using situation tests in knowledge, skills and attitude during and at the end of each period of posting. Based on the record of work and periodic assessment the Dean / Principal shall issue a certificate of satisfactory completion of training, following which the University shall award the M.B.B.S. degree or declare him eligible for it. The graduate is then qualified for full registration with the state Medical Council.

ii. Satisfactory completion of each posting shall be determined on the basis of the following :

1. Proficiency of knowledge SCORE 0-10

2. Competency in skills as acquired by :

a. Performing procedures

b. Assisting in procedures

c. Observing procedures SCORE 0-10

3. a. Responsibility, punctuality, initiative; follow – up reports,

b. Research aptitude,

c. Capacity to work in a team – Behaviour with colleagues, nursing staff and relationship with paramedical staff; Participation in discussions.

SCORE 0-10

TOTAL SCORE 0-30

Performance may be graded under each head as follows ;

Poor / Below average	/ Average	/ Above average	/Excellent
<3	<5	5 & above	7 & above
			9 to 10

An intern shall be required to have a minimum score of 5 in each of the three heads mentioned above failing which the concerned posting shall be taken as unsatisfactory. Each area of unsatisfactory score (below 5) shall result in the repetition of one third of the total period of posting in the concerned subject.

6. ASSESSMENT OF INTERNSHIP

Some guidelines in the implementation of the training programme are given below for each discipline.

(I) COMMUNITY MEDICINE

Interns shall acquire skills to deal effectively with an individual and the community in the context of primary health care. This is to be achieved by hands on experience in the district hospital, taluk hospital and primary health care. The details of training are as under :-

(i) COMMUNITY HEALTH CENTRE / DISTRICT HOSPITAL

1. During this period of internship, an intern must acquire :
 - a. Clinical competence for diagnosis of common ailments, use of bed side investigation and primary care techniques.
 - b. Gain information on 'Essential drugs' and their usage.
 - c. Recognise medical emergencies, resuscitate and institute initial treatment and refer to suitable institution / department.

2. Undergo specific Government of India / Ministry of Health and Family Welfare approved training using Government of India prescribed training manual for Medical Officers in National Health Programmes e.g., child survival and safe mother hood. EPI, CDD, ARI, FP, ANC, Safe delivery, Tuberculosis, Leprosy and others as recommended by the Ministry of Health and Family Welfare :
 - a. gain full expertise in immunization against infectious disease.
 - b. participate in programmes in prevention and control of locally prevalent endemic diseases including nutritional disorders.
 - c. learn skills first hand in family welfare planning procedures.
 - d. learn the management of National Health Programmes.

3. Be capable of conducting a survey and employ its findings as a measure towards arriving at a community diagnosis.

4. a. conduct of programmes on health education.
- b. gain capabilities of using Audiovisual aids.
- c. acquire capability of utilization of scientific information for promotion of community health.
5. Be capable of establishing linkages with other agencies as water supply, food distribution and other environmental / social agencies.
6. Acquire quality of being professional with dedication, resourcefulness and leadership.
7. Acquire managerial skills by delegation of duties to paramedical staff and other health professionals and their supervision.

(ii) TALUK HOSPITAL

Besides acquiring clinical skill in the evaluation of the patient with the environment and initiation of primary care, an intern shall :

1. effectively participate with other members of the health team with qualities of leadership;
2. make a community diagnosis in specific situations such as epidemics and institute relevant control measures for communicable diseases;
3. develop capability for analysis of hospital based morbidity and mortality statistics;
4. use of essential drugs in the community with the awareness of availability, cost and side effects;
5. provide health education to an individual / community on :
 - a. tuberculosis.
 - b. small family spacing by use of appropriate contraceptives,
 - c. applied nutrition and care of mothers and children,

- d. Immunization,
- e. participation in school health programme.
- f. HIV/AIDS.

(iii) PRIMARY HEALTH CENTRE

1. Initiate or participate in Family composite health care (birth to death), Inventory of events;
2. Participate in all the modules on field practice for community health e.g., safe motherhood, nutritional surveillance and rehabilitation, diarrhoea disorders, etc.,
3. acquire competence in diagnosis and management of common ailments e.g., malaria, tuberculosis, leprosy, enteric fever, rheumatic heart disease, congestive heart failure, hepatitis, meningitis, acute renal failure etc.,
4. acquire proficiency for Family Welfare Programmes (antenatal care, normal delivery, contraception care of newborn and under five including immunisation).

(II) GENERAL MEDICINE

1. Interns shall acquire the following training during their term :

Acquire competence for clinical diagnosis based on history, physical examination and relevant laboratory investigation and institute appropriate line of management; This would include diseases common in tropics (parasitic, bacterial or viral infections, nutritional disorders, including dehydration and electrolyte disturbances) and system illnesses.

2. The intern shall have assisted as care team in intensive care of cardiac, respiratory, hepatic, neurological and metabolic emergencies.

3. The intern shall be able to conduct the following laboratory investigations:

- a. Blood : (Routine haematology smear and blood groups);
- b. Urine : (Routine chemical and microscopic);

- c. Stool : (for ova / cyst and occult blood);
- d. Sputum and throat swab for gram stain or acid fast stain;
- e. Cerebrospinal Fluid (CSF) for smear.

4. Conduct following diagnostic procedures :

- a. Urethral catheterization; Proctoscopy;
- b. Ophthalmoscopy; Otoscopy; Indirect laryngoscopy.

5. Therapeutic procedures; Insertion of Ryle's Tube;

Pleural and ascitic tap, CSF tap by lumbar puncture; installing of airway tube, Oxygen administration, etc.

6. Biopsy Procedures :

Liver, Kidney, Skin, Nerve, Lymph node and muscle – biopsy, Bone marrow aspiration; Biopsy of malignant lesions on surface, Nasal / nerve / skin smear for leprosy.

7. a. Familiarity with usage of life saving procedures including use of aspirator, respirator and defibrillator.

b. Competence in interpretation of different monitoring devices such as cardiac monitor, blood gas analysis, etc.

8. Participate as a team member in total health care of an individual including appropriate follow-up and social rehabilitation.

9. Other competencies as indicated in general objectives.

(III) PAEDIATRICS

The details of the skills that an intern shall acquire during his / her tenure in the department of Paediatrics are as follows :

The intern shall be able to :

1. diagnose and manage common childhood disorders including neonatal disorders and acute emergencies (enquiry from parents of sick children), examining a sick child and making a record of information;

2. carry out activities related to patient care such as laboratory work, investigative procedures and use of special equipments. The details are given as under :
 - a. diagnostic techniques : (including from femoral vein and umbilical cord) abscess, cerebrospinal fluid, urine, pleura and peritoneum and common tissue biopsy techniques;
 - b. techniques related to patient care : immunization, perfusion techniques, feeding procedure, tuberculin testing and breast feeding counselling;
 - c. Use of equipment : vital monitoring, temperature monitoring, resuscitation at birth and care of children receiving intensive care;
3. screening of new born babies and those with objective risk factors for any anomalies and steps for preventive measures in future.
4. plan in collaboration, with parents and individual; collective surveillance of growth and development of new born babies, infants and children so that he / she is able to :
 - a. recognise growth abnormalities;
 - b. recognise anomalies of psychomotor development;
 - c. detect congenital abnormalities.
5. Assess nutritional and dietary status of infants and children and organize prevention, detection and follow up of deficiency disorders both at individual and community level such as :
 - a. protein – energy malnutrition;
 - b. Deficiencies of vitamins especially A, B, C, and D;
 - c. Iron deficiency.
6. Institute early management of common childhood disorders with special reference to paediatric dosage and oral rehydration therapy.

7. Participate actively in public health programme oriented towards children in the community.

(IV) GENERAL SURGERY

An intern is expected to acquire following skills during his / her posting :

- A. Diagnose with reasonable accuracy all surgical illnesses including emergencies.
- B. a. resuscitate a critically injured patient and a severe burns patient,
b. control surface bleeding and manage open wound.
- C. a. monitor patients of head, spine, chest, abdominal and pelvic injury;
b. institute first – line management of acute abdomen.
- D. a. perform venesection,
b. perform tracheostomy and endotracheal intubation,
c. catheterize patients with acute urinary retention or perform trocar cystostomy,
d. drain superficial abscesses,
e. suturing of wound,
f. perform circumcision,
g. biopsy of surface tumours,
h. perform vasectomy.

(V) EMERGENCY DEPARTMENT (CASUALTY)

The student intern should be provided adequate experience and trainings to manage the common emergency conditions which are encountered in the casualty department of the hospital. These are :

1. Accident & Trauma – mostly from road traffic accident and industrial hazards causing injury to the soft tissues of the body, fracture of bones, partial or total loss of limbs, injury to the nerves / blood vessels, chest injuries leading to rib fracture with or without pneumothorax or haemothorax, head injuries, crush injuries, etc.
2. Medical emergency conditions – which include acute shock and cardio – respiratory insufficiency, heart attack, cerebrovascular accident, convulsions, acute renal shut down, bronchial asthma with spasmodic bronchitis, acute endocrinal insufficiencies, hyperpyrexia, coma, etc.
3. Surgical emergency conditions – which include acute abdominal conditions like ruptured internal organs / blood vessels, acute appendicitis, pancreatitis, obstructed hernia, torsion, strangulation, urinary obstruction, intestinal obstruction, etc.
4. Intoxication and poisoning with drugs, chemicals, etc., allergic reactions.
5. Burns.
6. Obstetrical and Gynaecological conditions – like normal labour pain, abnormal labour, obstructed labour, spontaneous abortion, bleeding pv in pregnancy, other acute pelvic conditions like torsion, rupture, bleeding, etc.
7. Paediatric conditions like low birth weight, severe dehydration, hyperpyrexia, convulsions, foreign body intrusion in body orifices, epistaxis, colic, etc.
8. Ophthalmic conditions – like injury to eye, raised intraocular pressure, sudden blurring of vision, etc.

9. E.N.T. conditions – like foreign bodies in nose / ear, injury to nose / ear, bleeding from nose / ear, airway obstruction, etc.
10. Miscellaneous conditions – like drowning, snake bites, arthropod bites, electrical injuries, heat stroke, cold injury, blast injury, acute dental conditions, etc.
11. Medico legal conditions – like attempted suicide, homicides, gunshot injury, penetrating injury, etc.
12. Psychiatric conditions – acute states of mental illnesses.

CPR : In addition to the above, during the four weeks of posting in the Casualty / Emergency Department, the intern should be trained in the techniques of Cardio Pulmonary Resuscitation.

(VI) OBSTETRICS AND GYNAECOLOGY

Technical skills that interns are expected to learn :

1. Diagnosis of early pregnancy and provision of antenatal care;
2. Diagnosis of pathology of pregnancy related to :-
 - a. abortions;
 - b. ectopic pregnancy;
 - c. tumours complicationing pregnancy;
 - d. acute abdomen in early pregnancy;
 - e. hyperemesis gravidarum;
3. Detection of high risk pregnancy cases and suitable advice e.g., PIH, hydramanios, antepartum haemorrhage, multiple pregnancies, abnormal presentations and intra-uterine growth retardation;
4. Antenatal pelvic assessment and detection of cephalopelvic disproportion;

5. Induction of labour and amniotomy under supervision;
6. Management of normal labour, detection of abnormalities, postpartum haemorrhage and repair of perineal tears;
7. To assist in forceps delivery;
8. To assist in caesarean section and postoperative care thereof;
9. Detection and management of abnormalities of lactation;
10. To perform non-stress test during pregnancy;
11. Per speculum, per vaginum and per rectal examination for detection of common congenital, inflammatory, neoplastic and traumatic conditions of vulva, vagina, uterus and ovaries;
12. Medicolegal examination in Gynaecology and Obstetrics;
13. to perform the following procedures :-
 - a. Dilatation and curettage and fractional curettage,
 - b. Endometrial biopsy,
 - c. Endometrial aspiration.
 - d. Pap smear collection,
 - e. Intra Uterine Contraceptive Device (IUCD) insertion,
 - f. Minilap ligation,
 - g. Urethral catheterization,
 - h. Suture removal in postoperative cases,
 - i. Cervical punch biopsy.
14. To assist in major abdominal and vaginal surgery cases in Obstetrics and Gynaecology.

15. To assist in following up post-operative cases of Obstetrics and Gynaecology such as :-
 - a. Colposcopy,
 - b. First trimester MTP- procedures including manual vacuum aspiration (MVA).
 - c. Second trimester Medical Termination of Pregnancy (MTP) procedures, Emcredyl, Prostaglandine Instillation.
16. To evaluate and prescribe oral contraceptive.

(VII) OTO RHINO LARYNGOLOGY (E.N.T.)

1. Interns shall acquire ability for a comprehensive diagnosis of common Ear, Nose and Throat (E.N.T.) diseases including the emergencies and malignant neoplasms of the head and neck.
2. He / she shall acquire skills in the use of head mirror, Otoscope and indirect laryngoscopy and first line of management of common Ear, Nose and Throat (E.N.T.) problems.
3. He / she shall be able to carry out minor surgical procedures such as
 - a. antrum puncture and packing of the nose for epistaxis;
 - b. nasal douching and packing of the external canal;
 - c. remove foreign bodies from the nose and the ear; syringing of the ear;
 - d. Observe or assist in various endoscopic procedures.
 - e. Tracheostomy.
4. an intern shall have participated as a team member in the community diagnosis e.g., Chronic Suppurative Otitis Media (CSOM) and be aware of national programme on prevention of deafness.

5. He / she shall possess knowledge of various E.N.T. rehabilitative programmes.

(VIII) OPHTHALMOLOGY

An intern shall be able to :-

1. diagnose and manage common ophthalmological conditions such as :-

Trauma, Acute conjunctivitis, allergic conjunctivitis, xerosis, entropion, corneal ulcer, iridocyclitis, myopia, hypermetropia, cataract, glaucoma, ocular injury and sudden loss of vision;

2. carry out assessment of refractive errors and advise its correction;

3. diagnose ocular changes in common systemic disorders;

4. perform investigative procedures such as

Tonometry, syringing, direct ophthalmoscopy, subjective refraction and fluorescein staining of cornea.

5. carry out or assist in the following procedures;

1. Subconjunctival injection,
2. Ocular bandaging,
3. Removal of concretions,
4. Epilation and electrolysis,
5. Corneal foreign body removal,
6. Cauterization of corneal ulcers,
7. Chalazion removal,
8. Entropion correction,
9. Suturing conjunctival tears,

10. Lids repair,
 11. Glaucoma surgery (assisted),
 12. Enucleation of eye in cadaver,
6. He / she shall have full knowledge of the available methods for rehabilitation of the blind.

(IX) ORTHOPAEDICS

The intern must acquire the knowledge and skills that will enable him / her to diagnose and treat common ailments.

- A. Diagnosis : He / she shall have ability to diagnose and suspect presence of fracture, dislocation, acute osteomyelitis, acute poliomyelitis and common congenital deformities such as congenital talipes equinovarus (CTEV) and dislocation of hip (CDH).
- B. Therapy : An intern must know –
- a. Splinting (plaster slab) for the purpose of emergency splintage, definitive splintage and post operative splintage and application of Thomas splint;
 - b. Manual reduction of common fractures – phalangeal, metacarpal, metatarsal and Colles's fracture;
 - c. Manual reduction of common dislocations – interphalangeal, metacarpophalangeal, elbow and shoulder dislocations;
 - d. Plaster cast application for undisplaced fractures of arm, forearm, leg and ankle;
 - e. Emergency care of a multiple injury patient;
 - f. Precautions about transport and bed care of spinal cord injury patients.

C. Counselling : An intern should be able to advice about

- (i) Prognosis of poliomyelitis, cerebral palsy, CTEV and CDH;
- (ii) Rehabilitation of amputees and mutilating traumatic and leprosy deformities of hand.

D. Surgery : An intern must have observed or preferably assisted at the following operations :

- (i) drainage for acute osteomyelitis;
- (ii) sequestrectomy in chronic osteomyelitis;
- (iii) application of external fixation;
- (iv) internal fixation of fractures of long bones.

ELECTIVE POSTINGS

(X) DERMATOLOGY AND SEXUALLY TRANSMITTED DISEASES

An intern must be able to :-

1. conduct proper clinical examination, elicit and interpret physical findings and diagnose common disorders and emergencies.
2. perform simple, routine investigative procedures for making bedside diagnosis, specially the examination of scrapings for fungus, preparation of slit smears and staining or AFB for leprosy patient and for STD cases.
3. take a skin biopsy for diagnostic purpose.
4. manage common disease recognizing the need for referral for specialized care in case of inappropriateness of therapeutic response.

(XI) PSYCHIATRY

An intern must be able to –

1. diagnose and manage common psychiatric disorders,
2. identify and manage psychological reaction and psychiatric disorders in medical and surgical patients in clinical practice and community setting.

(XII) TUBERCULOSIS AND RESPIRATORY DISEASES

An intern after training must be able to :-

1. conduct proper clinical examination, elicit and interpret clinical findings and diagnose common respiratory disorders and emergencies.
2. perform simple, routine investigative procedures required for making bed side diagnosis, specially sputum collection examination for aetiological organism like AFB, interpretation of chest X-rays and respiratory function tests.
3. interpret and manage various blood gas changes and pH abnormalities in various respiratory diseases.
4. manage common diseases recognizing need for referral for specialized care in case of in-appropriateness of therapeutic response.
5. perform common procedures like laryngoscopy, pleural aspiration, respiratory physio-therapy, laryngeal intubation and pneumo-thoracic drainage aspiration.

(XIII) ANAESTHESIOLOGY

After the internship in the department of Anaesthesiology, an intern shall acquire knowledge, skill and attitude to :-

1. perform pre-anaesthetic check up and prescribe preanesthetic medications.

2. perform venepuncture and set up intravenous drip.
3. perform laryngoscopy and endotracheal intubation.
4. perform lumbar puncture, spinal anaesthesia and simple nerve block.
5. conduct simple general anaesthetic procedures under supervision.
6. monitor patients during anaesthesia and post-operative period.
7. recognize and manage problems associated with emergency anaesthesia.
8. maintain anaesthetic records.
9. recognize and treat complications in post operative period.
10. perform cardio pulmonary resuscitation correctly, including recognition of cardiac arrest.

(XIV) RADIO – DIAGNOSIS

An intern after training must know –

1. All aspects of Emergency Room Radiology like
 - a. all acute abdominal conditions,
 - b. all acute traumatic condition with emphasis on head injuries,
 - c. differentiation between Medical and Surgical Radiological emergencies.
2. Basic hazards and precautions in Radio-diagnostic practices.

(XV) PHYSICAL MEDICINE AND REHABILITATION

An intern is expected to acquire the following skills during his / her internship:-

1. competence for clinical diagnosis based on detailed history and assessment of common disabling conditions like poliomyelitis, cerebral palsy, haemiplegia, paraplegia, amputations, etc.
2. participation as a team member in total rehabilitation including appropriate follow up of common disabling conditions.
3. principles and procedures of fabrication and repair of artificial limbs and appliances.
4. various therapeutic modalities.
5. use of self help devices and splints and mobility aids.
6. familiarity with accessibility problems and home making for the disabled.
7. ability of demonstrate simple exercise therapy in common conditions like prevention of deformity in polio, stump exercise in an amputee, etc.

(XVI) FORENSIC MEDICINE AND TOXICOLOGY

The intern is to be posted in the casualty department of the hospital while attached under Forensic Medicine Department with the following objectives :-

1. to identify medico-legal problems in a hospital and general practice.
2. to identify and learn medico-legal responsibilities of a medical man in various hospital situations.
3. to be able to diagnose and learn management of basic poisoning conditions in the community.
4. to learn how to handle cases of sexual assault.
5. to be able to prepare medico-legal reports in various medico-legal situations.
6. to learn various medico-legal post-mortem procedures and formalities during its performance by police.

(XVII) BLOOD BANK AND TRANSFUSION DEPARTMENT

During the two weeks of elective posting, the intern shall learn –

1. Blood grouping in OAB and Rh systems – typing, cross matching;
2. Selection of blood donor; Screening for diseases;
3. Collection of blood; Separation of blood components;
4. Storage of blood and blood components – changes during storage;
5. Transfusion of blood and blood components;
6. Transfusion reactions – management;
7. Infections spread by transfusion.

PROFORMA – I**ASSESSMENT OF INTERNSHIP**
CERTIFICATE OF SATISFACTORY COMPLETION OF POSTING

NAME OF THE COURSE :

MBBS/BDS/BHMS/BAMS/BSMS/BUMS/BPT/BOT

1. (a) Name of the Discipline / Speciality :

(b) Duration : From to

.....

2. Proficiency of knowledge : Score obtained (0-10) in each level.

3. Competency in skills as acquired by :

(a) Performing Procedures

(b) Assisting in Procedures

(c) Observing Procedures

4. (a) Responsibility, Punctuality :

(b) Research Aptitude :

(c) Capacity to work in a team - :

Behaviour with Colleagues,
Nursing staff and relationship with
Paramedical staff; Participation in
Discussions.Total Score obtained out of 30,
i.e., @ 10 each

5. Performance grade obtained :

Poor	-	<3
Below average	-	<5
Average	-	5 and above
Above average	-	7 and above
Excellent	-	9 to 10

Note : An item shall be required to have a minimum score of 5 in each of the three heads mentioned above failing which the concerned posting shall be taken as unsatisfactory. Each area of unsatisfactory score (below 5) shall result in the repetition of one third of the total period of posting in the concerned subject.

Date :
(Office date seal).Signature of H.O.D./Head of the Institution
(Seal).

PROFORMA – II
FOR RE-ADMISSION AFTER CONDONING THE
C.R.R.I. BREAK

1. NAME OF THE STUDENT :
2. NAME OF THE COURSE /
PERIOD OF STUDY :
3. NAME OF THE COLLEGE :
4. DATE OF JOINING THE COURSE :
5. DATE OF COMPLETION OF THE
COURSE :
6. DATE OF COMMENCEMENT OF
C.R.R.I. :
7. DATE OF COMPLETION OF 50%
OF C.R.R.I. :
8. DATE OF DISCONTINUANCE OF
C.R.R.I. :
9. REASONS FOR THE
DISCONTINUANCE OF
THE C.R.R.I. :
10. DETAILS OF BREAK OF C.R.R.I. :
(PREVIOUS BREAK IF ANY,
THE DETAILS OF SPELL AND
THE PERIOD OF BREAK OF
STUDY MAY BE FURNISHED
INCLUDING THE PERIOD OF
LATE COMMENCEMENT).
11. WHETHER ANY DISCIPLINARY :
CASE IS PENDING FOR
DISCLOSED i.e., PRODUCING
FALSE CERTIFICATES / RAGGING
ETC.,

12. IF ANY CORRESPONDENCE WAS :
MADE IN THE PAST, FURNISH
THE COPIES OF RELEVANT
RECORDS FOR PERUSAL.

13. RECOMMENDATION OF THE DEAN/
PRINCIPAL CONCERNED.

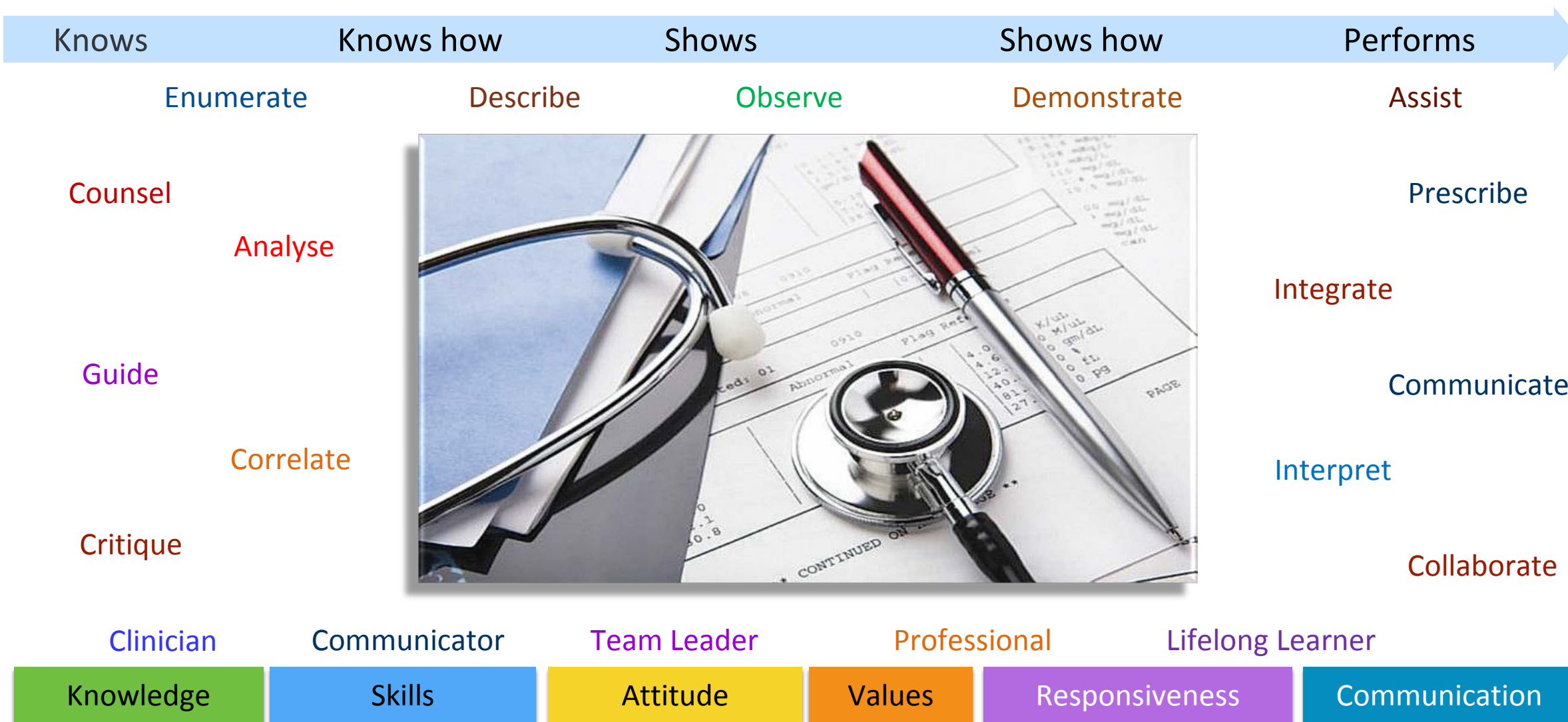
CERTIFIED THAT THE DETAILS FURNISHED ABOVE IN RESPECT
OF (Thiru. / Tmt. / Selvi. / -----
ARE TRUE TO THE BEST OF MY KNOWLEDGE AND FOUND TO BE
CORRECT.

***SIGNATURE OF THE DEAN /
PRINCIPAL***



MEDICAL COUNCIL OF INDIA

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE



VOLUME-I (2018)

**COMPETENCY BASED UNDERGRADUATE CURRICULUM
FOR THE
INDIAN MEDICAL GRADUATE
2018**



**Medical Council of India
Pocket-14, Sector- 8, Dwarka
New Delhi 110 077**

दूरभाष / Phone : 25367033, 25367035, 25367036

फैक्स / Fax : 0091-11-25367024

ई-मेल / E-mail : mci@bol.net.in

वेबसाइट / Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,

फेस-1, नई दिल्ली-110077

Pocket- 14, Sector- 8, Dwarka,

Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड

BOARD OF GOVERNORS IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

FOREWORD

The Medical Council of India, aware of its responsibilities in creation of trained health manpower, has been engaged for the past few years in updating the medical curriculum for undergraduates and postgraduates to be in consonance with the changing health needs of the country. The task of updating and reorganization of the postgraduate curriculum in nearly 50 broad specialty disciplines to the competency pattern was accomplished by the Academic Cell of the Council with the help of subject experts and members of its Reconciliation Board and have been uploaded on the Council Website for use of the medical fraternity.

The Council visualized that the Indian Medical Graduate, at the end of the undergraduate training program, should be able to recognize "health for all" as a national goal and should be able to fulfill his/her societal obligations towards the realization of this goal. To fulfill the mandate of the undergraduate medical curriculum which is to produce a clinician, who understands and is able to provide preventive, promotive, curative, palliative and holistic care to his patients, the curriculum must enunciate clearly the competencies the student must be imparted and must have learnt, with clearly defined teaching-learning strategies and effective methods of assessment. The student should be trained to effectively communicate with patients and their relatives in a manner respectful of the patient's preferences, values, beliefs, confidentiality and privacy and to this purpose, a book on Attitude, Ethics & Communication was prepared by the Medical Council of India; the teaching faculty of medical colleges have been receiving training on this module since 2015.

दूरभाष / Phone : 25367033, 25367035,
25367036

फैक्स / Fax : 0091-11-25367024

ई-मेल / E-mail : mci@bol.net.in

वेबसाइट / Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,
फेस-1, नई दिल्ली-110077
Pocket- 14, Sector- 8, Dwarka,
Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड
BOARD OF GOVERNORS
IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

-2-

Competency based Medical Education provides an effective outcome-based strategy where various domains of teaching including teaching learning methods and assessment form the framework of competencies. Keeping this objective as the core ingredient, the Medical Council of India with the help of panel of experts drawn from across the country, laid the basic framework for the revised undergraduate medical curriculum. Over the past four years, a group of highly committed medical professionals working as Members of the MCI Reconciliation Board developed this information into a document incorporating appropriate teaching-learning strategies, tools and techniques of teaching, and modes of assessment which have culminated in the current competency based undergraduate curriculum. We understand that maximum efforts were made to encourage integrated teaching between traditional subject areas using a problem-based learning approach starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both the understanding and resolution of the problem. All efforts have been made to de-emphasize compartmentalisation of disciplines so as to achieve both horizontal and vertical integration in different phases. We are proud of their work accomplishment and congratulate them in the onerous task accomplished.

It gives us great satisfaction to state that the '**competency based undergraduate curriculum**' that has been prepared by the Medical Council of India would definitely serve the cause of medical education and in creating a competent Indian Medical Graduate to serve the community.

BOARD OF GOVERNORS

Contributors

1. Dr. Avinash Supe

Chairman, Reconciliation Board
Director (ME & MH) and Dean
Professor, Departments of G I Surgery and Medical Education
Seth GSMC and KEM Hospital
Mumbai - 400012

2. Dr. Krishna G. Seshadri

Member, Reconciliation Board
Member, Board of Management
Visiting Professor, Departments of Endocrinology, Diabetes and Medical Education
Sri Balaji Vidyapeeth
Puducherry - 607 403

3. Dr. Praveen Singh

Member, Reconciliation Board
Professor and Head, Departments of Anatomy and Medical Education
Convenor, MCI Nodal Centre
Pramukhswami Medical College
Karamsad, Gujarat - 388325

4. Dr. R. Sajith Kumar

Member, Reconciliation Board
Professor and Head, Departments of Infectious Disease and Medical Education
Convenor, MCI Nodal Centre
Government Medical College
Kottayam, Kerala - 686008

5. Dr. PV Chalam

Member, Reconciliation Board
Principal & Professor, Department of Surgery
Bhaskar Medical College, RR Dist.
Telangana - 500075

6. Dr. Subir K. Maulik

Member, Reconciliation Board
Professor, Department of Pharmacology
All India Institute of Medical Sciences
New Delhi-110029

7. Dr. Dinesh Kumar Badyal

Member, Reconciliation Board
Professor and Head, Department of Pharmacology
Professor, Department of Medical Education
Co-Convenor, MCI Nodal Centre
Christian Medical College
Ludhiana - 141008, Punjab

8. Dr. Alka Rawekar

Member, Reconciliation Board
Professor, Departments of Physiology and Medical Education
Head, Department of Physiology
Co-Convenor, MCI Nodal Centre
Jawaharlal Nehru Medical College
Sawangi (Meghe), Wardha - 442004, Maharashtra

9. Dr. Sunita Y Patil

Member, Reconciliation Board
Professor, Departments of Pathology and Medical Education
Resource Faculty, MCI Nodal Centre
Jawaharlal Nehru Medical College, KLE Academy of Higher Education & Research
Belagavi - 590 010, Karnataka

10. Dr. M. Rajalakshmi

Chief Consultant, Academic Cell
Medical Council of India
New Delhi-110077

Grant of Copyright to the Competency based Undergraduate Curriculum

The Competency based Undergraduate Curriculum for MBBS students prepared by subject experts was scrutinized by members of the Reconciliation Board and Academic Cell. The contents, embodied in this document, have received Copyright from the Register of Copyrights, Copyright Office, Government of India with Registration Number L-63913/2016.

Reproducing any part of this document in any form must be with the prior written permission of the competent authorities of the Medical Council of India.

The most recent version of this document may be obtained from the Medical Council of India.

How to cite this document: Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 1; pg --- (give page nos.)

Contents Vol. I

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Pre-clinical and Para-clinical subjects		
1.	Human Anatomy	AN	41
2.	Physiology	PY	92
3.	Biochemistry	BI	119
4.	Pharmacology	PH	136
5.	Pathology	PA	160
6.	Microbiology	MI	205
7.	Forensic Medicine & Toxicology	FM	228
(iv)	List of contributing subject experts		252

Contents Vol. II

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Medicine and Allied subjects		
1.	Community Medicine	CM	41
2.	General Medicine	IM	60
3.	Respiratory Medicine	CT	143
4.	Pediatrics	PE	150
5.	Psychiatry	PS	203
6.	Dermatology, Venereology & Leprosy	DR	219
7.	Physical Medicine & Rehabilitation	PM	229
(iv)	List of contributing subject experts		235

Contents Vol. III

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Surgery and Allied subjects		
1.	General Surgery	SU	41
2.	Ophthalmology	OP	79
3.	Otorhinolaryngology	EN	89
4.	Obstetrics & Gynaecology	OG	102
5.	Orthopedics	OR	130
6.	Anesthesiology	AS	145
7.	Radiodiagnosis	RD	154
8.	Radiotherapy	RT	160
9.	Dentistry	DE	163
(iv)	List of contributing subject experts		166

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE

Preamble

The new Graduate Medical Education Regulations attempts to stand on the shoulder of the contributions and the efforts of resource persons, teachers and students (past and present). It intends to take the learner to provide health care to the evolving needs of the nation and the world.

More than twenty years have passed since the existing Regulations on Graduate Medical Education, 1997 was notified, necessitating a relook at all aspects of the various components in the existing regulations and adapt them to the changing demography, socio-economic context, perceptions, values and expectations of stakeholders. Emerging health care issues particularly in the context of emerging diseases, impact of advances in science and technology and shorter distances on diseases and their management also need consideration. The strong and forward looking fundamentals enshrined in the Regulations on Graduate Medical Education, 1997 has made this job easier. A comparison between the 1997 Regulations and proposed Graduate Medical Education Regulations, 2018 will reveal that the 2018 Regulations have evolved from several key principles enshrined in the 1997 Regulations.

The thrust in the new regulations is continuation and evolution of thought in medical education making it more learner-centric, patient-centric, gender-sensitive, outcome -oriented and environment appropriate. The result is an outcome driven curriculum which conforms to global trends. Emphasis is made on alignment and integration of subjects both horizontally and vertically while respecting the strengths and necessity of subject-based instruction and assessment. This has necessitated a deviation from using “broad competencies”; instead, the reports have written end of phase subject (sub) competencies. These “sub-competencies” can be mapped to the global competencies in the Graduate Medical Education Regulations.

A significant attempt has been made in the outcome driven undergraduate curriculum to provide the orientation and the skills necessary for life-long learning to enable proper care of the patient. In particular, the curriculum provides for early clinical exposure, electives and longitudinal care. Skill acquisition is an indispensable component of the learning process in medicine. The curriculum reinforces this aspect by necessitating certification of certain essential skills. The experts and the writing group have factored in patient availability, access, consent, number of students in a class etc. in suggesting skill acquisition and assessment methods; use of skills labs, simulated and guided environments are encouraged. In the pre-internship years,- the highest level of skill acquisition is a show how (SH) in a simulated or guided environment; few skills require independent performance and certification - these are marked with P (for performance). Opportunity to ‘perform’ these skills will be available during internship.

The importance of ethical values, responsiveness to the needs of the patient and acquisition of communication skills is underscored by providing dedicated curriculum time in the form of a longitudinal program based on Attitude, Ethics and Communication (AETCOM) competencies. Great emphasis has been placed on collaborative and inter-disciplinary teamwork, professionalism, altruism and respect in professional relationships with due sensitivity to differences in thought, social and economic position and gender.

In addition to the above, an attempt has been made to allow students from diverse educational streams and backgrounds to transition appropriately through a Foundation Course. Dedicated time has been allotted for self directed learning and co-curricular activities.

Formative and internal assessments have been streamlined to achieve the objectives of the curriculum. Minor tweaks to the summative assessment have been made to reflect evolving thought and regulatory requirements. Curricular governance and support have been strengthened, increasing the involvement of Curriculum Committee and Medical Education Departments/Units.

The curriculum document in conjunction with the new Graduate Medical Education Regulations (GMR), when notified, must be seen as a “living document” that should evolve as stakeholder requirements and aspirations change. We hope that the current GMR does just that. The Medical Council of India is

grateful to all the teachers, subject experts, process experts, patients, students and trainees who have contributed through invaluable inputs, intellectual feedbacks and valuable time spent to make this possible. This document would not have been possible without the dedicated and unstinting intellectual, mental and time-consuming efforts of the members of the Reconciliation Board of the Council and the Academic Cell of MCI.

How to use the Manual

This Manual is intended for curriculum planners in an institution to design learning and assessment experiences for the MBBS student. Contents created by subject experts have been curated to provide guidance for the curriculum planners, leaders and teachers in medical schools. They must be used with reference to and in the context of the Regulations.

Section 1

Competencies for the Indian Medical Graduate

Section 1 - provides the global competencies extracted from the Graduate Medical Education Regulations, 2018. The global competencies identified as defining the roles of the **Indian Medical Graduate** are the broad competencies that the learner has to aspire to achieve; teachers and curriculum planners must ensure that the learning experiences are aligned to this Manual.

Extract from the Graduate Medical Education Regulations, 2018

2. Objectives of the Indian Graduate Medical Training Programme

The undergraduate medical education program is designed with a goal to create an “Indian Medical Graduate” (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a physician of first contact of the community while being globally relevant. To achieve this, the following national and institutional goals for the learner of the Indian Medical Graduate training program are hereby prescribed:-

2.1. National Goals

At the end of undergraduate program, the Indian Medical Graduate should be able to:

- (a) recognize “health for all” as a national goal and health right of all citizens and by undergoing training for medical profession fulfill his/her social obligations towards realization of this goal.
- (b) learn every aspect of National policies on health and devote herself/himself to its practical implementation.
- (c) achieve competence in practice of holistic medicine, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- (d) develop scientific temper, acquire educational experience for proficiency in profession and promote healthy living.
- (e) become exemplary citizen by observance of medical ethics and fulfilling social and professional obligations, so as to respond to national aspirations.

2.2. Institutional Goals

In consonance with the national goals, each medical institution should evolve institutional goals to define the kind of trained manpower (or professionals) they intend to produce. The Indian Medical Graduates coming out of a medical institute should:

- (a) be competent in diagnosis and management of common health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations.
- (b) be competent to practice preventive, promotive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
- (c) appreciate rationale for different therapeutic modalities, be familiar with the administration of the "essential drugs" and their common side effects.
- (d) be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude towards the patients in discharging one's professional responsibilities.

- (e) possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine, action research and documentation skills.
- (f) be familiar with the basic factors which are essential for the implementation of the National Health Programs including practical aspects of the following:
 - (i) Family Welfare and Maternal and Child Health (MCH);
 - (ii) Sanitation and water supply;
 - (iii) Prevention and control of communicable and non-communicable diseases;
 - (iv) Immunization;
 - (v) Health Education;
 - (vi) Indian Public Health Standards (IPHS) at various level of service delivery;
 - (vii) Bio-medical waste disposal; and
 - (viii) Organizational and or institutional arrangements.
- (g) acquire basic management skills in the area of human resources, materials and resource management related to health care delivery, General and hospital management, principal inventory skills and counseling.
- (h) be able to identify community health problems and learn to work to resolve these by designing, instituting corrective steps and evaluating outcome of such measures.
- (i) be able to work as a leading partner in health care teams and acquire proficiency in communication skills.
- (j) be competent to work in a variety of health care settings.
- (k) have personal characteristics and attitudes required for professional life including personal integrity, sense of responsibility and dependability and ability to relate to or show concern for other individuals.

All efforts must be made to equip the medical graduate to acquire the skills as detailed in Table 11 Certifiable procedural skills – A Comprehensive list of skills recommended as desirable for Bachelor of Medicine and Bachelor of Surgery (MBBS) – Indian Medical Graduate, as given in the Graduate Medical Education Regulations, 2018

2.3. Goals for the Learner

In order to fulfil this goal, the Indian Medical Graduate must be able to function in the following roles appropriately and effectively:-

- 2.3.1. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
- 2.3.2. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
- 2.3.3. Communicator with patients, families, colleagues and community.
- 2.3.4. Lifelong learner committed to continuous improvement of skills and knowledge.
- 2.3.5. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession.

3. Competency Based Training Programme of the Indian Medical Graduate

Competency based learning would include designing and implementing medical education curriculum that focuses on the desired and observable ability in real life situations. In order to effectively fulfil the roles as listed in clause 2, the Indian Medical Graduate would have obtained the following set of competencies at the time of graduation:

3.1. *Clinician, who understands and provides preventive, promotive, curative, palliative and holistic care with compassion*

- 3.1.1 Demonstrate knowledge of normal human structure, function and development from a molecular, cellular, biologic, clinical, behavioral and social perspective.
- 3.1.2. Demonstrate knowledge of abnormal human structure, function and development from a molecular, cellular, biological, clinical, behavioural and social perspective.
- 3.1.3 Demonstrate knowledge of medico-legal, societal, ethical and humanitarian principles that influence health care.

- 3.1.4 Demonstrate knowledge of national and regional health care policies including the National Health Mission that incorporates National Rural Health Mission (NRHM) and National Urban Health Mission (NUHM), frameworks, economics and systems that influence health promotion, health care delivery, disease prevention, effectiveness, responsiveness, quality and patient safety.
- 3.1.5. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.6. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is contextual to gender, age, vulnerability, social and economic status, patient preferences, beliefs and values.
- 3.1.7 Demonstrate ability to perform a physical examination that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.8 Demonstrate ability to perform a physical examination that is contextual to gender, social and economic status, patient preferences and values.
- 3.1.9 Demonstrate effective clinical problem solving, judgment and ability to interpret and integrate available data in order to address patient problems, generate differential diagnoses and develop individualized management plans that include preventive, promotive and therapeutic goals.
- 3.1.10 Maintain accurate, clear and appropriate record of the patient in conformation with legal and administrative frameworks.
- 3.1.11 Demonstrate ability to choose the appropriate diagnostic tests and interpret these tests based on scientific validity, cost effectiveness and clinical context.
- 3.1.12 Demonstrate ability to prescribe and safely administer appropriate therapies including nutritional interventions, pharmacotherapy and interventions based on the principles of rational drug therapy, scientific validity, evidence and cost that conform to established national and regional health programmes and policies for the following:
 - i) Disease prevention,
 - ii) Health promotion and cure,
 - iii) Pain and distress alleviation, and
 - iv) Rehabilitation and palliation.

- 3.1.13 Demonstrate ability to provide a continuum of care at the primary and/or secondary level that addresses chronicity, mental and physical disability.
- 3.1.14 Demonstrate ability to appropriately identify and refer patients who may require specialized or advanced tertiary care.
- 3.1.15 Demonstrate familiarity with basic, clinical and translational research as it applies to the care of the patient.

3.2. *Leader and member of the health care team and system*

- 3.2.1 Work effectively and appropriately with colleagues in an inter-professional health care team respecting diversity of roles, responsibilities and competencies of other professionals.
- 3.2.2 Recognize and function effectively, responsibly and appropriately as a health care team leader in primary and secondary health care settings.
- 3.2.3 Educate and motivate other members of the team and work in a collaborative and collegial fashion that will help maximize the health care delivery potential of the team.
- 3.2.4 Access and utilize components of the health care system and health delivery in a manner that is appropriate, cost effective, fair and in compliance with the national health care priorities and policies, as well as be able to collect, analyze and utilize health data.
- 3.2.5 Participate appropriately and effectively in measures that will advance quality of health care and patient safety within the health care system.
- 3.2.6 Recognize and advocate health promotion, disease prevention and health care quality improvement through prevention and early recognition: in a) life style diseases and b) cancer, in collaboration with other members of the health care team.

3.3. *Communicator with patients, families, colleagues and community*

- 3.3.1 Demonstrate ability to communicate adequately, sensitively, effectively and respectfully with patients in a language that the patient understands and in a manner that will improve patient satisfaction and health care outcomes.
- 3.3.2 Demonstrate ability to establish professional relationships with patients and families that are positive, understanding, humane, ethical, empathetic, and trustworthy.
- 3.3.3 Demonstrate ability to communicate with patients in a manner respectful of patient's preferences, values, prior experience, beliefs, confidentiality and privacy.

3.3.4 Demonstrate ability to communicate with patients, colleagues and families in a manner that encourages participation and shared decision-making.

3.4. Lifelong learner committed to continuous improvement of skills and knowledge

3.4.1. Demonstrate ability to perform an objective self-assessment of knowledge and skills, continue learning, refine existing skills and acquire new skills.

3.4.2. Demonstrate ability to apply newly gained knowledge or skills to the care of the patient.

3.4.3. Demonstrate ability to introspect and utilize experiences, to enhance personal and professional growth and learning.

3.4.4. Demonstrate ability to search (including through electronic means), and critically reevaluate the medical literature and apply the information in the care of the patient.

3.4.5. Be able to identify and select an appropriate career pathway that is professionally rewarding and personally fulfilling.

3.5. *Professional who is committed to excellence, is ethical, responsive and accountable to patients, community and the profession*

3.5.1. Practice selflessness, integrity, responsibility, accountability and respect.

3.5.2. Respect and maintain professional boundaries between patients, colleagues and society.

3.5.3. Demonstrate ability to recognize and manage ethical and professional conflicts.

3.5.4. Abide by prescribed ethical and legal codes of conduct and practice.

3.5.5. Demonstrate a commitment to the growth of the medical profession as a whole.

Section 2

Subject-wise outcomes

Section 2 contains subject-wise outcomes so called “sub-competencies” that must be achieved at the end of instruction in that subject. These are organised in tables and have two parts. The core subject outcomes are in first part. The second part in the same document (titled Integration) contains outcomes/competencies in other subjects which have been identified by experts in those subjects as requiring alignment or integration with the core subject.

Outcomes (competencies) in each subject are grouped according to topics number-wise. It is important to review the individual outcomes (competencies) in the light of the topic outcomes as a whole. For each competency outlined - the learning domains (Knowledge, Skill, Attitude, Communication) are identified. The expected level of achievement in that subject is identified as – [knows (K), knows how (KH), shows how (SH), perform (P)]. As a rule, ‘perform’ indicates independent performance without supervision and is required rarely in the pre-internship period. The outcome is a core (Y - must achieve) or a non-core (N - desirable) outcome. Suggested learning and assessment methods (these are suggestions) and explanation of the terms used are given under the section “definitions used in this document”. The suggested number of times a skill must be performed independently for certification in the learner’s log book is also given. Last two columns indicate subjects within the same phase and other phases with which the topic can be taught - together - aligned (temporal coordination), shared, correlated or nested.

The number of topics and competencies in each subject are given below:

Topics & outcomes in Pre-clinical & Para-clinical subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Human Anatomy	82	409
2.	Physiology	11	137
3.	Biochemistry	11	89
4.	Pharmacology	05	85
5.	Pathology	36	182
6.	Microbiology	08	54
7.	Forensic Medicine & Toxicology	14	162
	Total	167	1118

Topics & outcomes in Medicine and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Community Medicine	20	107
2.	General Medicine	26	506
3.	Respiratory Medicine	02	47
4.	Pediatrics	35	406
5.	Psychiatry	19	117
6.	Dermatology, Venereology & Leprosy	18	73
7.	Physical Medicine & Rehabilitation	09	43
	Total	129	1299

Topics & outcomes in Surgery and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	General Surgery	30	133
2.	Ophthalmology	09	60
3.	Otorhinolaryngology	04	76
4.	Obstetrics & Gynaecology	38	126
5.	Orthopedics	14	39
6.	Anesthesiology	10	46
7.	Radiodiagnosis	01	13
8.	Radiotherapy	05	16
9.	Dentistry	05	23
	Total	116	532

Section 3

Sample topics used for alignment & integration

Section 3 contains a sample selection of topics that run across the phases which can be used for alignment and integration. These are suggestions and institutions can select their own set of topics which can run across phases.

It is important to design the curriculum with a view to ensure with several broad outcomes in mind: a) achievement of the broad competencies by the learner at the end of the MBBS program, b) retain the subject - wise character of learning and assessment and ensure that phase-wise subject outcomes are met and assessed, c) teaching topics that are similar together thereby reducing redundancy and allowing the learner to integrate the concept as the most important step in integration (alignment or temporal coordination) (see document on integration), and d) align learning and assessment experiences to the outcome and the level of achievement specified.

Understanding the competencies table

Understanding the competencies table

A	B	C	D	E	F	G	H	I	J
No.	Competencies	Domain	K/KH/SH/P	Core	Suggested Teaching Learning Method	Suggested Assessment method	No. required to certify (P)	Vertical Integration	Horizontal Integration
Physiology									
Summary Name of Topic: General Physiology Number of Competencies: (08)									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM25.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Unique number of the competency. First two alphabets represent the subject (see list); number following alphabet reflects topic number, following period is a running number.

Description of competency

Identifies the domain or domains addressed
 K - Knowledge
 S - Skill
 A - Attitude
 C - Communication

Identifies the level of competency required based on the Miller's pyramid
 K - Knows
 KH - Knows How
 S - Skill
 SH - Show How
 P - Perform independently

Identifies if the competency is core or desirable.
 Y indicates Core;
 N-non-core

Identifies the suggested learning method.
 DOAP - **D**emonstrate (by Student) **O**bserve, **A**ssist **P**erform)

Identifies the suggested assessment method
 Skill assessment - Clinics, Skills lab, Practicals etc.

no of times a skill needs to be done independently to be certified for independent performance;
 Rarely used in UG

Subject (s) in other phases with which the competency can be vertically integrated to increase relevance or improve basic understanding

Subject (s) in the same phase with which the competency can be horizontally integrated or aligned to allow a more wholesome understanding

***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning objectives from competencies

Deriving learning objectives from competencies

K	Knows	A knowledge attribute – Usually enumerates or describes
KH	Knows how	A higher level of knowledge – is able to discuss or analyse
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret / demonstrate a complex procedure requiring thought, knowledge and behaviour
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

PA42.1*	At the end of the session the phase II student must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the phase II student must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the phase II student must be able to describe the CSF features for a given etiology of meningitis accurately
PA42.4*	At the end of the session the phase II student must be able to identify the aetiology of meningitis correctly from a given set of CSF parameters

- Audience - who will do the behavior
- Behavior - What should the learner be able to do?
- Condition - Under what conditions should the learner be able to do it?
- Degree – How well must it be done

Objective: Statement of what a learner should be able to do at the end of a specific learning experience
***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning methods from competencies

Deriving learning methods from competencies

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the Phase II student must be able to enumerate the most common causes of meningitis correctly	Lecture	small group discussion
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Related objectives can be combined into one teaching session	
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given etiologic of meningitis accurately		
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	small group discussion, practical session	

*Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents

Deriving assessment methods from competencies

Deriving assessment methods from competencies-1

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the ~~Phase II student~~ must be able to enumerate the most common causes of meningitis correctly	Short note or part of structured essay: Enumerate 5 causes of meningitis based on their prevalence in India
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Short note or part of structured essay: Enumerate the components tested in a CSF analysis
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given aetiology of meningitis accurately	Short note or part of structured essay: Describe the CSF findings that are characteristic of tuberculous meningitis
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	Short note / part of the structured essay/ Skill station/ Viva voce Review the CSF findings in the following patient and identify (write or vocalise) the most likely etiology

* Numbers given are for illustrative purposes only and should not be compared with numbers in the curriculum document

Deriving assessment methods from competencies-2

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

MI2.4*	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia.	K	KH	Y	Didactic Small group discussion	Written/ Viva voce	Medicine	Pathology

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

MI2.1*	Enumerate the common microbial agents causing anaemia
MI2.2*	Describe the morphology of agent (1,2 etc)
MI2.3*	Describe the mode of infection of agent in humans
MI2.4*	Discuss the pathogenesis of anemia caused by agent
MI2.5*	Describe the clinical course of infection by agent
MI2.6*	Enumerate the diagnostic tests to identify the aetiology of agent as a cause of anemia
MI2.7*	Discuss the methods to prevent infection by agent
MI2.8*	Describe the treatment of infection by agent

Integrate concept - not necessarily teachers
Plan session with teachers of both subjects -teachers from both subjects usually not needed. Ensure redundancy and duplication by reviewing both subjects



Horizontally aligned and integrated with pathology

Vertically integrated with General Medicine



Integrate concept - not necessarily teachers Plan session with teachers from both phases. Make a decision on how much of the information needs to be brought down to this phase to make it relevant. Consider how a competency can ascend over phases: for eg. - can be at a KH -(know how) in phase II but becomes SH in phase III. For vertical integration with clinical subjects, use of a case to link the concept (a well written paper, case is sufficient). Using teachers from both phases is rarely required

The concept of integration

Concept of integration used in the Manual

Integration is a learning experience that allows the learner to perceive relationships from blocks of knowledge and develop a unified view of its basis and its application. The GMR 2018 applies these principles to the extent that will retain the strengths of silo - based education and assessment while providing experiences that will allow learners to integrate concepts.

Keeping this in mind, the Regulations recommend temporal coordination as described by Harden (called alignment in this document) as the major method to be followed allowing similar topics in different subjects to be thought separately but during the same time frame (Figure 1a).

In a small proportion - not to exceed 20% of the total curriculum an attempt can be made to Share (Figure 1b) topics or Correlate (Figure 1c) topics by using an integration session. The integration session most preferred will be a case based discussion in an appropriate format ensuring that elements in the same phase (horizontal) and from other phases are addressed. Care must be taken to ensure that achievement phase - based objectives are given primacy - the integrative elements from other phases are used only to provide adequate recall and understand the clinical application of concepts. It must be emphasized that integration does not necessarily require multiple teachers in each class. Experts from each phase and subject may be involved in the lesson planning but not it in its delivery unless deemed necessary.

As much as possible the necessary correlates from other phases must also be introduced while discussing a topic in a given subject - Nesting (Figure 1d) (Harden). Topics that cannot be aligned and integrated must be provided adequate time in the curriculum throughout the year.

Assessment will continue to be subject based. However, efforts must be made to ensure that phase appropriate correlates are tested to determine if the learner has internalized and integrated the concept and its application.

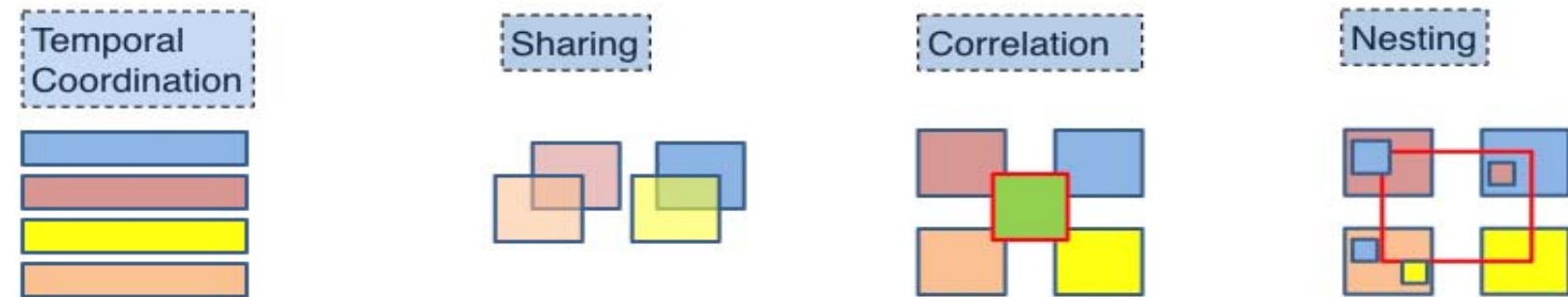


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement a teaching program c. Correlation: the emphasis remains on disciplines or subjects with subject-based courses taking up most of the curriculum time. Within this framework, an integrated teaching session or course is introduced in addition to the subject-based teaching (green box with red border) d. Nesting: the teacher targets, within a subject-based course, skills relating to other subjects. Adapted from Harden R Med Edu 2000. 34; 551

Definitions used in the Manual

- 1. Goal:** A projected state of affairs that a person or system plans to achieve.
In other words: Where do you want to go? or What do you want to become?
- 2. Competency:** The habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served.
In other words: What should you have? or What should have changed?
- 3. Objective:** Statement of what a learner should be able to do at the end of a specific learning experience.
In other words: What the Indian Medical Graduate should know, do, or behave.

Action Verbs used in this manual

Knowledge	Skill	Attitude/communicate
Enumerate	Identify	Counsel
List	Demonstrate	Inform
Describe	Perform under supervision	Demonstrate understanding of
Discuss	Perform independently	
Differentiate	Document	
Define	Present	
Classify	Record	
Choose	Interpret	
Elicit		
Report		

Note:

- 1. Specified essential competencies only will be required to be performed independently at the end of the final year MBBS.
- 2. The word ‘perform’ or ‘do’ is used ONLY if the task has to be done on patients or in laboratory practical in the pre/para- clinical phases.
- 3. Most tasks that require performance during undergraduate years will be performed under supervision.
- 4. If a certification to perform independently has been done, then the number of times the task has to be performed under supervision will be indicated in the last column.

Explanation of terms used in this manual

Lecture	Any instructional large group method including traditional lecture and interactive lecture
Small group discussion	Any instructional method involving small groups of students in an appropriate learning context
DOAP (Demonstration- Observation - Assistance - Performance)	A practical session that allows the student to observe a demonstration, assist the performer, perform in a simulated environment, perform under supervision or perform independently
Skill assessment	A session that assesses the skill of the student including those in the practical laboratory, skills lab, skills station that uses mannequins/ paper case/simulated patients/real patients as the context demands
Core	A competency that is necessary in order to complete the requirements of the subject (traditional must know)
Non-Core	A competency that is optional in order to complete the requirements of the subject (traditional nice (good) to know/ desirable to know)
National Guidelines	Health programs as relevant to the competency that are part of the National Health Program

Domains of learning

K	Knowledge
S	Skill
A	Attitude
C	Communication

Levels of competency

K	Knows	A knowledge attribute - Usually enumerates or describes
KH	Knows how	A higher level of knowledge - is able to discuss or analyze
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret/ demonstrate a complex procedure requiring thought, knowledge and behavior
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Note:

In the table of competency - the highest level of competency acquired is specified and implies that the lower levels have been acquired already. Therefore, when a student is able to SH - Show how - an informed consent is obtained - it is presumed that the preceding steps - the knowledge, the analytical skills, the skill of communicating have all been obtained.

It may also be noted that attainment of the highest level of competency may be obtained through steps spread over several subjects or phases and not necessarily in the subject or the phase in which the competency has been identified.

Volume I

Competency based Undergraduate Curriculum

in

Pre-clinical and Para-clinical subjects

HUMAN ANATOMY (CODE: AN)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Human Anatomy									
Topic: Anatomical terminology		Number of competencies: (2)			Number of procedures for certification: (NIL)				
AN1.1	Demonstrate normal anatomical position, various planes, relation, comparison, laterality & movement in our body	K/S	SH	Y	Lecture, DOAP session	Written/ Viva voce/skills assessment			
AN1.2	Describe composition of bone and bone marrow	K	KH	Y	Lecture	Written/ Viva voce			
Topic: General features of bones & Joints		Number of competencies: (6)			Number of procedures for certification: (NIL)				
AN2.1	Describe parts, blood and nerve supply of a long bone	K	KH	Y	Lecture, DOAP session	Written/ Viva voce			
AN2.2	Enumerate laws of ossification	K	KH	N	Lecture	Written			
AN2.3	Enumerate special features of a sesamoid bone	K	KH	N	Lecture	Written			
AN2.4	Describe various types of cartilage with its structure & distribution in body	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
AN2.5	Describe various joints with subtypes and examples	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
AN2.6	Explain the concept of nerve supply of joints & Hilton's law	K	KH	Y	Lecture	Written/ Viva voce			
Topic: General features of Muscle		Number of competencies: (3)			Number of procedures for certification: (NIL)				
AN3.1	Classify muscle tissue according to structure & action	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN3.2	Enumerate parts of skeletal muscle and differentiate between tendons and aponeuroses with examples	K	KH	Y	Lecture	Written/ Viva voce			
AN3.3	Explain Shunt and spurt muscles	K	KH	N	Lecture	Written			
Topic: General features of skin and fascia		Number of competencies: (5)			Number of procedures for certification: (NIL)				
AN4.1	Describe different types of skin & dermatomes in body	K	KH	N	Lecture, DOAP session	Written			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN4.2	Describe structure & function of skin with its appendages	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		Dermatology, Venereology & Leprosy	
AN4.3	Describe superficial fascia along with fat distribution in body	K	KH	Y	Lecture, DOAP session	Written/ Viva voce			
AN4.4	Describe modifications of deep fascia with its functions	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		Dermatology, Venereology & Leprosy	
AN4.5	Explain principles of skin incisions	K	KH	N	Lecture	Written		Dermatology, Venereology & Leprosy	
Topic: General features of the cardiovascular system Number of competencies: (8) Number of procedures for certification: (NIL)									
AN5.1	Differentiate between blood vascular and lymphatic system	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN5.2	Differentiate between pulmonary and systemic circulation	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN5.3	List general differences between arteries & veins	K	KH	Y	Lecture	Written/ Viva voce			
AN5.4	Explain functional difference between elastic, muscular arteries and arterioles	K	KH	Y	Lecture	Written/ Viva voce			
AN5.5	Describe portal system giving examples	K	KH	Y	Lecture	Written/ Viva voce			
AN5.6	Describe the concept of anastomoses and collateral circulation with significance of end-arteries	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN5.7	Explain function of meta-arterioles, precapillary sphincters, arterio-venous anastomoses	K	KH	N	Lecture	Written			Physiology
AN5.8	Define thrombosis, infarction & aneurysm	K	KH	N	Lecture	Written		Pathology	Physiology
Topic: General Features of lymphatic system Number of competencies: (3) Number of procedures for certification: (NIL)									
AN6.1	List the components and functions of the lymphatic system	K	KH	N	Lecture	Written			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN6.2	Describe structure of lymph capillaries & mechanism of lymph circulation	K	KH	N	Lecture	Written			
AN6.3	Explain the concept of lymphoedema and spread of tumors via lymphatics and venous system	K	KH	N	Lecture	Written		General Surgery	
Topic: Introduction to the nervous system Number of competencies: (8) Number of procedures for certification: (NIL)									
AN7.1	Describe general plan of nervous system with components of central, peripheral & autonomic nervous systems	K	KH	Y	Lecture	Written			
AN7.2	List components of nervous tissue and their functions	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN7.3	Describe parts of a neuron and classify them based on number of neurites, size & function	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN7.4	Describe structure of a typical spinal nerve	K	KH	Y	Lecture	Written/ Viva voce			
AN7.5	Describe principles of sensory and motor innervation of muscles	K	KH	N	Lecture	Written		General Medicine	Physiology
AN7.6	Describe concept of loss of innervation of a muscle with its applied anatomy	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
AN7.7	Describe various type of synapse	K	KH	N	Lecture	Written			Physiology
AN7.8	Describe differences between sympathetic and spinal ganglia	K	KH	N	Lecture	Written			
Topic: Features of individual bones (Upper Limb) Number of competencies: (6) Number of procedures for certification: (NIL)									
AN8.1	Identify the given bone, its side, important features & keep it in anatomical position	K/S	SH	Y	DOAP session	Viva voce/ Practicals/ OSPE			
AN8.2	Identify & describe joints formed by the given bone	K/S	SH	Y	Lecture, DOAP session	Viva voce			
AN8.3	Enumerate peculiarities of clavicle	K	KH	Y	Lecture, DOAP session	Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN8.4	Demonstrate important muscle attachment on the given bone	K/S	SH	Y	Practical DOAP session, Small group teaching	Viva voce Practicals		Orthopedics	
AN8.5	Identify and name various bones in articulated hand, Specify the parts of metacarpals and phalanges and enumerate the peculiarities of pisiform	K/S	SH	Y	Practical, F91 DOAP session, Small group teaching	Viva voce Practicals			
AN8.6	Describe scaphoid fracture and explain the anatomical basis of avascular necrosis	K	KH	N	DOAP session	Viva voce		Orthopedics	
Topic: Pectoral region Number of competencies: (3) Number of procedures for certification: (NIL)									
AN9.1	Describe attachment, nerve supply & action of pectoralis major and pectoralis minor	K	KH	Y	Lecture, Practical	Written			
AN9.2	Breast: Describe the location, extent, deep relations, structure, age changes, blood supply, lymphatic drainage, microanatomy and applied anatomy of breast	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN9.3	Describe development of breast	K	KH	N	Lecture	Written			
Topic: Axilla, Shoulder and Scapular region Number of competencies: (13) Number of procedures for certification: (NIL)									
AN10.1	Identify & describe boundaries and contents of axilla	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN10.2	Identify, describe and demonstrate the origin, extent, course, parts, relations and branches of axillary artery & tributaries of vein	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN10.3	Describe, identify and demonstrate formation, branches, relations, area of supply of branches, course and relations of terminal branches of brachial plexus	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN10.4	Describe the anatomical groups of axillary lymph nodes and specify their areas of drainage	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN10.5	Explain variations in formation of brachial plexus	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN10.6	Explain the anatomical basis of clinical features of Erb's palsy and Klumpke's paralysis	K	KH	N	Lecture	Written		General Surgery	
AN10.7	Explain anatomical basis of enlarged axillary lymph nodes	K	KH	N	Lecture	Written		General Surgery	
AN10.8	Describe, identify and demonstrate the position, attachment, nerve supply and actions of trapezius and latissimus dorsi	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN10.9	Describe the arterial anastomosis around the scapula and mention the boundaries of triangle of auscultation	K	KH	N	Lecture	Written			
AN10.10	Describe and identify the deltoid and rotator cuff muscles	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN10.11	Describe & demonstrate attachment of serratus anterior with its action	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN10.12	Describe and demonstrate shoulder joint for– type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements, muscles involved, blood supply, nerve supply and applied anatomy	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Orthopedics	
AN10.13	Explain anatomical basis of Injury to axillary nerve during intramuscular injections	K	KH	N	Lecture	Viva voce			
Topic: Arm & Cubital fossa Number of competencies: (6) Number of procedures for certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN11.1	Describe and demonstrate muscle groups of upper arm with emphasis on biceps and triceps brachii	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN11.2	Identify & describe origin, course, relations, branches (or tributaries), termination of important nerves and vessels in arm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN11.3	Describe the anatomical basis of Venepuncture of cubital veins	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN11.4	Describe the anatomical basis of Saturday night paralysis	K	KH	Y	Practical, Lecture	Written/ Viva voce		Orthopedics	
AN11.5	Identify & describe boundaries and contents of cubital fossa	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN11.6	Describe the anastomosis around the elbow joint	K	KH	N	Lecture	Written			
Topic: Forearm & hand Number of competencies: (15) Number of procedures for certification: (NIL)									
AN12.1	Describe and demonstrate important muscle groups of ventral forearm with attachments, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.2	Identify & describe origin, course, relations, branches (or tributaries), termination of important nerves and vessels of forearm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.3	Identify & describe flexor retinaculum with its attachments	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN12.4	Explain anatomical basis of carpal tunnel syndrome	K	KH	Y	Lecture	Written/ Viva voce			
AN12.5	Identify & describe small muscles of hand. Also describe movements of thumb and muscles involved	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.6	Describe & demonstrate movements of thumb and muscles involved	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.7	Identify & describe course and branches of important blood vessels and nerves in hand	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.8	Describe anatomical basis of Claw hand	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN12.9	Identify & describe fibrous flexor sheaths, ulnar bursa, radial bursa and digital synovial sheaths	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN12.10	Explain infection of fascial spaces of palm	K	KH	N	Lecture	Written		General Surgery	
AN12.11	Identify, describe and demonstrate important muscle groups of dorsal forearm with attachments, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN12.12	Identify & describe origin, course, relations, branches (or tributaries), termination of important nerves and vessels of back of forearm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN12.13	Describe the anatomical basis of Wrist drop	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN12.14	Identify & describe compartments deep to extensor retinaculum	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN12.15	Identify & describe extensor expansion formation	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
Topic: General Features, Joints, radiographs & surface marking Number of competencies: (8) Number of procedures for certification: (NIL)									
AN13.1	Describe and explain Fascia of upper limb and compartments, veins of upper limb and its lymphatic drainage	K	KH	Y	Lecture	Written/ Viva voce			
AN13.2	Describe dermatomes of upper limb	K	KH	N	Lecture	Written/ Viva voce			
AN13.3	Identify & describe the type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements, blood and nerve supply of elbow joint, proximal and distal radio-ulnar joints, wrist joint & first carpometacarpal joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN13.4	Describe Sternoclavicular joint, Acromioclavicular joint, Carpometacarpal joints & Metacarpophalangeal joint	K	KH	N	Lecture	Written			
AN13.5	Identify the bones and joints of upper limb seen in anteroposterior and lateral view radiographs of shoulder region, arm, elbow, forearm and hand	K/S	SH	Y	Practical, Small group discussion, DOAP session	Viva voce/ skill assessment		Radiodiagnosis	
AN13.6	Identify & demonstrate important bony landmarks of upper limb: Jugular notch, sternal angle, acromial angle, spine of the scapula, vertebral level of the medial end, Inferior angle of the scapula	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment			
AN13.7	Identify & demonstrate surface projection of: Cephalic and basilic vein, Palpation of Brachial artery, Radial artery, Testing of muscles: Trapezius, pectoralis major, serratus anterior, latissimus dorsi, deltoid, biceps brachii, Brachioradialis	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN13.8	Describe development of upper limb	K	KH	N	Lecture	Written			
Features of individual bones (Lower Limb) Number of competencies: (4) Number of procedures for certification: (NIL)									
AN14.1	Identify the given bone, its side, important features & keep it in anatomical position	K/S	SH	Y	DOAP session	Viva voce			
AN14.2	Identify & describe joints formed by the given bone	K/S	SH	Y	Lecture, DOAP session	Viva voce			
AN14.3	Describe the importance of ossification of lower end of femur & upper end of tibia	K	KH	Y	Lecture	Viva voce/ Practicals		Forensic Medicine & Toxicology	
AN14.4	Identify and name various bones in the articulated foot with individual muscle attachment	K/S	SH	N	Practical, DOAP session, Small group teaching	Viva voce/ Practicals			
Topic: Front & Medial side of thigh Number of competencies: (5) ♂ Number of procedures for certification: (NIL)									
AN15.1	Describe and demonstrate origin, course, relations, branches (or tributaries), termination of important nerves and vessels of anterior thigh	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN15.2	Describe and demonstrate major muscles with their attachment, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN15.3	Describe and demonstrate boundaries, floor, roof and contents of femoral triangle	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN15.4	Explain anatomical basis of Psoas abscess & Femoral hernia	K	KH	N	Lecture, DOAP session	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN15.5	Describe and demonstrate adductor canal with its content	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
Topic: Gluteal region & back of thigh Number of competencies: (6) Number of procedures for certification: (NIL)									
AN16.1	Describe and demonstrate origin, course, relations, branches (or tributaries), termination of important nerves and vessels of gluteal region	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN16.2	Describe anatomical basis of sciatic nerve injury during gluteal intramuscular injections	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN16.3	Explain the anatomical basis of Trendelenburg sign	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN16.4	Describe and demonstrate the hamstrings group of muscles with their attachment, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN16.5	Describe and demonstrate the origin, course, relations, branches (or tributaries), termination of important nerves and vessels on the back of thigh	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN16.6	Describe and demonstrate the boundaries, roof, floor, contents and relations of popliteal fossa	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
Topic: Hip Joint Number of competencies: (3) Number of procedures for certification: (NIL)									
AN17.1	Describe and demonstrate the type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply, bursae around the hip joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN17.2	Describe anatomical basis of complications of fracture neck of femur	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN17.3	Describe dislocation of hip joint and surgical hip replacement	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
Topic: Knee joint, Anterolateral compartment of leg & dorsum of foot Number of competencies: (7) ♂ Number of procedures for certification: (NIL)									
AN18.1	Describe and demonstrate major muscles of anterolateral compartment of leg with their attachment, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN18.2	Describe and demonstrate origin, course, relations, branches (or tributaries), termination of important nerves and vessels of anterior compartment of leg	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN18.3	Explain the anatomical basis of foot drop	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN18.4	Describe and demonstrate the type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply, bursae around the knee joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN18.5	Explain the anatomical basis of locking and unlocking of the knee joint	K	KH	Y	Small group teaching	Written/ Viva voce			
AN18.6	Describe knee joint injuries with its applied anatomy	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN18.7	Explain anatomical basis of Osteoarthritis	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
Topic: Back of Leg & Sole Number of competencies: (7) Number of procedures for certification: (NIL)									
AN19.1	Describe and demonstrate the major muscles of back of leg with their attachment, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN19.2	Describe and demonstrate the origin, course, relations, branches (or tributaries), termination of important nerves and vessels of back of leg	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN19.3	Explain the concept of "Peripheral heart"	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN19.4	Explain the anatomical basis of rupture of calcaneal tendon	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN19.5	Describe factors maintaining importance arches of the foot with its importance	K	KH	Y	Lecture	Written/ Viva voce			
AN19.6	Explain the anatomical basis of Flat foot & Club foot	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN19.7	Explain the anatomical basis of Metatarsalgia & Plantar fasciitis	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
Topic: General Features, Joints, radiographs & surface marking Number of competencies: (10) Number of procedures for certification: (NIL)									
AN20.1	Describe and demonstrate the type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements and muscles involved, blood and nerve supply of tibiofibular and ankle joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN20.2	Describe the subtalar and transverse tarsal joints	K	KH	N	Lecture, DOAP session	Written/ Viva voce			
AN20.3	Describe and demonstrate Fascia lata, Venous drainage, Lymphatic drainage, Retinacula & Dermatomes of lower limb	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN20.4	Explain anatomical basis of enlarged inguinal lymph nodes	K	KH	N	Lecture	Written/ Viva voce		General Surgery	
AN20.5	Explain anatomical basis of varicose veins and deep vein thrombosis	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN20.6	Identify the bones and joints of lower limb seen in anteroposterior and lateral view radiographs of various regions of lower limb	K/S	SH	Y	Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN20.7	Identify & demonstrate important bony landmarks of lower limb: -Vertebral levels of highest point of iliac crest, posterior superior iliac spines, iliac tubercle, pubic tubercle, ischial tuberosity, adductor tubercle, -Tibial tuberosity, head of fibula, -Medial and lateral malleoli, Condyles of femur and tibia, sustentaculum tali, tuberosity of fifth metatarsal, tuberosity of the navicular	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment			
AN20.8	Identify & demonstrate palpation of femoral, popliteal, post tibial, anti tibial & dorsalis pedis blood vessels in a simulated environment	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		General Medicine	
AN20.9	Identify & demonstrate Palpation of vessels (femoral, popliteal,dorsalis pedis,post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, Great and small saphenous veins	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		General Medicine, General Surgery	
AN20.10	Describe basic concept of development of lower limb	K	KH	N	Lecture	Viva voce			
Topic: Thoracic cage Number of competencies: (11) Number of procedures for certification: (NIL)									
AN21.1	Identify and describe the salient features of sternum, typical rib, 1 st rib and typical thoracic vertebra	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN21.2	Identify & describe the features of 2 nd , 11 th and 12 th ribs, 1 st , 11 th and 12 th thoracic vertebrae	K/S	SH	N	Lecture, DOAP session	Viva voce/ skill assessment			
AN21.3	Describe & demonstrate the boundaries of thoracic inlet, cavity and outlet	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN21.4	Describe & demonstrate extent, attachments, direction of fibres, nerve supply and actions of intercostal muscles	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN21.5	Describe & demonstrate origin, course, relations and branches of a typical intercostal nerve	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN21.6	Mention origin, course and branches/ tributaries of: 1) anterior & posterior intercostal vessels 2) internal thoracic vessels	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN21.7	Mention the origin, course, relations and branches of 1) atypical intercostal nerve 2) superior intercostal artery, subcostal artery	K	KH	N	Lecture	Written			
AN21.8	Describe & demonstrate type, articular surfaces & movements of manubriosternal, costovertebral, costotransverse and xiphisternal joints	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN21.9	Describe & demonstrate mechanics and types of respiration	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN21.10	Describe costochondral and interchondral joints	K	KH	N	Lecture	Written			
AN21.11	Mention boundaries and contents of the superior, anterior, middle and posterior mediastinum	K	KH	Y	Practical, Lecture	Written/ Viva voce			
Topic: Heart & Pericardium Number of competencies: (7) Number of procedures for certification: (NIL)									
AN22.1	Describe & demonstrate subdivisions, sinuses in pericardium, blood supply and nerve supply of pericardium	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN22.2	Describe & demonstrate external and internal features of each chamber of heart	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN22.3	Describe & demonstrate origin, course and branches of coronary arteries	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN22.4	Describe anatomical basis of ischaemic heart disease	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN22.5	Describe & demonstrate the formation, course, tributaries and termination of coronary sinus	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN22.6	Describe the fibrous skeleton of heart	K	KH	Y	Lecture	Written			
AN22.7	Mention the parts, position and arterial supply of the conducting system of heart	K	KH	Y	Lecture	Written		General Medicine	Physiology
Topic: Mediastinum Number of competencies: (7) Number of procedures for certification: (NIL)									
AN23.1	Describe & demonstrate the external appearance, relations, blood supply, nerve supply, lymphatic drainage and applied anatomy of oesophagus	K/S	SH	Y	Practical, Lecture, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN23.2	Describe & demonstrate the extent, relations tributaries of thoracic duct and enumerate its applied anatomy	K/S	SH	Y	Practical, Lecture, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN23.3	Describe & demonstrate origin, course, relations, tributaries and termination of superior venacava, azygos, hemiazygos and accessory hemiazygos veins	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN23.4	Mention the extent, branches and relations of arch of aorta & descending thoracic aorta	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN23.5	Identify & Mention the location and extent of thoracic sympathetic chain	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN23.6	Describe the splanchnic nerves	K	KH	N	Lecture	Written			
AN23.7	Mention the extent, relations and applied anatomy of lymphatic duct	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Lungs & Trachea Number of competencies: (6) Number of procedures for certification: (NIL)									
AN24.1	Mention the blood supply, lymphatic drainage and nerve supply of pleura, extent of pleura and describe the pleural recesses and their applied anatomy	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Medicine	Physiology
AN24.2	Identify side, external features and relations of structures which form root of lung & bronchial tree and their clinical correlate	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology
AN24.3	Describe a bronchopulmonary segment	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN24.4	Identify phrenic nerve & describe its formation & distribution	K/S	SH	Y	Lecture, Practical	Written/ Viva voce			
AN24.5	Mention the blood supply, lymphatic drainage and nerve supply of lungs	K	KH	Y	Lecture	Written/ Viva voce			
AN24.6	Describe the extent, length, relations, blood supply, lymphatic drainage and nerve supply of trachea	K	KH	N	Lecture	Written			
Topic: Thorax Number of competencies: (9) Number of procedures for certification: (01)									
AN25.1	Identify, draw and label a slide of trachea and lung	K/S	SH	Y	Lecture, Practical	Written/ skill assessment	1		
AN25.2	Describe development of pleura, lung & heart	K	KH	Y	Lecture	Written			
AN25.3	Describe fetal circulation and changes occurring at birth	K	KH	Y	Lecture	Written		General Medicine	Physiology
AN25.4	Describe embryological basis of: 1) atrial septal defect, 2) ventricular septal defect, 3) Fallot's tetralogy & 4) tracheo-oesophageal fistula	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN25.5	Describe developmental basis of congenital anomalies, transposition of great vessels, dextrocardia, patent ductus arteriosus and coarctation of aorta	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.6	Mention development of aortic arch arteries, SVC, IVC and coronary sinus	K	KH	N	Lecture	Written/ Viva voce			
AN25.7	Identify structures seen on a plain x-ray chest (PA view)	K/S	SH	Y	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN25.8	Identify and describe in brief a barium swallow	K/S	SH	N	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN25.9	Demonstrate surface marking of lines of pleural reflection, lung borders and fissures, trachea, heart borders, apex beat & surface projection of valves of heart	K/S	SH	Y	Practical	Viva voce/ skill assessment		General Medicine, Pediatrics	Physiology
Topic: Skull osteology Number of competencies: (7) Number of procedures for certification: (NIL)									
AN26.1	Demonstrate anatomical position of skull, Identify and locate individual skull bones in skull	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN26.2	Describe the features of norma frontalis, verticalis, occipitalis, lateralis and basalis	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN26.3	Describe cranial cavity, its subdivisions, foramina and structures passing through them	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN26.4	Describe morphological features of mandible	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN26.5	Describe features of typical and atypical cervical vertebrae (atlas and axis)	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN26.6	Explain the concept of bones that ossify in membrane	K	KH	N	Lecture	Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN26.7	Describe the features of the 7 th cervical vertebra	K/S	SH	N	DOAP session	Viva voce			
Topic: Scalp Number of competencies: (2) Number of procedures for certification: (NIL)									
AN27.1	Describe the layers of scalp, its blood supply, its nerve supply and surgical importance	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN27.2	Describe emissary veins with its role in spread of infection from extracranial route to intracranial venous sinuses	K	KH	Y	Lecture	Written			
Topic: Face & parotid region Number of competencies: (10) Number of procedures for certification: (NIL)									
AN28.1	Describe & demonstrate muscles of facial expression and their nerve supply	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN28.2	Describe sensory innervation of face	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN28.3	Describe & demonstrate origin /formation, course, branches /tributaries of facial vessels	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN28.4	Describe & demonstrate branches of facial nerve with distribution	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN28.5	Describe cervical lymph nodes and lymphatic drainage of head, face and neck	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN28.6	Identify superficial muscles of face, their nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN28.7	Explain the anatomical basis of facial nerve palsy	K	KH	Y	Lecture	Written		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN28.8	Explain surgical importance of deep facial vein	K	KH	Y	Lecture	Written		General Surgery	
AN28.9	Describe & demonstrate the parts, borders, surfaces, contents, relations and nerve supply of parotid gland with course of its duct and surgical importance	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN28.10	Explain the anatomical basis of Frey's syndrome	K	KH	N	Lecture	Written		General Surgery	
Topic: Posterior triangle of neck Number of competencies: (4) Number of procedures for certification: (NIL)									
AN29.1	Describe & demonstrate attachments, nerve supply, relations and actions of sternocleidomastoid	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN29.2	Explain anatomical basis of Erb's & Klumpke's palsy	K	KH	Y	Lecture	Written		General Surgery	
AN29.3	Explain anatomical basis of wry neck	K	KH	N	Lecture	Written		General Surgery	
AN29.4	Describe & demonstrate attachments of 1) inferior belly of omohyoid, 2)scalenus anterior, 3) scalenus medius & 4) levator scapulae	K/S	SH	N	Lecture, Practical	Written/ Viva voce			
Topic: Cranial cavity Number of competencies: (5) Number of procedures for certification: (NIL)									
AN30.1	Describe the cranial fossae & identify related structures	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN30.2	Describe & identify major foramina with structures passing through them	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN30.3	Describe & identify dural folds & dural venous sinuses	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN30.4	Describe clinical importance of dural venous sinuses	K	KH	Y	Lecture	Written			
AN30.5	Explain effect of pituitary tumours on visual pathway	K	KH	N	Lecture	Written		Ophthalmology	
Topic: Orbit Number of competencies: (5) Number of procedures for certification: (NIL)									
AN31.1	Describe & identify extra ocular muscles of eyeball	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN31.2	Describe & demonstrate nerves and vessels in the orbit	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN31.3	Describe anatomical basis of Horner's syndrome	K	KH	N	Lecture	Written		Ophthalmology	
AN31.4	Enumerate components of lacrimal apparatus	K	KH	Y	Lecture	Written			
AN31.5	Explain the anatomical basis of oculomotor, trochlear and abducent nerve palsies along with strabismus	K	KH	Y	Lecture	Written		Ophthalmology	
Topic: Anterior Triangle Number of competencies: (2) Number of procedures for certification: (NIL)									
AN32.1	Describe boundaries and subdivisions of anterior triangle	K	KH	Y	Practical, Lecture	Written/ Viva voce			
AN32.2	Describe & demonstrate boundaries and contents of muscular, carotid, digastric and submental triangles	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
Topic: Temporal and Infratemporal regions Number of competencies: (5) Number of procedures for certification: (NIL)									
AN33.1	Describe & demonstrate extent, boundaries and contents of temporal and infratemporal fossae	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN33.2	Describe & demonstrate attachments, direction of fibres, nerve supply and actions of muscles of mastication	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN33.3	Describe & demonstrate articulating surface, type & movements of temporomandibular joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN33.4	Explain the clinical significance of pterygoid venous plexus	K	KH	Y	Lecture	Written		General Surgery	
AN33.5	Describe the features of dislocation of temporomandibular joint	K	KH	N	Lecture	Written		General Surgery	
Topic: Submandibular region Number of competencies: (2) Number of procedures for certification: (NIL)									
AN34.1	Describe & demonstrate the morphology, relations and nerve supply of submandibular salivary gland & submandibular ganglion	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN34.2	Describe the basis of formation of submandibular stones	K	KH	N	Lecture	Written		General Surgery	
Topic: Deep structures in the neck Number of competencies: (10) Number of procedures for certification: (NIL)									
AN35.1	Describe the parts, extent, attachments, modifications of deep cervical fascia	K	KH	Y	Lecture	Written			
AN35.2	Describe & demonstrate location, parts, borders, surfaces, relations & blood supply of thyroid gland	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN35.3	Demonstrate & describe the origin, parts, course & branches subclavian artery	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN35.4	Describe & demonstrate origin, course, relations, tributaries and termination of internal jugular & brachiocephalic veins	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN35.5	Describe and demonstrate extent, drainage & applied anatomy of cervical lymph nodes	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN35.6	Describe and demonstrate the extent, formation, relation & branches of cervical sympathetic chain	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN35.7	Describe the course and branches of IX, X, XI & XII nerve in the neck	K	KH	Y	Lecture	Written			
AN35.8	Describe the anatomically relevant clinical features of Thyroid swellings	K	KH	N	Lecture	Written		General Surgery	
AN35.9	Describe the clinical features of compression of subclavian artery and lower trunk of brachial plexus by cervical rib	K	KH	N	Lecture	Written		General Surgery	
AN35.10	Describe the fascial spaces of neck	K	KH	N	Lecture	Written			
Topic: Mouth, Pharynx & Palate Number of competencies: (5) Number of procedures for certification: (NIL)									
AN36.1	Describe the 1) morphology, relations, blood supply and applied anatomy of palatine tonsil 2) composition of soft palate	K	KH	Y	Lecture	Written		ENT	
AN36.2	Describe the components and functions of Waldeyer's lymphatic ring	K	KH	Y	Lecture	Written		ENT	
AN36.3	Describe the boundaries and clinical significance of pyriform fossa	K	KH	N	Lecture	Written		ENT	
AN36.4	Describe the anatomical basis of tonsillitis, tonsillectomy, adenoids and peri-tonsillar abscess	K	KH	N	Lecture	Written		ENT	
AN36.5	Describe the clinical significance of Killian's dehiscence	K	KH	N	Lecture	Written		ENT	
Topic: Cavity of Nose Number of competencies: (3) Number of procedures for certification: (NIL)									
AN37.1	Describe & demonstrate features of nasal septum, lateral wall of nose, their blood supply and nerve supply	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN37.2	Describe location and functional anatomy of paranasal sinuses	K	KH	Y	Lecture	Written		ENT	
AN37.3	Describe anatomical basis of sinusitis & maxillary sinus tumours	K	KH	N	Lecture	Written		ENT	
Topic: Larynx Number of competencies: (3) Number of procedures for certification: (NIL)									
AN38.1	Describe the morphology, identify structure of the wall, nerve supply, blood supply and actions of intrinsic and extrinsic muscles of the larynx	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN38.2	Describe the anatomical aspects of laryngitis	K	KH	N	Lecture	Written		ENT	
AN38.3	Describe anatomical basis of recurrent laryngeal nerve injury	K	KH	N	Lecture	Written		ENT	
Topic: Tongue Number of competencies: (2) Number of procedures for certification: (NIL)									
AN39.1	Describe & demonstrate the morphology, nerve supply, embryological basis of nerve supply, blood supply, lymphatic drainage and actions of extrinsic and intrinsic muscles of tongue	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN39.2	Explain the anatomical basis of hypoglossal nerve palsy	K	KH	N	Lecture	Written		ENT	
Topic: Organs of hearing and equilibrium Number of competencies: (5) Number of procedures for certification: (NIL)									
AN40.1	Describe & identify the parts, blood supply and nerve supply of external ear	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN40.2	Describe & demonstrate the boundaries, contents, relations and functional anatomy of middle ear and auditory tube	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN40.3	Describe the features of internal ear	K	KH	N	Lecture	Written		ENT	
AN40.4	Explain anatomical basis of otitis externa and otitis media	K	KH	N	Lecture	Written		ENT	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN40.5	Explain anatomical basis of myringotomy	K	KH	N	Lecture	Written		ENT	
Topic: Eyeball Number of competencies: (3) Number of procedures for certification: (NIL)									
AN41.1	Describe & demonstrate parts and layers of eyeball	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Ophthalmology	
AN41.2	Describe the anatomical aspects of cataract, glaucoma & central retinal artery occlusion	K	KH	N	Lecture	Written		Ophthalmology	
AN41.3	Describe the position, nerve supply and actions of intraocular muscles	K	KH	N	Lecture	Written		Ophthalmology	
Topic: Back Region Number of competencies: (3) Number of procedures for certification: (NIL)									
AN42.1	Describe the contents of the vertebral canal	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN42.2	Describe & demonstrate the boundaries and contents of Suboccipital triangle	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN42.3	Describe the position, direction of fibres, relations, nerve supply, actions of semispinalis capitis and splenius capitis	K	KH	N	Lecture	Written			
Topic: Head & neck Joints, Histology, Development, Radiography & Surface marking Number of competencies: (9) Number of procedures for certification: (NIL)									
AN43.1	Describe & demonstrate the movements with muscles producing the movements of atlantooccipital joint & atlantoaxial joint	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN43.2	Identify, describe and draw the microanatomy of pituitary gland, thyroid, parathyroid gland, tongue, salivary glands, tonsil, epiglottis, cornea, retina	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN43.3	Identify, describe and draw microanatomy of olfactory epithelium, eyelid, lip, sclero-corneal junction, optic nerve, cochlea- organ of corti, pineal gland	K/S	SH	N	Lecture, Practical	Written/ skill assessment			
AN43.4	Describe the development and developmental basis of congenital anomalies of face, palate, tongue, branchial apparatus, pituitary gland, thyroid gland & eye	K	KH	Y	Lecture	Written/ Viva voce			
AN43.5	Demonstrate- 1) Testing of muscles of facial expression, extraocular muscles, muscles of mastication, 2) Palpation of carotid arteries, facial artery, superficial temporal artery, 3) Location of internal and external jugular veins, 4) Location of hyoid bone, thyroid cartilage and cricoid cartilage with their vertebral levels	K/S	SH	Y	Practical	Viva voce/ skill assessment		General Surgery	
AN43.6	Demonstrate surface projection of- Thyroid gland, Parotid gland and duct, Pterion, Common carotid artery, Internal jugular vein, Subclavian vein, External jugular vein, Facial artery in the face & accessory nerve	K/S	SH	N	Practical	Viva voce/ skill assessment		General Surgery	
AN43.7	Identify the anatomical structures in 1) Plain x-ray skull, 2) AP view and lateral view 3) Plain x-ray cervical spine-AP and lateral view 4) Plain x-ray of paranasal sinuses	K/S	SH	Y	Practical	Viva voce/ skill assessment		Radiodiagnosis	
AN43.8	Describe the anatomical route used for carotid angiogram and vertebral angiogram	K/S	SH	N	Practical	Viva voce/ skill assessment		Radiodiagnosis	
AN43.9	Identify anatomical structures in carotid angiogram and vertebral angiogram	K/S	SH	N	Practical	Viva voce/ skill assessment		Radiodiagnosis	
Topic: Anterior abdominal wall Number of competencies: (7) Number of procedures for certification: (NIL)									
AN44.1	Describe & demonstrate the Planes (transpyloric, transtuberular, subcostal, lateral vertical, linea alba, linea semilunaris), regions & Quadrants of abdomen	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN44.2	Describe & identify the Fascia, nerves & blood vessels of anterior abdominal wall	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN44.3	Describe the formation of rectus sheath and its contents	K	KH	Y	Lecture	Written/ Viva voce			
AN44.4	Describe & demonstrate extent, boundaries, contents of Inguinal canal including Hesselbach's triangle.	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN44.5	Explain the anatomical basis of inguinal hernia.	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN44.6	Describe & demonstrate attachments of muscles of anterior abdominal wall	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN44.7	Enumerate common Abdominal incisions	K	KH	N	Lecture	Written		General Surgery	
Topic: Posterior abdominal wall Number of competencies: (3) Number of procedures for certification: (NIL)									
AN45.1	Describe Thoracolumbar fascia	K	KH	Y	Lecture	Written			
AN45.2	Describe & demonstrate Lumbar plexus for its root value, formation & branches	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN45.3	Mention the major subgroups of back muscles, nerve supply and action	K	KH	N	Lecture	Written			
Topic: Male external genitalia Number of competencies: (5) Number of procedures for certification: (NIL)									
AN46.1	Describe & demonstrate coverings, internal structure, side determination, blood supply, nerve supply, lymphatic drainage & descent of testis with its applied anatomy	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN46.2	Describe parts of Epididymis	K	KH	Y	Lecture, Practical	Written/ Viva voce			
AN46.3	Describe Penis under following headings: (parts, components, blood supply and lymphatic drainage)	K	KH	Y	Lecture, Practical	Written/ Viva voce			
AN46.4	Explain the anatomical basis of Varicocoele	K	KH	N	Lecture	Written		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN46.5	Explain the anatomical basis of Phimosis & Circumcision	K	KH	N	Lecture	Written		General Surgery	
Topic: Abdominal cavity Number of competencies: (14) Number of procedures for certification: (NIL)									
AN47.1	Describe & identify boundaries and recesses of Lesser & Greater sac	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN47.2	Name & identify various peritoneal folds & pouches with its explanation	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN47.3	Explain anatomical basis of Ascites & Peritonitis	K	KH	N	Lecture	Written		General Surgery	
AN47.4	Explain anatomical basis of Subphrenic abscess	K	KH	N	Lecture	Written		General Surgery	
AN47.5	Describe & demonstrate major viscera of abdomen under following headings (anatomical position, external and internal features, important peritoneal and other relations, blood supply, nerve supply, lymphatic drainage and applied aspects)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN47.6	Explain the anatomical basis of Splenic notch, Accessory spleens, Kehr's sign, Different types of vagotomy, Liver biopsy (site of needle puncture), Referred pain in cholecystitis, Obstructive jaundice, Referred pain around umbilicus, Radiating pain of kidney to groin & Lymphatic spread in carcinoma stomach	K	KH	N	Lecture	Written		General Surgery	
AN47.7	Mention the clinical importance of Calot's triangle	K	KH	N	Lecture	Written		General Surgery	
AN47.8	Describe & identify the formation, course relations and tributaries of Portal vein, Inferior vena cava & Renal vein	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN47.9	Describe & identify the origin, course, important relations and branches of Abdominal aorta, Coeliac trunk, Superior mesenteric, Inferior mesenteric & Common iliac artery	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN47.10	Enumerate the sites of portosystemic anastomosis	K	KH	Y	Lecture	Written		General Surgery	
AN47.11	Explain the anatomic basis of hematemesis& caput medusae in portal hypertension	K	KH	Y	Lecture,	Written/ Viva voce		General Surgery	
AN47.12	Describe important nerve plexuses of posterior abdominal wall	K	KH	N	Lecture	Written			
AN47.13	Describe & demonstrate the attachments, openings, nerve supply & action of the thoracoabdominal diaphragm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN47.14	Describe the abnormal openings of thoracoabdominal diaphragm and diaphragmatic hernia	K	KH	N	Lecture	Written		General Surgery	
Topic: Pelvic wall and viscera Number of competencies: (8) Number of procedures for certification: (NIL)									
AN48.1	Describe & identify the muscles of Pelvic diaphragm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN48.2	Describe & demonstrate the (position, features, important peritoneal and other relations, blood supply, nerve supply, lymphatic drainage and clinical aspects of) important male & female pelvic viscera	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN48.3	Describe & demonstrate the origin, course, important relations and branches of internal iliac artery	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN48.4	Describe the branches of sacral plexus	K	KH	Y	Lecture	Written			
AN48.5	Explain the anatomical basis of suprapubic cystostomy, Urinary obstruction in benign prostatic hypertrophy, Retroverted uterus, Prolapse uterus, Internal and external haemorrhoids, Anal fistula, Vasectomy, Tubal pregnancy & Tubal ligation	K	KH	N	Lecture	Written		General Surgery	
AN48.6	Describe the neurological basis of Automatic bladder	K	KH	N	Lecture	Written		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN48.7	Mention the lobes involved in benign prostatic hypertrophy & prostatic cancer	K	KH	N	Lecture	Written		General Surgery	
AN48.8	Mention the structures palpable during vaginal & rectal examination	K	KH	N	Lecture	Written		Obstetrics & Gynaecology General Surgery	
Topic: Perineum Number of competencies: (5) Number of procedures for certification: (NIL)									
AN49.1	Describe & demonstrate the superficial & deep perineal pouch (boundaries and contents)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN49.2	Describe & identify Perineal body	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN49.3	Describe & demonstrate Perineal membrane in male & female	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN49.4	Describe & demonstrate boundaries, content & applied anatomy of Ischiorectal fossa	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Surgery	
AN49.5	Explain the anatomical basis of Perineal tear, Episiotomy, Perianal abscess and Anal fissure	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
Topic: Vertebral column Number of competencies: (4) Number of procedures for certification: (NIL)									
AN50.1	Describe the curvatures of the vertebral column	K	KH	Y	Lecture	Written/ Viva voce			
AN50.2	Describe & demonstrate the type, articular ends, ligaments and movements of Intervertebral joints, Sacroiliac joints & Pubic symphysis	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN50.3	Describe lumbar puncture (site, direction of the needle, structures pierced during the lumbar puncture)	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
AN50.4	Explain the anatomical basis of Scoliosis, Lordosis, Prolapsed disc, Spondylolisthesis & Spina bifida	K	KH	N	Lecture	Written		Orthopedics	
Topic: Sectional Anatomy Number of competencies: (2) Number of procedures for certification: (NIL)									
AN51.1	Describe & identify the cross-section at the level of T8, T10 and L1 (transpyloric plane)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Radiodiagnosis	
AN51.2	Describe & identify the midsagittal section of male and female pelvis	K	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Radiodiagnosis	
Topic: Histology & Embryology Number of competencies: (8) Number of procedures for certification: (NIL)									
AN52.1	Describe & identify the microanatomical features of Gastro-intestinal system: Oesophagus, Fundus of stomach, Pylorus of stomach, Duodenum, Jejunum, Ileum, Large intestine, Appendix, Liver, Gall bladder, Pancreas & Suprarenal gland	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
AN52.2	Describe & identify the microanatomical features of: Urinary system: Kidney, Ureter & Urinary bladder Male Reproductive System: Testis, Epididymis, Vas deferens, Prostate & penis Female reproductive system: Ovary, Uterus, Uterine tube, Cervix, Placenta & Umbilical cord	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
AN52.3	Describe & identify the microanatomical features of Cardiooesophageal junction, Corpus luteum	K/S	SH	N	Lecture, Practical	Written/ skill assessment			
AN52.4	Describe the development of anterior abdominal wall	K	KH	N	Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN52.5	Describe the development and congenital anomalies of Diaphragm	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN52.6	Describe the development and congenital anomalies of: Foregut, Midgut & Hindgut	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN52.7	Describe the development of Urinary system	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN52.8	Describe the development of male & female reproductive system	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
Topic: Osteology Number of competencies: (4) Number of procedures for certification: (NIL)									
AN53.1	Identify & hold the bone in the anatomical position, Describe the salient features, articulations & demonstrate the attachments of muscle groups	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		General Surgery, Obstetrics & Gynaecology	
AN53.2	Demonstrate the anatomical position of bony pelvis & show boundaries of pelvic inlet, pelvic cavity, pelvic outlet	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN53.3	Define true pelvis and false pelvis and demonstrate sex determination in male & female bony pelvis	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN53.4	Explain and demonstrate clinical importance of bones of abdominopelvic region (sacralization of lumbar vertebra, Lumbarization of 1st sacral vertebra, types of bony pelvis & Coccyx)	K/S	SH	N	Lecture, DOAP session	Viva voce/ skill assessment			
Topic: Radiodiagnosis Number of competencies: (3) Number of procedures for certification: (NIL)									
AN54.1	Describe & identify features of plain X ray abdomen	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Radiodiagnosis	
AN54.2	Describe & identify the special radiographs of abdominopelvic region (contrast X ray Barium swallow, Barium meal, Barium enema, Cholecystography, Intravenous pyelography & Hysterosalpingography)	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN54.3	Describe role of ERCP, CT abdomen, MRI, Arteriography in radiodiagnosis of abdomen	K	KH	N	Lecture	Viva voce		Radiodiagnosis	
Topic: Surface marking Number of competencies: (2) Number of procedures for certification: (NIL)									
AN55.1	Demonstrate the surface marking of; Regions and planes of abdomen, Superficial inguinal ring, Deep inguinal ring , McBurney's point, Renal Angle & Murphy's point	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		General Surgery	
AN55.2	Demonstrate the surface projections of: Stomach, Liver, Fundus of gall bladder, Spleen, Duodenum, Pancreas, Ileocaecal junction, Kidneys & Root of mesentery	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		General Surgery	
Topic: Meninges & CSF Number of competencies: (2) Number of procedures for certification: (NIL)									
AN56.1	Describe & identify various layers of meninges with its extent & modifications	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	
AN56.2	Describe circulation of CSF with its applied anatomy	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
Topic: Spinal Cord Number of competencies: (5) Number of procedures for certification: (NIL)									
AN57.1	Identify external features of spinal cord	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN57.2	Describe extent of spinal cord in child & adult with its clinical implication	K	KH	Y	Lecture	Written/ Viva voce			
AN57.3	Draw & label transverse section of spinal cord at mid-cervical & mid-thoracic level	K	KH	Y	Lecture	Written/ Viva voce			
AN57.4	Enumerate ascending & descending tracts at mid thoracic level of spinal cord	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN57.5	Describe anatomical basis of syringomyelia	K	KH	N	Lecture	Written		General Medicine	Physiology
Topic: Medulla Oblongata Number of competencies: (4) Number of procedures for certification: (NIL)									
AN58.1	Identify external features of medulla oblongata	K/S	SH	Y	Lecture, DOAP session	Written/ Viva voce/ skill assessment			
AN58.2	Describe transverse section of medulla oblongata at the level of 1) pyramidal decussation, 2) sensory decussation 3) ION	K	KH	Y	Lecture	Written/ Viva voce			
AN58.3	Enumerate cranial nerve nuclei in medulla oblongata with their functional group	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN58.4	Describe anatomical basis & effects of medial & lateral medullary syndrome	K	KH	N	Lecture	Written		General Medicine	Physiology
Topic: Pons Number of competencies: (3) Number of procedures for certification: (NIL)									
AN59.1	Identify external features of pons	K/S	SH	Y	Lecture, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN59.2	Draw & label transverse section of pons at the upper and lower level	K	KH	Y	Lecture	Written/ Viva voce			
AN59.3	Enumerate cranial nerve nuclei in pons with their functional group	K	KH	Y	Lecture	Written/ Viva voce			
Topic: Cerebellum Number of competencies: (3) Number of procedures for certification: (NIL)									
AN60.1	Describe & demonstrate external & internal features of cerebellum	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN60.2	Describe connections of cerebellar cortex and intracerebellar nuclei	K	KH	Y	Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN60.3	Describe anatomical basis of cerebellar dysfunction	K	KH	N	Lecture	Written		General Medicine	Physiology
Topic: Midbrain Number of competencies: (3) Number of procedures for certification: (NIL)									
AN61.1	Identify external & internal features of midbrain	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			
AN61.2	Describe internal features of midbrain at the level of superior & inferior colliculus	K	KH	Y	Lecture	Written/ Viva voce			
AN61.3	Describe anatomical basis & effects of Benedikt's and Weber's syndrome	K	KH	N	Lecture	Written		General Medicine	Physiology
Topic: Cranial nerve nuclei & Cerebral hemispheres Number of competencies: (6) Number of procedures for certification: (NIL)									
AN62.1	Enumerate cranial nerve nuclei with its functional component	K	KH	Y	Lecture	Written/ Viva voce			
AN62.2	Describe & demonstrate surfaces, sulci, gyri, poles, & functional areas of cerebral hemisphere	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology
AN62.3	Describe the white matter of cerebrum	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.4	Enumerate parts & major connections of basal ganglia & limbic lobe	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN62.5	Describe boundaries, parts, gross relations, major nuclei and connections of dorsal thalamus, hypothalamus, epithalamus, metathalamus and subthalamus	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.6	Describe & identify formation, branches & major areas of distribution of circle of Willis	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Ventricular System Number of competencies: (2) Number of procedures for certification: (NIL)									
AN63.1	Describe & demonstrate parts, boundaries & features of IIIrd, IVth & lateral ventricle	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN63.2	Describe anatomical basis of congenital hydrocephalus	K	KH	N	Lecture	Written		Pediatrics	Physiology
Topic: Histology & Embryology Number of competencies: (3) Number of procedures for certification: (NIL)									
AN64.1	Describe & identify the microanatomical features of Spinal cord, Cerebellum & Cerebrum	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
AN64.2	Describe the development of neural tube, spinal cord, medulla oblongata, pons, midbrain, cerebral hemisphere & cerebellum	K	KH	Y	Lecture	Written/ Viva voce			
AN64.3	Describe various types of open neural tube defects with its embryological basis	K	KH	N	Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
Topic: Epithelium histology Number of competencies: (2) Number of competencies for certification: (01)									
AN65.1	Identify epithelium under the microscope & describe the various types that correlate to its function	K/S	P	Y	Lecture, Practical	Written/ skill assessment	1		
AN65.2	Describe the ultrastructure of epithelium	K	KH	N	Lecture, Practical	Written			
Topic: Connective tissue histology Number of competencies: (2) Number of procedures for certification: (NIL)									
AN66.1	Describe & identify various types of connective tissue with functional correlation	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			Physiology
AN66.2	Describe the ultrastructure of connective tissue	K	KH	N	Lecture, Practical	Written		Pathology	
Topic: Muscle histology Number of competencies: (3) Number of procedures for certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN67.1	Describe & identify various types of muscle under the microscope	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
AN67.2	Classify muscle and describe the structure-function correlation of the same	K	KH	Y	Lecture, Practical	Written			Physiology
AN67.3	Describe the ultrastructure of muscular tissue	K	KH	N	Lecture, Practical	Written			
Topic: Nervous tissue histology Number of competencies: (3) Number of procedures for certification: (NIL)									
AN68.1	Describe & Identify multipolar & unipolar neuron, ganglia, peripheral nerve	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
AN68.2	Describe the structure-function correlation of neuron	K	KH	Y	Lecture, Practical	Written			Physiology
AN68.3	Describe the ultrastructure of nervous tissue	K	KH	N	Lecture, Practical	Written			
Topic: Blood Vessels Number of competencies: (3) Number of procedures for certification: (NIL)									
AN69.1	Identify elastic & muscular blood vessels, capillaries under the microscope	K/S	SH	Y	Lecture, Practical	Skill assessment			
AN69.2	Describe the various types and structure-function correlation of blood vessel	K	KH	Y	Lecture, Practical	Written			Physiology
AN69.3	Describe the ultrastructure of blood vessels	K	KH	Y	Lecture, Practical	Written			
Topic: Glands & Lymphoid tissue Number of competencies: (2) Number of procedures for certification: (NIL)									
AN70.1	Identify exocrine gland under the microscope & distinguish between serous, mucous and mixed acini	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
AN70.2	Identify the lymphoid tissue under the microscope & describe microanatomy of lymph node, spleen, thymus, tonsil and correlate the structure with function	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
Topic: Bone & Cartilage Number of competencies: (2) Number of procedures for certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN71.1	Identify bone under the microscope; classify various types and describe the structure-function correlation of the same	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
AN71.2	Identify cartilage under the microscope & describe various types and structure- function correlation of the same	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
Topic: Integumentary System Number of competencies: (1) Number of procedures for certification: (NIL)									
AN72.1	Identify the skin and its appendages under the microscope and correlate the structure with function	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			
Topic: Chromosomes Number of competencies: (3) Number of procedures for certification: (NIL)									
AN73.1	Describe the structure of chromosomes with classification	K	KH	Y	Lecture	Written			
AN73.2	Describe technique of karyotyping with its applications	K	KH	Y	Lecture	Written			
AN73.3	Describe the Lyon's hypothesis	K	KH	Y	Lecture	Written			
Topic: Patterns of Inheritance Number of competencies: (4) Number of procedures for certification: (NIL)									
AN74.1	Describe the various modes of inheritance with examples	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	
AN74.2	Draw pedigree charts for the various types of inheritance & give examples of diseases of each mode of inheritance	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	
AN74.3	Describe multifactorial inheritance with examples	K	KH	Y	Lecture	Written		General Medicine	
AN74.4	Describe the genetic basis & clinical features of Achondroplasia, Cystic Fibrosis, Vitamin D resistant rickets, Haemophilia, Duchene's muscular dystrophy & Sickle cell anaemia	K	KH	N	Lecture	Written		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Principle of Genetics, Chromosomal Aberrations & Clinical Genetics Number of competencies: (5) Number of procedures for certification: (NIL)									
AN75.1	Describe the structural and numerical chromosomal aberrations	K	KH	Y	Lecture	Written		Pediatrics	
AN75.2	Explain the terms mosaics and chimeras with example	K	KH	N	Lecture	Written		Pediatrics	
AN75.3	Describe the genetic basis & clinical features of Prader Willi syndrome, Edward syndrome & Patau syndrome	K	KH	N	Lecture	Written		Pediatrics	
AN75.4	Describe genetic basis of variation: polymorphism and mutation	K	KH	Y	Lecture	Written		Pediatrics	
AN75.5	Describe the principles of genetic counselling	K	KH	Y	Lecture	Written		Pediatrics, Obstetrics & Gynaecology	
Topic: Introduction to embryology Number of competencies: (2) Number of procedures for certification: (NIL)									
AN76.1	Describe the stages of human life	K	KH	Y	Lecture	Written			
AN76.2	Explain the terms- phylogeny, ontogeny, trimester, viability	K	KH	Y	Lecture	written			
Topic: Gametogenesis and fertilization Number of competencies: (6) Number of procedures for certification: (NIL)									
AN77.1	Describe the uterine changes occurring during the menstrual cycle	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.2	Describe the synchrony between the ovarian and menstrual cycles	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.3	Describe spermatogenesis and oogenesis along with diagrams	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.4	Describe the stages and consequences of fertilisation	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN77.5	Enumerate and describe the anatomical principles underlying contraception	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.6	Describe teratogenic influences; fertility and sterility, surrogate motherhood, social significance of “sex-ratio”.	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
Topic: Second week of development Number of competencies: (5) Number of procedures for certification: (NIL)									
AN78.1	Describe cleavage and formation of blastocyst	K	KH	Y	Lecture	Written			
AN78.2	Describe the development of trophoblast	K	KH	Y	Lecture	Written			
AN78.3	Describe the process of implantation & common abnormal sites of implantation	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN78.4	Describe the formation of extra-embryonic mesoderm and coelom, bilaminar disc and prochordal plate	K	KH	Y	Lecture	Written			
AN78.5	Describe in brief abortion; decidual reaction, pregnancy test	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
Toic: 3rd to 8th week of development Number of competencies: (6) Number of procedures for certification: (NIL)									
AN79.1	Describe the formation & fate of the primitive streak	K	KH	Y	Lecture	Written			
AN79.2	Describe formation & fate of notochord	K	KH	Y	Lecture	Written			
AN79.3	Describe the process of neurulation	K	KH	Y	Lecture	Written			
AN79.4	Describe the development of somites and intra-embryonic coelom	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN79.5	Explain embryological basis of congenital malformations, nucleus pulposus, sacrococcygeal teratomas, neural tube defects	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN79.6	Describe the diagnosis of pregnancy in first trimester and role of teratogens, alpha-fetoprotein	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Fetal membranes Number of competencies: (7) Number of procedures for certification: (NIL)									
AN80.1	Describe formation, functions & fate of-chorion: amnion; yolk sac; allantois & decidua	K	KH	Y	Lecture	Written			
AN80.2	Describe formation & structure of umbilical cord	K	KH	Y	Lecture	Written			
AN80.3	Describe formation of placenta, its physiological functions, foetomaternal circulation & placental barrier	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.4	Describe embryological basis of twinning in monozygotic & dizygotic twins	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.5	Describe role of placental hormones in uterine growth & parturition	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.6	Explain embryological basis of estimation of fetal age.	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN80.7	Describe various types of umbilical cord attachments	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
Topic: Prenatal Diagnosis Number of competencies: (3) Number of procedures for certification: (NIL)									
AN81.1	Describe various methods of prenatal diagnosis	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN81.2	Describe indications, process and disadvantages of amniocentesis	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN81.3	Describe indications, process and disadvantages of chorion villus biopsy	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
Topic: Ethics in Anatomy Number of competencies: (1) Number of procedures for certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN 82.1	Demonstrate respect and follow the correct procedure when handling cadavers and other biologic tissue	S	SH	Y	Group Activity	NIL		AETCOM	
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Physiology									
PY3.1	Describe the structure and functions of a neuron and neuroglia; Discuss Nerve Growth Factor & other growth factors/cytokines	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY3.7	Describe the different types of muscle fibres and their structure	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY3.13	Describe muscular dystrophy: myopathies	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Human Anatomy
PY4.1	Describe the structure and functions of digestive system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY5.1	Describe the functional Anatomy of heart including chambers, sounds; and Pacemaker tissue and conducting system.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY5.6	Describe abnormal ECG, arrhythmias, heart block and myocardial Infarction	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Human Anatomy
PY9.1	Describe and discuss sex determination; sex differentiation and their abnormalities and outline psychiatry and practical implication of sex determination.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.1	Describe and discuss the organization of nervous system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
PY10.2	Describe and discuss the functions and properties of synapse, reflex, receptors	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.3	Describe and discuss somatic sensations & sensory tracts	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.4	Describe and discuss motor tracts, mechanism of maintenance of tone, control of body movements, posture and equilibrium & vestibular apparatus	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.5	Describe and discuss structure and functions of reticular activating system, autonomic nervous system (ANS)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.6	Describe and discuss Spinal cord, its functions, lesion & sensory disturbances	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.7	Describe and discuss functions of cerebral cortex, basal ganglia, thalamus, hypothalamus, cerebellum and limbic system and their abnormalities	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	Human Anatomy
PY10.11	Demonstrate the correct clinical examination of the nervous system: Higher functions, Sensory system, motor system, reflexes, Cranial Nerves in a normal volunteer or simulated environment	S	P	Y	DOAP sessions	Skill assessment / Viva voce / OSCE	1 each (total 5)		Human Anatomy
Biochemistry									
BI6.13	Describe the functions of the kidney, liver, thyroid and adrenal glands	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.14	Describe the tests that are commonly done in clinical practice to assess the functions of these organs (kidney, liver, thyroid and adrenal glands).	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.15	Describe the abnormalities of kidney, liver, thyroid and adrenal glands	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
Pathology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA28.10	Describe the etiology, pathogenesis, pathology, laboratory findings, distinguishing features progression and complications of acute and chronic pyelonephritis and reflux nephropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, General Surgery	
PA31.1	Classify and describe the types, etiology, pathogenesis, pathology and hormonal dependency of benign breast disease	K	KH	Y	Lecture, Small group	Written/ Viva voce		Human Anatomy, General Surgery	
PA32.1	Enumerate, classify and describe the etiology, pathogenesis, pathology and iodine dependency of thyroid swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy Physiology, General Medicine, General Surgery	
PA32.9	Describe the etiology, pathogenesis, manifestations, laboratory and morphologic features of adrenal neoplasms	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
PA33.1	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of osteomyelitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Orthopedics	Microbiology
Forensic Medicine & Toxicology									
FM2.28	Describe and discuss signs of intrauterine death, signs of live birth, viability of foetus, age determination of foetus, DOAP session of ossification centres, Hydrostatic test, Sudden infants death syndrome and Munchausen's syndrome by proxy.	K	KH	Y	Lectures, Small group discussion, Autopsy, DOAP session	Written/Viva voce/ OSCE		Pediatrics, Human Anatomy	
FM3.1	Identification Define and describe Corpus Delicti, establishment of identity of living persons including race, Sex, religion, complexion, stature, age determination using morphology, teeth-eruption, decay, bite marks, bones ossification centres, medico-legal aspects of age.	K	KH	Y	Lectures, Small group discussion, Bedside clinic, DOAP session	Written/ Viva voce/skill assessment		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
Anesthesiology									
AS4.2	Describe the Anatomy of the airway and its implications for general anaesthesia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
AS5.2	Describe the correlative Anatomy of the brachial plexus, subarachnoid and epidural spaces	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
AS5.3	Observe and describe the principles and steps/ techniques involved in peripheral nerve blocks	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Human Anatomy	
AS8.1	Describe the anatomical correlates and physiologic principles of pain	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Human Anatomy Physiology	
ENT									
EN1.1	Describe the Human Anatomy & physiology of ear, nose, throat, head & neck.	K	KH	Y	Lecture, Small group discission, DOAP session	Written/ Viva voce/Skill assessment		Human Anatomy	
Ophthalmology									
OP2.1	Enumerate the causes, describe and discuss the aetiology, clinical presentations and diagnostic features of common conditions of the lid and adnexa including Hordeolum externum/ internum, blepharitis, preseptal cellulitis, dacryocystitis, hemangioma, dermoid, ptosis, entropion, lid lag, lagophthalmos	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
OP4.1	Enumerate describe and discuss the types and causes of corneal ulceration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
OP6.7	Enumerate and discuss the aetiology, the clinical distinguishing features of various glaucomas associated with shallow and deep anterior chamber. Choose appropriate investigations and treatment for patients with above conditions.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
OP7.1	Describe the surgical anatomy and the metabolism of the lens	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Human Anatomy	
OP8.1	Discuss the aetiology, pathology, clinical features and management of vascular occlusions of the retina	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Pathology	
Dentistry									
DE1.1	Enumerate the parts of the tooth	K	K	N	Lecture, Small group discussion	Viva voce		Human Anatomy	
DE5.1	Enumerate the parts of the tooth and supporting structures	K	K	N	Lecture, Small group discussion	Viva voce		Human Anatomy	
General Medicine									
IM3.1	Define discuss describe and distinguish community acquired pneumonia, nosocomial pneumonia and aspiration pneumonia	K	K	Y	Lecture, Small Group discussion	short note/ Viva voce		Human Anatomy, Pathology, Microbiology	
IM13.9	Demonstrate in a mannequin the correct technique for performing breast exam, rectal examination and cervical examination and pap smear	S	K	Y	Bedside clinic	Skill assessment/ short case		Human Anatomy	General Surgery
IM17.1	Define and classify headache and describe the presenting features, precipitating factors, aggravating and relieving factors of various kinds of headache	K	KH	Y	Lecture, Small group discussion	short note/ Viva voce		Human Anatomy	
IM18.1	Describe the functional and the vascular anatomy of the brain	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Human Anatomy	
IM19.1	Describe the functional anatomy of the locomotor system of the brain	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Human Anatomy, Physiology	
Obstetrics & Gynaecology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
OG2.1	Describe and discuss the development and anatomy of the female reproductive tract, relationship to other pelvic organs, applied anatomy as related to Obstetrics and Gynaecology.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Human Anatomy	
OG4.1	Describe and discuss the basic embryology of fetus , factors influencing fetal growth and development, anatomy and physiology of placenta, and teratogenesis	K	K	Y	Lecture, Small group discussion	Theory		Human Anatomy	
OG14.1	Enumerate and discuss the diameters of maternal pelvis and types	K	KH	Y	Lecture, Small group discussion, Bedside clinic, DOAP session	Written/ Viva voce/ skill assessment		Human Anatomy	
General Surgery									
SU19.1	Describe the etiology and classification of cleft lip and palate	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU19.2	Describe the Principles of reconstruction of cleft lip and palate	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU22.1	Describe the Applied anatomy, and physiology of thyroid	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU22.5	Describe the applied anatomy of parathyroid.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU23.1	Describe the applied anatomy of adrenal glands	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU24.1	Describe the clinical features, principles of investigation, prognosis and management of pancreatitis.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
SU25.1	Describe applied anatomy appropriate investigations for breast disease	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.2	Describe the clinical features, investigations and principles of management of congenital anomalies of Genitourinary system.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.5	Describe the applied anatomy and physiology of esophagus	K	K	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Human Anatomy, Physiology	
SU28.7	Describe the applied anatomy and physiology of stomach.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.10	Describe the applied anatomy of liver. Describe the Clinical features, Investigations and principles of management of Liver abscess, hydatid disease, Injuries and Tumors of the liver.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.11	Describe the applied anatomy of Spleen. Describe the clinical features, Investigations and principles of management of splenic injuries. Describe the Post-splenectomy sepsis- prophylaxis.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.12	Describe the applied anatomy of biliary system. Describe the clinical features, investigations and principles of management of diseases of biliary system.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.13	Describe the applied anatomy of small and large intestines	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU28.16	Describe applied anatomy including congenital anomalies of the rectum and anal canal	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
SU30.2	Describe the applied anatomy, clinical features, investigations and principles of management of Undescended testis.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU30.3	Describe the applied anatomy, clinical features, investigations and principles of management of Epididymo-orchitis	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU30.4	Describe the applied anatomy, clinical features, investigations and principles of management of Varicocele	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
SU30.5	Describe the applied anatomy, clinical features, investigations and principles of management of Hydrocele	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
Orthopaedics									
OR2.1	Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of clavicle	K/S	KH/SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE	1	Human Anatomy	
OR2.2	Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal humerus	K	K/KH/SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.3	Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of supra condylar fracture of humerus	K	KH/SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.4	Describe and discuss the mechanism of injury, clinical features, investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neurovascular deficit	K/S	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.5	Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injury	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
OR2.6	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radius	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.7	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instability	K	K/KH/SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.8	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patient	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.9	Describe and discuss the mechanism of injury, Clinical features, investigations and principle of management of acetabular fracture	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.10	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femur	K/S/A/C	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.11	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of (a) Fracture patella (b) Fracture distal femur © Fracture proximal tibia with special focus on neurovascular injury and compartment syndrome	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.12	Describe and discuss the aetiopathogenesis, clinical features, Investigation and principles of management of Fracture shaft of femur in all age groups and the recognition and management of fat embolism as a complication	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.13	Describe and discuss the aetiopathogenesis, clinical features, Investigation and principles of management of: (a) Fracture both bones leg (b) Calcaneus (c) Small bones of foot	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.14	Describe and discuss the aetiopathogenesis, clinical features, Investigation and principles of management of ankle fractures	K/S/C	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Teaching-Learning Methods	Assessment Methods	Number required to certify P	Vertical Integration	Horizontal Integration
OR2.15	Plan and interpret the investigations to diagnose complications of fractures like malunion, non-union, infection, compartmental syndrome	K/S	SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE	2	Human Anatomy	
OR2.16	Describe and discuss the mechanism of injury, clinical features, investigations and principles of management of open fractures with focus on secondary infection, prevention and management	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR11.1	Describe and discuss the aetiopathogenesis, Clinical features, Investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves	K	K/H	Y	Lecture, Small Group discussion, case discussion	Written/ Viva voce/ OSCE		Human Anatomy	General Medicine, General surgery
OR12.1	Describe and discuss the Clinical features, Investigations and principles of management of Congenital and acquired malformations and deformities of: a. limbs and spine - Scoliosis and spinal bifida b. Congenital dislocation of Hip, Torticollis, c. congenital talipes equino varus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ OSCE		Human Anatomy	
Physical Medicine & Rehabilitation									
PM2.1	Describe the causes of disability in the patient with a cerebrovascular accident	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	General Medicine
PM3.1	Describe and discuss the clinical features, types, evaluation, diagnosis and management of cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	Pediatrics
Pediatrics									
PE32.1	Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counselling in Down's Syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	

PHYSIOLOGY (CODE: PY)

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PHYSIOLOGY									
Topic: General Physiology Number of competencies: (09) Number of procedures that require certification : (NIL)									
PY1.1	Describe the structure and functions of a mammalian cell	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY1.2	Describe and discuss the principles of homeostasis	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY1.3	Describe intercellular communication	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY1.4	Describe apoptosis – programmed cell death	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology	
PY1.5	Describe and discuss transport mechanisms across cell membranes	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY1.6	Describe the fluid compartments of the body, its ionic composition & measurements	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY1.7	Describe the concept of pH & Buffer systems in the body	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY1.8	Describe and discuss the molecular basis of resting membrane potential and action potential in excitable tissue	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY1.9	Demonstrate the ability to describe and discuss the methods used to demonstrate the functions of the cells and its products, its communications and their applications in Clinical care and research.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
Topic: Haematology Number of competencies: (13) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY2.1	Describe the composition and functions of blood components	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY2.2	Discuss the origin, forms, variations and functions of plasma proteins	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY2.3	Describe and discuss the synthesis and functions of Haemoglobin and explain its breakdown. Describe variants of haemoglobin	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY2.4	Describe RBC formation (erythropoiesis & its regulation) and its functions	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY2.5	Describe different types of anaemias & Jaundice	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology	Biochemistry
PY2.6	Describe WBC formation (granulopoiesis) and its regulation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY2.7	Describe the formation of platelets, functions and variations.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY2.8	Describe the physiological basis of hemostasis and, anticoagulants. Describe bleeding & clotting disorders (Hemophilia, purpura)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology	
PY2.9	Describe different blood groups and discuss the clinical importance of blood grouping, blood banking and transfusion	K	KH	Y	Lecture, Small group discussion, ECE- Visit to blood bank	Written/Viva voce		Pathology	
PY2.10	Define and classify different types of immunity. Describe the development of immunity and its regulation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY2.11	Estimate Hb, RBC, TLC, RBC indices, DLC, Blood groups, BT/CT	S	SH	Y	DOAP sessions	Practical/OSPE/Viva voce		Pathology	
PY2.12	Describe test for ESR, Osmotic fragility, Hematocrit. Note the findings and interpret the test results etc	K	KH	Y	Demonstration	Written /Viva voce		Pathology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY2.13	Describe steps for reticulocyte and platelet count	K	KH	Y	Demonstration sessions	Written /Viva voce		Pathology	
Topic: Nerve and Muscle Physiology Number of competencies: (18) Number of procedures that require certification: (NIL)									
PY3.1	Describe the structure and functions of a neuron and neuroglia; Discuss Nerve Growth Factor & other growth factors/cytokines	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY3.2	Describe the types, functions & properties of nerve fibers	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY3.3	Describe the degeneration and regeneration in peripheral nerves	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PY3.4	Describe the structure of neuro-muscular junction and transmission of impulses	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Anaesthesiology	
PY3.5	Discuss the action of neuro-muscular blocking agents	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Anaesthesiology, Pharmacology	
PY3.6	Describe the pathophysiology of Myasthenia gravis	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology	
PY3.7	Describe the different types of muscle fibres and their structure	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY3.8	Describe action potential and its properties in different muscle types (skeletal & smooth)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY3.9	Describe the molecular basis of muscle contraction in skeletal and in smooth muscles	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY3.10	Describe the mode of muscle contraction (isometric and isotonic)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY3.11	Explain energy source and muscle metabolism	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY3.12	Explain the gradation of muscular activity	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PY3.13	Describe muscular dystrophy: myopathies	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Human Anatomy
PY3.14	Perform Ergography	S	SH	Y	DOAP sessions	Practical/OSPE/Viva voce			
PY3.15	Demonstrate effect of mild, moderate and severe exercise and record changes in cardiorespiratory parameters	S	SH	Y	DOAP sessions	Practical/OSPE/Viva voce			
PY3.16	Demonstrate Harvard Step test and describe the impact on induced physiologic parameters in a simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/Viva voce			
PY3.17	Describe Strength-duration curve	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY3.18	Observe with Computer assisted learning (i) amphibian nerve - muscle experiments (ii) amphibian cardiac experiments	S	KH	Y	Demonstration, Computer assisted learning methods	Practical / Viva voce			
Topic: Gastro-intestinal Physiology Number of competencies: (10) Number of procedures that require certification: (NIL)									
PY4.1	Describe the structure and functions of digestive system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY4.2	Describe the composition, mechanism of secretion, functions, and regulation of saliva, gastric, pancreatic, intestinal juices and bile secretion	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY4.3	Describe GIT movements, regulation and functions. Describe defecation reflex. Explain role of dietary fibre.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY4.4	Describe the physiology of digestion and absorption of nutrients	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY4.5	Describe the source of GIT hormones, their regulation and functions	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY4.6	Describe the Gut-Brain Axis	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY4.7	Describe & discuss the structure and functions of liver and gall bladder	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY4.8	Describe & discuss gastric function tests, pancreatic exocrine function tests & liver function tests	K	KH	Y	Lecture, Small group discussion, Demonstration Esophageal Manometry & endoscopy	Written/Viva voce			Biochemistry
PY4.9	Discuss the physiology aspects of: peptic ulcer, gastro-oesophageal reflux disease, vomiting, diarrhoea, constipation, Adynamic ileus, Hirschsprung's disease	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Biochemistry
PY4.10	Demonstrate the correct clinical examination of the abdomen in a normal volunteer or simulated environment	S	SH	Y	DOAP session	Skill assessment/ Viva voce/OSCE			
Topic: Cardiovascular Physiology (CVS) Number of competencies: (16) Number of procedures that require certification: (03)									
PY5.1	Describe the functional anatomy of heart including chambers, sounds; and Pacemaker tissue and conducting system.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY5.2	Describe the properties of cardiac muscle including its morphology, electrical, mechanical and metabolic functions	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.3	Discuss the events occurring during the cardiac cycle	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.4	Describe generation, conduction of cardiac impulse	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.5	Describe the physiology of electrocardiogram (E.C.G), its applications and the cardiac axis	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY5.6	Describe abnormal ECG, arrhythmias, heart block and myocardial Infarction	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Human Anatomy
PY5.7	Describe and discuss haemodynamics of circulatory system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.8	Describe and discuss local and systemic cardiovascular regulatory mechanisms	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.9	Describe the factors affecting heart rate, regulation of cardiac output & blood pressure	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.10	Describe & discuss regional circulation including microcirculation, lymphatic circulation, coronary, cerebral, capillary, skin, foetal, pulmonary and splanchnic circulation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PY5.11	Describe the patho-physiology of shock, syncope and heart failure	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY5.12	Record blood pressure & pulse at rest and in different grades of exercise and postures in a volunteer or simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/ Viva voce	1 each x 3		
PY5.13	Record and interpret normal ECG in a volunteer or simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/ Viva voce		General Medicine	
PY5.14	Observe cardiovascular autonomic function tests in a volunteer or simulated environment	S	SH	N	DOAP sessions	Skill assessment/ Viva voce			
PY5.15	Demonstrate the correct clinical examination of the cardiovascular system in a normal volunteer or simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/ Viva voce			
PY5.16	Record Arterial pulse tracing using finger plethysmography in a volunteer or simulated environment	S	SH	N	DOAP sessions, Computer assisted learning methods	Practical/OSPE/ Viva voce		General Medicine	
Topic: Respiratory Physiology Number of competencies: (10) Number of procedures that require certification: (01)									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY6.1	Describe the functional anatomy of respiratory tract	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.2	Describe the mechanics of normal respiration, pressure changes during ventilation, lung volume and capacities, alveolar surface tension, compliance, airway resistance, ventilation, V/P ratio, diffusion capacity of lungs	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.3	Describe and discuss the transport of respiratory gases: Oxygen and Carbon dioxide	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.4	Describe and discuss the physiology of high altitude and deep sea diving	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.5	Describe and discuss the principles of artificial respiration, oxygen therapy, acclimatization and decompression sickness.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.6	Describe and discuss the pathophysiology of dyspnoea, hypoxia, cyanosis asphyxia; drowning, periodic breathing	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.7	Describe and discuss lung function tests & their clinical significance	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY6.8	Demonstrate the correct technique to perform & interpret Spirometry	S	SH	Y	DOAP sessions	Skill assessment/ Viva voce		Respiratory Medicine	
PY6.9	Demonstrate the correct clinical examination of the respiratory system in a normal volunteer or simulated environment	S	P	Y	DOAP sessions	Skill assessment/ Viva voce/OSCE	1		
PY6.10	Demonstrate the correct technique to perform measurement of peak expiratory flow rate in a normal volunteer or simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/ Viva voce			
Topic: Renal Physiology Number of competencies: (09) Number of procedures that require certification: (NIL)									
PY7.1	Describe structure and function of kidney	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY7.2	Describe the structure and functions of juxta glomerular apparatus and role of renin-angiotensin system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY7.3	Describe the mechanism of urine formation involving processes of filtration, tubular reabsorption & secretion; concentration and diluting mechanism	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY7.4	Describe & discuss the significance & implication of Renal clearance	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY7.5	Describe the renal regulation of fluid and electrolytes & acid-base balance	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY7.6	Describe the innervations of urinary bladder, physiology of micturition and its abnormalities	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY7.7	Describe artificial kidney, dialysis and renal transplantation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PY7.8	Describe & discuss Renal Function Tests	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY7.9	Describe cystometry and discuss the normal cystometrogram	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
Topic: Endocrine Physiology Number of competencies: (06) Number of procedures that require certification : (NIL)									
PY8.1	Describe the physiology of bone and calcium metabolism	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY8.2	Describe the synthesis, secretion, transport, physiological actions, regulation and effect of altered (hypo and hyper) secretion of pituitary gland, thyroid gland, parathyroid gland, adrenal gland, pancreas and hypothalamus	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY8.3	Describe the physiology of Thymus & Pineal Gland	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY8.4	Describe function tests: Thyroid gland; Adrenal cortex, Adrenal medulla and pancreas	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY8.5	Describe the metabolic and endocrine consequences of obesity & metabolic syndrome, Stress response. Outline the psychiatry component pertaining to metabolic syndrome.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY8.6	Describe & differentiate the mechanism of action of steroid, protein and amine hormones	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
Topic: Reproductive Physiology Number of competencies: (12) Number of procedures that require certification: (NIL)									
PY9.1	Describe and discuss sex determination; sex differentiation and their abnormalities and outline psychiatry and practical implication of sex determination.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY9.2	Describe and discuss puberty: onset, progression, stages; early and delayed puberty and outline adolescent clinical and psychological association.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY9.3	Describe male reproductive system: functions of testis and control of spermatogenesis & factors modifying it and outline its association with psychiatric illness	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY9.4	Describe female reproductive system: (a) functions of ovary and its control; (b) menstrual cycle - hormonal, uterine and ovarian changes	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY9.5	Describe and discuss the physiological effects of sex hormones	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY9.6	Enumerate the contraceptive methods for male and female. Discuss their advantages & disadvantages	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology, Community Medicine	
PY9.7	Describe and discuss the effects of removal of gonads on physiological functions	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY9.8	Describe and discuss the physiology of pregnancy, parturition & lactation and outline the psychology and psychiatry-disorders associated with it.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology	
PY9.9	Interpret a normal semen analysis report including (a) sperm count, (b) sperm morphology and (c) sperm motility, as per WHO guidelines and discuss the results	K	KH	Y	Lecture, Small group discussion	OSPE/Viva voce			
PY9.10	Discuss the physiological basis of various pregnancy tests	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology	
PY9.11	Discuss the hormonal changes and their effects during perimenopause and menopause	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology	
PY9.12	Discuss the common causes of infertility in a couple and role of IVF in managing a case of infertility.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology	
Topic: Neurophysiology Number of competencies: (20) Number of procedures that require certification: (09)									
PY10.1	Describe and discuss the organization of nervous system	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.2	Describe and discuss the functions and properties of synapse, reflex, receptors	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.3	Describe and discuss somatic sensations & sensory tracts	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.4	Describe and discuss motor tracts, mechanism of maintenance of tone, control of body movements, posture and equilibrium & vestibular apparatus	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.5	Describe and discuss structure and functions of reticular activating system, autonomic nervous system (ANS)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy
PY10.6	Describe and discuss Spinal cord, its functions, lesion & sensory disturbances	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Human Anatomy

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY10.7	Describe and discuss functions of cerebral cortex, basal ganglia, thalamus, hypothalamus, cerebellum and limbic system and their abnormalities	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	Human Anatomy
PY10.8	Describe and discuss behavioural and EEG characteristics during sleep and mechanism responsible for its production	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	
PY10.9	Describe and discuss the physiological basis of memory, learning and speech	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	
PY10.10	Describe and discuss chemical transmission in the nervous system. (Outline the psychiatry element).	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY10.11	Demonstrate the correct clinical examination of the nervous system: Higher functions, sensory system, motor system, reflexes, cranial nerves in a normal volunteer or simulated environment	S	P	Y	DOAP sessions	Skill assessment/ Viva voce/OSCE	1 each (total 5)		Human Anatomy
PY10.12	Identify normal EEG forms	S	S	Y	Small group teaching	OSPE/Viva voce		Psychiatry	
PY10.13	Describe and discuss perception of smell and taste sensation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		ENT	
PY10.14	Describe and discuss patho-physiology of altered smell and taste sensation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		ENT	
PY10.15	Describe and discuss functional anatomy of ear and auditory pathways & physiology of hearing	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		ENT	
PY10.16	Describe and discuss pathophysiology of deafness. Describe hearing tests	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		ENT	
PY10.17	Describe and discuss functional anatomy of eye, physiology of image formation, physiology of vision including colour vision, refractive errors, colour blindness, physiology of pupil and light reflex	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Ophthalmology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY10.18	Describe and discuss the physiological basis of lesion in visual pathway	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Ophthalmology	
PY10.19	Describe and discuss auditory & visual evoke potentials	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Ophthalmology	
PY10.20	Demonstrate (i) Testing of visual acuity, colour and field of vision and (ii) hearing (iii) Testing for smell and (iv) taste sensation in volunteer/ simulated environment	S	P	Y	DOAP sessions	Skill assessment/ Viva voce	1 each (total 4)	ENT, Ophthalmology	
Topic: Integrated Physiology Number of competencies: (14) Number of procedures that require certification: (NIL)									
PY11.1	Describe and discuss mechanism of temperature regulation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.2	Describe and discuss adaptation to altered temperature (heat and cold)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.3	Describe and discuss mechanism of fever, cold injuries and heat stroke	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.4	Describe and discuss cardio-respiratory and metabolic adjustments during exercise; physical training effects	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.5	Describe and discuss physiological consequences of sedentary lifestyle	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.6	Describe physiology of Infancy	K	KH	N	Lecture, Small group discussion	Written/Viva voce		Pediatrics	
PY11.7	Describe and discuss physiology of aging; free radicals and antioxidants	K	KH	N	Lecture, Small group discussion	Written/Viva voce			
PY11.8	Discuss & compare cardio-respiratory changes in exercise (isometric and isotonic) with that in the resting state and under different environmental conditions (heat and cold)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY11.9	Interpret growth charts	K	KH	N	Small group teaching	Practical/OSPE/ Viva voce		Pediatrics	
PY11.10	Interpret anthropometric assessment of infants	K	KH	N	Small group teaching	Practical/OSPE/ Viva voce		Pediatrics	
PY11.11	Discuss the concept, criteria for diagnosis of Brain death and its implications	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
PY11.12	Discuss the physiological effects of meditation	K	KH	N	Lecture, Small group discussion	Written/Viva voce			
PY11.13	Obtain history and perform general examination in the volunteer / simulated environment	S	SH	Y	DOAP sessions	Skill assessment/ Viva voce			
PY11.14	Demonstrate Basic Life Support in a simulated environment	S	SH	Y	DOAP sessions	OSCE		General Medicine, Anaesthesiology	
Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation									
Integration									
Human Anatomy									
AN3.1	Classify muscle tissue according to structure & action	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN5.1	Differentiate between blood vascular and lymphatic system	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN5.2	Differentiate between pulmonary and systemic circulation	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN5.6	Describe the concept of anastomoses and collateral circulation with significance of end-arteries	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN5.7	Explain function of meta-arterioles, precapillary sphincters, arterio-venous anastomoses	K	KH	N	Lecture	Written			Physiology
AN5.8	Define thrombosis, infarction & aneurysm	K	KH	N	Lecture	Written		Pathology	Physiology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN7.2	List components of nervous tissue and their functions	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN7.3	Describe parts of a neuron and classify them based on number of neurites, size & function	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN7.5	Describe principles of sensory and motor innervation of muscles	K	KH	N	Lecture	Written		General Medicine	Physiology
AN7.7	Describe various types of synapse	K	KH	N	Lecture	Written			Physiology
AN21.9	Describe & demonstrate mechanics and types of respiration	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/Viva voce/ skill assessment			Physiology
AN22.2	Describe & demonstrate external and internal features of each chamber of heart	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/Viva voce/ skill assessment			Physiology
AN22.3	Describe & demonstrate origin, course and branches of coronary arteries	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/Viva voce/ skill assessment			Physiology
AN22.4	Describe anatomical basis of ischaemic heart disease	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN22.7	Mention the parts, position and arterial supply of the conducting system of heart	K	KH	Y	Lecture	Written		General Medicine	Physiology
AN24.1	Mention the blood supply, lymphatic drainage and nerve supply of pleura, extent of pleura and describe the pleural recesses and their applied anatomy	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Medicine	Physiology
AN24.2	Identify side, external features and relations of structures which form root of lung & bronchial tree and their clinical correlate	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology
AN24.3	Describe a bronchopulmonary segment	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN25.3	Describe fetal circulation and changes occurring at birth	K	KH	Y	Lecture	Written		General Medicine	Physiology
AN25.4	Describe embryological basis of: 1) atrial septal defect, 2) ventricular septal defect, 3) Fallot's tetralogy & 4) tracheo-oesophageal fistula	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.5	Describe developmental basis of congenital anomalies, transposition of great vessels, dextrocardia, patent ductus arteriosus and coarctation of aorta	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.9	Demonstrate surface marking of lines of pleural reflection, Lung borders and fissures, Trachea, Heart borders, Apex beat & Surface projection of valves of heart	K/S	SH	Y	Practical	Viva voce/ skill assessment		General Medicine, Pediatrics	Physiology
AN56.2	Describe circulation of CSF with its applied anatomy	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN57.4	Enumerate ascending & descending tracts at mid thoracic level of spinal cord	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN57.5	Describe anatomical basis of syringomyelia	K	KH	N	Lecture	Written		General Medicine	Physiology
AN58.3	Enumerate cranial nerve nuclei in medulla oblongata with their functional group	K	KH	Y	Lecture	Written/ Viva voce			Physiology
AN58.4	Describe anatomical basis & effects of medial & lateral medullary syndrome	K	KH	N	Lecture	Written		General Medicine	Physiology
AN59.1	Identify external features of pons	K/S	SH	Y	Lecture, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN60.3	Describe anatomical basis of cerebellar dysfunction	K	KH	N	Lecture	Written		General Medicine	Physiology
AN61.3	Describe anatomical basis & effects of Benedikt's and Weber's syndromme	K	KH	N	Lecture	Written		General Medicine	Physiology
AN62.2	Describe & demonstrate surfaces, sulci, gyri, poles, & functional areas of cerebral hemisphere	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN62.3	Describe the white matter of cerebrum	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.4	Enumerate parts & major connections of basal ganglia & limbic lobe	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.5	Describe boundaries, parts, gross relations, major nuclei and connections of dorsal thalamus, hypothalamus, epithalamus, metathalamus and subthalamus	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.6	Describe & identify formation, branches & major areas of distribution of circle of Willis	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		General Medicine	Physiology
AN63.1	Describe & demonstrate parts, boundaries & features of IIIrd, IVth & lateral ventricle	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment			Physiology
AN63.2	Describe anatomical basis of congenital hydrocephalus	K	KH	N	Lecture	Written		Pediatrics	Physiology
AN66.1	Describe & identify various types of connective tissue with functional correlation	K/S	SH	Y	Lecture, Practical	Written/ skill assessment			Physiology
AN67.2	Classify muscle and describe the structure-function correlation of the same	K	KH	Y	Lecture, Practical	Written			Physiology
AN68.2	Describe the structure-function correlation of neuron	K	KH	Y	Lecture, Practical	Written			Physiology
AN69.2	Describe the various types and structure-function correlation of blood vessel	K	KH	Y	Lecture, Practical	Written			Physiology
Biochemistry									
BI1.1	Describe the molecular and functional organization of a cell and its sub-cellular components.	K	KH	Y	Lecture, Small group discussions	Written assessment and Viva voce			Physiology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
BI3.7	Describe the common poisons that inhibit crucial enzymes of carbohydrate metabolism (eg; fluoride, arsenate)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Physiology
BI5.2	Describe and discuss functions of proteins and structure-function relationships in relevant areas eg, hemoglobin and selected hemoglobinopathies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.3	Describe the common disorders associated with nucleotide metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Physiology
BI6.7	Describe the processes involved in maintenance of normal pH, water & electrolyte balance of body fluids and the derangements associated with these.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.9	Describe the functions of various minerals in the body, their metabolism and homeostasis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.11	Describe the functions of haem in the body and describe the processes involved in its metabolism and describe porphyrin metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.12	Describe the major types of haemoglobin and its derivatives found in the body and their physiological/ pathological relevance.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.13	Describe the functions of the kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.14	Describe the tests that are commonly done in clinical practice to assess the functions of these organs (kidney, liver, thyroid and adrenal glands).	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.15	Describe the abnormalities of kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI10.4	Describe & discuss innate and adaptive immune responses, self/non-self recognition and the central role of T-helper cells in immune responses.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	Physiology
BI11.4	Perform urine analysis to estimate and determine normal and abnormal constituents	S	P	Y	DOAP session	Skill assessment	1	General Medicine	Physiology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Pathology									
PA26.3	Define and describe the etiology, types, pathogenesis, stages, morphology and complications and evaluation of Obstructive airway disease (OAD) and bronchiectasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	Microbiology
PA27.3	Describe the etiology, types, stages pathophysiology pathology and complications of heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA27.8	Interpret abnormalities in cardiac function testing in acute coronary syndromes	S	SH	Y	DOAP session	Skill Assessment		Physiology, General Medicine	
PA27.9	Classify and describe the etiology, types, pathophysiology, pathology, gross and microscopic features, diagnosis and complications of cardiomyopathies	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA28.5	Define and classify glomerular diseases. Enumerate and describe the etiology, pathogenesis, mechanisms of glomerular injury, pathology, distinguishing features and clinical manifestations of glomerulonephritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.1	Enumerate, classify and describe the etiology, pathogenesis, pathology and iodine dependency of thyroid swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
PA32.2	Describe the etiology, cause, iodine dependency, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.3	Describe the etiology, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis/ hypothyroidism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.4	Classify and describe the epidemiology, etiology, pathogenesis, pathology, clinical laboratory features, complications and progression of diabetes mellitus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.5	Describe the etiology, genetics, pathogenesis, manifestations, laboratory and morphologic features of hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA32.7	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of adrenal insufficiency	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.8	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of Cushing's syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.9	Describe the etiology, pathogenesis, manifestations, laboratory and morphologic features of adrenal neoplasms	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	

Pharmacology

PH1.15	Describe mechanism/s of action, types, doses, side effects, indications and contraindications of skeletal muscle relaxants	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology, Physiology	
PH1.19	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs which act on CNS, (including anxiolytics, sedatives & hypnotics, antipsychotic, antidepressant drugs, anti-manics, opioid agonists and antagonists, drugs used for neurodegenerative disorders, antiepileptics Drugs)	K	KH	Y	Lecture	Written/ Viva voce		Psychiatry, Physiology	
PH1.25	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs acting on blood, like anticoagulants, antiplatelets, fibrinolytics, plasma expanders	K	KH	Y	Lecture	Written/ Viva voce		Physiology, General Medicine	
PH1.26	Describe mechanisms of action, types, doses, side effects, indications and contraindications of the drugs modulating the renin angiotensin and aldosterone system	K	KH	Y	Lecture	Written/ Viva voce		Physiology, General Medicine	
PH1.35	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in hematological disorders like: 1. Drugs used in anemias 2. Colony Stimulating factors	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Physiology	Pharmacology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Forensic Medicine & Toxicology									
FM14.7	Demonstrate & identify that a particular stain is blood and identify the species of its origin.	S	KH	Y	Small group discussion, Lecture	Log book/ skill station/ Viva voce		Pathology, Physiology	
FM14.8	Demonstrate the correct technique to perform and identify ABO & Rh blood group of a person.	S	SH	Y	Small group discussion, DOAP session	Log book/ skill station/ Viva voce		Pathology, Physiology	
Anesthesiology									
AS7.3	Observe and describe the management of an unconscious patient	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	General Medicine
AS7.4	Observe and describe the basic setup process of a ventilator	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	General Medicine
AS8.1	Describe the anatomical correlates and physiologic principles of pain	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Human Anatomy, Physiology	
AS8.2	Elicit and determine the level, quality and quantity of pain and its tolerance in patient or surrogate	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	
Ophtalmology									
OP1.1	Describe the physiology of vision.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	
General Medicine									
IM1.1	Describe and discuss the epidemiology, pathogenesis clinical evolution and course of common causes of heart disease including: rheumatic/ valvular, ischemic, hypertrophic inflammatory.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM1.2	Describe and discuss the genetic basis of some forms of heart failure	K	KH	N	Lecture, Small group discussion	Written		Pathology, Physiology	
IM1.3	Describe and discuss the aetiology microbiology pathogenies and clinical evolution of rheumatic fever, criteria, degree of rheumatic activity and rheumatic valvular heart disease and its complications including infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Microbiology	
IM1.4	Stage heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.5	Describe discuss and differentiate the processes involved in R Vs L heart failure, systolic vs diastolic failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.6	Describe and discuss the compensatory mechanisms involved in heart failure including cardiac remodelling and neurohormonal adaptations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.7	Enumerate, describe and discuss the factors that exacerbate heart failure including ischemia, arrhythmias anemia, thyrotoxicosis, dietary factors drugs etc.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.8	Describe and discuss the pathogenesis and development of common arrhythmias involved in heart failure particularly atrial fibrillation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.1	Discuss and describe the epidemiology, antecedents and risk factors for atherosclerosis and ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology Community Medicine	
IM2.2	Discuss the aetiology of risk factors both modifiable and non modifiable of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.3	Discuss and describe the lipid cycle and the role of dyslipidemia in the pathogenesis of atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
IM2.4	Discuss and describe the pathogenesis, natural history, evolution and complications of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM5.1	Describe and discuss the physiologic and biochemical basis of hyperbilirubinemia	K	K	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, Physiology	
IM5.2	Describe and discuss the aetiology and pathophysiology of liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.1	Describe and discuss the epidemiology, aetiology and the prevalence of primary and secondary hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.2	Describe and discuss the pathophysiology of hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM11.22	Enumerate the causes of hypoglycaemia and describe the counter hormone response and the initial approach and treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM12.1	Describe the epidemiology and pathogenesis of hypothyroidism and hyperthyroidism including the influence of iodine deficiency and autoimmunity in the pathogenesis of thyroid disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM12.3	Describe and discuss the physiology of the hypothalamopituitary - thyroid axis, principles of thyroid function testing and alterations in physiologic function	K	K	Y	Lecture, Small group discussion	short notes		Pathology, Physiology	
IM15.3	Describe and discuss the physiologic effects of acute blood and volume loss	K	K	Y	Lecture, Small group discussions	short note/ Viva voce		Pathology, Physiology	General Surgery
IM18.6	Distinguish the lesion based on upper vs lower motor neuron, side, site and most probable nature of the lesion	K/S	SH	Y	Bedside clinic, DOAP session	Skill Assessment		Physiology	
IM18.7	Describe the clinical features and distinguish, based on clinical examination, the various disorders of speech	K/S	SH	N	Bedside clinic, DOAP session	Skill Assessment		Physiology	
IM18.8	Describe and distinguish, based on the clinical presentation, the types of bladder dysfunction seen in CNS disease	K	KH	Y	Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
IM19.1	Describe the functional anatomy of the locomotor system of the brain	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Human Anatomy, Physiology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM22.1	Enumerate the causes of hypercalcemia and distinguish the features of PTH vs non PTH mediated hypercalcemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM22.9	Enumerate the causes and describe the clinical and laboratory features of metabolic acidosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.10	Enumerate the causes of describe the clinical and laboratory features of metabolic alkalosis	K	KH	N	Lecture, small group discussion	Written/ Viva voce		Physiology	
IM22.11	Enumerate the causes and describe the clinical and laboratory features of respiratory acidosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.12	Enumerate the causes and describe the clinical and laboratory features of respiratory alkalosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.13	Identify the underlying acid based disorder based on an ABG report and clinical situation	S	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM23.1	Discuss and describe the methods of nutritional assessment in an adult and calculation of caloric requirements during illnesses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.2	Discuss and describe the causes and consequences of protein caloric malnutrition in the hospital	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM24.22	Describe and discuss the aetiopathogenesis, clinical presentation, complications, assessment and management of nutritional disorders in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
Obstetrics & Gynaecology									
OG3.1	Describe the physiology of ovulation, menstruation, fertilization, implantation and gametogenesis	K	K	Y	Lecture, seminars	Theory		Physiology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG7.1	Describe and discuss the changes in the genital tract, cardiovascular system, respiratory, haematology, renal and gastrointestinal systems in pregnancy	K	KH	Y	Lecture, seminars	Theory		Physiology	
Pediatrics									
PE7.2	Explain the physiology of lactation	K	KH	Y	Lecture, small group discussion	Written/ Viva voce		Physiology	
PE7.3	Describe the composition and types of breast milk and discuss the differences between cow's milk and human milk	K	KH	Y	Lecture, debate	Written/ Viva voce		Physiology	
PE10.1	Define, describe the etio-pathogenesis, classify including WHO classification, clinical features, complication and management of severe Acute Malnourishment and Moderate Acute Malnutrition	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Biochemistry	
PE10.2	Outline the clinical approach to a child with SAM and MAM	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
PE10.3	Assessment of a patient with SAM and MAM, diagnosis, classification and planning management including hospital and community based intervention, rehabilitation and prevention	S	SH	Y	Bed side clinics, Skill Lab	Skill station		Physiology, Biochemistry	
PE11.1	Describe the common etiology, clinical features and management of Obesity in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry, Pathology	
PE11.2	Discuss the risk approach for obesity and discuss the prevention strategies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE12.7	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin D (Rickets and Hypervitaminosis D	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.8	Identify the clinical features of dietary deficiency of Vitamin D	S	P	Y	Bedside clinics, Skills lab	Document in log book	3	Biochemistry Physiology Pathology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE12.9	Assess patients with Vitamin D deficiency, diagnose, classify and plan management	S	SH	Y	Bed side clinics	Document in log book		Biochemistry, Physiology, Pathology	
PE12.13	Discuss the RDA, dietary sources of Vitamin K and their role in health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.14	Describe the causes, clinical features, diagnosis, management and prevention of Deficiency of Vitamin K	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE23.1	Discuss the Hemodynamic changes, clinical presentation, complications and management of Acyanotic Heart Diseases –VSD, ASD and PDA	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Pathology	
PE23.2	Discuss the Hemodynamic changes, clinical presentation, complications and management of Cyanotic Heart Diseases – Fallot's Physiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Pathology	
PE23.3	Discuss the etio-pathogenesis, clinical presentation and management of cardiac failure in infant and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Pathology	
PE23.4	Discuss the etio-pathogenesis, clinical presentation and management of Acute Rheumatic Fever in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Pathology	
PE23.5	Discuss the clinical features, complications, diagnosis, management and prevention of Acute Rheumatic Fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology Pathology	
PE23.6	Discuss the etio-pathogenesis and clinical features and management of Infective endocarditis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology, Microbiology	
PE29.1	Discuss the etio-pathogenesis, Clinical features, classification and approach to a child with anaemia	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, Physiology	
PE29.2	Discuss the etio-pathogenesis, clinical features and management of Iron Deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE29.3	Discuss the etiopathogenesis, Clinical features and management of VIT B12, Folate deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.4	Discuss the etio-pathogenesis, clinical features and management of Hemolytic anemia, Thalassemia Major, Sickle cell anaemia, Hereditary spherocytosis, Auto-immune hemolytic anaemia and hemolytic uremic syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology Physiology	

General Surgery

SU1.1	Describe basic concepts of homeostasis, enumerate the metabolic changes in injury and their mediators	K	KH	Y	Lecture, Bed side clinic and Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
SU2.1	Describe Pathophysiology of shock. Types of shock. Principles of resuscitation including fluid replacement and monitoring	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
SU4.1	Elicit, document and present history in a case of Burns and perform physical examination. Describe Pathophysiology of Burns.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	
SU12.1	Enumerate the causes and consequences of malnutrition in the surgical patient.	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
SU12.2	Describe and Discuss the methods of estimation and replacement the Fluid and electrolyte requirements in the surgical patient	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
SU28.5	Describe the applied Anatomy and physiology of esophagus	K	K	Y	Lecture, Small group Discussion, Demonstration	Written/ Viva voce		Human Anatomy, Physiology	

Respiratory Medicine

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT2.1	Define and classify obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.2	Describe and discuss the epidemiology risk factors and evolution of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.4	Describe and discuss the physiology and pathophysiology of hypoxia and hypercapnea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.5	Describe and discuss the genetics of alpha 1 antitrypsin deficiency in emphysema	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.11	Describe, discuss and interpret pulmonary function tests	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Physiology, Pathology	

BIOCHEMISTRY (CODE: BI)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BIOCHEMISTRY									
Topic: Basic Biochemistry		Number of competencies: (01)			Number of procedures that require certification: (NIL)				
BI1.1	Describe the molecular and functional organization of a cell and its sub-cellular components.	K	KH	Y	Lecture, Small group discussion	Written assessment/ Viva voce			Physiology
Topic: Enzyme		Number of competencies: (07)			Number of procedures that require certification: (NIL)				
BI2.1	Explain fundamental concepts of enzyme, isoenzyme, alloenzyme, coenzyme & co-factors. Enumerate the main classes of IUBMB nomenclature.	K	KH	Y	Lecture, case discussion	Written assessment/ Viva voce			
BI2.2	Observe the estimation of SGOT & SGPT	K	K	Y	Demonstration	Viva voce			
BI2.3	Describe and explain the basic principles of enzyme activity	K	KH	Y	Lecture, case discussion	Written/ Viva voce			
BI2.4	Describe and discuss enzyme inhibitors as poisons and drugs and as therapeutic enzymes	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, General Medicine	
BI2.5	Describe and discuss the clinical utility of various serum enzymes as markers of pathological conditions.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, General Medicine	
BI2.6	Discuss use of enzymes in laboratory investigations (Enzyme-based assays)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI2.7	Interpret laboratory results of enzyme activities & describe the clinical utility of various enzymes as markers of pathological conditions.	K	KH	Y	Lecture, Small group discussion, DOAP sessions	Written/ Viva voce		Pathology, General Medicine	
Topic: Chemistry and Metabolism of Carbohydrates		Number of competencies: (10)			Number of procedures that require certification: (NIL)				
BI3.1	Discuss and differentiate monosaccharides, di-saccharides and polysaccharides giving examples of main carbohydrates as energy fuel, structural element and storage in the human body	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI3.2	Describe the processes involved in digestion and assimilation of carbohydrates and storage.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
BI3.3	Describe and discuss the digestion and assimilation of carbohydrates from food.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
BI3.4	Define and differentiate the pathways of carbohydrate metabolism, (glycolysis, gluconeogenesis, glycogen metabolism, HMP shunt).	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
BI3.5	Describe and discuss the regulation, functions and integration of carbohydrate along with associated diseases/disorders.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
BI3.6	Describe and discuss the concept of TCA cycle as a amphibolic pathway and its regulation.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			
BI3.7	Describe the common poisons that inhibit crucial enzymes of carbohydrate metabolism (eg; fluoride, arsenate)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Physiology
BI3.8	Discuss and interpret laboratory results of analytes associated with metabolism of carbohydrates.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, General Medicine	
BI3.9	Discuss the mechanism and significance of blood glucose regulation in health and disease.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
BI3.10	Interpret the results of blood glucose levels and other laboratory investigations related to disorders of carbohydrate metabolism.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
Topic: Chemistry and Metabolism of Lipids Number of competencies: (07) Number of procedures that require certification: (NIL)									
BI4.1	Describe and discuss main classes of lipids (Essential/non-essential fatty acids, cholesterol and hormonal steroids, triglycerides, major phospholipids and sphingolipids) relevant to human system and their major functions.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
BI4.2	Describe the processes involved in digestion and absorption of dietary lipids and also the key features of their metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI4.3	Explain the regulation of lipoprotein metabolism & associated disorders.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.4	Describe the structure and functions of lipoproteins, their functions, interrelations & relations with atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.5	Interpret laboratory results of analytes associated with metabolism of lipids	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.6	Describe the therapeutic uses of prostaglandins and inhibitors of eicosanoid synthesis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.7	Interpret laboratory results of analytes associated with metabolism of lipids.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Chemistry and Metabolism of Proteins Number of competencies: (05) Number of procedures that require certification: (NIL)									
BI5.1	Describe and discuss structural organization of proteins.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI5.2	Describe and discuss functions of proteins and structure-function relationships in relevant areas eg, hemoglobin and selected hemoglobinopathies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI5.3	Describe the digestion and absorption of dietary proteins.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI5.4	Describe common disorders associated with protein metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI5.5	Interpret laboratory results of analytes associated with metabolism of proteins.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Metabolism and homeostasis Number of competencies: (15) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI6.1	Discuss the metabolic processes that take place in specific organs in the body in the fed and fasting states.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.2	Describe and discuss the metabolic processes in which nucleotides are involved.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI6.3	Describe the common disorders associated with nucleotide metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Physiology
BI6.4	Discuss the laboratory results of analytes associated with gout & Lesch Nyhan syndrome.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.5	Describe the biochemical role of vitamins in the body and explain the manifestations of their deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.6	Describe the biochemical processes involved in generation of energy in cells.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI6.7	Describe the processes involved in maintenance of normal pH, water & electrolyte balance of body fluids and the derangements associated with these.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.8	Discuss and interpret results of Arterial Blood Gas (ABG) analysis in various disorders.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.9	Describe the functions of various minerals in the body, their metabolism and homeostasis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.10	Enumerate and describe the disorders associated with mineral metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.11	Describe the functions of haem in the body and describe the processes involved in its metabolism and describe porphyrin metabolism.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI6.12	Describe the major types of haemoglobin and its derivatives found in the body and their physiological/ pathological relevance.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.13	Describe the functions of the kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.14	Describe the tests that are commonly done in clinical practice to assess the functions of these organs (kidney, liver, thyroid and adrenal glands).	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.15	Describe the abnormalities of kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
Topic: Molecular biology Number of competencies: (07) Number of procedures that require certification: (NIL)									
BI7.1	Describe the structure and functions of DNA and RNA and outline the cell cycle.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI7.2	Describe the processes involved in replication & repair of DNA and the transcription & translation mechanisms.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI7.3	Describe gene mutations and basic mechanism of regulation of gene expression.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI7.4	Describe applications of molecular technologies like recombinant DNA technology, PCR in the diagnosis and treatment of diseases with genetic basis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	
BI7.5	Describe the role of xenobiotics in disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI7.6	Describe the anti-oxidant defence systems in the body.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI7.7	Describe the role of oxidative stress in the pathogenesis of conditions such as cancer, complications of diabetes mellitus and atherosclerosis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
Topic: Nutrition Number of competencies: (05) Number of procedures that require certification: (NIL)									
BI8.1	Discuss the importance of various dietary components and explain importance of dietary fibre.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.2	Describe the types and causes of protein energy malnutrition and its effects.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.3	Provide dietary advice for optimal health in childhood and adult, in disease conditions like diabetes mellitus, coronary artery disease and in pregnancy.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI8.4	Describe the causes (including dietary habits), effects and health risks associated with being overweight/ obesity.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	
BI8.5	Summarize the nutritional importance of commonly used items of food including fruits and vegetables.(macro-molecules & its importance)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, General Medicine, Pediatrics	
Topic: Extracellular Matrix Number of competencies: (03) Number of procedures that require certification: (NIL)									
BI9.1	List the functions and components of the extracellular matrix (ECM).	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI9.2	Discuss the involvement of ECM components in health and disease.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI9.3	Describe protein targeting & sorting along with its associated disorders.	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Oncogenesis and immunity Number of competencies: (05) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI10.1	Describe the cancer initiation, promotion oncogenes & oncogene activation. Also focus on p53 & apoptosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.2	Describe various biochemical tumor markers and the biochemical basis of cancer therapy.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.3	Describe the cellular and humoral components of the immune system & describe the types and structure of antibody	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.4	Describe & discuss innate and adaptive immune responses, self/non-self recognition and the central role of T-helper cells in immune responses.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	Physiology
BI10.5	Describe antigens and concepts involved in vaccine development.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Pediatrics, Microbiology	
Topic: Biochemical Laboratory Tests Number of competencies: (24) Number of procedures that require certification: (05)									
BI11.1	Describe commonly used laboratory apparatus and equipments, good safe laboratory practice and waste disposal.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.2	Describe the preparation of buffers and estimation of pH.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.3	Describe the chemical components of normal urine.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.4	Perform urine analysis to estimate and determine normal and abnormal constituents	S	P	Y	DOAP session	Skill assessment	1	General Medicine	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI11.5	Describe screening of urine for inborn errors & describe the use of paper chromatography	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI11.6	Describe the principles of colorimetry	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.7	Demonstrate the estimation of serum creatinine and creatinine clearance	S	P	Y	Practical	Skills assessment	1		
BI11.8	Demonstrate estimation of serum proteins, albumin and A:G ratio	S	P	Y	Practical	Skills assessment	1		
BI11.9	Demonstrate the estimation of serum total cholesterol and HDL-cholesterol	S	P	Y	Practical	Skills assessment			
BI11.10	Demonstrate the estimation of triglycerides	S	P	Y	Practical	Skills assessment			
BI11.11	Demonstrate estimation of calcium and phosphorous	S	P	Y	Practical	Skills assessment			
BI11.12	Demonstrate the estimation of serum bilirubin	S	P	Y	Practical	Skills assessment			
BI11.13	Demonstrate the estimation of SGOT/ SGPT	S	P	Y	Practical	Skills assessment			
BI11.14	Demonstrate the estimation of alkaline phosphatase	S	P	Y	Practical	Skills assessment			
BI11.15	Describe & discuss the composition of CSF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI11.16	Observe use of commonly used equipments/techniques in biochemistry laboratory including: •pH meter •Paper chromatography of amino acid •Protein electrophoresis •TLC, PAGE •Electrolyte analysis by ISE •ABG analyzer •ELISA •Immunodiffusion •Autoanalyser •Quality control •DNA isolation from blood/ tissue	S	KH	Y	Demonstration	Skill assessment			
BI11.17	Explain the basis and rationale of biochemical tests done in the following conditions: - diabetes mellitus, - dyslipidemia, - myocardial infarction, - renal failure, gout, - proteinuria, - nephrotic syndrome, - edema, - jaundice, - liver diseases, pancreatitis, disorders of acid- base balance, thyroid disorders.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	
BI11.18	Discuss the principles of spectrophotometry.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.19	Outline the basic principles involved in the functioning of instruments commonly used in a biochemistry laboratory and their applications.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
BI11.20	Identify abnormal constituents in urine, interpret the findings and correlate these with pathological states.	S	SH	Y	DOAP sessions	Skill assessment	1		

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
BI11.21	Demonstrate estimation of glucose, creatinine, urea and total protein in serum.	S	SH	Y	DOAP sessions	Skill assessment	1		
BI11.22	Calculate albumin: globulin (AG) ratio and creatinine clearance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI11.23	Calculate energy content of different food Items, identify food items with high and low glycemic index and explain the importance of these in the diet	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI11.24	Enumerate advantages and/or disadvantages of use of unsaturated, saturated and trans fats in food.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation									
Integration									
Physiology									
PY3.11	Explain energy source and muscle metabolism	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY4.2	Describe the composition, mechanism of secretion, functions, and regulation of saliva, gastric, pancreatic, intestinal juices and bile secretion	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY4.4	Describe the physiology of digestion and absorption of nutrients	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY4.7	Describe & discuss the structure and functions of liver and gall bladder	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PY4.8	Describe & discuss gastric function tests, pancreatic exocrine function tests & liver function tests	K	KH	Y	Lecture, Small group discussion, Demonstration Esophageal Manometry & endoscopy	Written/Viva voce			Biochemistry
PY4.9	Discuss the physiology aspects of: peptic ulcer, gastro-oesophageal reflux disease, vomiting, diarrhoea, constipation, Adynamic ileus, Hirschsprung's disease	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	Biochemistry
PY7.8	Describe & discuss Renal Function Tests	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry
PY8.4	Describe function tests: Thyroid gland; Adrenal cortex, Adrenal medulla and pancreas	K	KH	Y	Lecture, Small group discussion	Written/Viva voce			Biochemistry

Pathology

PA12.2	Describe the pathogenesis of disorders caused by protein calorie malnutrition and starvation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Pediatrics	
PA14.1	Describe iron metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PA15.1	Describe the metabolism of Vitamin B12 and the etiology and pathogenesis of B12 deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.1	Define and classify hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.2	Describe the pathogenesis and clinical features and hematologic indices of hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.3	Describe the pathogenesis, features, hematologic indices and peripheral blood picture of sickle cell anemia and thalassemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.4	Describe the etiology, pathogenesis, hematologic indices and peripheral blood picture of Acquired hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PA25.1	Describe bilirubin metabolism, enumerate the etiology and pathogenesis of jaundice, distinguish between direct and indirect hyperbilirubinemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	

Dermatology, Venereology & Leprosy

DR17.1	Enumerate and identify the cutaneous findings in Vitamin A deficiency	K/S	SH	Y	Lecture, Small group discussion, Bedside clinic	Skill assessment Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.2	Enumerate and describe the various skin changes in Vitamin B complex deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine Pediatrics, Biochemistry	
DR17.3	Enumerate and describe the various changes in Vitamin C deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.4	Enumerate and describe the various changes in Zinc deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	

Ophthalmology

OP7.1	Describe the surgical anatomy and the metabolism of the lens	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Human Anatomy	

General Medicine

IM2.3	Discuss and describe the lipid cycle and the role of dyslipidemia in the pathogenesis of atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
IM2.12	Choose and interpret a lipid profile and identify the desirable lipid profile in the clinical context	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Biochemistry	
IM2.18	Discuss and describe the indications, formulations, doses, side effects and monitoring for drugs used in the management of dyslipidemia	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology, Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM11.12	Perform and interpret a capillary blood glucose test	S	P	Y	Bed side clinic, DOAP session	Skill assessment	2	Pathology, Biochemistry	
IM11.13	Perform and interpret a urinary ketone estimation with a dipstick	S	P	Y	Bed side clinic, DOAP session	Skill assessment	2	Pathology, Biochemistry	
IM13.1	Describe the clinical epidemiology and inherited & modifiable risk factors for common malignancies in India	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology, Biochemistry	
IM23.1	Discuss and describe the methods of nutritional assessment in an adult and calculation of caloric requirements during illnesses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.2	Discuss and describe the causes and consequences of protein caloric malnutrition in the hospital	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM24.22	Describe and discuss the aetiopathogenesis, clinical presentation, complications, assessment and management of nutritional disorders in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	

Pediatrics

PE9.1	Describe the age related nutritional needs of infants, children and adolescents including micronutrients and vitamins	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Community Medicine, Biochemistry	
PE9.3	Explains the Calorific value of common Indian foods	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE10.1	Define Describe the etio-pathogenesis , Classify including WHO classification , clinical features, complication and management of Severe Acute Malnourishment (SAM) and Moderate Acute Malnutrition (MAM)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE10.2	Outline the clinical approach to a child with SAM and MAM	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
PE10.3	Assessment of a patient with SAM and MAM, diagnosis, classification and planning management including hospital and community based intervention, rehabilitation and prevention	S	SH	Y	Bed side clinics, Skill Lab	Skill station		Physiology, Biochemistry	
PE11.1	Describe the common etiology, clinical features and management of Obesity in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry, Pathology	
PE12.1	Discuss the (RDA) , dietary sources of Vitamin A and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.2	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin A	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.3	Identify the clinical features of dietary deficiency / excess of Vitamin A	S	SH	Y	Bed side clinics, Small group discussion	Document in log book		Biochemistry	
PE12.4	Diagnose patients with Vitamin A deficiency, Classify and plan management	S	SH	N	Bed side clinics, Skill Station	Document in log book		Biochemistry	
PE12.5	Discuss the Vitamin A prophylaxis program and their recommendations	K	K	Y	Lecture, Small group Discussion	Written/ Viva voce		Biochemistry	
PE12.6	Discuss the RDA, dietary sources of Vitamin D and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.7	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin D (Rickets and Hypervitaminosis D)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.8	Identify the clinical features of dietary deficiency of Vitamin D	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Biochemistry, Physiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE12.9	Assess patients with Vitamin D deficiency, Diagnose, Classify and plan management	S	SH	Y	Bed side clinics	Document in log book		Biochemistry, Physiology, Pathology	
PE12.11	Discuss the RDA, dietary sources of Vitamin E and their role in Health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.12	Describe the causes, clinical features, diagnosis and management of deficiency of Vitamin E	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.13	Discuss the RDA , dietary sources of Vitamin K and their role in Health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.14	Describe the causes, clinical features, diagnosis , management and prevention of Deficiency of Vitamin K	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.15	Discuss the RDA , dietary sources of Vitamin B and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.16	Describe the causes, clinical features, diagnosis and management of Deficiency of B complex Vitamins	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.17	Identify the clinical features of Vitamin B complex deficiency	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Biochemistry	
PE12.18	Diagnose patients with Vitamin B complex deficiency and plan management	S	SH	Y	Bed side clinics, Skill lab	Document in log book		Biochemistry	
PE12.19	Discuss the RDA, dietary sources of Vitamin C and their role in Health and disease	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.20	Describe the causes, clinical features, diagnosis and management of Deficiency of Vitamin C (scurvy)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.21	Identify the clinical features Vitamin C deficiency	S	SH	N	Bed side clinics, Skill lab	Document in log book		Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE13.1	Discuss the RDA, dietary sources of Iron and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry	
PE13.2	Describe the causes, diagnosis and management of Fe deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry	
PE13.3	Identify the clinical features of dietary deficiency of Iron and make a diagnosis	S	SH	Y	Bed side clinics, Skill Lab	Document in log book		Pathology, Biochemistry	
PE13.4	Interpret hemogram and Iron Panel	S	SH	Y	Bed side clinic, Small group discussion	Skill Assessment		Pathology, Biochemistry	
PE13.7	Discuss the RDA , dietary sources of Iodine and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.8	Describe the causes, clinical features, diagnosis and management of Deficiency of Iodine	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.9	Identify the clinical features of Iodine deficiency disorders	S	SH	N	Lecture, Bed side clinic	Written/ Viva voce		Biochemistry	
PE13.10	Discuss the National Goiter control program and their recommendations	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Community Medicine	
PE13.11	Discuss the RDA, dietary sources of Calcium and its role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.12	Describe the causes, clinical features, diagnosis and management of Ca Deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.13	Discuss the RDA , dietary sources of Magnesium and their role in Health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.14	Describe the causes, clinical features, diagnosis and management of Magnesium Deficiency	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE19.1	Explain the components of the Universal immunization Program and the sub National Immunization Programs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE19.2	Explain the epidemiology of Vaccine preventable diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.3	Vaccine description with regards to Classification of vaccines, Strain used, Dose, route, schedule, Risks benefits and side effects, indications and contraindications	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.4	Define cold chain and discuss the methods of safe storage and handling of vaccines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.5	Discuss immunization in special situations – HIV positive children, immunodeficiency, preterm, organ transplants, those who received blood and blood products, splenectomised children, Adolescents, travellers	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE21.11	Perform and interpret the common analytes in a Urine examination	S	SH	Y	Bed side clinic Labs, Skill lab	Skill assessment		Biochemistry, Pathology	
PE29.16	Discuss the Indications for Hemoglobin electrophoresis and interpret report	K	K	N	Small group discussion	Viva voce		Biochemistry	
PE33.6	Perform and interpret Urine Dip Stick for Sugar	S	P	Y	DOAP session	Skill assessment	3	Biochemistry	

General Surgery

SU1.1	Describe basic concepts of homeostasis, enumerate the metabolic changes in injury and their mediators.	K	KH	Y	Lecture, Bed side clinic and Small group discussion.	Written/ Viva voce.		Physiology, Biochemistry	
SU1.2	Describe the factors that affect the metabolic response to injury.	K	KH	Y	Lecture, Bed side clinic and Small group discussion.	Written/ Viva voce.		Biochemistry	
SU9.1	Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient.	K	KH	Y	Lecture, Small group discussion.	Written/ Viva voce		Biochemistry, Microbiology, Pathology	
SU12.3	Discuss the nutritional requirements of surgical patients, the methods of providing nutritional support and their complications.	K	KH	Y	Lecture, Small group discussion, Bedside clinic discussion	Written/ Viva voce		Biochemistry	

PHARMACOLOGY (CODE: PH)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PHARMACOLOGY									
KNOWLEDGE: Topic: Pharmacology		Number of competencies: (64)			Number of procedures that require certification : (NIL)				
PH1.1	Define and describe the principles of pharmacology and pharmacotherapeutics	K	K	Y	Lecture	Written/ Viva voce			
PH1.2	Describe the basis of Evidence based medicine and Therapeutic drug monitoring	K	KH	Y	Lecture	Written/ Viva voce			
PH1.3	Enumerate and identify drug formulations and drug delivery systems	K/S	SH	Y	Lecture, Practical	Written/ Viva voce			
PH1.4	Describe absorption, distribution, metabolism & excretion of drugs	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce			
PH1.5	Describe general principles of mechanism of drug action	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce			
PH1.6	Describe principles of Pharmacovigilance & ADR reporting systems	K	KH	Y	Lecture, Practical	Written/ Viva voce			
PH1.7	Define, identify and describe the management of adverse drug reactions (ADR)	K/S	KH	Y	Lecture, Practical	Written/ Viva voce			
PH1.8	Identify and describe the management of drug interactions	K/S	KH	Y	Lecture, Practical	Written/ Viva voce			
PH1.9	Describe nomenclature of drugs i.e. generic, branded drugs	K/S	SH	Y	Lecture, Practical	Written/ Viva voce			
PH1.10	Describe parts of a correct, complete and legible generic prescription. Identify errors in prescription and correct appropriately	K/S	SH	Y	Lecture, Practical	Written/ Viva voce			
PH1.11	Describe various routes of drug administration, eg., oral, SC, IV, IM, SL	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.12	Calculate the dosage of drugs using appropriate formulae for an individual patient, including children, elderly and patient with renal dysfunction.	K/S	SH	Y	Lecture, practical	Written/ Viva voce		Pediatrics, General Medicine	
PH1.13	Describe mechanism of action, types, doses, side effects, indications and contraindications of adrenergic and anti-adrenergic drugs	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce			
PH1.14	Describe mechanism of action, types, doses, side effects, indications and contraindications of cholinergic and anticholinergic drugs	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce			
PH1.15	Describe mechanism/s of action, types, doses, side effects, indications and contraindications of skeletal muscle relaxants	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology, Physiology	
PH1.16	Describe mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs which act by modulating autacoids, including: anti-histaminics, 5-HT modulating drugs, NSAIDs, drugs for gout, anti-rheumatic drugs, drugs for migraine	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.17	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of local anesthetics	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology	
PH1.18	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of general anaesthetics, and pre-anesthetic medications	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology	
PH1.19	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs which act on CNS, (including anxiolytics, sedatives & hypnotics, anti-psychotic, anti-depressant drugs, anti-maniacs, opioid agonists and antagonists, drugs used for neurodegenerative disorders, anti-epileptics drugs)	K	KH	Y	Lecture	Written/ Viva voce		Psychiatry, Physiology	
PH1.20	Describe the effects of acute and chronic ethanol intake	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.21	Describe the symptoms and management of methanol and ethanol poisonings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PH1.22	Describe drugs of abuse (dependence, addiction, stimulants, depressants, psychedelics, drugs used for criminal offences)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	Forensic Medicine
PH1.23	Describe the process and mechanism of drug deaddiction	K/S	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
PH1.24	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs affecting renal systems including diuretics, antidiuretics- vasopressin and analogues	K	KH	Y	Lecture	Written/ Viva voce			
PH1.25	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs acting on blood, like anticoagulants, antiplatelets, fibrinolytics, plasma expanders	K	KH	Y	Lecture	Written/ Viva voce		Physiology, General Medicine	
PH1.26	Describe mechanisms of action, types, doses, side effects, indications and contraindications of the drugs modulating the renin-angiotensin and aldosterone system	K	KH	Y	Lecture	Written/ Viva voce		Physiology, General Medicine	
PH1.27	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of antihypertensive drugs and drugs used in shock	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.28	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in ischemic heart disease (stable, unstable angina and myocardial infarction), peripheral vascular disease	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.29	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in congestive heart failure	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.30	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the antiarrhythmics	K	KH	N	Lecture	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.31	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in the management of dyslipidemias	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PH1.32	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in bronchial asthma and COPD	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.33	Describe the mechanism of action, types, doses, side effects, indications and contraindications of the drugs used in cough (antitussives, expectorants/ mucolytics)	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.34	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs used as below: 1. Acid-peptic disease and GERD 2. Antiemetics and prokinetics 3. Antidiarrhoeals 4 .Laxatives 5. Inflammatory Bowel Disease 6. Irritable Bowel Disorders, biliary and pancreatic diseases	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		General Medicine	
PH1.35	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in hematological disorders like: 1.Drugs used in anemias 2.Colony Stimulating factors	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Physiology	Pharmacology
PH1.36	Describe the mechanism of action, types, doses, side effects, indications and contraindications of drugs used in endocrine disorders (diabetes mellitus, thyroid disorders and osteoporosis)	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.37	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used as sex hormones, their analogues and anterior Pituitary hormones	K	KH	Y	Lecture	Written/ Viva voce			
PH1.38	Describe the mechanism of action, types, doses, side effects, indications and contraindications of corticosteroids	K	KH	Y	Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.39	Describe mechanism of action, types, doses, side effects, indications and contraindications the drugs used for contraception	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
PH1.40	Describe mechanism of action, types, doses, side effects, indications and contraindications of 1. Drugs used in the treatment of infertility, and 2. Drugs used in erectile dysfunction	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
PH1.41	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of uterine relaxants and stimulants	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
PH1.42	Describe general principles of chemotherapy	K	KH	Y	Lecture	Written/ Viva voce			
PH1.43	Describe and discuss the rational use of antimicrobials including antibiotic stewardship program	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Microbiology
PH1.44	Describe the first line antitubercular drugs, their mechanisms of action, side effects and doses.	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	
PH1.45	Describe the drugs used in MDR and XDR Tuberculosis	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	Microbiology
PH1.46	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of antileprotic drugs	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy	Microbiology
PH1.47	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in malaria, KALA-AZAR, amebiasis and intestinal helminthiasis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Microbiology
PH1.48	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in UTI/ STD and viral diseases including HIV	K	KH	Y	Lecture	Written/Viva voce			Microbiology
PH1.49	Describe mechanism of action, classes, side effects, indications and contraindications of anticancer drugs	K	KH	Y	Lecture	Written/Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.50	Describe mechanisms of action, types, doses, side effects, indications and contraindications of immunomodulators and management of organ transplant rejection	K	KH	Y	Lecture	Written/ Viva voce			
PH1.51	Describe occupational and environmental pesticides, food adulterants, pollutants and insect repellents	K	KH/	Y	Lecture	Written/ Viva voce			
PH1.52	Describe management of common poisoning, insecticides, common sting and bites	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.53	Describe heavy metal poisoning and chelating agents	K	KH	N	Lecture	Written/ Viva voce			
PH1.54	Describe vaccines and their uses	K	KH	Y	Lecture	Written/ Viva voce			
PH1.55	Describe and discuss the following National Health Programmes including Immunisation, Tuberculosis, Leprosy, Malaria, HIV, Filaria, Kala Azar, Diarrhoeal diseases, Anaemia & nutritional disorders, Blindness, Non-communicable diseases, cancer and Iodine deficiency	K	KH	Y	Lecture	Written/ Viva voce			Community Medicine
PH1.56	Describe basic aspects of Geriatric and Pediatric pharmacology	K	KH	Y	Lecture	Written/ Viva voce		Pediatrics	
PH1.57	Describe drugs used in skin disorders	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PH1.58	Describe drugs used in Ocular disorders	K	KH	Y	Lecture	Written/ Viva voce		Ophthalmology	
PH1.59	Describe and discuss the following: Essential medicines, Fixed dose combinations, Over the counter drugs, Herbal medicines	K	KH	Y	Lecture	Written/ Viva voce			
PH1.60	Describe and discuss Pharmacogenomics and Pharmacoeconomics	K	KH	N	Lecture	Written/ Viva voce			
PH1.61	Describe and discuss dietary supplements and nutraceuticals	K	KH	N	Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.62	Describe and discuss antiseptics and disinfectants	K	KH	Y	Lecture	Written/ Viva voce			
PH1.63	Describe Drug Regulations, acts and other legal aspects	K	KH	Y	Lecture	Written/ Viva voce			
PH1.64	Describe overview of drug development, Phases of clinical trials and Good Clinical Practice	K	KH	Y	Lecture	Written/ Viva voce			
SKILLS: Topic: Clinical Pharmacy Number of competencies: (04) Number of procedures that require certification : (NIL)									
PH2.1	Demonstrate understanding of the use of various dosage forms (oral/local/parenteral; solid/liquid)	S/C	SH	Y	DOAP sessions	Skills assessment			
PH2.2	Prepare oral rehydration solution from ORS packet and explain its use	S/C	SH	Y	DOAP sessions	Skills assessment			
PH2.3	Demonstrate the appropriate setting up of an intravenous drip in a simulated environment	S	SH	Y	DOAP sessions	Skills assessment			
PH2.4	Demonstrate the correct method of calculation of drug dosage in patients including those used in special situations	S	SH	Y	DOAP sessions	Skills assessment		Pediatrics, General Medicine	
SKILLS: Topic: Clinical Pharmacology Number of competencies: (08) Number of procedures that require certification : (04)									
PH3.1	Write a rational, correct and legible generic prescription for a given condition and communicate the same to the patient	S/C	P	Y	Skill station	Skill station	5	General Medicine	
PH3.2	Perform and interpret a critical appraisal (audit) of a given prescription	S	P	Y	Skill Lab	Maintenance of log book	3		
PH3.3	Perform a critical evaluation of the drug promotional literature	S	P	Y	Skill Lab	Maintenance of log book/ Skill station	3	General Medicine	
PH3.4	To recognise and report an adverse drug reaction	S	SH	Y	Skill station	Maintenance of log book/ Skill station			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH3.5	To prepare and explain a list of P-drugs for a given case/condition	S	P	Y	Skill station	Maintenance of log book	3	General Medicine	
PH3.6	Demonstrate how to optimize interaction with pharmaceutical representative to get authentic information on drugs	S	SH	N	Skill station	maintenance of log book			
PH3.7	Prepare a list of essential medicines for a healthcare facility	S	SH	Y	Skill station	Maintenance of log book			
PH3.8	Communicate effectively with a patient on the proper use of prescribed medication	C/A	SH	Y	Skill Lab	Skill station			
SKILLS: Topic: Experimental Pharmacology Number of competencies: (02) Number of procedures that require certification :(NIL)									
PH4.1	Administer drugs through various routes in a simulated environment using mannequins	S	SH	Y	DOAP sessions	Skills assessment			
PH4.2	Demonstrate the effects of drugs on blood pressure (vasopressor and vaso-depressors with appropriate blockers) using computer aided learning	S	SH	Y	Skill lab	Skill station			
Communication Topic: Pharmacology Number of competencies: (07) Number of procedures that require certification : (NIL)									
PH5.1	Communicate with the patient with empathy and ethics on all aspects of drug use	A/C	SH	Y	Small group discussion	skill station		General Medicine	
PH5.2	Communicate with the patient regarding optimal use of a) drug therapy, b) devices and c) storage of medicines	A/C	SH	Y	Small group discussion	Skill station			
PH5.3	Motivate patients with chronic diseases to adhere to the prescribed management by the health care provider	A/C	SH	Y	Small group discussion	short note/skill station			
PH5.4	Explain to the patient the relationship between cost of treatment and patient compliance	A/C	SH	Y	Small group discussion	short note/ viva voce		General Medicine	
PH5.5	Demonstrate an understanding of the caution in prescribing drugs likely to produce dependence and recommend the line of management	K	KH	Y	Small group discussion	short note/ Viva voce		Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH5.6	Demonstrate ability to educate public & patients about various aspects of drug use including drug dependence and OTC drugs	A/C	SH	Y	Small group discussion	Skill station		Psychiatry	
PH5.7	Demonstrate an understanding of the legal and ethical aspects of prescribing drugs	K	KH	Y	Small group discussion	short note/ Viva voce			Forensic Medicine

Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.

Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,

Column F: DOAP session – Demonstrate, Observe, Assess, Perform.

Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation

Integration

Physiology									
PY3.5	Discuss the action of neuro-muscular blocking agents	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Anaesthesiology, Pharmacology	

Microbiology									
MI1.6	Describe the mechanisms of drug resistance, methods of antimicrobial susceptibility testing and monitoring of antimicrobial therapy.	K	K	Y	Lecture , Small group discussion	Written Viva			Pharmacology
MI3.3	Describe the enteric fever pathogens and discuss the evolution of the clinical course, the laboratory diagnosis of the diseases caused by them	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.5	Enumerate the causative agents of food poisoning and discuss the pathogenesis, clinical course and laboratory diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology
MI3.6	Describe the etio-pathogenesis of Acid Peptic Disease (APD) and the clinical course. Discuss the diagnosis and management of the causative agent of APD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology

Community Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM3.8	Describe the mode of action & application cycle of commonly used insecticides and rodenticides	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
CM19.1	Define and describe the concept of Essential Medicine List (EML)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology
CM19.2	Describe roles of essential medicine in primary health care	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology
CM19.3	Describe counterfeit medicine and its prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology

Forensic Medicine & Toxicology

FM4.11	Describe and discuss euthanasia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.12	Discuss legal and ethical issues in relation to stem cell research	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.17	Describe and discuss ethical Principles: Respect for autonomy, non-maleficence, beneficence & justice	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.22	Explain Oath – Hippocrates, Charaka and Sushruta and procedure for administration of Oath	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.23	Describe the modified Declaration of Geneva and its relevance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.25	Clinical research & Ethics: Discuss human experimentation including clinical trials	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.26	Discuss the constitution and functions of ethical committees	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM4.27	Describe and discuss Ethical Guidelines for Biomedical Research on Human Subjects & Animals	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		AETCOM	Pharmacology
FM8.1	Describe the history of Toxicology	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM8.2	Define the terms Toxicology, Forensic Toxicology, Clinical Toxicology and poison	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.3	Describe the various types of poisons, Toxicokinetics & Toxicodynamics and diagnosis of poisoning in living and dead	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.4	Describe the Laws in relations to poisons including NDPS Act, Medico-legal aspects of poisons	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.5	Describe Medico-legal autopsy in cases of poisoning including preservation and dispatch of viscera for chemical analysis	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce/ OSPE		Pharmacology	
FM8.6	Describe the general symptoms, principles of diagnosis and management of common poisons encountered in India	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce /OSCE		Pharmacology	
FM8.7	Describe simple Bedside clinic tests to detect poison/drug in a patient's body fluids	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce /OSCE		Pharmacology, General Medicine	
FM8.8	Describe basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Caustics Inorganic – sulphuric, nitric, and hydrochloric acid Organic- Carbolic Acid (phenol), Oxalic and acetylsalicylic acids.	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.2	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Phosphorus, Iodine, Barium	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.3	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Arsenic, lead, mercury, copper, iron, cadmium and thallium	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM9.4	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ethanol, methanol, ethylene glycol	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.5	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Organophosphates, Carbamates, Organochlorines, Pyrethroids, Paraquat, Aluminium and Zinc phosphide	K	K/KH	Y	Lectures, Small group discussion Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	Pharmacology
FM9.6	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ammonia, carbon monoxide, hydrogen cyanide & derivatives, methyl isocyanate, tear (riot control) gases	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM10.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: i. Antipyretics – Paracetamol, Salicylates ii. Anti-Infectives (Common antibiotics – an overview) iii. Neuropsychotoxicology Barbiturates, benzodiazepines, phenytoin, lithium, haloperidol, neuroleptics, tricyclics iv. Narcotic Analgesics, Anaesthetics, and Muscle Relaxants v. Cardiovascular Toxicology Cardiotoxic plants – oleander, odollam, aconite, digitalis vi. Gastro-Intestinal and Endocrinal Drugs – Insulin	K	K/KH	Y	Lectures, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	Pharmacology
Dermatology, Venereology & Leprosy									
DR5.3	Enumerate and describe the pharmacology, administration and adverse reaction of pharmacotherapies for scabies	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	Pharmacology
DR7.3	Describe the pharmacology and action of antifungal (systemic and topical). agents Enumerate side effects of antifungal therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology ,Pharmacology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR8.7	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for common viral illnesses of the skin	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Pharmacology
DR9.4	Enumerate, describe and identify lepra reactions and supportive measures and therapy of lepra reactions	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology
DR9.5	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for various classes of leprosy based on National Guidelines	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.6	Describe the treatment of Leprosy based on WHO guidelines	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.7	Enumerate and describe the complications of leprosy and its management, including understanding disability and stigma	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Psychiatry
DR10.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Microbiology
DR10.8	Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Microbiology
DR11.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for dermatologic lesions in HIV	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Microbiology
DR14.5	Enumerate the indications and describe the pharmacology indications and adverse reactions of drugs used in the urticaria and angioedema	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Pharmacology
DR15.3	Enumerate the indications and describe the pharmacology indications and adverse reactions of topical and systemic drugs used in treatment of pyoderma	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery	Microbiology, Pharmacology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Anesthesiology									
AS3.6	Choose and write a prescription for appropriate premedications for patients undergoing surgery	S	SH	Y	DOAP session, Bedside clinic session	Skill station		Pharmacology	
AS4.1	Describe and discuss the pharmacology of drugs used in induction and maintenance of general anaesthesia (including intravenous and inhalation induction agents, opiate and non-opiate analgesics, depolarising and non-depolarising muscle relaxants, anticholinesterases	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pharmacology	
AS4.3	Observe and describe the principles and the practical aspects of induction and maintenance of anesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	
AS5.4	Observe and describe the pharmacology and correct use of commonly used drugs and adjuvant agents in regional anesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Pharmacology	
AS8.3	Describe the pharmacology and use of drugs in the management of pain	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Pharmacology	
AS8.4	Describe the principles of pain management in palliative care	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Pharmacology	General Medicine
AS8.5	Describe the principles of pain management in the terminally ill	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Pharmacology	General Medicine
AS10.4	Define and describe common medical and medication errors in anaesthesia	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Pharmacology	General Medicine

Psychiatry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PS4.4	Describe the treatment of alcohol and substance abuse disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS4.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in alcohol and substance abuse	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS5.3	Describe the treatment of schizophrenia including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS5.5	Enumerate and describe the pharmacologic basis and side effects of drugs used in schizophrenia	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology	
PS6.4	Describe the treatment of depression including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS6.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in depression	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS7.4	Describe the treatment of bipolar disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS7.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in bipolar disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS8.4	Describe the treatment of anxiety disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS8.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in anxiety disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS10.4	Describe the treatment of somatoform disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS10.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in somatoform, dissociative and conversion disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PS11.4	Describe the treatment of personality disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS11.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in personality disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS12.4	Describe the treatment of psychosomatic disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS12.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychosomatic disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS13.4	Describe the treatment of psychosexual and gender identity disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS18.1	Enumerate the indications and describe the pharmacology, dose and side effects of commonly use drugs in psychiatric disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
General Medicine									
IM1.24	Describe and discuss the pharmacology of drugs including indications & contraindications in the management of heart failure including diuretics, ACE inhibitors, Beta blockers, aldosterone antagonists and cardiac glycosides	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM1.27	Describe and discuss the role of penicillin prophylaxis in the prevention of rheumatic heart disease	K	KH	Y	Bedside clinic, Small group discussion	Written		Microbiology Pharmacology	
IM1.30	Administer an intramuscular injection with an appropriate explanation to the patient	S	SH	Y	Bedside clinic, Skill assessment	log book documentation of completion		Pharmacology	
IM2.15	Discuss and describe the medications used in patients with an acute coronary syndrome based on the clinical presentation	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM2.18	Discuss and describe the indications, formulations, doses, side effects and monitoring for drugs used in the management of dyslipidemia	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology, Biochemistry	
IM2.20	Discuss and describe the assessment and relief of pain in acute coronary syndromes	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology	
IM2.23	Describe and discuss the indications for nitrates, anti platelet agents, gpIIb - IIIa inhibitors, beta blockers, ACE inhibitors etc in the management of coronary syndromes	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		Pharmacology	
IM3.12	Select, describe and prescribe based on the most likely aetiology, an appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum	S	SH	Y	Bed side clinic, DOAP session	Skill Assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM3.13	Select, describe and prescribe based on culture and sensitivity appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum	S	SH	Y	Bed side clinic, DOAP session	Skill Assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM4.22	Describe and discuss the pharmacology, indications, adverse reactions, interactions of antimalarial drugs and basis of resistance	K	KH	Y	Small group, Lecture	Written/ Viva voce		Pharmacology	
IM4.23	Prescribe drugs for malaria based on the species identified, prevalence of drug resistance and National Programs	S	SH	Y	Skill assessment	Skill assessment		Microbiology, Pharmacology	
IM4.26	Counsel the patient on malarial prevention	C	SH	Y	DOAP session	Skill assessment		Microbiology, Pharmacology	
IM5.7	Enumerate and describe the causes and pathophysiology of drug induced liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Pharmacology	
IM5.16	Describe and discuss the management of hepatitis, cirrhosis, portal hypertension, ascites spontaneous, bacterial peritonitis and hepatic encephalopathy	K	KH	Y	Written, Small group	Skill Assessment/ Written/ Viva voce		Pharmacology	General Surgery
IM6.13	Describe and enumerate the indications and side effects of drugs for bacterial, viral and other types of diarrhea	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM6.17	Discuss and describe the principles of HAART, the classes of antiretrovirals used, adverse reactions and interactions	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM6.18	Discuss and describe the principles and regimens used in post exposure prophylaxis	K	K	Y	Lecture Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM7.21	Select, prescribe and communicate appropriate medications for relief of joint pain	K/C	SH	Y	DOAP session	Skill assessment/ written		Pharmacology	Orthopedics
IM7.22	Select, prescribe and communicate preventive therapy for crystalline arthropathies	K/C	SH	Y	DOAP session	Skill assessment/ written		Pharmacology	
IM7.23	Select, prescribe and communicate treatment option for systemic rheumatologic conditions	K/C	SH	Y	DOAP session	Skill assessment/ written		Pharmacology	
IM7.24	Describe the basis for biologic and disease modifying therapy in rheumatologic diseases	K	KH	Y	Bed side clinic, Small group discussion	Skill assessment/ written		Pharmacology	
IM8.14	Develop an appropriate treatment plan for essential hypertension	K	KH	Y	Small group discussion	Skill assessment/ Written/ Viva voce		Pharmacology	
IM8.15	Recognise, prioritise and manage hypertensive emergencies	S	SH	Y	DOAP session	Skill assessment/ written		Pharmacology	
IM9.14	Prescribe replacement therapy with iron, B12, folate	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ written		Pharmacology	
IM9.15	Describe the national programs for anemia prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Community Medicine	
IM10.25	Identify and describe the priorities in the management of ARF including diet, volume management, alteration in doses of drugs, monitoring and indications for dialysis	K/C	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM11.16	Discuss and describe the pharmacologic therapies for diabetes their indications, contraindications, adverse reactions and interactions	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM11.18	Describe and discuss the pharmacology, indications, adverse reactions and interactions of drugs used in the prevention and treatment of target organ damage and complications of Type II Diabetes including neuropathy, nephropathy, retinopathy, hypertension, dyslipidemia and cardiovascular disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM11.19	Demonstrate and counsel patients on the correct technique to administer insulin	S/C	SH	Y	DOAP session	Skill assessment		Pharmacology	
IM12.13	Describe the pharmacology, indications, adverse reaction, interactions of thyroxine and antithyroid drugs	K	KH	Y	Lecture, Small group discussion	Viva voce/ short note		Pharmacology	General Surgery
IM12.14	Write and communicate to the patient appropriately a prescription for thyroxine based on age, sex, and clinical and biochemical status	S/C	SH	Y	Skill assessment	Skill assessment		Pharmacology	
IM12.15	Describe and discuss the indications of thionamide therapy, radio iodine therapy and General Surgery in the management of thyrotoxicosis	K	KH	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pharmacology	General Surgery
IM13.6	Describe and distinguish the difference between curative and palliative care in patients with cancer	K	K	N	Lecture, Small group discussion	short note/ Viva voce		Pharmacology	
IM13.13	Describe and assess pain and suffering objectively in a patient with cancer	K	KH	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pharmacology	General Surgery
IM13.14	Describe the indications for General Surgery, radiation and chemotherapy for common malignancies	K	KH	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pharmacology	General Surgery
IM13.17	Describe and enumerate the indications, use, side effects of narcotics in pain alleviation in patients with cancer	K	KH	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pharmacology	Anesthesiology
IM14.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for obesity	K	K	Y	Lecture, small group discussion	short note/ Viva voce		Pharmacology	
IM15.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of pressors used in the treatment of Upper GI bleed	K	K	Y	Lecture, Small group discussion	Viva voce/ short note		Pharmacology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM15.15	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of acid peptic disease including Helicobacter pylori	K	K	Y	Lecture, small group discussion	short note/ Viva voce		Pharmacology, Microbiology	General Surgery
IM16.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for parasitic causes of diarrhea	K	K	Y	Lecture, small group discussion	short note/ Viva voce		Pharmacology, Microbiology	
IM16.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for bacterial and viral diarrhea	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	
IM16.16	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy including immunotherapy	K	K	Y	Lecture, small group discussion	short note/ Viva voce		Pharmacology	
IM17.11	Describe the indications, pharmacology, dose, side effects of abortive therapy in migraine	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Pharmacology	
IM17.12	Describe the indications, pharmacology, dose, side effects of prophylactic therapy in migraine	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Pharmacology	
IM17.13	Describe the pharmacology, dose, adverse reactions and regimens of drugs used in the treatment of bacterial, tubercular and viral meningitis	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce		Pharmacology	
IM17.14	Counsel patients with migraine on lifestyle changes and need for prophylactic therapy	A/C	SH	N	DOAP session	Skill Assessment		Pharmacology	
IM19.8	Discuss and describe the pharmacology, dose, side effects and interactions used in the drug therapy of Parkinson's syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM19.9	Enumerate the indications for use of surgery and botulinum toxin in the treatment of movement disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Surgery
IM20.1	Enumerate the poisonous snakes of your area and describe the distinguishing marks of each	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM20.7	Enumerate the indications and describe the pharmacology, dose, adverse reactions, hypersensitivity reactions of anti-snake venom	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM20.8	Describe the diagnosis, initial approach, stabilisation and therapy of scorpion envenomation	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM20.9	Describe the diagnosis, initial approach, stabilisation and therapy of bee sting allergy	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM21.1	Describe the initial approach to the stabilisation of the patient who presents with poisoning	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM21.2	Enumerate the common plant poisons seen in your area and describe their toxicology, clinical features, prognosis and specific approach to detoxification	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.3	Enumerate the common corrosives used in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.4	Enumerate the commonly observed drug overdose in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.5	Observe and describe the functions and role of a poison center in suspected poisoning	S	KH	Y	DOAP session	document in log book		Forensic Medicine, Pharmacology	
IM21.6	Describe the medico-legal aspects of suspected suicidal or homicidal poisoning and demonstrate the correct procedure to write a medico-legal report on a suspected poisoning	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Forensic Medicine, Pharmacology	
IM21.7	Counsel family members of a patient with suspected poisoning about the clinical and medico-legal aspects with empathy	A/C	SH	Y	DOAP session	Skill assessment		Forensic Medicine, Pharmacology	
IM22.3	Describe the approach to the management of hypercalcemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM25.11	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH	Y	DOAP session	Skill assessment		Microbiology, Pharmacology	

Pediatrics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE13.5	Propose a management plan for Fe Deficiency Anaemia	S	SH	Y	Bed side clinics, Skill lab	Skill Assessment		Pathology, Pharmacology	
PE13.6	Discuss the National Anaemia Control Program and its recommendations	K	K	Y	Lecture, Small group Discussion	Written/ Viva voce		Pharmacology, Community Medicine	
PE14.1	Discuss the risk factors, clinical features, diagnosis and management of Lead Poisoning	K	KH	N	Lecture, Small group Discussion	Written/ Viva voce		Pharmacology	
PE14.3	Discuss the risk factors, clinical features, diagnosis and management of Organo phosphorous poisoning	K	KH	N	Lecture, Small group Discussion	Written/ Viva voce		Pharmacology	General Medicine
PE14.4	Discuss the risk factors, clinical features, diagnosis and management of paracetamol Poisoning	K	KH	N	Lecture, Small group Discussion	Written/ Viva voce		Pharmacology	
PE24.5	Discuss the role of antibiotics, antispasmodics, anti-secretory drugs, probiotics, anti- emetics in acute diarrheal diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
PE24.8	Discuss the causes, clinical presentation and management of dysentery in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
General Surgery									
SU13.2	Discuss the Principles of immunosuppressive therapy. Enumerate indications, describe surgical principles, management of organ transplantation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	

Physical Medicine & Rehabilitation

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM3.5	Enumerate the indications and describe the therapies for spasticity including medications, serial casts, nerve blocks, botulinum toxin injections	K	KH	Y	Lectures, Small group discussion			Pharmacology	Pediatrics, Orthopedics
PM7.6	Enumerate the indications and describe the pharmacology and side effects of commonly used drugs in neuropathic bladder	K	KH	Y	Lectures, Small group discussion	Written / Viva voce		Pharmacology	General Medicine
Respiratory Medicine									
CT1.4	Describe the epidemiology, the predisposing factors and microbial and therapeutic factors that determine resistance to drugs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Pharmacology	
CT1.14	Describe and discuss the pharmacology of various antituberculous agents, their indications, contraindications, interactions and adverse reactions	K	KH	Y	Lecture, Small group discussion	short note/ Viva voce		Pharmacology, Microbiology	
CT1.15	Prescribe an appropriate antituberculosis regimen based on the location of disease, smear positivity and negativity and co-morbidities based on current national guidelines including directly observed tuberculosis therapy (DOTS)	K	SH	Y	Bedside clinic, Small group discussion, Lecture	Skill assessment		Pharmacology, Community Medicine	
CT2.16	Discuss and describe therapies for OAD including bronchodilators, leukotriene inhibitors, mast cell stabilisers, theophylline, inhaled and systemic steroids, oxygen and immunotherapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
Orthopaedics									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR3.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of Bone and Joint infections a) Acute Osteomyelitis b) Subacute osteomyelitis c) Acute Suppurative arthritis d) Septic arthritis & HIV infection e) Spirochaetal infection f) Skeletal Tuberculosis	K/S	K/KH/S H	Y	Lecture, Small group Discussion, Video assisted lecture	Written/ Viva voce/ OSCE	–	Pathology, Microbiology	General surgery

PATHOLOGY (CODE: PA)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PATHOLOGY									
Topic: Introduction to Pathology Number of competencies: (03) Number of procedures that require certification: (NIL)									
PA1.1	Describe the role of a pathologist in diagnosis and management of disease	K	K	Y	Departmental orientation	Written/ Viva voce			
PA1.2	Enumerate common definitions and terms used in Pathology	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PA1.3	Describe the history and evolution of Pathology	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Cell Injury and Adaptation Number of competencies: (08) Number of procedures that require certification: (NIL)									
PA2.1	Demonstrate knowledge of the causes, mechanisms, types and effects of cell injury and their clinical significance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA2.2	Describe the etiology of cell injury. Distinguish between reversible-irreversible injury: mechanisms; morphology of cell injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA2.3	Intracellular accumulation of fats, proteins, carbohydrates, pigments	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA2.4	Describe and discuss Cell death- types, mechanisms, necrosis, apoptosis (basic as contrasted with necrosis), autolysis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA2.5	Describe and discuss pathologic calcifications, gangrene	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA2.6	Describe and discuss cellular adaptations: atrophy, hypertrophy, hyperplasia, metaplasia, dysplasia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA2.7	Describe and discuss the mechanisms of cellular aging and apoptosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
PA2.8	Identify and describe various forms of cell injuries, their manifestations and consequences in gross and microscopic specimens	S	SH	Y	DOAP session	Skill assessment			
Topic: Amyloidosis Number of competencies: (02) Number of procedures that require certification: (NIL)									
PA3.1	Describe the pathogenesis and pathology of amyloidosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA3.2	Identify and describe amyloidosis in a pathology specimen	S	SH	N	DOAP session	Skill assessment			
Topic: Inflammation Number of competencies:(04) Number of procedures that require certification: (NIL)									
PA4.1	Define and describe the general features of acute and chronic inflammation including stimuli, vascular and cellular events	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA4.2	Enumerate and describe the mediators of acute inflammation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA4.3	Define and describe chronic inflammation including causes, types, non-specific and granulomatous; and enumerate examples of each	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA4.4	Identify and describe acute and chronic inflammation in gross and microscopic specimens	S	SH	Y	DOAP session	Skill assessment			
Topic: Healing and repair Number of competencies: (01) Number of procedures that require certification:(NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA5.1	Define and describe the process of repair and regeneration including wound healing and its types	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
Topic: Hemodynamic disorders Number of competencies: (07) Number of procedures that require certification :(NIL)									
PA6.1	Define and describe edema, its types, pathogenesis and clinical correlations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA6.2	Define and describe hyperemia, congestion, hemorrhage	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA6.3	Define and describe shock, its pathogenesis and its stages	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA6.4	Define and describe normal haemostasis and the etiopathogenesis and consequences of thrombosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA6.5	Define and describe embolism and its causes and common types	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA6.6	Define and describe Ischaemia/infarction its types, etiology, morphologic changes and clinical effects	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA6.7	Identify and describe the gross and microscopic features of infarction in a pathologic specimen	S	SH	Y	DOAP session	Skill Assessment			
Topic: Neoplastic disorders Number of competencies: (05) Number of procedures that require certification: (NIL)									
PA7.1	Define and classify neoplasia. Describe the characteristics of neoplasia including gross, microscopy, biologic, behaviour and spread. Differentiate between benign from malignant neoplasms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA7.2	Describe the molecular basis of cancer	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA7.3	Enumerate carcinogens and describe the process of carcinogenesis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA7.4	Describe the effects of tumor on the host including paraneoplastic syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA7.5	Describe immunology and the immune response to cancer	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Microbiology
Topic: Basic diagnostic cytology Number of competencies:(03) Number of procedures that require certification:(NIL)									
PA8.1	Describe the diagnostic role of cytology and its application in clinical care	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA8.2	Describe the basis of exfoliative cytology including the technique & stains used	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		General Surgery	
PA8.3	Observe a diagnostic cytology and its staining and interpret the specimen	S	KH	Y	DOAP session	Skill assessment			
Topic: Immunopathology and AIDS Number of competencies: (07) Number of procedures that require certification: (NIL)									
PA9.1	Describe the principles and mechanisms involved in immunity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
PA9.2	Describe the mechanism of hypersensitivity reactions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA9.3	Describe the HLA system and the immune principles involved in transplant and mechanism of transplant rejection	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA9.4	Define autoimmunity. Enumerate autoimmune disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA9.5	Define and describe the pathogenesis of systemic Lupus Erythematosus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA9.6	Define and describe the pathogenesis and pathology of HIV and AIDS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA9.7	Define and describe the pathogenesis of other common autoimmune diseases	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Infections and Infestations Number of competencies: (04) Number of procedures that require certification:(NIL)									
PA10.1	Define and describe the pathogenesis and pathology of malaria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.2	Define and describe the pathogenesis and pathology of cysticercosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.3	Define and describe the pathogenesis and pathology of leprosy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.4	Define and describe the pathogenesis and pathology of common bacterial, viral, protozoal and helminthic diseases	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
Topic: Genetic and paediatric diseases Number of competencies: (03) Number of procedures that require certification :(NIL)									
PA11.1	Describe the pathogenesis and features of common cytogenetic abnormalities and mutations in childhood	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA11.2	Describe the pathogenesis and pathology of tumor and tumour-like conditions in infancy and childhood	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA11.3	Describe the pathogenesis of common storage disorders in infancy and childhood	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
Topic: Environmental and nutritional diseases Number of competencies:(03) Number of procedures that require certification:(NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA12.1	Enumerate and describe the pathogenesis of disorders caused by air pollution, tobacco and alcohol	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Community Medicine
PA12.2	Describe the pathogenesis of disorders caused by protein calorie malnutrition and starvation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Pediatrics	
PA12.3	Describe the pathogenesis of obesity and its consequences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Introduction to haematology Number of competencies: (05) Number of procedures that require certification:(NIL)									
PA13.1	Describe hematopoiesis and extramedullary hematopoiesis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.2	Describe the role of anticoagulants in hematology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.3	Define and classify anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.4	Enumerate and describe the investigation of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.5	Perform, Identify and describe the peripheral blood picture in anemia	S	SH	Y	DOAP session	Skill assessment		General Medicine	
Topic: Microcytic anemia Number of competencies: (03) Number of procedures that require certification:(NIL)									
PA14.1	Describe iron metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PA14.2	Describe the etiology, investigations and differential diagnosis of microcytic hypochromic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA14.3	Identify and describe the peripheral smear in microcytic anemia	S	SH	Y	DOAP session	Skill assessment		General Medicine	
Topic: Macrocytic anemia Number of competencies: (04) Number of procedures that require certification:(NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA15.1	Describe the metabolism of Vitamin B12 and the etiology and pathogenesis of B12 deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA15.2	Describe laboratory investigations of macrocytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA15.3	Identify and describe the peripheral blood picture of macrocytic anemia	S	SH	Y	DOAP session	Skill assessment			
PA15.4	Enumerate the differences and describe the etiology and distinguishing features of megaloblastic and non-megaloblastic macrocytic anemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Hemolytic anemia Number of competencies: (07) Number of procedures that require certification: (01)									
PA16.1	Define and classify hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.2	Describe the pathogenesis and clinical features and hematologic indices of hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.3	Describe the pathogenesis, features, hematologic indices and peripheral blood picture of sickle cell anemia and thalassemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.4	Describe the etiology pathogenesis, hematologic indices and peripheral blood picture of Acquired hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.5	Describe the peripheral blood picture in different hemolytic anaemias	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA16.6	Prepare a peripheral blood smear and identify hemolytic anaemia from it	S	P	Y	DOAP session	Skill assessment	1		
PA16.7	Discribe the correct technique to perform a cross match	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Aplastic anemia Number of competencies: (02) Number of procedures that require certification:(NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA 17.1	Enumerate the etiology, pathogenesis and findings in aplastic anemia	K	K	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA17.2	Enumerate the indications and describe the findings in bone marrow aspiration and biopsy	K	K	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Leukocyte disorders Number of competencies: (02) Number of procedures that require certification:(NIL)									
PA18.1	Enumerate and describe the causes of leucocytosis leucopenia lymphocytosis and leukemoid reactions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA`18.2	Describe the etiology, genetics, pathogenesis classification, features, hematologic features of acute and chronic leukemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Lymph node and spleen Number of competencies: (07) Number of procedures that require certification:(NIL)									
PA19.1	Enumerate the causes and describe the differentiating features of lymphadenopathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA19.2	Describe the pathogenesis and pathology of tuberculous lymphadenitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA19.3	Identify and describe the features of tuberculous lymphadenitis in a gross and microscopic specimen	S	SH	Y	DOAP session	Skill assessment			
PA19.4	Describe and discuss the pathogenesis, pathology and the differentiating features of Hodgkin's and non-Hodgkin's lymphoma	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA19.5	Identify and describe the features of Hodgkin's lymphoma in a gross and microscopic specimen	S	SH	Y	DOAP session	Skill assessment		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA19.6	Enumerate and differentiate the causes of splenomegaly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA19.7	Identify and describe the gross specimen of an enlarged spleen	S	SH	Y	DOAP session	Skill assessment			
Topic: Plasma cell disorders Number of competencies: (01) Number of procedures that require certification: (NIL)									
PA20.1	Describe the features of plasma cell myeloma	S	SH	Y	DOAP session	Skill assessment			
Topic: Hemorrhagic disorders Number of competencies: (05) Number of procedures that require certification:(NIL)									
PA21.1	Describe normal hemostasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA21.2	Classify and describe the etiology, pathogenesis and pathology of vascular and platelet disorders including ITP and haemophilia's	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA21.3	Differentiate platelet from clotting disorders based on the clinical and hematologic features	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA21.4	Define and describe disseminated intravascular coagulation, its laboratory findings and diagnosis of disseminated intravascular coagulation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA21.5	Define and describe disseminated intravascular coagulation, its laboratory findings and diagnosis of Vitamin K deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Blood banking and transfusion Number of competencies: (07) Number of procedures that require certification: (NIL)									
PA22.1	Classify and describe blood group systems (ABO and RH)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA22.2	Enumerate the indications, describe the principles, enumerate and demonstrate the steps of compatibility testing	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA22.4	Enumerate blood components and describe their clinical uses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA22.5	Enumerate and describe infections transmitted by blood transfusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA22.6	Describe transfusion reactions and enumerate the steps in the investigation of a transfusion reaction	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA22.7	Enumerate the indications and describe the principles and procedure of autologous transfusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Clinical Pathology Number of competencies: (03) Number of procedures that require certification: (NIL)									
PA23.1	Describe abnormal urinary findings in disease states and identify and describe common urinary abnormalities in a clinical specimen	S	SH	Y	DOAP session	Skill Assessment			
PA23.2	Describe abnormal findings in body fluids in various disease states	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PA23.3	Describe and interpret the abnormalities in a panel containing semen analysis, thyroid function tests, renal function tests or liver function tests	S	SH	Y	DOAP session	Skill Assessment			
Topic: Gastrointestinal tract Number of competencies: (07) Number of procedures that require certification: (NIL)									
PA24.1	Describe the etiology, pathogenesis, pathology and clinical features of oral cancers	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Dentistry	
PA24.2	Describe the etiology, pathogenesis, pathology, microbiology, clinical and microscopic features of peptic ulcer disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA24.3	Describe and identify the microscopic features of peptic ulcer	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA24.4	Describe and etiology and pathogenesis and pathologic features of carcinoma of the stomach	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.5	Describe and etiology and pathogenesis and pathologic features of Tuberculosis of the intestine	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.6	Describe and etiology and pathogenesis and pathologic and distinguishing features of Inflammatory bowel disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.7	Describe the etiology, pathogenesis, pathology and distinguishing features of carcinoma of the colon	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
Topic: Hepatobiliary system Number of competencies: (06) Number of procedures that require certification: (01)									
PA25.1	Describe bilirubin metabolism, enumerate the etiology and pathogenesis of jaundice, distinguish between direct and indirect hyperbilirubinemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA25.2	Describe the pathophysiology and pathologic changes seen in hepatic failure and their clinical manifestations, complications and consequences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.3	Describe the etiology and pathogenesis of viral and toxic hepatitis: distinguish the causes of hepatitis based on the clinical and laboratory features. Describe the pathology, complications and consequences of hepatitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA25.4	Describe the pathophysiology, pathology and progression of alcoholic liver disease including cirrhosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.5	Describe the etiology, pathogenesis and complications of portal hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.6	Interpret liver function and viral hepatitis serology panel. Distinguish obstructive from non-obstructive jaundice based on clinical features and liver function tests	S	P	Y	DOAP session	Skill assessment	1	General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
Topic: Respiratory system		Number of competencies: (07)			Number of procedures that require certification: (NIL)				
PA26.1	Define and describe the etiology, types, pathogenesis, stages, morphology and complications of pneumonia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.2	Describe the etiology, gross and microscopic appearance and complications of lung abscess	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.3	Define and describe the etiology, types, pathogenesis, stages, morphology and complications and evaluation of Obstructive airway disease (OAD) and bronchiectasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	Microbiology
PA26.4	Define and describe the etiology, types, pathogenesis, stages, morphology microscopic appearance and complications of tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.5	Define and describe the etiology, types, exposure, environmental influence, pathogenesis, stages, morphology, microscopic appearance and complications of Occupational lung disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Community Medicine	
PA26.6	Define and describe the etiology, types, exposure, genetics environmental influence, pathogenesis, stages, morphology, microscopic appearance,metastases and complications of tumors of the lung and pleura	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA26.7	Define and describe the etiology, types, exposure, genetics environmental influence, pathogenesis, morphology, microscopic appearance and complications of mesothelioma	K	KH	N	Lecture, Small group discussion	Written / Viva voce		General Medicine, Community Medicine	
Topic: Cardiovascular system		Number of competencies: (10)			Number of procedures that require certification: (NIL)				
PA27.1	Distinguish arteriosclerosis from atherosclerosis. Describe the pathogenesis and pathology of various causes and types of arteriosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.2	Describe the etiology, dynamics, pathology types and complications of aneurysms including aortic aneurysms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA27.3	Describe the etiology, types, stages pathophysiology, pathology and complications of heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA27.4	Describe the etiology, pathophysiology, pathology, gross and microscopic features, criteria and complications of rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.5	Describe the epidemiology, risk factors, etiology, pathophysiology, pathology, presentations, gross and microscopic features, diagnostic tests and complications of ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.6	Describe the etiology, pathophysiology, pathology, gross and microscopic features, diagnosis and complications of infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.7	Describe the etiology, pathophysiology, pathology, gross and microscopic features, diagnosis and complications of pericarditis and pericardial effusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.8	Interpret abnormalities in cardiac function testing in acute coronary syndromes	S	SH	Y	DOAP session	Skill Assessment		Physiology, General Medicine	
PA27.9	Classify and describe the etiology, types, pathophysiology, pathology, gross and microscopic features, diagnosis and complications of cardiomyopathies	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA27.10	Describe the etiology, pathophysiology, pathology features and complications of syphilis on the cardiovascular system	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
Topic: Urinary Tract Number of competencies: (16) Number of procedures that require certification: (NIL)									
PA28.1	Describe the normal histology of the kidney	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PA28.2	Define, classify and distinguish the clinical syndromes and describe the etiology, pathogenesis, pathology, morphology, clinical and laboratory and urinary findings, complications of renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA28.3	Define and describe the etiology, precipitating factors, pathogenesis, pathology, laboratory urinary findings, progression and complications of acute renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.4	Define and describe the etiology, precipitating factors, pathogenesis, pathology, laboratory urinary findings progression and complications of chronic renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.5	Define and classify glomerular diseases. Enumerate and describe the etiology, pathogenesis, mechanisms of glomerular injury, pathology, distinguishing features and clinical manifestations of glomerulonephritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA28.6	Define and describe the etiology, pathogenesis, pathology, laboratory, urinary findings, progression and complications of IgA nephropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.7	Enumerate and describe the findings in glomerular manifestations of systemic disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.8	Enumerate and classify diseases affecting the tubular interstitium	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.9	Define and describe the etiology, pathogenesis, pathology, laboratory, urinary findings, progression and complications of acute tubular necrosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.10	Describe the etiology, pathogenesis, pathology, laboratory findings, distinguishing features progression and complications of acute and chronic pyelonephritis and reflux nephropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, General Surgery	
PA28.11	Define classify and describe the etiology, pathogenesis pathology, laboratory, urinary findings, distinguishing features progression and complications of vascular disease of the kidney	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA28.12	Define classify and describe the genetics, inheritance, etiology, pathogenesis, pathology, laboratory, urinary findings, distinguishing features, progression and complications of cystic disease of the kidney	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
PA28.13	Define classify and describe the etiology, pathogenesis, pathology, laboratory, urinary findings, distinguishing features progression and complications of renal stone disease and obstructive uropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA28.14	Classify and describe the etiology, genetics, pathogenesis, pathology, presenting features, progression and spread of renal tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA28.15	Describe the etiology, genetics, pathogenesis, pathology, presenting features and progression of thrombotic angiopathies	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.16	Describe the etiology, genetics, pathogenesis, pathology, presenting features and progression of urothelial tumors	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
Topic: Male Genital Tract Number of competencies: (05) Number of procedures that require certification: (NIL)									
PA29.1	Classify testicular tumors and describe the pathogenesis, pathology, presenting and distinguishing features, diagnostic tests, progression and spread of testicular tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.2	Describe the pathogenesis, pathology, presenting and distinguishing features, diagnostic tests, progression and spread of carcinoma of the penis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.3	Describe the pathogenesis, pathology, hormonal dependency presenting and distinguishing features, urologic findings & diagnostic tests of benign prostatic hyperplasia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.4	Describe the pathogenesis, pathology, hormonal dependency presenting and distinguishing features, diagnostic tests, progression and spread of carcinoma of the prostate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA29.5	Describe the etiology, pathogenesis, pathology and progression of prostatitis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
Topic: Female Genital Tract Number of competencies: (09) Number of procedures that require certification: (NIL)									
PA30.1	Describe the epidemiology, pathogenesis, etiology, pathology, screening, diagnosis and progression of carcinoma of the cervix	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.2	Describe the pathogenesis, etiology, pathology, diagnosis and progression and spread of carcinoma of the endometrium	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.3	Describe the pathogenesis, etiology, pathology, diagnosis and progression and spread of carcinoma of the leiomyomas and leiomyosarcomas	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.4	Classify and describe the etiology, pathogenesis, pathology, morphology, clinical course, spread and complications of ovarian tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.5	Describe the etiology, pathogenesis, pathology, morphology, clinical course, spread and complications of gestational trophoblastic neoplasms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.6	Describe the etiology and morphologic features of cervicitis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.7	Describe the etiology, hormonal dependence, features and morphology of endometriosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.8	Describe the etiology and morphologic features of adenomyosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA30.9	Describe the etiology, hormonal dependence and morphology of endometrial hyperplasia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
Topic: Breast Number of competencies: (04) Number of procedures that require certification: (NIL)									
PA31.1	Classify and describe the types, etiology, pathogenesis, pathology and hormonal dependency of benign breast disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, General Surgery	
PA31.2	Classify and describe the epidemiology, pathogenesis, classification, morphology, prognostic factors, hormonal dependency, staging and spread of carcinoma of the breast	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA31.3	Describe and identify the morphologic and microscopic features of carcinoma of the breast	S	SH	N	DOAP session	Skill Assessment		General Surgery	
PA31.4	Enumerate and describe the etiology, hormonal dependency and pathogenesis of gynecomastia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	
Topic: Endocrine system Number of competencies: (09) Number of procedures that require certification: (NIL)									
PA32.1	Enumerate, classify and describe the etiology, pathogenesis, pathology and iodine dependency of thyroid swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
PA32.2	Describe the etiology, cause, iodine dependency, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.3	Describe the etiology, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis/ hypothyroidism	K	KH	Y	Lecture, Small group	Written/ Viva voce		Physiology, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA32.4	Classify and describe the epidemiology, etiology, pathogenesis, pathology, clinical laboratory features, complications and progression of diabetes mellitus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.5	Describe the etiology, genetics, pathogenesis, manifestations, laboratory and morphologic features of hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.6	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications and metastases of pancreatic cancer	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA32.7	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of adrenal insufficiency	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.8	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of Cushing's syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.9	Describe the etiology, pathogenesis, manifestations, laboratory and morphologic features of adrenal neoplasms	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
Topic: Bone and soft tissue Number of competencies: (05) Number of procedures that require certification: (NIL)									
PA33.1	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of osteomyelitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Orthopaedics	Microbiology
PA33.2	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications and metastases of bone tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Orthopaedics	
PA33.3	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications and metastases of soft tissue tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Orthopaedics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA33.4	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of Paget's disease of the bone	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Orthopaedics	
PA33.5	Classify and describe the etiology, immunology, pathogenesis, manifestations, radiologic and laboratory features, diagnostic criteria and complications of rheumatoid arthritis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Skin Number of competencies: (04) Number of procedures that require certification:(NIL)									
PA34.1	Describe the risk factors pathogenesis, pathology and natural history of squamous cell carcinoma of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.2	Describe the risk factors pathogenesis, pathology and natural history of basal cell carcinoma of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.3	Describe the distinguishing features between a nevus and melanoma. Describe the etiology, pathogenesis, risk factors morphology clinical features and metastases of melanoma	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.4	Identify, distinguish and describe common tumors of the skin	S	SH	N	DOAP session	Skill Assessment		Dermatology, Venereology & Leprosy	
Topic: Central Nervous System Number of competencies:(03) Number of procedures that require certification: (01)									
PA35.1	Describe the etiology, types and pathogenesis, differentiating factors, CSF findings in meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA35.2	Classify and describe the etiology, genetics, pathogenesis, pathology, presentation sequelae and complications of CNS tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PA35.3	Identify the etiology of meningitis based on given CSF parameters	S	P	Y	DOAP session	Skill Assessment	1	General Medicine	Microbiology
Topic: Eye Number of competencies: (01) Number of procedures that require certification:(NIL)									
PA36.1	Describe the etiology, genetics, pathogenesis, pathology, presentation, sequelae and complications of retinoblastoma	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Ophthalmology	
Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, S - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation									
Integration									
Human Anatomy									
AN5.8	Define thrombosis, infarction & aneurysm	K	KH	N	Lecture	Written		Pathology	Physiology
AN66.2	Describe the ultrastructure of connective tissue	K	KH	N	Lecture, Practical	Written		Pathology	
AN70.1	Identify exocrine gland under the microscope & distinguish between serous, mucous and mixed acini	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
AN70.2	Identify the lymphoid tissue under the microscope & describe microanatomy of lymph node, spleen, thymus, tonsil and correlate the structure with function	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
AN71.1	Identify bone under the microscope, Classify various types and describe the structure-function correlation of the same	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
AN71.2	Identify cartilage under the microscope & describe various types and structure- function correlation of the same describe various types and structure-function correlation of the same	K/S	SH	Y	Lecture, Practical	Written/ skill assessment		Pathology	
Physiology									
PY1.4	Describe apoptosis – programmed cell death	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PY2.5	Describe different types of anemia & Jaundice	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	Biochemistry
PY2.8	Describe the physiological basis of hemostasis and anticoagulants. Describe bleeding & clotting disorders (Hemophilia, purpura)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PY2.9	Describe different blood groups and discuss the clinical importance of blood grouping, blood banking and transfusion	K	KH	Y	Lecture, Small group discussion, ECE- Visit to blood bank	Written/ Viva voce		Pathology	
PY2.11	Estimate Hb, RBC, TLC, RBC indices, DLC, Blood groups, BT/CT	S	SH	Y	DOAP sessions	Practical/OSPE/ viva voce		Pathology	
PY2.12	Describe test for ESR, Osmotic fragility, Hematocrit. Note the findings and interpret the test results etc	K	KH	Y	Demonstration	Written/ Viva voce		Pathology	
PY2.13	Describe steps for reticulocyte and platelet count	K	KH	Y	Demonstration sessions	Written/ Viva voce		Pathology	
PY3.6	Describe the pathophysiology of Myasthenia gravis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
Biochemistry									
BI2.4	Describe and discuss enzyme inhibitors as poisons and drugs and as therapeutic enzymes	K	KH	Y	Lecture, small group discussions	Written/ Viva voce		Pathology, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
BI2.5	Describe and discuss the clinical utility of various serum enzymes as markers of pathological conditions	K	KH	Y	Lecture, small group discussions	Written/ Viva voce		Pathology, General Medicine	
BI2.6	Discuss use of enzymes in laboratory investigations (Enzyme-based assays)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI2.7	Interpret laboratory results of enzyme activities & describe the clinical utility of various enzymes as markers of pathological conditions	K	KH	Y	Lecture, Small group discussion /DOAP sessions	Written/ Viva voce		Pathology, General Medicine	
BI3.8	Discuss and interpret laboratory results of analytes associated with metabolism of carbohydrates.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI5.2	Describe and discuss functions of proteins and structure-function relationships in relevant areas eg, hemoglobin and selected hemoglobinopathies	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.11	Describe the functions of haem in the body and describe the processes involved in its metabolism and describe porphyrin metabolism	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.12	Describe the major types of haemoglobin and its derivatives found in the body and their physiological/ pathological relevance	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.13	Describe the functions of the kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.14	Describe the tests that are commonly done in clinical practice to assess the functions of kidney, liver, thyroid and adrenal glands	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
BI6.15	Describe the abnormalities of kidney, liver, thyroid and adrenal glands	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI7.7	Describe the role of oxidative stress in the pathogenesis of conditions such as cancer, complications of diabetes mellitus and atherosclerosis	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pathology	
BI8.1	Discuss the importance of various dietary components and explain importance of dietary fibre	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.2	Describe the types and causes of protein energy malnutrition and its effects	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.4	Describe the causes (including dietary habits), effects and health risks associated with being overweight/obesity	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pathology	
BI8.5	Summarize the nutritional importance of commonly used items of food including fruits and vegetables (macro-molecules & its importance)	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Community Medicine, General Medicine, Pediatrics	
BI10.1	Describe the cancer initiation, promotion oncogenes & oncogene activation	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.2	Describe various biochemical tumor markers and the biochemical basis of cancer therapy	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.3	Describe the cellular and humoral components of the immune system & describe the types and structure of antibody	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
BI10.4	Describe & discuss innate and adaptive immune responses, self/non-self recognition and the central role of T-helper cells in immune responses	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pathology	Physiology
BI10.5	Describe antigens and concepts involved in vaccine development	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pathology, Pediatrics, Microbiology	
BI11.17	Explain the basis and rationale of biochemical tests done in the following conditions: diabetes mellitus, dyslipidemia, myocardial infarction, renal failure, gout, proteinuria, nephrotic syndrome, edema, jaundice, liver diseases, pancreatitis, disorders of acid-base balance, thyroid disorders	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		General Medicine, Pathology	
Microbiology									
MI1.7	Describe the immunological mechanisms in health	K	KH	Y	Lecture	Written/ Viva voce			Pathology
MI1.8	Describe the mechanisms of immunity and response of the host immune system to infections	K	KH	Y	Lecture	Written/ Viva voce		Pediatrics	Pathology
MI2.1	Describe the etiologic agents in rheumatic fever and their diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.2	Describe the classification etio-pathogenesis, clinical features and discuss the diagnostic modalities of Infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.3	Identify the microbial agents causing Rheumatic heart disease & infective Endocarditis	S	SH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI2.4	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia	K	KH	Y	Lecture, Small group discussion	Written/ viva voce		General Medicine	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
MI2.5	Describe the etio-pathogenesis and discuss the clinical evolution and the laboratory diagnosis of kala azar, malaria, filariasis and other common parasites prevalent in India	K	KH	Y	Lecture, Small group discussion	Written/ viva voce		General Medicine	Pathology
MI2.7	Describe the epidemiology, the etio-pathogenesis, evolution, complications, opportunistic infections, diagnosis, prevention and the principles of management of HIV	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI3.1	Enumerate the microbial agents causing diarrhea and dysentery. Describe the epidemiology, morphology, pathogenesis, clinical features, and diagnostic modalities of these agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	Pathology
MI3.3	Describe the enteric fever pathogens and discuss the evolution of the clinical course, the laboratory diagnosis of the diseases caused by them	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.4	Identify the different modalities for diagnosis of enteric fever. Choose the appropriate test related to the duration of illness	S	KH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI3.6	Describe the etio-pathogenesis of Acid Peptic disease (APD) and the clinical course. Discuss the diagnosis and management of the causative agent of APD.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.7	Describe the epidemiology, the etio-pathogenesis and discuss the viral markers in the evolution of Viral hepatitis. Discuss the modalities in the diagnosis, and prevention of viral hepatitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI3.8	Choose the appropriate laboratory test in the diagnosis of viral hepatitis	K	KH	Y	small group discussion, Case discussion	Written/ Viva voce/ OSPE		General Medicine	Pathology
MI5.1	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of meningitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Pathology
MI5.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of encephalitis.	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
MI8.2	Describe the etio-pathogenesis of opportunistic infections (OI) and discuss the factors contributing to the occurrence of OI, and the laboratory diagnosis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Pathology
MI8.3	Describe the role of oncogenic viruses in the evolution of virus associated malignancy	K	KH	Y	Lecture	Written		General Medicine	Pathology
Community Medicine									
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	Microbiology, Pathology
Forensic Medicine & Toxicology									
FM2.1	Define, describe and discuss death and its types including somatic/clinical/cellular, molecular and brain-death, Cortical death and Brainstem death	K	KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM2.2	Describe and discuss natural and unnatural deaths	K	KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM2.3	Describe and discuss issues related to sudden natural deaths	K	KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM2.5	Discuss moment of death, modes of death-coma, asphyxia and syncope	K	KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM2.11	Describe and discuss autopsy procedures including post-mortem examination, different types of autopsies, aims and objectives of post-mortem examination	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/viva voce/ OSPE			Pathology
FM2.12	Describe the legal requirements to conduct post-mortem examination and procedures to conduct medico-legal post-mortem examination	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/viva voce/ OSPE			Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
FM2.13	Describe and discuss obscure autopsy	K	KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM3.28	Describe evidences of abortion - living and dead, duties of doctor in cases of abortion, investigations of death due to criminal abortion	K	K/KH	Y	Lecture, Small group discussion	Written/viva voce		Obstetrics & Gynaecology, Pathology	
FM6.1	Describe different types of specimens and tissues to be collected both in the living and dead: body fluids (blood, urine, semen, faeces, saliva), skin, nails, tooth pulp, vaginal smear, viscera, skull, specimen for histo-pathological examination, blood grouping, HLA Typing and DNA Fingerprinting. Describe Locard's Exchange Principle	K	K/KH	Y	Lecture, Small group discussion	Written/viva voce			Pathology
FM14.7	Demonstrate & identify that a particular stain is blood and identify the species of its origin	S	KH	Y	Small group discussion, Lecture	Log book/ skill station/ Viva voce		Forensic Medicne, Physiology	
FM14.8	Demonstrate the correct technique to perform and identify ABO & RH blood group of a person	S	SH	Y	Small group discussion, DOAP session	Log book/ skill station/ Viva voce		Forensic Medicne, Physiology	
Dermatology, Venereology & Leprosy									
DR12.7	Identify and distinguish fixed drug eruptions and Steven Johnson syndrome from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment	1	General Medicine	Pathology, Microbiology
DR14.1	Describe the etiology, pathogenesis and clinical precipitating features and classification of Urticaria and angioedema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology, Pathology
DR16.1	Identify and distinguish skin lesions of SLE	S	SH	Y	Bedside clinic discussion	Skill assessment	2	General Medicine	Pathology
DR16.2	Identify and distinguish Raynaud's phenomenon	S	SH	Y	Bedside clinic discussion	Skill assessment	2	General Medicine	Pathology
Anesthesiology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
AS9.4	Enumerate blood products and describe the use of blood products in the preoperative period	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pathology	General Surgery
ENT									
EN1.2	Describe the pathophysiology of common diseases in ENT	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pathology	
Ophthalmology									
OP7.2	Describe and discuss the aetio-pathogenesis, stages of maturation and complications of cataract	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
OP8.1	Discuss the aetiology, pathology, clinical features and management of vascular occlusions of the retina	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Pathology	
Dentistry									
DE4.1	Discuss the prevalence of oral cancer and enumerate the common types of cancer that can affect tissues of the oral cavity	K	K	N	Lecture, Small group discussion	Viva voce		Pathology	ENT
DE4.2	Discuss the role of etiological factors in the formation of precancerous /cancerous lesions	K	KH	Y	Lecture, Small group discussion	Viva voce		Pathology	ENT
DE4.3	Identify potential pre-cancerous / cancerous lesions	S	SH	N	Observation, Bed side clinics	Skill assessment		Pathology	ENT
DE4.4	Counsel patients to risks of oral cancer with respect to tobacco, smoking, alcohol and other causative factors.	A/C	SH	Y	DOAP session	Document in Log book	2	Pathology	ENT
General Medicine									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM1.1	Describe and discuss the epidemiology, pathogenesis clinical evolution and course of common causes of heart disease including: rheumatic/ valvular, ischemic, hypertrophic inflammatory	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.2	Describe and discuss the genetic basis of some forms of heart failure	K	KH	N	Lecture, Small group discussion	Written		Pathology, Physiology	
IM1.3	Describe and discuss the aetiology, microbiology, pathogenies and clinical evolution of rheumatic fever, criteria, degree of rheumatic activity and rheumatic valvular heart disease and its complications including infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Microbiology	
IM1.4	Stage heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.5	Describe, discuss and differentiate the processes involved in R vs L heart failure, systolic vs diastolic failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.6	Describe and discuss the compensatory mechanisms involved in heart failure including cardiac remodelling and neurohormonal adaptations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.7	Enumerate, describe and discuss the factors that exacerbate heart failure including ischemia, arrhythmias, anemia, thyrotoxicosis, dietary factors drugs etc.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.8	Describe and discuss the pathogenesis and development of common arrhythmias involved in heart failure particularly atrial fibrillation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.9	Describe and discuss the clinical presentation and features, diagnosis, recognition and management of acute rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM2.1	Discuss and describe the epidemiology, antecedents and risk factors for atherosclerosis and ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Community Medicine	
IM2.2	Discuss the aetiology of risk factors both modifiable and non-modifiable of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.4	Discuss and describe the pathogenesis natural history, evolution and complications of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.5	Define the various acute coronary syndromes and describe their evolution, natural history and outcomes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM3.1	Define, discuss, describe and distinguish community acquired pneumonia, nosocomial pneumonia and aspiration pneumonia	K	K	Y	Lecture , Small group discussion	short note/ Viva voce		Human Anatomy, Pathology, Microbiology	
IM3.3	Discuss and describe the pathogenesis, presentation, natural history and complications of pneumonia	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology, Microbiology	
IM4.5	Describe and discuss the pathophysiology and manifestations of malignant causes of fever including hematologic and lymph node malignancies	K	KH	Y	Lecture, Small group discussion	written		Pathology, Microbiology	
IM4.12	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH	Y	Bed side clinic, Skill assessment	Skill assessment		Pathology, Microbiology	
IM4.16	Enumerate the indications and describe the findings in tests of inflammation and specific rheumatologic tests, serologic testing for pathogens including HIV, bone marrow aspiration and biopsy	K	KH	N	Lecture, Small group discussion	written		Pathology	
IM4.17	Observe and assist in the performance of a bone marrow aspiration and biopsy in a simulated environment	S	SH	N	skills lab	log book documentation/ DOAP session		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM5.1	Describe and discuss the physiologic and biochemical basis of hyperbilirubinemia	K	K	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, Physiology	
IM5.2	Describe and discuss the aetiology and pathophysiology of liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM5.3	Describe and discuss the pathologic changes in various forms of liver disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM5.4	Describe and discuss the epidemiology, microbiology, immunology and clinical evolution of infective (viral) hepatitis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
IM5.5	Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM5.6	Describe and discuss the pathophysiology, clinical evolution and complications of cirrhosis and portal hypertension including ascites, spontaneous bacterial peritonitis, hepatorenal syndrome and hepatic encephalopathy	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM5.7	Enumerate and describe the causes and pathophysiology of drug induced liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Pharmacology	
IM5.12	Choose and interpret appropriate diagnostic tests including: CBC, bilirubin, function tests, Hepatitis serology and ascitic fluid examination in patient with liver diseases	S	KH	Y	Bedside clinic, DOAP session	Skill assessment		Pathology	
IM5.14	Outline a diagnostic approach to liver disease based on hyperbilirubinemia, liver function changes and hepatitis serology	S	SH	Y	Bedside clinic, Small group discussion	viva voce/ written		Pathology, Microbiology	
IM6.5	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related malignancies	K	KH	Y	Lecture, Small group discussion	short notes/ Viva voce		Pathology, Microbiology	
IM6.6	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related skin and oral lesions	K	KH	Y	Lecture, Small group discussion	short notes/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM6.10	Choose and interpret appropriate diagnostic tests to diagnose and classify the severity of HIV-AIDS including specific tests of HIV, CDC	K	KH	Y	Bed side clinic, DOAP session, Small group discussion	written/ Skill assessment		Pathology, Microbiology	
IM6.19	Enumerate the indications of and discuss about prophylactic drugs used to prevent HIV related opportunistic infections	K/C	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
IM7.1	Describe the pathophysiology of autoimmune disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM7.2	Describe the genetic basis of autoimmune disease	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM7.16	Enumerate the indications for and interpret the results of: CBC, anti CCP (Anti-cyclic citrullinated peptide), RA, ANA, DNA and other tests of autoimmunity	K	SH	Y	Bed side clinic, small group	Skill assessment/ written		Pathology	
IM8.1	Describe and discuss the epidemiology, aetiology and the prevalence of primary and secondary hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.2	Describe and discuss the pathophysiology of hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.3	Describe and discuss the genetic basis of hypertension	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.4	Define and classify hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.5	Describe and discuss the differences between primary and secondary hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.7	Describe and discuss the clinical manifestations of the various aetiologies of secondary causes of hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.8	Describe, discuss and identify target organ damage due to hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM9.1	Define, describe and classify anemia based on red blood cell size and reticulocyte count	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM9.2	Describe and discuss the morphological characteristics, aetiology and prevalence of each of the causes of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM9.6	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH	Y	Bed side clinic, DOAP session, Small group discussion	Skill assessment/ written		Pathology	
IM9.7	Describe the appropriate diagnostic work up based on the presumed aetiology	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ written		Pathology	
IM9.8	Describe and discuss the meaning and utility of various components of the hemogram	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.9	Describe and discuss the various tests for iron deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.10	Order and interpret tests for anemia including hemogram, red cell indices, reticulocyte count, iron studies, B12 and folate.	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ written		Pathology	
IM9.11	Describe, perform and interpret a peripheral smear and stool occult blood	S	SH	P	Bed side clinic, DOAP session	Skill assessment/ written		Pathology	
IM9.12	Describe the indications and interpret the results of a bone marrow aspirations and biopsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.13	Describe, develop a diagnostic plan to determine the aetiology of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.18	Describe the indications for blood transfusion and the appropriate use of blood components	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM10.1	Define, describe and differentiate between acute and chronic renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM10.2	Classify, describe and differentiate the pathophysiologic causes of acute renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.3	Describe the pathophysiology and causes of pre renal ARF, renal and post renal ARF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.4	Describe the evolution, natural history and treatment of ARF	K	KH	Y	Lecture, small group	Written/ Viva voce		Pathology	
IM10.5	Describe and discuss the aetiology of CRF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.6	Stage Chronic Kidney Disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.7	Describe and discuss the pathophysiology and clinical findings of uraemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.8	Classify, describe and discuss the significance of proteinuria in CKD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.9	Describe and discuss the pathophysiology of anemia and hyperparathyroidism in CKD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.10	Describe and discuss the association between CKD glycemia and hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.11	Describe and discuss the relationship between CAD risk factors and CKD and in dialysis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.16	Enumerate the indications for and interpret the results of: renal function tests, calcium, phosphorus, PTH, urine electrolytes, osmolality, Anion gap	K	KH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology	
IM10.17	Describe and calculate indices of renal function based on available laboratories including FENa (Fractional Excretion of Sodium) and CrCl (Creatinine Clearance)	S	SH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology	
IM11.2	Describe and discuss the epidemiology and pathogenesis and risk factors and clinical evolution of type 1 diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM11.3	Describe and discuss the epidemiology and pathogenesis and risk factors, economic impact and clinical evolution of type 2 diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM11.5	Describe and discuss the pathogenesis and temporal evolution of microvascular and macrovascular complications of diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM11.11	Order and interpret laboratory tests to diagnose diabetes and its complications including: glucoses, glucose tolerance test, glycosylated hemoglobin, urinary micro albumin, ECG, electrolytes, ABG, ketones, renal function tests and lipid profile	S	SH	Y	Bed side clinic, DOAP session, Small group discussion	Skill assessment		Pathology	
IM11.12	Perform and interpret a capillary blood glucose test	S	P	Y	Bed side clinic, DOAP session, Small group discussion	Skill assessment	2	Pathology, Biochemistry	
IM11.13	Perform and interpret a urinary ketone estimation with a dipstick	S	P	Y	Bed side clinic, DOAP session	Skill assessment	2	Pathology, Biochemistry	
IM11.22	Enumerate the causes of hypoglycaemia and describe the counter hormone response and the initial approach and treatment	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM12.1	Describe the epidemiology and pathogenesis of hypothyroidism and hyperthyroidism including the influence of iodine deficiency and autoimmunity in the pathogenesis of thyroid disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM12.3	Describe and discuss the physiology of the hypothalamo-pituitary - thyroid axis, principles of thyroid function testing and alterations in physiologic function	K	K	Y	Lecture, Small group discussion	short notes		Pathology, Physiology	
IM13.1	Describe the clinical epidemiology and inherited & modifiable risk factors for common malignancies in India	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology, Biochemistry	
IM13.2	Describe the genetic basis of selected cancers	K	K	N	Lecture, Small group discussion	short note/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM13.3	Describe the relationship between infection and cancers	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology, Microbiology	
IM13.4	Describe the natural history, presentation, course, complications and cause of death for common cancers	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	
IM13.15	Describe the need, tests involved, their utility in the prevention of common malignancies	K	KH	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pathology	
IM14.2	Describe and discuss the aetiology of obesity including modifiable and non-modifiable risk factors and secondary causes	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology	
IM14.3	Describe and discuss the monogenic forms of obesity	K	K	N	Lecture, Small group discussion	short note/ Viva voce		Pathology	
IM14.4	Describe and discuss the impact of environmental factors including eating habits, food, work, environment and physical activity on the incidence of obesity	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Community Medicine	
IM14.5	Describe and discuss the natural history of obesity and its complications	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology	
IM15.1	Enumerate, describe and discuss the aetiology of upper and lower GI bleeding	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Pathology	General Surgery
IM15.2	Enumerate, describe and discuss the evaluation and steps involved in stabilizing a patient who presents with acute volume loss and GI bleed	S	SH	Y	DOAP session, Small group discussion, Lecture	Written/ Viva voce/ Skill assessment		Pathology	General Surgery
IM15.3	Describe and discuss the physiologic effects of acute blood and volume loss	K	K	Y	Lecture, Small group discussion	Short note/ viva voce		Pathology, Physiology	General Surgery
IM15.9	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, PT and PTT, stool examination, occult blood, liver function tests, H.pylori test	S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment/ Short note/ Viva voce		Pathology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM15.11	Develop document and present a treatment plan that includes fluid resuscitation, blood and blood component transfusion and specific therapy for arresting blood loss	S	KH	Y	Lecture, Small group discussion	Short note/ viva voce		Pathology	General Surgery
IM15.12	Enumerate the indications for whole blood, component and platelet transfusion and describe the clinical features and management of a mismatched transfusion	K	K	Y	Lecture, Small group discussion	Short note/ viva voce		Pathology	General Surgery
IM15.13	Observe cross matching and blood / blood component transfusion	S	SH	Y	Bedside clinic	Short note/ Viva voce/ Skill assessment		Pathology	General Surgery
IM16.4	Elicit and document and present an appropriate history that includes the natural history, dietary history, travel, sexual history and other concomitant illnesses	S	SH	Y	Bedside clinic skills lab	Skill assessment		Microbiology, Pathology	
IM16.8	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, and stool examination	S	SH	Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce		Microbiology, Pathology	
IM16.12	Enumerate and discuss the indications for further investigations including antibodies, colonoscopy, diagnostic imaging and biopsy in the diagnosis of chronic diarrhea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	General Surgery
IM16.15	Distinguish, based on the clinical presentation, Crohn's disease from ulcerative colitis	S	SH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM17.7	Enumerate the indications and describe the findings in the CSF in patients with meningitis	K	K	Y	Small group, Bedside clinic	Skill Assessment		Microbiology, Pathology	
IM17.8	Demonstrate in a mannequin or equivalent the correct technique for performing a lumbar puncture	S	SH	Y	DOAP session	Skill assessment		Microbiology, Pathology	
IM17.9	Interpret the CSF findings when presented with various parameters of CSF fluid analysis	S	SH	Y	Small group discussion, Bedside clinic	Skill assessment		Microbiology, Pathology	
IM18.2	Classify cerebrovascular accidents and describe the aetiology, predisposing genetic and risk factors pathogenesis of hemorrhagic and non hemorrhagic stroke	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
IM18.3	Elicit and document and present an appropriate history including onset, progression precipitating and aggravating relieving factors, associated symptoms that help identify the cause of the cerebrovascular accident	S	SH	Y	Bedside clinic	Skill assessment		Pathology	
IM22.1	Enumerate the causes of hypercalcemia and distinguish the features of PTH vs non PTH mediated hypercalcemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM22.2	Describe the aetiology, clinical manifestations, diagnosis and clinical approach to primary hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	General Surgery
IM22.4	Enumerate the components and describe the genetic basis of the multiple endocrine neoplasia syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM25.7	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, blood biochemistry, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH	Y	Bed side clinic, Skill assessment	Skill assessment		Pathology, Microbiology	
Obstetrics & Gynaecology									
OG10.2	Enumerate the indications and describe the appropriate use of blood and blood products, their complications and management	K	KH	Y	Lecture, Small group discussion			Pathology	
Pediatrics									
PE11.1	Describe the common etiology, clinical features and management of obesity in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry, Pathology	
PE11.2	Discuss the risk approach for obesity and discuss the prevention strategies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PE12.7	Describe the causes, clinical features, diagnosis and management of deficiency /excess of Vitamin D (Rickets and Hypervitaminosis D)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.8	Identify the clinical features of dietary deficiency of Vitamin D	S	p	Y	Bedside clinics, Skills lab	Document in log book	3	Biochemistry, Physiology Pathology	
PE12.9	Assess patients with Vitamin D deficiency, diagnose, classify and plan management	S	SH	Y	Bed side clinics	Document in log book		Biochemistry, Physiology, Pathology	
PE12.13	Discuss the RDA , dietary sources of Vitamin K and their role in Health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.14	Describe the causes, clinical features, diagnosis, management and prevention of Deficiency of Vitamin K	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE13.1	Discuss the RDA, dietary sources of Iron and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry	
PE13.2	Describe the causes, diagnosis and management of Fe deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology Biochemistry	
PE13.3	Identify the clinical features of dietary deficiency of Iron and make a diagnosis	S	SH	Y	Bed side clinics, Skill Lab	Document in log book		Pathology, Biochemistry	
PE13.4	Interpret hemogram and Iron Panel	S	P	Y	Bed side clinic, Small group discussion	Skill Assessment	5	Pathology, Biochemistry	
PE13.5	Propose a management plan for Fe Deficiency Anaemia	S	SH	Y	Bed side clinics, Skill lab	Skill Assessment		Pathology, Pharmacology	
PE21.2	Enumerate the etio-pathogenesis, clinical features, complications and management of Acute post streptococcal Glomerular Nephritis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.3	Discuss the approach and referral criteria to a child with Proteinuria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PE21.5	Enumerate the etio-pathogenesis clinical features, complications and management of Acute Renal Failure in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.6	Enumerate the etio-pathogenesis, clinical features, complications and management of Chronic renal Failure in Children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.7	Enumerate the etio-pathogenesis clinical features, complications and management of Wilms Tumor	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.11	Perform and interpret the common analytes in a Urine examination	S	SH	Y	Bed side clinic Labs, Skill lab	Skill assessment		Biochemistry, Pathology	
PE23.1	Discuss the Hemodynamic changes, clinical presentation, complications and management of Acyanotic Heart Diseases –VSD, ASD and PDA	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.2	Discuss the Hemodynamic changes, clinical presentation, complications and management of Cyanotic Heart Diseases – Fallot's Physiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.3	Discuss the etio-pathogenesis, clinical presentation and management of cardiac failure in infant and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.4	Discuss the etio-pathogenesis, clinical presentation and management of Acute Rheumatic Fever in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.5	Discuss the clinical features, complications, diagnosis, management and prevention of Acute Rheumatic Fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.6	Discuss the etio-pathogenesis and clinical features and management of Infective endocarditis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology, Microbiology	
PE24.1	Discuss the etio-pathogenesis, classification, clinical presentation and management of diarrheal diseases in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PE24.2	Discuss the classification and clinical presentation of various types of diarrheal dehydration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
PE25.1	Discuss the etio-pathogenesis, clinical presentation and management of Malabsorption in children and its causes including celiac disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE26.1	Discuss the etio-pathogenesis, clinical features and management of acute hepatitis in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.2	Discuss the etio-pathogenesis, clinical features and management of Fulminant Hepatic Failure in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.3	Discuss the etio-pathogenesis, clinical features and management of chronic liver diseases in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.4	Discuss the etio-pathogenesis, clinical features and management of Portal Hypertension in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology	
PE26.9	Interpret Liver Function Tests, viral markers, ultra sonogram report	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment		Pathology	
PE29.1	Discuss the etio-pathogenesis, clinical features, classification and approach to a child with anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.2	Discuss the etio-pathogenesis, clinical features and management of Iron Deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.3	Discuss the etiopathogenesis, clinical features and management of VIT B12, Folate deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.4	Discuss the etio-pathogenesis, clinical features and management of Hemolytic anemia, Thalassemia Major, Sickle cell anaemia, Hereditary spherocytosis, Auto-immune hemolytic anaemia and hemolytic uremic syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
PE29.6	Discuss the cause of thrombocytopenia in children: describe the clinical features and management of Idiopathic Thrombocytopenic Purpura (ITP)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.7	Discuss the etiology, classification, pathogenesis and clinical features of Hemophilia in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.8	Discuss the etiology, clinical presentation and management of Acute Lymphoblastic Leukemia in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.9	Discuss the etiology, clinical presentation and management of lymphoma in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
General Surgery									
SU2.1	Describe pathophysiology of shock, types of shock, principles of resuscitation including fluid replacement and monitoring	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
SU3.1	Describe the indications and appropriate use of blood and blood products and complications of blood transfusion.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce.		Pathology	
SU5.1	Describe normal wound healing and factors affecting healing.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
SU9.1	Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Microbiology, Pathology	
SU22.2	Describe the etiopathogenesis of thyroidal swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology,	
Respiratory Medicine									
CT2.1	Define and classify obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.2	Describe and discuss the epidemiology, risk factors and evolution of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
CT2.4	Describe and discuss the physiology and pathophysiology of hypoxia and hypercapnia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.5	Describe and discuss the genetics of alpha 1 antitrypsin deficiency in emphysema	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.6	Describe the role of the environment in the cause and exacerbation of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
CT2.7	Describe and discuss allergic and non-allergic precipitants of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology,	
CT2.11	Describe, discuss and interpret pulmonary function tests	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Physiology, Pathology	
Orthopaedics									
OR3.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of Bone and Joint infections a) Acute Osteomyelitis b) Subacute osteomyelitis c) Acute Suppurative arthritis d) Septic arthritis & HIV infection e) Spirochaetal infection f) Skeletal Tuberculosis	K/S	K/KH/S H	Y	Lecture, Small group discussion, Video assisted lecture	Written/ Viva voce/ OSCE		Pathology, Microbiology	General surgery
OR4.1	Describe and discuss the clinical features, investigation and principles of management of Tuberculosis affecting major joints (Hip, Knee) including cold abscess and caries spine	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE		Pathology	General surgery
OR10.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of benign and malignant bone tumours and pathological fractures	K	K/KH	Y	Lecture, Small group discussion, Video assisted interactive lecture	Written/ Viva voce OSCE		Pathology	General surgery, Radiotherapy
Radiotherapy									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical integration	Horizontal Integration
RT1.3	Enumerate, describe and discuss classification and staging of cancer (AJCC, FIGO etc.)	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, General Medicine
RT4.5	Describe and discuss role of radiation in management of common malignancies in India (region specific)	K	KH	Y	Lecture and Bed side clinic	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.6	Describe and discuss radiotherapy for benign disease	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.7	Counsel patients regarding acute and late effects of radiation and supportive care	K/A/S	KH	Y	Bed side clinic, Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT5.1	Describe and discuss cancer prevention, screening, vaccination, cancer registry	K	K	Y	Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology

MICROBIOLOGY (CODE: MI)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MICROBIOLOGY									
Topic: General Microbiology and Immunity Number of competencies: (11) Number of procedures that require certification : (01)									
MI1.1	Describe the different causative agents of Infectious diseases+A208, the methods used in their detection, and discuss the role of microbes in health and disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
MI1.2	Perform and identify the different causative agents of Infectious diseases by Gram Stain, ZN stain and stool routine microscopy	S	P	Y	DOAP session	Skill assessment	5		
MI1.3	Describe the epidemiological basis of common infectious diseases	K	KH	Y	Lecture	Written/ Viva voce			Community Medicine
MI1.4	Classify and describe the different methods of sterilization and disinfection. Discuss the application of the different methods in the laboratory, in clinical and surgical practice	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
MI1.5	Choose the most appropriate method of sterilization and disinfection to be used in specific situations in the laboratory, in clinical and surgical practice	K	KH	Y	Small group discussion, Case discussion	Written/Viva voce/ OSPE		General Surgery	
MI1.6	Describe the mechanisms of drug resistance, and the methods of antimicrobial susceptibility testing and monitoring of antimicrobial therapy	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology
MI1.7	Describe the immunological mechanisms in health	K	KH	Y	Lecture	Written/ Viva voce			Pathology
MI1.8	Describe the mechanisms of immunity and response of the host immune system to infections	K	KH	Y	Lecture	Written/ Viva voce		Pediatrics	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI1.9	Discuss the immunological basis of vaccines and describe the Universal Immunisation schedule	K	KH	Y	Lecture	Written/ Viva voce		Paediatrics	
MI1.10	Describe the immunological mechanisms in immunological disorder (hypersensitivity, autoimmune disorders and immunodeficiency states) and discuss the laboratory methods used in detection.	K	KH	Y	Lecture	Written/ Viva voce		Paediatrics	
MI1.11	Describe the immunological mechanisms of transplantation and tumor immunity	K	KH	Y	Lecture	Written/ Viva voce			
Topic: CVS and Blood Number of competencies: (7) Number of procedures that require certification : (NIL)									
MI2.1	Describe the etiologic agents in rheumatic fever and their diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.2	Describe the classification etio-pathogenesis, clinical features and discuss the diagnostic modalities of Infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.3	Identify the microbial agents causing Rheumatic Heart Disease & infective Endocarditis	S	SH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI2.4	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.5	Describe the etio-pathogenesis and discuss the clinical evolution and the laboratory diagnosis of kalaazar, malaria, filariasis and other common parasites prevalent in India	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.6	Identify the causative agent of malaria and filariasis	K/S	SH	Y	DOAP session	Skill assessment		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI2.7	Describe the epidemiology, the etio- pathogenesis, evolution complications, opportunistic infections, diagnosis, prevention and the principles of management of HIV	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
Topic: Gastrointestinal and hepatobiliary system Number of competencies: (8) Number of procedures that require certification : (NIL)									
MI3.1	Enumerate the microbial agents causing diarrhea and dysentery. Describe the epidemiology, morphology, pathogenesis, clinical features and diagnostic modalities of these agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI3.2	Identify the common etiologic agents of diarrhea and dysentery	S	SH	Y	DOAP session	Skill assessment		General Medicine, Paediatrics	
MI3.3	Describe the enteric fever pathogens and discuss the evolution of the clinical course and the laboratory diagnosis of the diseases caused by them	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.4	Identify the different modalities for diagnosis of enteric fever. Choose the appropriate test related to the duration of illness	S	KH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI3.5	Enumerate the causative agents of food poisoning and discuss the pathogenesis, clinical course and laboratory diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology
MI3.6	Describe the etio-pathogenesis of Acid peptic disease (APD) and the clinical course. Discuss the diagnosis and management of the causative agent of APD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.7	Describe the epidemiology, the etio-pathogenesis and discuss the viral markers in the evolution of Viral hepatitis. Discuss the modalities in the diagnosis and prevention of viral hepatitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI3.8	Choose the appropriate laboratory test in the diagnosis of viral hepatitis with emphasis on viral markers	K	KH	Y	Small group discussion, Case discussion	Written/ Viva voce/ OSPE		General Medicine	Pathology
Topic: Musculoskeletal system skin and soft tissue infections Number of competencies: (3) Number of procedures that require certification : (NIL)									
MI4.1	Enumerate the microbial agents causing anaerobic infections. Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of anaerobic infections	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
MI4.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of bone & joint infections	K	KH	Y	Lecture	Written/ Viva voce		Orthopaedics	
MI4.3	Describe the etio-pathogenesis of infections of skin and soft tissue and discuss the clinical course and the laboratory diagnosis	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy, General Surgery	
Topic: Central Nervous System infections Number of competencies: (3) Number of procedures that require certification : (NIL)									
MI5.1	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of meningitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Pathology
MI5.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of encephalitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Pathology
MI5.3	Identify the microbial agents causing meningitis	S	SH	Y	DOAP session	Skill assessment		General Medicine, Pediatrics	
Topic: Respiratory tract infections Number of competencies: (3) Number of procedures that require certification : (02)									
MI6.1	Describe the etio-pathogenesis, laboratory diagnosis and prevention of Infections of upper and lower respiratory tract	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI6.2	Identify the common etiologic agents of upper respiratory tract infections (Gram Stain)	S	P	Y	DOAP session	Skill assessment	3	General Medicine	
MI6.3	Identify the common etiologic agents of lower respiratory tract infections (Gram Stain & Acid fast stain)	S	P	Y	DOAP session	Skill assessment	3	General Medicine	
Topic: Genitourinary & Sexually transmitted infections Number of competencies: (3) Number of procedures that require certification : (NIL)									
MI7.1	Describe the etio-pathogenesis and discuss the laboratory diagnosis of infections of genitourinary system	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
MI7.2	Describe the etio-pathogenesis and discuss the laboratory diagnosis of sexually transmitted infections. Recommend preventive measures	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy, Obstetrics & Gynaecology	
MI7.3	Describe the etio-pathogenesis, clinical features, the appropriate method for specimen collection, and discuss the laboratory diagnosis of Urinary tract infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Zoonotic diseases and miscellaneous Number of competencies: (16) Number of procedures that require certification : (01)									
MI8.1	Enumerate the microbial agents and their vectors causing Zoonotic diseases. Describe the morphology, mode of transmission, pathogenesis and discuss the clinical course, laboratory diagnosis and prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
MI8.2	Describe the etio-pathogenesis of opportunistic infections (OI) and discuss the factors contributing to the occurrence of OI, and the laboratory diagnosis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Pathology
MI8.3	Describe the role of oncogenic viruses in the evolution of virus associated malignancy	K	KH	Y	Lecture	Written		General Medicine	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI8.4	Describe the etiologic agents of emerging Infectious diseases. Discuss the clinical course and diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
MI8.5	Define Healthcare Associated Infections (HAI) and enumerate the types. Discuss the factors that contribute to the development of HAI and the methods for prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
MI8.6	Describe the basics of Infection control	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Community Medicine
MI8.7	Demonstrate Infection control practices and use of Personal Protective Equipments (PPE)	S	P	Y	DOAP session	Skill assessment	3 each in (Hand hygiene & PPE)	General Surgery	Community Medicine
MI8.8	Describe the methods used and significance of assessing the microbial contamination of food, water and air	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
MI8.9	Discuss the appropriate method of collection of samples in the performance of laboratory tests in the detection of microbial agents causing infectious diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
MI8.10	Demonstrate the appropriate method of collection of samples in the performance of laboratory tests in the detection of microbial agents causing Infectious diseases	S	SH	Y	DOAP session	Skill assessment			
MI8.11	Demonstrate respect for patient samples sent to the laboratory for performance of laboratory tests in the detection of microbial agents causing Infectious diseases	A	SH	Y	DOAP session	Skill assessment			
MI8.12	Discuss confidentiality pertaining to patient identity in laboratory results	A	KH	Y	Lecture, Small group discussion	Viva voce			
MI8.13	Choose the appropriate laboratory test in the diagnosis of the infectious disease	K	KH	Y	Small group discussions, Case discussion	Written/ Viva voce/ OSPE			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
MI8.14	Demonstrate confidentiality pertaining to patient identity in laboratory results	A	SH	Y	DOAP session	Skill assessment		AETCOM	
MI8.15	Choose and Interpret the results of the laboratory tests used in diagnosis of the infectious diseases	K/S	SH	Y	Small group discussion, Case discussion	Written/ Viva voce/ OSPE			
MI8.16	Describe the National Health Programs in the prevention of common infectious disease (for information purpose only as taught in CM)	K	K	Y	Lecture	Written/ Viva voce			Community Medicine
	*causative agents of Infectious diseases are inclusive of bacterial, viral, parasites and fungal agents causing various clinical conditions.								
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Biochemistry									
BI10.5	Describe antigens and concepts involved in vaccine development.	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Pathology, Pediatrics, Microbiology	
Pathology									
PA7.5	Describe the immunology and the immune response to cancer	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA9.1	Describe the principles and mechanisms involved in immunity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
PA9.2	Describe the mechanism of hypersensitivity reactions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PA9.3	Describe the HLA system and the immune principles involved in transplant and mechanism of transplant rejection	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA9.6	Define and describe the pathogenesis and pathology of HIV and AIDS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.1	Define and describe the pathogenesis and pathology of malaria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.2	Define and describe the pathogenesis and pathology of cysticercosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.3	Define and describe the pathogenesis and pathology of leprosy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.4	Define and describe the pathogenesis and pathology of common bacterial, viral, protozoal and helminthic diseases	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA22.5	Enumerate and describe infections transmitted by blood transfusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
PA26.1	Define and describe the etiology, types, pathogenesis, stages, morphology and complications of pneumonia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.2	Describe the etiology, gross and microscopic appearance and complications of lung abscess	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.3	Define and describe the etiology, types, pathogenesis, stages, morphology and complications and evaluation of Obstructive Airway Disease (OAD) and bronchiectasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	Microbiology
PA26.4	Define and describe the etiology, types, pathogenesis, stages, morphology, microscopic appearance and complications of tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PA27.4	Describe the etiology, pathophysiology, pathology, gross and microscopic features, criteria and complications of rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.6	Describe the etiology, pathophysiology, pathology, gross and microscopic, features diagnosis and complications of infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.10	Describe the etiology, pathophysiology, pathology features and complications of syphilis on the cardiovascular system	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA33.1	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of osteomyelitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Orthopaedics	Microbiology
PA35.1	Describe the etiology, types and pathogenesis, differentiating factors, CSF findings in meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA35.3	Identify the etiology of meningitis based on given CSF parameters	S	P	Y	DOAP session	Skill Assessment	1	General Medicine	Microbiology
Pharmacology									
PH1.43	Describe and discuss the rational use of antimicrobials including antibiotic stewardship program	K	KH	Y	Lecture	Written/ Viva voce		General Medicine Pediatrics	Microbiology
PH1.45	Describe the drugs used in MDR and XDR Tuberculosis	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	Microbiology
PH1.46	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of antileprotic drugs	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy	Microbiology
PH1.47	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in malaria, KALA-AZAR, amebiasis and intestinal helminthiasis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PH1.48	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in UTI/ STD and viral diseases including HIV	K	KH	Y	Lecture	Written/Viva voce			Microbiology
Community Medicine									
CM3.3	Describe the aetiology and basis of water borne diseases/ jaundice/hepatitis/ diarrheal diseases	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Microbiology, General Medicine, Pediatrics	
CM3.6	Describe the role of vectors in the causation of diseases. Also discuss National Vector Borne disease Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
CM3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures	S	SH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Microbiology	
CM5.7	Describe food hygiene	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
CM7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	Microbiology
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	Microbiology, Pathology
CM14.1	Define and classify hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written/ Viva voce			Microbiology
CM14.2	Describe various methods of treatment of hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written/ Viva voce			Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
CM14.3	Describe laws related to hospital waste management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology
Dermatology, Venereology & Leprosy									
DR6.1	Describe the etiology pathogenesis and diagnostic features of pediculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR7.1	Describe the etiology microbiology pathogenesis and clinical presentations and diagnostic features of dermatophytes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR7.2	Identify candida species in fungal scrapings and KOH mount	S	SH	Y	DOAP session	Skill assessment			Microbiology
DR7.3	Describe the pharmacology and action of antifungal (systemic and topical) agents. Enumerate side effects of antifungal therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology ,Pharmacology
DR8.1	Describe the etiology microbiology pathogenesis and clinical presentations and diagnostic features of common viral infections of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR9.1	Classify, describe the epidemiology, etiology, microbiology, pathogenesis and clinical presentations and diagnostic features of Leprosy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology, Community Medicine
DR10.1	Identify and classify syphilis based on the presentation and clinical manifestations	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR10.2	Identify spirochete in a dark ground microscopy	S	SH	Y	DOAP session	Skill assessment			Microbiology
DR10.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
DR10.6	Describe the etiology, diagnostic and clinical features of non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
DR10.7	Identify and differentiate based on the clinical features non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR10.8	Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Microbiology
DR11.1	Describe the etiology, pathogenesis and clinical features of the dermatologic manifestations of HIV and its complications including opportunistic infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
DR11.2	Identify and distinguish the dermatologic manifestations of HIV its complications, opportunistic infections and adverse reactions	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR11.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for dermatologic lesions in HIV	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology Microbiology
DR12.7	Identify and distinguish fixed drug eruptions and Steven Johnson syndrome from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Pathology, Microbiology
DR14.1	Describe the etiology, pathogenesis and clinical precipitating features and classification of Urticaria and angioedema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology, Pathology
DR15.2	Identify staphylococcus on a gram stain	S	SH	Y	Bedside clinic	Skill assessment			Microbiology
DR15.3	Enumerate the indications and describe the pharmacology, indications and adverse reactions of topical and systemic drugs used in treatment of pyoderma	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	Microbiology, Pharmacology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
Dentistry									
DE1.2	Discuss the role of causative microorganisms in the aetio-pathogenesis of dental caries	K	KH	Y	Lecture, Small group discussion	Viva voce		Microbiology	
DE1.4	Discuss the role of dental caries as a focus of sepsis	K	KH	Y	Lecture, Small group discussion	Viva voce		Microbiology, General Medicine	
General Medicine									
IM1.3	Describe and discuss the aetiology, microbiology, pathogenies and clinical evolution of rheumatic fever, criteria, degree of rheumatic activity and rheumatic valvular heart disease and its complications including infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Microbiology	
IM1.9	Describe and discuss the clinical presentation and features, diagnosis, recognition and management of acute rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
IM1.22	Assist and demonstrate the proper technique in collecting specimen for blood culture	S	SH	Y	DOAP session	Skill assessment		Microbiology	
IM1.27	Describe and discuss the role of penicillin prophylaxis in the prevention of rheumatic heart disease	K	KH	Y	Bedside clinic, Small group discussion	Written		Microbiology, Pharmacology	
IM3.1	Define, discuss, describe and distinguish community acquired pneumonia, nosocomial pneumonia and aspiration pneumonia	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Human Anatomy, Pathology, Microbiology	
IM3.2	Discuss and describe the aetiology of various kinds of pneumonia and their microbiology depending on the setting and immune status of the host	K	K	Y	Lecture, Small group discussion	short note/ Viva voce		Microbiology	
IM3.3	Discuss and describe the pathogenesis, presentation, natural history and complications of pneumonia	K	KH	Y	Lecture , Small group discussion	short note/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM3.7	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum gram stain, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing and ABG	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	
IM3.10	Demonstrate the correct technique in a mannequin and interpret results of a blood culture	S	SH	Y	DOAP session	Skill assessment		Microbiology	
IM3.11	Describe and enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialised testing	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	
IM3.12	Select, describe and prescribe based on the most likely aetiology, an appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum	S	SH	Y	Bed side clinic, DOAP session	Skill Assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM3.13	Select, describe and prescribe based on culture and sensitivity appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum.	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM3.14	Perform and interpret a sputum gram stain and AFB	S	P	Y	DOAP session	Skill assessment		Microbiology	
IM3.19	Discuss, describe and enumerate the indications and communicate to patients on pneumococcal and influenza vaccines	S/C	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
IM4.1	Describe and discuss the febrile response and the influence of host immune status, risk factors and co-morbidities on the febrile response	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.2	Describe and discuss the influence of special populations on the febrile response including: the elderly, immune suppression, malignancy and neutropenia, HIV and travel	K	K	Y	Lecture, Small group discussion	Written		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM4.3	Discuss and describe the common causes, pathophysiology and manifestations of fever in various regions in India including bacterial, parasitic and viral causes (e.g. Dengue, Chikungunya, Typhus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM4.4	Describe and discuss the pathophysiology and manifestations of inflammatory causes of fever	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.5	Describe and discuss the pathophysiology and manifestations of malignant causes of fever including hematologic and lymph node malignancies	K	KH	Y	Lecture, Small group discussion	Written		Pathology, Microbiology	
IM4.6	Discuss and describe the pathophysiology and manifestations of malaria	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.8	Discuss and describe the pathophysiology, aetiology and clinical manifestations of fever of unknown origin (FUO) including in a normal host, neutropenic host, nosocomial host and a host with HIV disease	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.9	Elicit document and present a medical history that helps delineate the aetiology of fever that includes the evolution and pattern of fever, associated symptoms, immune status, comorbidities, risk factors, exposure through occupation, travel and environment and medication use	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Microbiology	
IM4.12	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH	Y	Bedside clinic, Skill assessment	Skill assessment		Pathology, Microbiology	
IM4.13	Perform and interpret a sputum gram stain	S	SH	Y	DOAP session	Log book documentation		Microbiology	
IM4.14	Perform and interpret a sputum AFB	S	SH	Y	DOAP session	Log book documentation		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM4.15	Perform and interpret a malarial smear	S	SH	Y	DOAP session	Log book documentation/ Skill assessment		Microbiology	
IM4.19	Assist in the collection of blood and wound cultures	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	
IM4.20	Interpret a PPD (Mantoux)	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	
IM4.23	Prescribe drugs for malaria based on the species identified, prevalence of drug resistance and national programs	S	SH	Y	Small group discussion	Skill assessment		Microbiology, Pharmacology	
IM4.26	Counsel the patient on malarial prevention	C	SH	Y	DOAP session	Skill assessment		Microbiology, Pharmacology	
IM5.4	Describe and discuss the epidemiology, microbiology, immunology and clinical evolution of infective (viral) hepatitis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
IM5.14	Outline a diagnostic approach to liver disease based on hyperbilirubinemia, liver function changes and hepatitis serology	S	SH	Y	Bedside clinic, Small group discussion	Viva voce/ Written		Pathology, Microbiology	
IM5.17	Enumerate the indications precautions and counsel patients on vaccination for hepatitis	K/C	SH	Y	written Small group discussion	Written/ Viva voce		Microbiology	
IM6.1	Describe and discuss the symptoms and signs of acute HIV seroconversion	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.2	Define and classify HIV AIDS based on the CDC criteria	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.3	Describe and discuss the relationship between CDC count and the risk of opportunistic infections	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.4	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related opportunistic infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM6.10	Choose and interpret appropriate diagnostic tests to diagnose and classify the severity of HIV-AIDS including specific tests of HIV, CDC	K	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment		Pathology, Microbiology	
IM6.13	Describe and enumerate the indications and side effects of drugs for bacterial, viral and other types of diarrhea	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
IM6.14	Perform and interpret a gram stain of the sputum	S	P	Y	DOAP session	Skill assessment		Microbiology	
IM6.17	Describe and discuss the principles of HAART, the classes of antiretroviral used, adverse reactions and interactions	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM6.18	Describe and discuss the principles and regimens used in post exposure prophylaxis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM6.19	Enumerate the indications of and discuss about prophylactic drugs used to prevent HIV related opportunistic infections	K/C	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
IM13.3	Describe the relationship between infection and cancers	K	K	Y	Lecture, Small group discussion	Short notes/ Viva voce		Pathology, Microbiology	General Surgery
IM15.15	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of acid peptic disease including Helicobacter pylori	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
IM16.1	Describe and discuss the aetiology of acute and chronic diarrhea including infectious and non-infectious causes	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
IM6.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for bacterial, viral and other types of diarrhea	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
IM16.8	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, and stool examination	S	SH	Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce		Microbiology, Pathology	
IM16.9	Identify common parasitic causes of diarrhea under the microscope in a stool specimen	S	SH	Y	DOAP session	Skill assessment		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM16.10	Identify Vibrio cholera in a hanging drop specimen	S	SH	Y	DOAP session	Skill Assessment		Microbiology	
IM16.11	Enumerate the indications for stool cultures and blood cultures in patients with acute diarrhea	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Microbiology	
IM16.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for parasitic causes of diarrhea	K	K	Y	Lectures, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
IM17.7	Enumerate the indications and describe the findings in the CSF in patients with meningitis	K	K	Y	Small group discussion, Bedside clinic	Skill Assessment		Microbiology, Pathology	
IM17.8	Demonstrate in a mannequin or equivalent the correct technique for performing a lumbar puncture	S	SH	Y	DOAP session	Skill assessment		Microbiology, Pathology	
IM17.9	Interpret the CSF findings when presented with various parameters of CSF fluid analysis	S	SH	Y	Small group discussion, Bedside clinic	Skill assessment		Microbiology, Pathology	
IM25.1	Describe and discuss the response and the influence of host immune status, risk factors and comorbidities on zoonotic disease (eg. Leptospirosis, Rabies) and non febrile infectious disease (eg. Tetanus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.2	Describe and discuss the common causes pathophysiology and manifestations of these diseases	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.3	Describe and discuss the pathophysiology and manifestations of these diseases	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
IM25.9	Assist in the collection of blood and other specimen cultures	S	SH	Y	DOAP session	Log book documentation		Microbiology	
IM25.11	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH	Y	DOAP session	Skill assessment		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
Pediatrics									
PE19.1	Explain the components of the Universal immunization Program and the sub National Immunization Programs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.2	Explain the epidemiology of Vaccine preventable diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.3	Vaccine description with regard to classification of vaccines, strain used, dose, route, schedule, risks, benefits and side effects, indications and contraindications	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.4	Define cold chain and discuss the methods of safe storage and handling of vaccines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.5	Discuss immunization in special situations – HIV positive children, immunodeficiency, preterm, organ transplants, those who received blood and blood products, splenectomised children, adolescents, travellers	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE21.1	Enumerate the etio-pathogenesis clinical features, complications and management of Urinary Tract infection in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE23.6	Discuss the etio-pathogenesis and clinical features and management of Infective endocarditis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology, Microbiology	
PE24.1	Discuss the etio-pathogenesis, classification, clinical presentation and management of diarrheal diseases in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
PE24.2	Discuss the classification and clinical presentation of various types of diarrheal dehydration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
PE24.5	Discuss the role of antibiotics, antispasmodics, anti-secretory drugs, probiotics, anti- emetics in acute diarrheal diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE24.6	Discuss the causes, clinical presentation and management of persistent diarrhoea in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE24.8	Discuss the causes, clinical presentation and management of dysentery in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
PE24.12	Perform and interpret stool examination including Hanging Drop	S	P	N	Bed side clinics, Skills lab	log book	2	Microbiology	
PE26.1	Discuss the etio-pathogenesis, clinical features and management of acute hepatitis in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.2	Discuss the etio-pathogenesis, clinical features and management of Fulminant Hepatic Failure in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.3	Discuss the etio-pathogenesis, clinical features and management of chronic liver diseases in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.12	Discuss the prevention of Hep B infection – Universal precautions and Immunisation	K	KH	Y	Lecture, Small group discussion activity	Written/ Viva voce		Microbiology	
PE30.1	Discuss the etio-pathogenesis, clinical features, complications, management and prevention of meningitis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.2	Distinguish bacterial, viral and tuberculous meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.13	Discuss the etio-pathogenesis, clinical features, management and prevention of Poliomyelitis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.21	Interpret and explain the findings in a CSF analysis	S	SH	Y	Small group discussion	Log book		Microbiology	Respiratory Medicine
PE34.1	Discuss the epidemiology, clinical features, clinical types, complications of Tuberculosis in Children and Adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE34.2	Discuss the various diagnostic tools for childhood tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine Pharmacology	Respiratory Medicine
PE34.6	Identify a BCG scar	S	P	Y	Bed side clinics, Skills lab	Skill Assessment	3	Microbiology	Respiratory Medicine
PE34.7	Interpret a Mantoux test	S	P	Y	Bed side clinics Skills lab	Skill assessment	3	Microbiology	Respiratory Medicine
PE34.9	Interpret blood tests in the context of laboratory evidence for tuberculosis	S	SH	N	Bed side clinics, Small group discussion	Log book		Microbiology	Respiratory Medicine
PE34.10	Discuss the various samples for demonstrating the organism eg Gastric Aspirate, Sputum, CSF, FNAC	K	KH	Y	Bed side clinics, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.11	Perform AFB staining	S	P	Y	DOAP session	Log book/journal	3	Microbiology	Respiratory Medicine
PE34.12	Enumerate the indications and Discuss the limitation of methods of culturing M.Tuberculi	K	KH	Y	Small group discussion	Written/ Viva voce		Microbiology	
General Surgery									
SU6.1	Define and describe the aetiology and pathogenesis of surgical infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
SU9.1	Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Microbiology, Pathology	
SU13.1	Describe the immunological basis of organ transplantation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU13.2	Discuss the Principles of immunosuppressive therapy.Enumerate Indications, describe surgical principles, management of organ transplantation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
SU14.1	Describe aseptic techniques, sterilization and disinfection	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU15.1	Describe Classification of hospital waste and appropriate methods of disposal	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU29.3	Describe the Clinical features, Investigations and principles of management of urinary tract infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
Orthopaedics									
OR3.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of Bone and Joint infections a) Acute Osteomyelitis b) Subacute osteomyelitis c) Acute Suppurative arthritis d) Septic arthritis & HIV infection e) Spirochaetal infection f) Skeletal Tuberculosis	K/S	K/KH/SH	Y	Lecture, Small group discussion, Video assisted lecture	Written/ Viva voce/ OSCE		Pathology, Microbiology	
Respiratory Medicine									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/ P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
CT1.2	Describe and discuss the microbiology of tubercle bacillus, mode of transmission, pathogenesis, clinical evolution and natural history of pulmonary and extra pulmonary forms (including lymph node, bone and CNS).	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
CT1.3	Discuss and describe the impact of confection with HIV and other co-morbid conditions like diabetes on the natural history of tuberculosis	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
CT1.4	Describe the epidemiology, the predisposing factors and microbial and therapeutic factors that determine resistance to drugs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Pharmacology	
CT1.7	Perform and interpret a PPD (Mantoux) and describe and discuss the indications and pitfalls of the test	S	P	Y	DOAP session	Maintenance of log book		Microbiology	
CT1.10	Perform and interpret an AFB stain	S	P	Y	DOAP session	Skill assessment	1	Microbiology	
CT1.12	Enumerate the indications for tests including: serology, special cultures and polymerase chain reaction and sensitivity testing	K	KH	Y	Small group discussion, Lecture	Short note/ Viva voce		Microbiology	
CT1.13	Describe and discuss the origins, indications, technique of administration, efficacy and complications of the BCG vaccine	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	

FORENSIC MEDICINE INCLUDING TOXICOLOGY (CODE: FM)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FORENSIC MEDICINE & TOXICOLOGY									
Topic: General Information		Number of competencies: (11)			Number of procedures that require certification: (NIL)				
FM1.1	Demonstrate knowledge of basics of Forensic Medicine like definitions of Forensic medicine, Clinical Forensic Medicine, Forensic Pathology, State Medicine, Legal Medicine and Medical Jurisprudence	K	KH	N	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.2	Describe history of Forensic Medicine	K	KH	N	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.3	Describe legal procedures including Criminal Procedure Code, Indian Penal Code, Indian Evidence Act, Civil and Criminal Cases, Inquest (Police Inquest and Magistrate's Inquest), Cognizable and Non-cognizable offences	K	KH	N	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.4	Describe Courts in India and their powers: Supreme Court, High Court, Sessions court, Magistrate's Court, Labour Court, Family Court, Executive Magistrate Court and Juvenile Justice Board	K	KH	N	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.5	Describe Court procedures including issue of Summons, conduct money, types of witnesses, recording of evidence oath, affirmation, examination in chief, cross examination, re-examination and court questions, recording of evidence & conduct of doctor in witness box	K	KH	N	Lecture, Small Group Discussion, Moot Court	Written/ Viva voce			
FM1.6	Describe Offenses in Court including Perjury; Court strictures vis-a-vis Medical Officer	K	KH	N	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.7	Describe Dying Declaration & Dying Deposition	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.8	Describe the latest decisions/notifications/resolutions/circulars/standing orders related to medico-legal practice issued by Courts/Government authorities etc.	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially - maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres. - maintenance of medico-legal register like accident register. - documents of issuance of wound certificate - documents of issuance of drunkenness certificate. - documents of issuance of sickness and fitness certificate. - documents for issuance of death certificate. -documents of Medical Certification of Cause of Death - Form Number4 and 4A - documents for estimation of age by physical, dental and radiological examination and issuance of certificate	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Pediatrics	
FM1.10	Select appropriate cause of death in a particular scenario by referring ICD 10 code	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce			
FM1.11	Write a correct cause of death certificate as per ICD 10 document	S	SH	Y	Lecture, Small Group Discussion	Written/ Viva voce			
Topic: Forensic Pathology Number of competencies: (35) Number of procedures that require certification : (NIL)									
FM2.1	Define, describe and discuss death and its types including somatic/clinical/cellular, molecular and brain-death, Cortical Death and Brainstem Death	K	KH	Y	Lecture/Small group discussion	Written/ Viva voce		Pathology	
FM2.2	Describe and discuss natural and unnatural deaths	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce		Pathology	
FM2.3	Describe and discuss issues related to sudden natural deaths	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce		Pathology	
FM2.4	Describe salient features of the Organ Transplantation and The Human Organ Transplant (Amendment) Act 2011 and discuss ethical issues regarding organ donation	K	KH	Y	Lecture/Small group discussion	Written/ Viva voce		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM2.5	Discuss moment of death, modes of death - coma, asphyxia and syncope	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce		Psychiatry, Pathology	
FM2.6	Discuss presumption of death and survivorship	K	KH	Y	Lecture, Small Group Discussion	Written/ Viva voce			
FM2.7	Describe and discuss suspended animation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM2.8	Describe and discuss postmortem changes including signs of death, cooling of body, post-mortem lividity, rigor mortis, cadaveric spasm, cold stiffening and heat stiffening	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.9	Describe putrefaction, mummification, adipocere and maceration	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.10	Discuss estimation of time since death	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.11	Describe and discuss autopsy procedures including post-mortem examination, different types of autopsies, aims and objectives of post-mortem examination	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE		Pathology	
FM2.12	Describe the legal requirements to conduct post-mortem examination and procedures to conduct medico-legal post-mortem examination	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE		Pathology	
FM2.13	Describe and discuss obscure autopsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
FM2.14	Describe and discuss examination of clothing, preservation of viscera on post-mortem examination for chemical analysis and other medico-legal purposes, post-mortem artefacts	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM 2.15	Describe special protocols for conduction of medico-legal autopsies in cases of death in custody or following violation of human rights as per National Human Rights Commission Guidelines	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.16	Describe and discuss examination of mutilated bodies or fragments, charred bones and bundle of bones	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ OSPE			
FM2.17	Describe and discuss exhumation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM2.18	Crime Scene Investigation:- Describe and discuss the objectives of crime scene visit, the duties & responsibilities of doctors on crime scene and the reconstruction of sequence of events after crime scene investigation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM2.19	Investigation of anaesthetic, operative deaths: Describe and discuss special protocols for conduction of autopsy and for collection, preservation and dispatch of related material evidences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Anesthesiology, General Surgery	
FM2.20	Mechanical asphyxia: Define, classify and describe asphyxia and medico-legal interpretation of post-mortem findings in asphyxial deaths	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.21	Mechanical asphyxia: Describe and discuss different types of hanging and strangulation including clinical findings, causes of death, post-mortem findings and medico-legal aspects of death due to hanging and strangulation including examination, preservation and dispatch of ligature material	K	KH	Y	Lecture/Small group discussion, Autopsy DOAP session	Written/ Viva voce/ OSPE			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM2.22	Mechanical asphyxia: Describe and discuss patho-physiology, clinical features, post-mortem findings and medico-legal aspects of traumatic asphyxia, obstruction of nose & mouth, suffocation and sexual asphyxia	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.23	Describe and discuss types, patho-physiology, clinical features, post-mortem findings and medico-legal aspects of drowning, diatom test and, gettler test.	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.24	Thermal deaths: Describe the clinical features, post-mortem finding and medicolegal aspects of injuries due to physical agents like heat (heat-hyper-pyrexia, heat stroke, sun stroke, heat exhaustion/prostration, heat cramps [miner's cramp] or cold (systemic and localized hypothermia, frostbite, trench foot, immersion foot)	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce			
FM2.25	Describe types of injuries, clinical features, patho-physiology, post-mortem findings and medico-legal aspects in cases of burns, scalds, lightening, electrocution and radiations	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE		General Surgery	
FM2.26	Describe and discuss clinical features, post-mortem findings and medico-legal aspects of death due to starvation and neglect	K	KH	Y	Lecture/Small group discussion	Written/ Viva voce			
FM2.27	Define and discuss infanticide, foeticide and stillbirth	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
FM2.28	Describe and discuss signs of intrauterine death, signs of live birth, viability of foetus, age determination of foetus, DOAP session of ossification centres, Hydrostatic test, Sudden Infants Death syndrome and Munchausen's syndrome by proxy	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/Viva voce / OSCE		Pediatrics, Human Anatomy	
FM2.29	Demonstrate respect to the directions of courts, while appearing as witness for recording of evidence under oath or affirmation, examination in chief, cross examination, re-examination and court questions, recording of evidence	A and C	SH	Y	Lecture, Small group discussion, Moot Court, Court visits, Role Play	Role Play during internal assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM2.30	Have knowledge/awareness of latest decisions/notifications/resolutions/circulars/standing orders related to medico-legal practice issued by Courts/Government authorities etc	A	K	Y	Lecture/Small group discussion	Written/ Viva voce			
FM2.31	Demonstrate ability to work in a team for conduction of medico-legal autopsies in cases of death following alleged negligence medical dowry death, death in custody or following violation of human rights as per National Human Rights Commission Guidelines on exhumation	A	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE			
FM2.32	Demonstrate ability to exchange information by verbal, or nonverbal communication to the peers, family members, law enforcing agency and judiciary	A and C	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		AETCOM	
FM2.33	Demonstrate ability to use local resources whenever required like in mass disaster situations	A and C	KH	Y	Lecture/Small group discussion	Written/ Viva voce		Community Medicine	
FM2.34	Demonstrate ability to use local resources whenever required like in mass disaster situations	A and C	KH	Y	Lecture/Small group discussion	Written/ Viva voce		General Medicine, AETCOM	
FM2.35	Demonstrate professionalism while conducting autopsy in medicolegal situations, interpretation of findings and making inference/opinion, collection preservation and dispatch of biological or trace evidences	A and C	KH/SH		Lecture, small group discussions, DOAP session	Written/ Viva voce/ OSPE		AETCOM	
Topic: Clinical Forensic Medicine Number of competencies:(33) Number of procedures that require certification:(NIL)									
FM3.1	IDENTIFICATION Define and describe Corpus Delicti, establishment of identity of living persons including race, Sex, religion, complexion, stature, age determination using morphology, teeth-eruption, decay, bite marks, bones-ossification centres, medico-legal aspects of age	K	KH	Y	Lecture, Small group discussion, Bedside clinic, DOAP session	Written/Viva voce/ skill assessment		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.2	IDENTIFICATION Describe and discuss identification of criminals, unknown persons, dead bodies from the remains-hairs, fibers, teeth, anthropometry, dactylography, foot prints, scars, tattoos, poroscopy and superimposition	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM3.3	Mechanical injuries and wounds: Define, describe and classify different types of mechanical injuries, abrasion, bruise, laceration, stab wound, incised wound, chop wound, defense wound, self-inflicted/fabricated wounds and their medico-legal aspects	K	KH	Y	Lecture, Small group discussion Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		General Surgery	
FM3.4	Mechanical injuries and wounds: Define injury, assault & hurt. Describe IPC pertaining to injuries	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
FM3.5	Mechanical injuries and wounds: Describe accidental, suicidal and homicidal injuries. Describe simple, grievous and dangerous injuries. Describe ante-mortem and post-mortem injuries	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce			
FM3.6	Mechanical injuries and wounds: Describe healing of injury and fracture of bones with its medico-legal importance	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		General Surgery	
FM3.7	Describe factors influencing infliction of injuries and healing, examination and certification of wounds and wound as a cause of death: Primary and Secondary	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	
FM3.8	Mechanical injuries and wounds: Describe and discuss different types of weapons including dangerous weapons and their examination	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	
FM3.9	Firearm injuries: Describe different types of firearms including structure and components. Along with description of ammunition propellant charge and mechanism of fire-arms, different types of cartridges and bullets and various terminology in relation of firearm – caliber, range, choking	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.10	Firearm injuries: Describe and discuss wound ballistics-different types of firearm injuries, blast injuries and their interpretation, preservation and dispatch of trace evidences in cases of firearm and blast injuries, various tests related to confirmation of use of firearms	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/Viva voce/ OSCE		General Surgery, Orthopaedics	
FM3.11	Regional Injuries: Describe and discuss regional injuries to head (Scalp wounds, fracture skull, intracranial haemorrhages, coup and contrecoup injuries), neck, chest, abdomen, limbs, genital organs, spinal cord and skeleton	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic or autopsy, DOAP session	Written/ Viva voce/ OSCE/OSPE		General Surgery, Orthopaedics	
FM3.12	Regional Injuries Describe and discuss injuries related to fall from height and vehicular injuries – Primary and Secondary impact, Secondary injuries, crush syndrome, railway spine	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic or autopsy, DOAP session	Written/ Viva voce/ OSCE/OSPE		General Surgery, Orthopaedics	
FM3.13	Describe different types of sexual offences. Describe various sections of IPC regarding rape including definition of rape (Section 375 IPC), Punishment for Rape (Section 376 IPC) and recent amendments notified till date	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce/ OSCE/OSPE		Obstetrics & Gynaecology	
FM3.14	SEXUAL OFFENCES Describe and discuss the examination of the victim of an alleged case of rape, and the preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Obstetrics & Gynaecology, Psychiatry	
FM3.15	SEXUAL OFFENCES Describe and discuss examination of accused and victim of sodomy, preparation of report, framing of opinion, preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Obstetrics & Gynaecology, Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.16	SEXUAL OFFENCES Describe and discuss adultery and unnatural sexual offences- sodomy, incest, lesbianism, buccal coitus, bestiality, indecent assault and preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Psychiatry	
FM3.17	Describe and discuss the sexual perversions fetishism, transvestism, voyeurism, sadism, necrophagia, masochism, exhibitionism, frotteurism, Necrophilia	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Psychiatry	
FM3.18	Describe anatomy of male and female genitalia, hymen and its types. Discuss the medico-legal importance of hymen. Define virginity, defloration, legitimacy and its medicolegal importance	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.19	Discuss the medicolegal aspects of pregnancy and delivery, signs of pregnancy, precipitate labour superfoetation, superfecundation and signs of recent and remote delivery in living and dead	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.20	Discuss disputed paternity and maternity	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.21	Discuss Pre-conception and Pre Natal Diagnostic Techniques (PC&PNDT) - Prohibition of Sex Selection Act 2003 and Domestic Violence Act 2005	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, AETCOM	
FM3.22	Define and discuss impotence, sterility, frigidity, sexual dysfunction, premature ejaculation. Discuss the causes of impotence and sterility in male and female	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Medicine	
FM3.23	Discuss Sterilization of male and female, artificial insemination, Test Tube Baby, surrogate mother, hormonal replacement therapy with respect to appropriate national and state laws	K	K/KH	Y	Lecture/Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.24	Discuss the relative importance of surgical methods of contraception (vasectomy and tubectomy) as methods of contraception in the National Family Planning Programme	K	K/KH	N	Lecture, Small group discussion	Written		Obstetrics & Gynaecology	
FM3.25	Discuss the major results of the National Family Health Survey	K	K/KH	N	Lecture	Written		Obstetrics & Gynaecology	
FM3.26	Discuss the national Guidelines for accreditation, supervision & regulation of ART Clinics in India	K	K/KH	Y	Lecture, Small group discussion	Written		Obstetrics & Gynaecology	
FM3.27	Define, classify and discuss abortion, methods of procuring MTP and criminal abortion and complication of abortion. MTP Act 1971	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, AETCOM	
FM3.28	Describe evidences of abortion - living and dead, duties of doctor in cases of abortion, investigations of death due to criminal abortion	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Pathology	
FM3.29	Describe and discuss child abuse and battered baby syndrome	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
FM3.30	Describe and discuss issues relating to torture, identification of injuries caused by torture and its sequelae, management of torture survivors	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM3.31	Torture and Human rights Describe and discuss guidelines and Protocols of National Human Rights Commission regarding torture	K	K/KH	N	Lecture/Small group discussion	Written/ Viva voce			
FM3.32	Demonstrate the professionalism while preparing reports in medicolegal situations, interpretation of findings and making inference/opinion, collection preservation and dispatch of biological or trace evidences	A and C	SH	Y	Lecture, Small group discussion	OSPE/Viva voce		AETCOM	
FM3.33	Should be able to demonstrate the professionalism while dealing with victims of torture and human right violations, sexual assaults- psychological consultation, rehabilitation	A and C	K/KH/S H	Y	Lecture/Small group discussion	Written/ Viva voce		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Medical Jurisprudence (Medical Law and ethics)		Number of competencies: (30)			Number of procedures that require certification : (NIL)				
FM4.1	Describe Medical Ethics and explain its historical emergence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.2	Describe the Code of Medical Ethics 2002 conduct, Etiquette and Ethics in medical practice and unethical practices & the dichotomy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.3	Describe the functions and role of Medical Council of India and State Medical Councils	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.4	Describe the Indian Medical Register	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.5	Rights/privileges of a medical practitioner, penal erasure, infamous conduct, disciplinary Committee, disciplinary procedures, warning notice and penal erasure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.6	Describe the Laws in Relation to medical practice and the duties of a medical practitioner towards patients and society	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.7	Describe and discuss the ethics related to HIV patients	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.8	Describe the Consumer Protection Act-1986 (Medical Indemnity Insurance, Civil Litigations and Compensations), Workman's Compensation Act & ESI Act	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.9	Describe the medico - legal issues in relation to family violence, violation of human rights, NHRC and doctors	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.10	Describe communication between doctors, public and media	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.11	Describe and discuss euthanasia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM4.12	Discuss legal and ethical issues in relation to stem cell research	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.13	Describe social aspects of Medico-legal cases with respect to victims of assault, rape, attempted suicide, homicide, domestic violence, dowry- related cases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.14	Describe & discuss the challenges in managing medico-legal cases including development of skills in relationship management – Human behaviour, communication skills, conflict resolution techniques	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.15	Describe the principles of handling pressure – definition, types, causes, sources and skills for managing the pressure while dealing with medico-legal cases by the doctor	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.16	Describe and discuss Bioethics	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.17	Describe and discuss ethical Principles: Respect for autonomy, non-maleficence, beneficence & justice	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.18	Describe and discuss medical negligence including civil and criminal negligence, contributory negligence, corporate negligence, vicarious liability, Res Ipsa Loquitor, prevention of medical negligence and defenses in medical negligence litigations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.19	Define Consent. Describe different types of consent and ingredients of informed consent. Describe the rules of consent and importance of consent in relation to age, emergency situation, mental illness and alcohol intoxication	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.20	Describe therapeutic privilege, Malingering, Therapeutic Misadventure, Professional Secrecy, Human Experimentation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM4.21	Describe Products liability and Medical Indemnity Insurance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.22	Explain Oath – Hippocrates, Charaka and Sushruta and procedure for administration of Oath.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.23	Describe the modified Declaration of Geneva and its relevance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.24	Enumerate rights, privileges and duties of a Registered Medical Practitioner. Discuss doctor- patient relationship: professional secrecy and privileged communication	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.25	Clinical research & Ethics Discuss human experimentation including clinical trials	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.26	Discuss the constitution and functions of ethical committees	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.27	Describe and discuss Ethical Guidelines for Biomedical Research on Human Subjects & Animals	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		AETCOM, Pharmacology	
FM4.28	Demonstrate respect to laws relating to medical practice and Ethical code of conduct prescribed by Medical Council of India and rules and regulations prescribed by it from time to time	A and C	SH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.29	Demonstrate ability to communicate appropriately with media, public and doctors	A and C	KH/SH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
FM4.30	Demonstrate ability to conduct research in pursuance to guidelines or research ethics	A and C	KH/SH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
Topic: Forensic Psychiatry Number of competencies: (06) Number of procedures that require certification: (NIL)									
FM5.1	Classify common mental illnesses including post-traumatic stress disorder (PTSD)	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM5.2	Define, classify and describe delusions, hallucinations, illusion, lucid interval and obsessions with exemplification	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.3	Describe Civil and criminal responsibilities of a mentally ill person	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.4	Differentiate between true insanity from feigned insanity	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.5	Describe & discuss Delirium tremens	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry, General Medicine	
FM5.6	Describe the Indian Mental Health Act, 1987 with special reference to admission, care and discharge of a mentally ill person	K	K/KH	N	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
Topic: Forensic Laboratory investigation in medical legal practice Number of competencies: (03) Number of procedures that require certification: (NIL)									
FM6.1	Describe different types of specimen and tissues to be collected both in the living and dead: Body fluids (blood, urine, semen, faeces saliva), Skin, Nails, tooth pulp, vaginal smear, viscera, skull, specimen for histo-pathological examination, blood grouping, HLA Typing and DNA Fingerprinting. Describe Locard's Exchange Principle	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
FM6.2	Describe the methods of sample collection, preservation, labelling, dispatch, and interpretation of reports	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM6.3	Demonstrate professionalism while sending the biological or trace evidences to Forensic Science laboratory, specifying the required tests to be carried out, objectives of preservation of evidences sent for examination, personal discussions on interpretation of findings	A and C	KH/SH	Y	Lecture, Small group discussions, DOAP sessions	Viva voce / OSPE			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Emerging technologies in Forensic Medicine Number of competencies: (01) Number of procedures that require certification:(NIL)									
FM7.1	Enumerate the indications and describe the principles and appropriate use for: - DNA profiling Facial reconstruction - Polygraph (Lie Detector) - Narcoanalysis, - Brain Mapping, - Digital autopsy, - Virtual Autopsy, - Imaging technologies	K	K/KH	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Toxicology: General Toxicology Number of competencies: (10) Number of procedures that require certification: (NIL)									
FM8.1	Describe the history of Toxicology	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.2	Define the terms Toxicology, Forensic Toxicology, Clinical Toxicology and poison	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.3	Describe the various types of poisons, Toxicokinetics, and Toxicodynamics and diagnosis of poisoning in living and dead	K	K/KH	Y	Lecture, Small group discussion	Written/viva voce		Pharmacology	
FM8.4	Describe the Laws in relations to poisons including NDPS Act, Medico-legal aspects of poisons	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
FM8.5	Describe Medico-legal autopsy in cases of poisoning including preservation and dispatch of viscera for chemical analysis	K	K/KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE		Pharmacology	
FM8.6	Describe the general symptoms, principles of diagnosis and management of common poisons encountered in India	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM8.7	Describe simple Bedside clinic tests to detect poison/drug in a patient's body fluids	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM8.8	Describe basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM8.9	Describe the procedure of intimation of suspicious cases or actual cases of foul play to the police, maintenance of records, preservation and despatch of relevant samples for laboratory analysis.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce			
FM8.10	Describe the general principles of Analytical Toxicology and give a brief description of analytical methods available for toxicological analysis: Chromatography – Thin Layer Chromatography, Gas Chromatography, Liquid Chromatography and Atomic Absorption Spectroscopy	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Toxicology : Chemical Toxicology Number of competencies: (06) Number of procedures that require certification : (NIL)									
FM9.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Caustics Inorganic – sulphuric, nitric, and hydrochloric acids; Organic- Carbolic Acid (phenol), Oxalic and acetylsalicylic acids	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.2	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Phosphorus, Iodine, Barium	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM9.3	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Arsenic, lead, mercury, copper, iron, cadmium and thallium	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.4	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ethanol, methanol, ethylene glycol	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.5	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Organophosphates, Carbamates, Organochlorines, Pyrethroids, Paraquat, Aluminium and Zinc phosphide	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.6	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ammonia, carbon monoxide, hydrogen cyanide & derivatives, methyl isocyanate, tear (riot control) gases	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
Topic: Toxicology : Pharmaceutical Toxicology Number of competencies: (01) Number of procedures that require certification : (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM10.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: i. Antipyretics – Paracetamol, Salicylates ii. Anti-Infectives (Common antibiotics – an overview) iii. Neuropsychotoxicology Barbiturates, benzodiazepins phenytoin, lithium, haloperidol, neuroleptics, tricyclics iv .Narcotic Analgesics, Anaesthetics, and Muscle Relaxants v. Cardiovascular Toxicology Cardiotoxic plants – oleander, odollam, aconite, digitalis vi.Gastro-Intestinal and Endocrinal Drugs – Insulin	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
Topic: Toxicology : Biotoxicology Number of competencies: (01) Number of procedures that require certification : (NIL)									
FM11.1	Describe features and management of Snake bite, scorpion sting, bee and wasp sting and spider bite	K	K/KH	Y	Lecture, Small group discussion, Autopsy	Written/ Viva voce		General Medicine	
Topic: Toxicology : Sociomedical Toxicology Number of competencies: (01) Number of procedures that require certification : (NIL)									
FM12.1	Describe features and management of abuse/poisoning with following camicals: Tobacco, cannabis, amphetamines, cocaine, hallucinogens, designer drugs & solvent	K	K/KH	Y	Lecture, Small group discussion, Autopsy	Written/ Viva voce		General Medicine	
Topic: Toxicology : Environmental Toxicology Number of competencies: (02) Number of procedures that require certification : (NIL)									
FM13.1	Describe toxic pollution of environment, its medico-legal aspects & toxic hazards of occupation and industry	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
FM13.2	Describe medico-legal aspects of poisoning in Workman's Compensation Act	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Skills in Forensic Medicine & Toxicology Number of competencies: (22) Number of procedures that require certification: (NIL)									
FM14.1	Examine and prepare Medico-legal report of an injured person with different etiologies in a simulated/ supervised environment	S	SH/P	Y	Bedside clinic (ward/ casualty), Small group discussion	Log book/ Skill station/ Viva voce / OSCE			
FM14.2	Demonstrate the correct technique of clinical examination in a suspected case of poisoning & prepare medico-legal report in a simulated/ supervised environment	S	SH	Y	Bedside clinic (ward/casualty), Small Group discussion	Log book/ Skill station/ Viva voce / OSCE		General Medicine	
FM14.3	Assist and demonstrate the proper technique in collecting, preserving and dispatch of the exhibits in a suspected case of poisoning, along with clinical examination	S	SH	Y	Bedside clinic, Small Group discussion, DOAP session	Skill lab/ Viva voce		General Medicine	
FM14.4	Conduct and prepare report of estimation of age of a person for medico-legal and other purposes & prepare medico-legal report in a simulated/ supervised environment	S	KH	Y	Small group discussion, Demonstration	Log book/ Skill station/ Viva voce / OSCE			
FM14.5	Conduct & prepare post-mortem examination report of varied etiologies (at least 15) in a simulated/ supervised environment	S	KH	Y	Small group discussion, Autopsy, DOAP session	Log book/ Skill station/ Viva voce / OSCE			
FM14.6	Demonstrate and interpret medico-legal aspects from examination of hair (human & animal) fibre, semen & other biological fluids	S	KH	Y	Small group discussion, Lecture	Log book/ Skill station/ Viva voce / OSCE			
FM14.7	Demonstrate & identify that a particular stain is blood and identify the species of its origin	S	KH	Y	Small group discussion, Lecture	Log book/Skill station/Viva voce		Pathology, Physiology	
FM14.8	Demonstrate the correct technique to perform and identify ABO & RH blood group of a person	S	SH	Y	Small group discussion, DOAP session	Log book/Skill station/Viva voce		Pathology, Physiology	
FM14.9	Demonstrate examination of & present an opinion after examination of skeletal remains in a simulated/ supervised environment	S	SH	Y	Small group discussion, DOAP session	Log book/Skill station/Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM14.10	Demonstrate ability to identify & prepare medicolegal inference from specimens obtained from various types of injuries e.g. contusion, abrasion, laceration, firearm wounds, burns, head injury and fracture of bone	S	KH	Y	Small group discussion, DOAP session	Log book/Skill station/ Viva voce/ OSPE			
FM14.11	To identify & describe weapons of medicolegal importance which are commonly used e.g. lathi, knife, kripa, axe, gadda, gupta, farsha, dagger, bhalla, razor & stick. Able to prepare report of the weapons brought by police and to give opinion regarding injuries present on the person as described in injury report/ PM report so as to connect weapon with the injuries. (Prepare injury report/ PM report must be provided to connect the weapon with the injuries)	S	KH	Y	Small group discussion, DOAP session	Log book/Skill station/ Viva voce/ OSPE			
FM14.12	Describe the contents and structure of bullet and cartridges used & to provide medico-legal interpretation from these	S	KH	Y	Small group discussion, DOAP session	Log book/ Skill station/Viva voce			
FM14.13	To estimate the age of foetus by post-mortem examination	S	KH	Y	Small group discussion, DOAP session	Theory/ Clinical assessment/ Viva voce			
FM14.14	To examine & prepare report of an alleged accused in rape/unnatural sexual offence in a simulated/ supervised environment	S	KH	Y	Small group discussion, DOAP session	Log book/ Skill station/ Viva voce / OSCE			
FM14.15	To examine & prepare medico-legal report of a victim of sexual offence/unnatural sexual offence in a simulated/ supervised environment	S	KH	Y	Small group discussion, DOAP session	Log book/ Skill station/ Viva voce / OSCE			
FM14.16	To examine & prepare medico-legal report of drunk person in a simulated/ supervised environment	S	KH	Y	Small group discussion, Bed side clinic, DOAP session	Log book/ Skill station/ Viva voce / OSCE			
FM14.17	To identify & draw medico-legal inference from common poisons e.g. dhatura, castor, cannabis, opium, aconite copper sulphate, pesticides compounds, marking nut, oleander, Nux vomica, abrus seeds, Snakes, capsicum, calotropis, lead compounds & tobacco.	S	KH	Y	Small group discussion, DOAP session	Log book/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM14.18	To examine & prepare medico-legal report of a person in police, judicial custody or referred by Court of Law and violation of human rights as requirement of NHRC, who has been brought for medical examination	S	KH	Y	Small group discussion, DOAP session	Log book/ Skill station/ Viva voce / OSCE			
FM14.19	To identify & prepare medico-legal inference from histo-pathological slides of Myocardial Infarction, pneumonitis, tuberculosis, brain infarct, liver cirrhosis, brain haemorrhage, bone fracture, Pulmonary oedema, brain oedema, soot particles, diatoms & wound healing	S	KH	Y	Small group discussion, DOAP session	Log book/ Skill station/ Viva voce			
FM14.20	To record and certify dying declaration in a simulated/ supervised environment	S	KH	Y	Small group discussion, Role Play, Bed side clinic DOAP session	Log book/ Skill station/ Viva voce /OSCE			
FM14.21	To collect, preserve, seal and dispatch exhibits for DNA-Finger printing using various formats of different laboratories.	S	KH	Y	Small group discussion, Lecture	Log book/ Skill station/Viva voce			
FM14.22	To give expert medical/ medico-legal evidence in Court of law	S	KH	Y	Small group discussion, Lecture, DOAP session, role play, Court Visits	Log book/ Viva voce/OSCE			
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Human Anatomy									
AN14.3	Describe the importance of ossification of lower end of femur & upper end of tibia	K	KH	Y	Lecture	Viva voce/Practicals		Forensic Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Pharmacology									
PH1.22	Describe drugs of abuse (dependence, addiction, stimulants, depressants, psychedelics, drugs used for criminal offences)	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	Forensic Medicine
PH5.7	Demonstrate an understanding of the legal and ethical aspects of prescribing drugs	K	KH	Y	Small group discussion	short note/Viva voce			Forensic Medicine
Radiodiagnosis									
RD1.13	Describe the components of the PC & PNDT act and its medicolegal implications	K	KH	Y	Lecture, Small group discussion			Obstetrics & Gynaecology, Forensic Medicine	
Psychiatry									
PS19.3	Describe and discuss the basic legal and ethical issues in psychiatry	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine AETCOM	
General Medicine									
IM20.1	Enumerate the poisonous snakes of your area and describe the distinguishing marks of each	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM20.2	Describe, demonstrate in a volunteer or a mannequin and educate (to other health care workers / patients) the correct initial management of patient with a snake bite in the field	S	SH	Y	DOAP session	Skill assessment/ Written/ Viva voce		Forensic Medicine	
IM20.3	Describe the initial approach to the stabilisation of the patient who presents with snake bite	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine	
IM20.4	Elicit and document and present an appropriate history, the circumstance, time, kind of snake, evolution of symptoms in a patient with snake bite	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Forensic Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM21.2	Enumerate the common plant poisons seen in your area and describe their toxicology, clinical features, prognosis and specific approach to detoxification	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.3	Enumerate the common corrosives used in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.4	Enumerate the commonly observed drug overdose in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.5	Observe and describe the functions and role of a poison center in suspected poisoning	S	KH	Y	DOAP session	document in log book		Forensic Medicine, Pharmacology	
IM21.6	Describe the medico legal aspects of suspected suicidal or homicidal poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Forensic Medicine, Pharmacology	
IM21.7	Counsel family members of a patient with suspected poisoning about the clinical and medico legal aspects with empathy	A/C	SH	Y	DOAP session	Skill assessment		Forensic Medicine, Pharmacology	
IM21.8	Enumerate the indications for psychiatric consultation and describe the precautions to be taken in a patient with suspected suicidal ideation / gesture	K	KH	Y	DOAP session	Skill assessment		Forensic Medicine, Psychiatry	
Obstetrics & Gynaecology									
OG1.3	Define and Discuss still birth and abortion	K	KH	Y	Lecture, Small group discussions	Short notes		Forensic Medicine	
OG9.2	Describe the steps and observe/ assist in the performance of an MTP evacuation	S	SH	Y	DOAP session, Bedside clinic	Viva voce		Forensic Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG20.1	Enumerate the indications and describe and discuss the legal aspects, indications, methods for first and second trimester MTP; complications and management of complications of medical termination of pregnancy	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Forensic Medicine	
OG20.2	In a simulated environment administer informed consent to a person wishing to undergo medical termination of pregnancy	S/A/C	SH	Y	DOAP session	Skill assessment		Forensic Medicine	
OG20.3	Discuss Pre-conception and Pre Natal Diagnostic Techniques (PC& PNDT) Act 1994 & its amendments	K	K/KH	Y	Lecture, Small group discussions	Written/ Viva voce		Forensic Medicine	
General Surgery									
SU8.1	Describe the principles of Ethics as it pertains to surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ skill assessment		Forensic Medicine, AETCOM	
SU8.2	Demonstrate Professionalism and empathy to the patient undergoing surgery	A/C	SH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Forensic Medicine, AETCOM	
SU8.3	Discuss Medico legal issues in surgical practice	A/C	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ skill assessment		Forensic Medicine, AETCOM	

List of contributing subject Experts

1. Human Anatomy

- Dr. Praveen R Singh, Professor & Head, Department of Anatomy, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Nachiket Shankar, Associate Professor, Department of Anatomy, St. John's Medical College & Hospital, Bangalore

2. Physiology

- Dr. Mario Vaz, Professor, Department of Physiology, St. John's Medical College & Hospital, Bangalore
- Dr. Jayashree Sengupta, Former Professor & Head, Department of Physiology, All India Institute of Medical Sciences, New Delhi.
- Dr Hasmukh D Shah, Professor & Head, Department of Physiology, Pramukhswami Medical College, Karamsad, Gujarat

3. Biochemistry

- Dr. Nibhriti Das, Professor, Department of Biochemistry, All India Institute of Medical Sciences, New Delhi
- Dr. S. P. Singh, Professor, Department of Biochemistry, Maharani Laxmi Bai Medical College, Jhansi, Uttar Pradesh
- Dr. Hitesh N Shah, Professor & Head, Department of Biochemistry, Pramukhswami Medical College, Karamsad, Gujarat

4. Pharmacology

- Dr. S. K. Maulik, Professor, Department of Pharmacology, All India Institute of Medical Sciences, New Delhi
- Dr. Vandana Roy, Professor, Department of Pharmacology, Maulana Azad Medical College, New Delhi

5. Pathology

- Dr. S. Datta Gupta, Professor, Department of Pathology, All India Institute of Medical Sciences, New Delhi
- Dr. Uma Chaturvedi, Professor, C-1303, Freedom Park Life, Sector- 57, Gurugram

6. Microbiology

- Dr. S. Geetalakshmi, Dean, Professor, Department of Microbiology, Stanley Medical College, Chennai, Tamil Nadu.
- Dr. Padma Srikanth, Professor, Department of Microbiology, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suman Singh, Professor, Department of Microbiology, Pramukhswami Medical College, Karamsad, Gujarat

7. Forensic Medicine & Toxicology

- Dr. Sanjeev Lalwani, Professor & Registrar (Academics), Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. T. D. Dogra, Former Director & Former Head, Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi; currently, Vice Chancellor, SGT University, Gurugram
- Col. Ravi Rautji, Professor & Head, Department of Forensic Medicine, Commanding Officer, Directorate General of Medical Services (Army), New Delhi
- Dr. S.D. Nanandkar, Professor & Head, Department of Forensic Medicine, Grant Government Medical College & Sir J.J. Group of Hospitals, Mumbai
- Dr. Indrajit L. Khandekar, In-charge CFMU and Associate Professor, Department of Forensic Medicine & Toxicology, MGIMS and Kasturba Hospital, Sewagram, Wardha.
- Dr. S. B. Punpale, Professor & Head, Department of Forensic Medicine, B. J. Medical College, Pune, Maharashtra

8. Community Medicine

- Dr. B. S. Garg, Professor & Head, Department of Community Medicine, Mahatama Gandhi Institute of Medical Sciences, Wardha, Sewagram, Maharashtra
- Dr. Umesh Kapil, Professor, Department of Community Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. Sanjay Zodpey, Director, Public Health Foundation of India, Isid Campus, 4 Institutional Area, Vasant Kunj, New Delhi
- Dr. Saudan Singh, Professor, Department of Community Medicine, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. Dinesh Kumar, Professor, Department of Community Medicine, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Pankaj B. Shah, Professor, Department of Community Medicine, Sri Ramachandra Medical College & Research Institute, Chennai.

9. General Medicine & Respiratory Medicine

- Dr. Krishna G. Seshadri, Visiting Professor, Endocrinology & Metabolism, Balaji Vidyapeeth, Puducherry
- Dr. M. K. Bhatnagar, Director Professor, Department of General Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Aparna Agarwal, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Anil Gurtoo, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi

10. Pediatrics

- Dr. Harish Chellani, Professor of Pediatrics, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. A. K. Dutta, Former Head, Kalawati Saran Children's Hospital, New Delhi

- Dr. S. Aneja, Director Professor & Head, Department of Pediatrics, Kalawati Saran Children's Hospital, New Delhi
- Dr. Latha Ravichandran, Professor, Deartment of Paediatrics, Sri Ramachandra Medical College & Research Institute, Chennai.

11. Psychiatry

- Dr. Rakesh Kumar Chadda, Department of Psychiatry, All India Institute of Medical Sciences, New Delhi
- Dr. N. M. Patil, Professor, Department of Psychiatry, Jawaharlal Nehru Medical College, Belagavi
- Dr. Rajesh Rastogi, Consultant & Head Department of Psychiatry, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi.
- Dr. Jagdish R Varma, Associate Professor, Department of Psychiatry, Pramukhswami Medical College, Karamsad, Gujarat

12. Dermatology, Venereology & Leprosy

- Dr. R. K. Gautam, Professor, Department of Dermatology, Venereology & Leprosy, Dr. Ram Manohar Lohia Hospital, New Delhi.
- Dr. Sujay Khandpur, Professor, Department of Dermatology, Venereology & Leprosy, All India Institute of Medical Sciences, New Delhi
- Dr. S. Murugan, Associate Professor of Dermatology, Sri Ramachandra Medical College & Research Institute, Chennai

13. Physical Medicine and Rehabilitation

- Dr. Sanjay Wadhwa, Professor, Department of Physical Medicine & Rehabilitation, All India Institute of Medical Sciences, New Delhi
- Dr. George Tharion, Head, Department of Physical Medicine & Rehabilitation, Christian Medical College, Vellore, Tamil Nadu

- Dr. Jagdish Menon, Professor & Head, Department of Orthopaedics and Dept. of Physical & Rehabilitative Medicine, Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry

14. General Surgery

- Dr. N Ananthakrishnan, 2A Vairam Enclave, Siddhananda Nagar, Pondicherry -605005.
- Dr. P. V. Chalam, Former Professor, Department of Surgery, Gandhi Medical College, Secunderabad, Telengana.
- Dr. Dinesh Bhatnagar, Professor, Department of General Surgery, North Delhi Municipal Corporation Medical College, Hindu Rao Hospital, Malka Ganj, Delhi

15. Ophthalmology

- Dr. Smita Singh, Professor, Department of Ophthalmology, Mahatma Gandhi Institute of Medical Sciences, Wardha

16. Oto-rhino-laryngology

- Dr. Achal Gulati, Director Professor, Department of ENT, Maulana Azad Medical College, New Delhi
- Dr. Ravi Kumar, Professor & Head, Department of ENT, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suma Mathew, Professor, Department of ENT, Christian Medical College, Vellore, Tamil Nadu

17. Obstetrics and Gynaecology

- Dr. Neerja Bhatla, Professor, Department of Obstetrics & Gynecology, All India Institute of Medical Sciences, New Delhi
- Dr. Annie Regi, Professor & Head, Department of Obstetrics & Gynecology, Christian Medical College, Vellore, Tamil Nadu
- Dr. Usha Vishwanath, Professor, Department of Obstetrics & Gynecology, Sri Ramachandra Medical College & Research Institute, Chennai

18. Orthopaedics

- Dr. P.V. Vijayaraghavan, Vice Chancellor & Professor of Orthopedics, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Raj Bahadur, Professor & Head, Department of Orthopaedics, Postgraduate Institute of Medical Sciences, Chandigarh
- Dr. SC. Goel, Professor, Department of Orthopaedics, Institute of Medical Sciences, BHU, Varanasi, Uttar Pradesh

19. Anaesthesiology

- Dr. Baljit Singh, Director Professor of Anaesthesia, G. B. Pant Hospital, Delhi
- Dr. Ramesh Keshav, Department of Anaesthesia, Dr. Ram Manohar Lohia Hospital, New Delhi
- Dr. Mridula Pawar, Consultant & Head, Department of Anaesthesia, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi

20. Radio- Diagnosis

- Dr. Kishor Taori (late), Professor & Head, Department of Radiodiagnosis, Government Medical College, Nagpur

21. Radiotherapy

- Dr. P. K. Jhulka, Dean & Professor of Radiotherapy, All India Institute of Medical Sciences, New Delhi.
- Dr. Shyam Shrivastava, Head, Department of Radiation, Tata Memorial Hospital, Mumbai

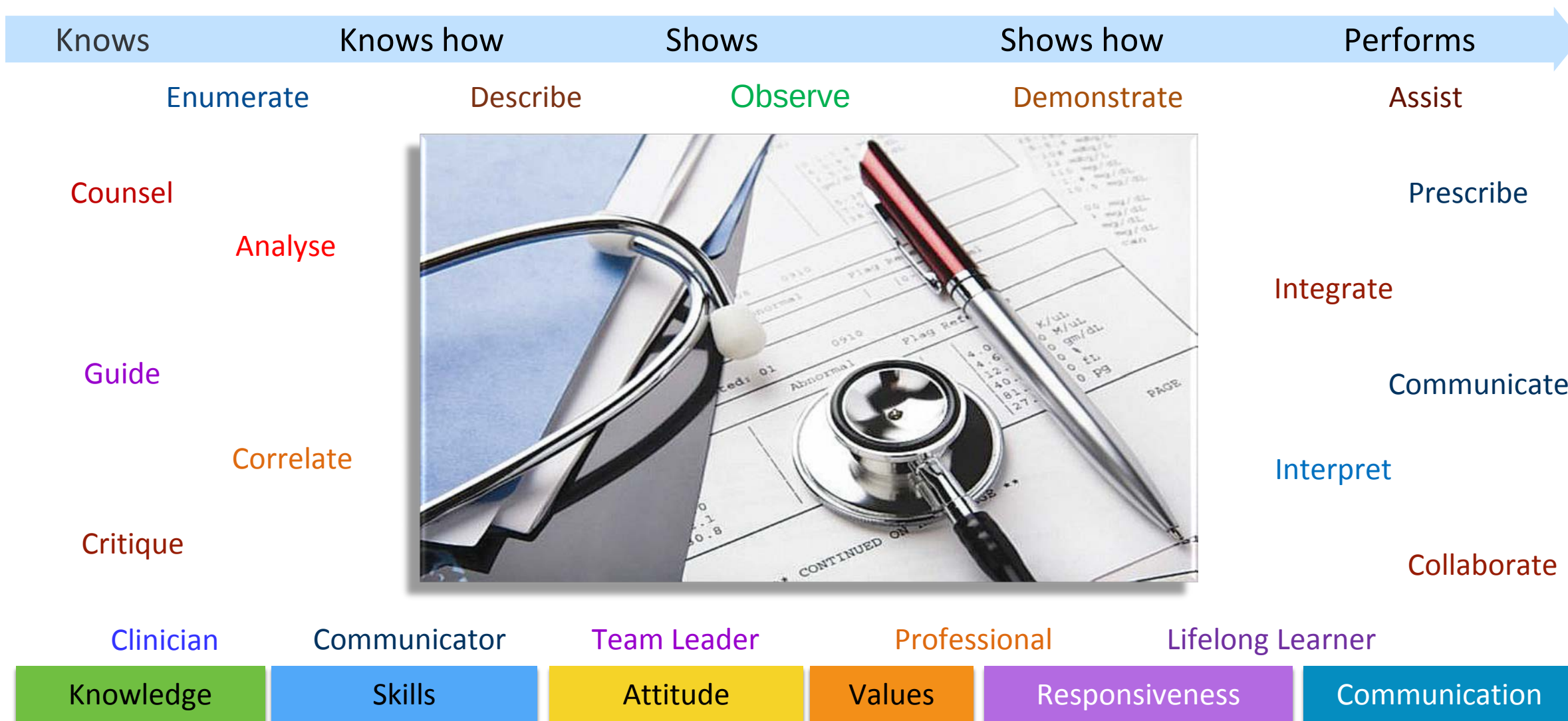
22. Dentistry

- Dr. Sridevi Padmanabhan, Professor, Department of Orthodontics, Faculty of Dental Sciences, Sri Ramchandra Medical College & Research Institute, Chennai



MEDICAL COUNCIL OF INDIA

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE



VOLUME-II (2018)

**COMPETENCY BASED UNDERGRADUATE CURRICULUM
FOR THE
INDIAN MEDICAL GRADUATE
2018**



**Medical Council of India
Pocket-14, Sector- 8, Dwarka
New Delhi 110 077**

दूरभाष / Phone : 25367033, 25367035, 25367036

फैक्स / Fax : 0091-11-25367024

ई-मेल / E-mail : mci@bol.net.in

वेबसाइट / Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,

फेस-1, नई दिल्ली-110077

Pocket- 14, Sector- 8, Dwarka,

Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड

BOARD OF GOVERNORS IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

FOREWORD

The Medical Council of India, aware of its responsibilities in creation of trained health manpower, has been engaged for the past few years in updating the medical curriculum for undergraduates and postgraduates to be in consonance with the changing health needs of the country. The task of updating and reorganization of the postgraduate curriculum in nearly 50 broad specialty disciplines to the competency pattern was accomplished by the Academic Cell of the Council with the help of subject experts and members of its Reconciliation Board and have been uploaded on the Council Website for use of the medical fraternity.

The Council visualized that the Indian Medical Graduate, at the end of the undergraduate training program, should be able to recognize "health for all" as a national goal and should be able to fulfill his/her societal obligations towards the realization of this goal. To fulfill the mandate of the undergraduate medical curriculum which is to produce a clinician, who understands and is able to provide preventive, promotive, curative, palliative and holistic care to his patients, the curriculum must enunciate clearly the competencies the student must be imparted and must have learnt, with clearly defined teaching-learning strategies and effective methods of assessment. The student should be trained to effectively communicate with patients and their relatives in a manner respectful of the patient's preferences, values, beliefs, confidentiality and privacy and to this purpose, a book on Attitude, Ethics & Communication was prepared by the Medical Council of India; the teaching faculty of medical colleges have been receiving training on this module since 2015.

दूरभाष / Phone : 25367033, 25367035,
25367036

फैक्स / Fax : 0091-11-25367024

ई-मेल / E-mail : mci@bol.net.in

वेबसाइट / Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,
फेस-1, नई दिल्ली-110077
Pocket- 14, Sector- 8, Dwarka,
Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड
BOARD OF GOVERNORS
IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

-2-

Competency based Medical Education provides an effective outcome-based strategy where various domains of teaching including teaching learning methods and assessment form the framework of competencies. Keeping this objective as the core ingredient, the Medical Council of India with the help of panel of experts drawn from across the country, laid the basic framework for the revised undergraduate medical curriculum. Over the past four years, a group of highly committed medical professionals working as Members of the MCI Reconciliation Board developed this information into a document incorporating appropriate teaching-learning strategies, tools and techniques of teaching, and modes of assessment which have culminated in the current competency based undergraduate curriculum. We understand that maximum efforts were made to encourage integrated teaching between traditional subject areas using a problem-based learning approach starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both the understanding and resolution of the problem. All efforts have been made to de-emphasize compartmentalisation of disciplines so as to achieve both horizontal and vertical integration in different phases. We are proud of their work accomplishment and congratulate them in the onerous task accomplished.

It gives us great satisfaction to state that the '**competency based undergraduate curriculum**' that has been prepared by the Medical Council of India would definitely serve the cause of medical education and in creating a competent Indian Medical Graduate to serve the community.

BOARD OF GOVERNORS

Contributors

1. Dr. Avinash Supe

Chairman, Reconciliation Board
Director (ME & MH) and Dean
Professor, Departments of G I Surgery and Medical Education
Seth GSMC and KEM Hospital
Mumbai - 400012

2. Dr. Krishna G. Seshadri

Member, Reconciliation Board
Member, Board of Management
Visiting Professor, Departments of Endocrinology, Diabetes and Medical Education
Sri Balaji Vidyapeeth
Puducherry - 607 403

3. Dr. Praveen Singh

Member, Reconciliation Board
Professor and Head, Departments of Anatomy and Medical Education
Convenor, MCI Nodal Centre
Pramukhswami Medical College
Karamsad, Gujarat - 388325

4. Dr. R. Sajith Kumar

Member, Reconciliation Board
Professor and Head, Departments of Infectious Disease and Medical Education
Convenor, MCI Nodal Centre
Government Medical College
Kottayam, Kerala - 686008

5. Dr. PV Chalam

Member, Reconciliation Board
Principal & Professor, Department of Surgery
Bhaskar Medical College, RR Dist.
Telangana - 500075

6. Dr. Subir K. Maulik

Member, Reconciliation Board
Professor, Department of Pharmacology
All India Institute of Medical Sciences
New Delhi-110029

7. Dr. Dinesh Kumar Badyal

Member, Reconciliation Board
Professor and Head, Department of Pharmacology
Professor, Department of Medical Education
Co-Convenor, MCI Nodal Centre
Christian Medical College
Ludhiana - 141008, Punjab

8. Dr. Alka Rawekar

Member, Reconciliation Board
Professor, Departments of Physiology and Medical Education
Head, Department of Physiology
Co-Convenor, MCI Nodal Centre
Jawaharlal Nehru Medical College
Sawangi (Meghe), Wardha - 442004, Maharashtra

9. Dr. Sunita Y Patil

Member, Reconciliation Board
Professor, Departments of Pathology and Medical Education
Resource Faculty, MCI Nodal Centre
Jawaharlal Nehru Medical College, KLE Academy of Higher Education & Research
Belagavi - 590 010, Karnataka

10. Dr. M. Rajalakshmi

Chief Consultant, Academic Cell
Medical Council of India
New Delhi-110077

Grant of Copyright to the Competency based Undergraduate Curriculum

The Competency based Undergraduate Curriculum for MBBS students prepared by subject experts was scrutinized by members of the Reconciliation Board and Academic Cell. The contents, embodied in this document, have received Copyright from the Register of Copyrights, Copyright Office, Government of India with Registration Number L-63913/2016.

Reproducing any part of this document in any form must be with the prior written permission of the competent authorities of the Medical Council of India.

The most recent version of this document may be obtained from the Medical Council of India.

How to cite this document: Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 1; pg --- (give page nos.)

Contents Vol. I

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Pre-clinical and Para-clinical subjects		
1.	Human Anatomy	AN	41
2.	Physiology	PY	92
3.	Biochemistry	BI	119
4.	Pharmacology	PH	136
5.	Pathology	PA	160
6.	Microbiology	MI	205
7.	Forensic Medicine & Toxicology	FM	228
(iv)	List of contributing subject experts		252

Contents Vol. II

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Medicine and Allied subjects		
1.	Community Medicine	CM	41
2.	General Medicine	IM	60
3.	Respiratory Medicine	CT	143
4.	Pediatrics	PE	150
5.	Psychiatry	PS	203
6.	Dermatology, Venereology & Leprosy	DR	219
7.	Physical Medicine & Rehabilitation	PM	229
(iv)	List of contributing subject experts		235

Contents Vol. III

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Surgery and Allied subjects		
1.	General Surgery	SU	41
2.	Ophthalmology	OP	79
3.	Otorhinolaryngology	EN	89
4.	Obstetrics & Gynaecology	OG	102
5.	Orthopedics	OR	130
6.	Anesthesiology	AS	145
7.	Radiodiagnosis	RD	154
8.	Radiotherapy	RT	160
9.	Dentistry	DE	163
(iv)	List of contributing subject experts		166

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE

Preamble

The new Graduate Medical Education Regulations attempts to stand on the shoulder of the contributions and the efforts of resource persons, teachers and students (past and present). It intends to take the learner to provide health care to the evolving needs of the nation and the world.

More than twenty years have passed since the existing Regulations on Graduate Medical Education, 1997 was notified, necessitating a relook at all aspects of the various components in the existing regulations and adapt them to the changing demography, socio-economic context, perceptions, values and expectations of stakeholders. Emerging health care issues particularly in the context of emerging diseases, impact of advances in science and technology and shorter distances on diseases and their management also need consideration. The strong and forward looking fundamentals enshrined in the Regulations on Graduate Medical Education, 1997 has made this job easier. A comparison between the 1997 Regulations and proposed Graduate Medical Education Regulations, 2018 will reveal that the 2018 Regulations have evolved from several key principles enshrined in the 1997 Regulations.

The thrust in the new regulations is continuation and evolution of thought in medical education making it more learner-centric, patient-centric, gender-sensitive, outcome -oriented and environment appropriate. The result is an outcome driven curriculum which conforms to global trends. Emphasis is made on alignment and integration of subjects both horizontally and vertically while respecting the strengths and necessity of subject-based instruction and assessment. This has necessitated a deviation from using “broad competencies”; instead, the reports have written end of phase subject (sub) competencies. These “sub-competencies” can be mapped to the global competencies in the Graduate Medical Education Regulations.

A significant attempt has been made in the outcome driven undergraduate curriculum to provide the orientation and the skills necessary for life-long learning to enable proper care of the patient. In particular, the curriculum provides for early clinical exposure, electives and longitudinal care. Skill acquisition is an indispensable component of the learning process in medicine. The curriculum reinforces this aspect by necessitating certification of certain essential skills. The experts and the writing group have factored in patient availability, access, consent, number of students in a class etc. in suggesting skill acquisition and assessment methods; use of skills labs, simulated and guided environments are encouraged. In the pre-internship years,- the highest level of skill acquisition is a show how (SH) in a simulated or guided environment; few skills require independent performance and certification - these are marked with P (for performance). Opportunity to ‘perform’ these skills will be available during internship.

The importance of ethical values, responsiveness to the needs of the patient and acquisition of communication skills is underscored by providing dedicated curriculum time in the form of a longitudinal program based on Attitude, Ethics and Communication (AETCOM) competencies. Great emphasis has been placed on collaborative and inter-disciplinary teamwork, professionalism, altruism and respect in professional relationships with due sensitivity to differences in thought, social and economic position and gender.

In addition to the above, an attempt has been made to allow students from diverse educational streams and backgrounds to transition appropriately through a Foundation Course. Dedicated time has been allotted for self directed learning and co-curricular activities.

Formative and internal assessments have been streamlined to achieve the objectives of the curriculum. Minor tweaks to the summative assessment have been made to reflect evolving thought and regulatory requirements. Curricular governance and support have been strengthened, increasing the involvement of Curriculum Committee and Medical Education Departments/Units.

The curriculum document in conjunction with the new Graduate Medical Education Regulations (GMR), when notified, must be seen as a “living document” that should evolve as stakeholder requirements and aspirations change. We hope that the current GMR does just that. The Medical Council of India is

grateful to all the teachers, subject experts, process experts, patients, students and trainees who have contributed through invaluable inputs, intellectual feedbacks and valuable time spent to make this possible. This document would not have been possible without the dedicated and unstinting intellectual, mental and time-consuming efforts of the members of the Reconciliation Board of the Council and the Academic Cell of MCI.

How to use the Manual

This Manual is intended for curriculum planners in an institution to design learning and assessment experiences for the MBBS student. Contents created by subject experts have been curated to provide guidance for the curriculum planners, leaders and teachers in medical schools. They must be used with reference to and in the context of the Regulations.

Section 1

Competencies for the Indian Medical Graduate

Section 1 - provides the global competencies extracted from the Graduate Medical Education Regulations, 2018. The global competencies identified as defining the roles of the **Indian Medical Graduate** are the broad competencies that the learner has to aspire to achieve; teachers and curriculum planners must ensure that the learning experiences are aligned to this Manual.

Extract from the Graduate Medical Education Regulations, 2018

2. Objectives of the Indian Graduate Medical Training Programme

The undergraduate medical education program is designed with a goal to create an “Indian Medical Graduate” (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a physician of first contact of the community while being globally relevant. To achieve this, the following national and institutional goals for the learner of the Indian Medical Graduate training program are hereby prescribed:-

2.1. National Goals

At the end of undergraduate program, the Indian Medical Graduate should be able to:

- (a) recognize “health for all” as a national goal and health right of all citizens and by undergoing training for medical profession fulfill his/her social obligations towards realization of this goal.
- (b) learn every aspect of National policies on health and devote herself/himself to its practical implementation.
- (c) achieve competence in practice of holistic medicine, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- (d) develop scientific temper, acquire educational experience for proficiency in profession and promote healthy living.
- (e) become exemplary citizen by observance of medical ethics and fulfilling social and professional obligations, so as to respond to national aspirations.

2.2. Institutional Goals

In consonance with the national goals, each medical institution should evolve institutional goals to define the kind of trained manpower (or professionals) they intend to produce. The Indian Medical Graduates coming out of a medical institute should:

- (a) be competent in diagnosis and management of common health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations.
- (b) be competent to practice preventive, promotive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
- (c) appreciate rationale for different therapeutic modalities, be familiar with the administration of the "essential drugs" and their common side effects.
- (d) be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude towards the patients in discharging one's professional responsibilities.

- (e) possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine, action research and documentation skills.
- (f) be familiar with the basic factors which are essential for the implementation of the National Health Programs including practical aspects of the following:
 - (i) Family Welfare and Maternal and Child Health (MCH);
 - (ii) Sanitation and water supply;
 - (iii) Prevention and control of communicable and non-communicable diseases;
 - (iv) Immunization;
 - (v) Health Education;
 - (vi) Indian Public Health Standards (IPHS) at various level of service delivery;
 - (vii) Bio-medical waste disposal; and
 - (viii) Organizational and or institutional arrangements.
- (g) acquire basic management skills in the area of human resources, materials and resource management related to health care delivery, General and hospital management, principal inventory skills and counseling.
- (h) be able to identify community health problems and learn to work to resolve these by designing, instituting corrective steps and evaluating outcome of such measures.
- (i) be able to work as a leading partner in health care teams and acquire proficiency in communication skills.
- (j) be competent to work in a variety of health care settings.
- (k) have personal characteristics and attitudes required for professional life including personal integrity, sense of responsibility and dependability and ability to relate to or show concern for other individuals.

All efforts must be made to equip the medical graduate to acquire the skills as detailed in Table 11 Certifiable procedural skills – A Comprehensive list of skills recommended as desirable for Bachelor of Medicine and Bachelor of Surgery (MBBS) – Indian Medical Graduate, as given in the Graduate Medical Education Regulations, 2018

2. 3. Goals for the Learner

In order to fulfil this goal, the Indian Medical Graduate must be able to function in the following roles appropriately and effectively:-

- 2.3.1. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
- 2.3.2. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
- 2.3.3. Communicator with patients, families, colleagues and community.
- 2.3.4. Lifelong learner committed to continuous improvement of skills and knowledge.
- 2.3.5. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession.

3. Competency Based Training Programme of the Indian Medical Graduate

Competency based learning would include designing and implementing medical education curriculum that focuses on the desired and observable ability in real life situations. In order to effectively fulfil the roles as listed in clause 2, the Indian Medical Graduate would have obtained the following set of competencies at the time of graduation:

3.1. *Clinician, who understands and provides preventive, promotive, curative, palliative and holistic care with compassion*

- 3.1.1 Demonstrate knowledge of normal human structure, function and development from a molecular, cellular, biologic, clinical, behavioral and social perspective.
- 3.1.2. Demonstrate knowledge of abnormal human structure, function and development from a molecular, cellular, biological, clinical, behavioural and social perspective.
- 3.1.3 Demonstrate knowledge of medico-legal, societal, ethical and humanitarian principles that influence health care.

- 3.1.4 Demonstrate knowledge of national and regional health care policies including the National Health Mission that incorporates National Rural Health Mission (NRHM) and National Urban Health Mission (NUHM), frameworks, economics and systems that influence health promotion, health care delivery, disease prevention, effectiveness, responsiveness, quality and patient safety.
- 3.1.5. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.6. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is contextual to gender, age, vulnerability, social and economic status, patient preferences, beliefs and values.
- 3.1.7 Demonstrate ability to perform a physical examination that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.8 Demonstrate ability to perform a physical examination that is contextual to gender, social and economic status, patient preferences and values.
- 3.1.9 Demonstrate effective clinical problem solving, judgment and ability to interpret and integrate available data in order to address patient problems, generate differential diagnoses and develop individualized management plans that include preventive, promotive and therapeutic goals.
- 3.1.10 Maintain accurate, clear and appropriate record of the patient in conformation with legal and administrative frameworks.
- 3.1.11 Demonstrate ability to choose the appropriate diagnostic tests and interpret these tests based on scientific validity, cost effectiveness and clinical context.
- 3.1.12 Demonstrate ability to prescribe and safely administer appropriate therapies including nutritional interventions, pharmacotherapy and interventions based on the principles of rational drug therapy, scientific validity, evidence and cost that conform to established national and regional health programmes and policies for the following:
 - i) Disease prevention,
 - ii) Health promotion and cure,
 - iii) Pain and distress alleviation, and
 - iv) Rehabilitation and palliation.

- 3.1.13 Demonstrate ability to provide a continuum of care at the primary and/or secondary level that addresses chronicity, mental and physical disability.
- 3.1.14 Demonstrate ability to appropriately identify and refer patients who may require specialized or advanced tertiary care.
- 3.1.15 Demonstrate familiarity with basic, clinical and translational research as it applies to the care of the patient.

3.2. *Leader and member of the health care team and system*

- 3.2.1 Work effectively and appropriately with colleagues in an inter-professional health care team respecting diversity of roles, responsibilities and competencies of other professionals.
- 3.2.2 Recognize and function effectively, responsibly and appropriately as a health care team leader in primary and secondary health care settings.
- 3.2.3 Educate and motivate other members of the team and work in a collaborative and collegial fashion that will help maximize the health care delivery potential of the team.
- 3.2.4 Access and utilize components of the health care system and health delivery in a manner that is appropriate, cost effective, fair and in compliance with the national health care priorities and policies, as well as be able to collect, analyze and utilize health data.
- 3.2.5 Participate appropriately and effectively in measures that will advance quality of health care and patient safety within the health care system.
- 3.2.6 Recognize and advocate health promotion, disease prevention and health care quality improvement through prevention and early recognition: in a) life style diseases and b) cancer, in collaboration with other members of the health care team.

3.3. *Communicator with patients, families, colleagues and community*

- 3.3.1 Demonstrate ability to communicate adequately, sensitively, effectively and respectfully with patients in a language that the patient understands and in a manner that will improve patient satisfaction and health care outcomes.
- 3.3.2 Demonstrate ability to establish professional relationships with patients and families that are positive, understanding, humane, ethical, empathetic, and trustworthy.
- 3.3.3 Demonstrate ability to communicate with patients in a manner respectful of patient's preferences, values, prior experience, beliefs, confidentiality and privacy.

3.3.4 Demonstrate ability to communicate with patients, colleagues and families in a manner that encourages participation and shared decision-making.

3.4. Lifelong learner committed to continuous improvement of skills and knowledge

3.4.1. Demonstrate ability to perform an objective self-assessment of knowledge and skills, continue learning, refine existing skills and acquire new skills.

3.4.2. Demonstrate ability to apply newly gained knowledge or skills to the care of the patient.

3.4.3. Demonstrate ability to introspect and utilize experiences, to enhance personal and professional growth and learning.

3.4.4. Demonstrate ability to search (including through electronic means), and critically reevaluate the medical literature and apply the information in the care of the patient.

3.4.5. Be able to identify and select an appropriate career pathway that is professionally rewarding and personally fulfilling.

3.5. *Professional who is committed to excellence, is ethical, responsive and accountable to patients, community and the profession*

3.5.1. Practice selflessness, integrity, responsibility, accountability and respect.

3.5.2. Respect and maintain professional boundaries between patients, colleagues and society.

3.5.3. Demonstrate ability to recognize and manage ethical and professional conflicts.

3.5.4. Abide by prescribed ethical and legal codes of conduct and practice.

3.5.5. Demonstrate a commitment to the growth of the medical profession as a whole.

Section 2

Subject-wise outcomes

Section 2 contains subject-wise outcomes so called “sub-competencies” that must be achieved at the end of instruction in that subject. These are organised in tables and have two parts. The core subject outcomes are in first part. The second part in the same document (titled Integration) contains outcomes/competencies in other subjects which have been identified by experts in those subjects as requiring alignment or integration with the core subject.

Outcomes (competencies) in each subject are grouped according to topics number-wise. It is important to review the individual outcomes (competencies) in the light of the topic outcomes as a whole. For each competency outlined - the learning domains (Knowledge, Skill, Attitude, Communication) are identified. The expected level of achievement in that subject is identified as – [knows (K), knows how (KH), shows how (SH), perform (P)]. As a rule, ‘perform’ indicates independent performance without supervision and is required rarely in the pre-internship period. The outcome is a core (Y - must achieve) or a non-core (N - desirable) outcome. Suggested learning and assessment methods (these are suggestions) and explanation of the terms used are given under the section “definitions used in this document”. The suggested number of times a skill must be performed independently for certification in the learner’s log book is also given. Last two columns indicate subjects within the same phase and other phases with which the topic can be taught - together - aligned (temporal coordination), shared, correlated or nested.

The number of topics and competencies in each subject are given below:

Topics & outcomes in Pre-clinical & Para-clinical subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Human Anatomy	82	409
2.	Physiology	11	137
3.	Biochemistry	11	89
4.	Pharmacology	05	85
5.	Pathology	36	182
6.	Microbiology	08	54
7.	Forensic Medicine & Toxicology	14	162
	Total	167	1118

Topics & outcomes in Medicine and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Community Medicine	20	107
2.	General Medicine	26	506
3.	Respiratory Medicine	02	47
4.	Pediatrics	35	406
5.	Psychiatry	19	117
6.	Dermatology, Venereology & Leprosy	18	73
7.	Physical Medicine & Rehabilitation	09	43
	Total	129	1299

Topics & outcomes in Surgery and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	General Surgery	30	133
2.	Ophthalmology	09	60
3.	Otorhinolaryngology	04	76
4.	Obstetrics & Gynaecology	38	126
5.	Orthopedics	14	39
6.	Anesthesiology	10	46
7.	Radiodiagnosis	01	13
8.	Radiotherapy	05	16
9.	Dentistry	05	23
	Total	116	532

Section 3

Sample topics used for alignment & integration

Section 3 contains a sample selection of topics that run across the phases which can be used for alignment and integration. These are suggestions and institutions can select their own set of topics which can run across phases.

It is important to design the curriculum with a view to ensure with several broad outcomes in mind: a) achievement of the broad competencies by the learner at the end of the MBBS program, b) retain the subject - wise character of learning and assessment and ensure that phase-wise subject outcomes are met and assessed, c) teaching topics that are similar together thereby reducing redundancy and allowing the learner to integrate the concept as the most important step in integration (alignment or temporal coordination) (see document on integration), and d) align learning and assessment experiences to the outcome and the level of achievement specified.

Understanding the competencies table

Understanding the competencies table

A	B	C	D	E	F	G	H	I	J
No.	Competencies	Domain	K/KH/SH/P	Core	Suggested Teaching Learning Method	Suggested Assessment method	No. required to certify (P)	Vertical Integration	Horizontal Integration
Physiology									
Summary Name of Topic: General Physiology Number of Competencies: (08)									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM25.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Unique number of the competency. First two alphabets represent the subject (see list); number following alphabet reflects topic number, following period is a running number.

Description of competency

Identifies the domain or domains addressed
 K - Knowledge
 S - Skill
 A - Attitude
 C - Communication

Identifies the level of competency required based on the Miller's pyramid
 K - Knows
 KH - Knows How
 S - Skill
 SH - Show How
 P - Perform independently

Identifies if the competency is core or desirable.
 Y indicates Core;
 N-non-core

Identifies the suggested learning method.
 DOAP - **D**emonstrate (by Student) **O**bserve, **A**ssist **P**erform)

Identifies the suggested assessment method
 Skill assessment - Clinics, Skills lab, Practicals etc.

no of times a skill needs to be done independently to be certified for independent performance;
 Rarely used in UG

Subject (s) in other phases with which the competency can be vertically integrated to increase relevance or improve basic understanding

Subject (s) in the same phase with which the competency can be horizontally integrated or aligned to allow a more wholesome understanding

***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning objectives from competencies

Deriving learning objectives from competencies

K	Knows	A knowledge attribute – Usually enumerates or describes
KH	Knows how	A higher level of knowledge – is able to discuss or analyse
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret / demonstrate a complex procedure requiring thought, knowledge and behaviour
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

PA42.1*	At the end of the session the phase II student must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the phase II student must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the phase II student must be able to describe the CSF features for a given etiology of meningitis accurately
PA42.4*	At the end of the session the phase II student must be able to identify the aetiology of meningitis correctly from a given set of CSF parameters

- Audience - who will do the behavior
- Behavior - What should the learner be able to do?
- Condition - Under what conditions should the learner be able to do it?
- Degree – How well must it be done

Objective: Statement of what a learner should be able to do at the end of a specific learning experience
***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning methods from competencies

Deriving learning methods from competencies

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the Phase II student must be able to enumerate the most common causes of meningitis correctly	Lecture	small group discussion
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Related objectives can be combined into one teaching session	
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given etiologic of meningitis accurately		
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	small group discussion, practical session	

*Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents

Deriving assessment methods from competencies

Deriving assessment methods from competencies-1

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the ~~Phase II student~~ must be able to enumerate the most common causes of meningitis correctly	Short note or part of structured essay: Enumerate 5 causes of meningitis based on their prevalence in India
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Short note or part of structured essay: Enumerate the components tested in a CSF analysis
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given aetiology of meningitis accurately	Short note or part of structured essay: Describe the CSF findings that are characteristic of tuberculous meningitis
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	Short note / part of the structured essay/ Skill station/ Viva voce Review the CSF findings in the following patient and identify (write or vocalise) the most likely etiology

* Numbers given are for illustrative purposes only and should not be compared with numbers in the curriculum document

Deriving assessment methods from competencies-2

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

MI2.4*	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia.	K	KH	Y	Didactic Small group discussion	Written/ Viva voce	Medicine	Pathology

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

MI2.1*	Enumerate the common microbial agents causing anaemia
MI2.2*	Describe the morphology of agent (1,2 etc)
MI2.3*	Describe the mode of infection of agent in humans
MI2.4*	Discuss the pathogenesis of anemia caused by agent
MI2.5*	Describe the clinical course of infection by agent
MI2.6*	Enumerate the diagnostic tests to identify the aetiology of agent as a cause of anemia
MI2.7*	Discuss the methods to prevent infection by agent
MI2.8*	Describe the treatment of infection by agent

Integrate concept - not necessarily teachers
Plan session with teachers of both subjects -teachers from both subjects usually not needed. Ensure redundancy and duplication by reviewing both subjects



Horizontally aligned and integrated with pathology

Vertically integrated with General Medicine



Integrate concept - not necessarily teachers Plan session with teachers from both phases. Make a decision on how much of the information needs to be brought down to this phase to make it relevant. Consider how a competency can ascend over phases: for eg. - can be at a KH -(know how) in phase II but becomes SH in phase III. For vertical integration with clinical subjects, use of a case to link the concept (a well written paper, case is sufficient). Using teachers from both phases is rarely required

The concept of integration

Concept of integration used in the Manual

Integration is a learning experience that allows the learner to perceive relationships from blocks of knowledge and develop a unified view of its basis and its application. The GMR 2018 applies these principles to the extent that will retain the strengths of silo - based education and assessment while providing experiences that will allow learners to integrate concepts.

Keeping this in mind, the Regulations recommend temporal coordination as described by Harden (called alignment in this document) as the major method to be followed allowing similar topics in different subjects to be thought separately but during the same time frame (Figure 1a).

In a small proportion - not to exceed 20% of the total curriculum an attempt can be made to Share (Figure 1b) topics or Correlate (Figure 1c) topics by using an integration session. The integration session most preferred will be a case based discussion in an appropriate format ensuring that elements in the same phase (horizontal) and from other phases are addressed. Care must be taken to ensure that achievement phase - based objectives are given primacy - the integrative elements from other phases are used only to provide adequate recall and understand the clinical application of concepts. It must be emphasized that integration does not necessarily require multiple teachers in each class. Experts from each phase and subject may be involved in the lesson planning but not it in its delivery unless deemed necessary.

As much as possible the necessary correlates from other phases must also be introduced while discussing a topic in a given subject - Nesting (Figure 1d) (Harden). Topics that cannot be aligned and integrated must be provided adequate time in the curriculum throughout the year.

Assessment will continue to be subject based. However, efforts must be made to ensure that phase appropriate correlates are tested to determine if the learner has internalized and integrated the concept and its application.

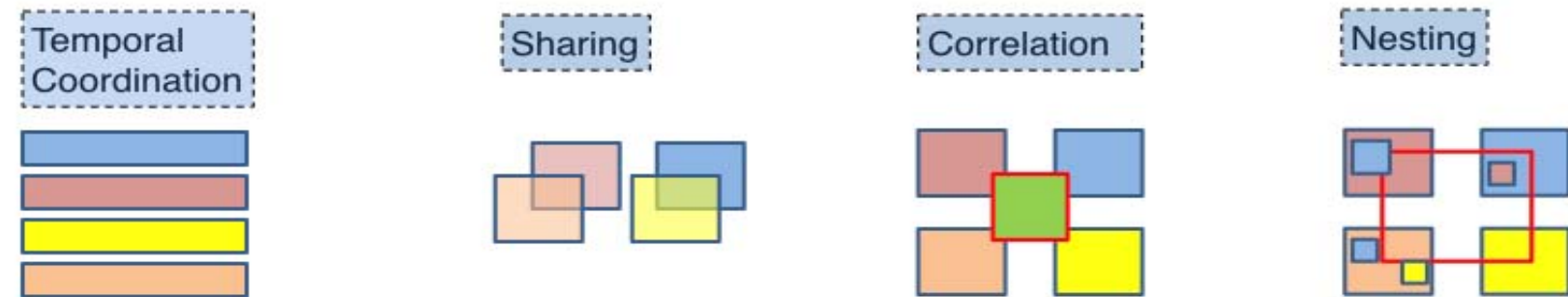


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement a teaching program c. Correlation: the emphasis remains on disciplines or subjects with subject-based courses taking up most of the curriculum time. Within this framework, an integrated teaching session or course is introduced in addition to the subject-based teaching (green box with red border) d. Nesting: the teacher targets, within a subject-based course, skills relating to other subjects. Adapted from Harden R Med Edu 2000. 34; 551

Definitions used in the Manual

- 1. Goal:** A projected state of affairs that a person or system plans to achieve.
In other words: Where do you want to go? or What do you want to become?
- 2. Competency:** The habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served.
In other words: What should you have? or What should have changed?
- 3. Objective:** Statement of what a learner should be able to do at the end of a specific learning experience.
In other words: What the Indian Medical Graduate should know, do, or behave.

Action Verbs used in this manual

Knowledge	Skill	Attitude/communicate
Enumerate	Identify	Counsel
List	Demonstrate	Inform
Describe	Perform under supervision	Demonstrate understanding of
Discuss	Perform independently	
Differentiate	Document	
Define	Present	
Classify	Record	
Choose	Interpret	
Elicit		
Report		

Note:

1. Specified essential competencies only will be required to be performed independently at the end of the final year MBBS.
2. The word ‘perform’ or ‘do’ is used ONLY if the task has to be done on patients or in laboratory practical in the pre/para- clinical phases.
3. Most tasks that require performance during undergraduate years will be performed under supervision.
4. If a certification to perform independently has been done, then the number of times the task has to be performed under supervision will be indicated in the last column.

Explanation of terms used in this manual

Lecture	Any instructional large group method including traditional lecture and interactive lecture
Small group discussion	Any instructional method involving small groups of students in an appropriate learning context
DOAP (Demonstration- Observation - Assistance - Performance)	A practical session that allows the student to observe a demonstration, assist the performer, perform in a simulated environment, perform under supervision or perform independently
Skill assessment	A session that assesses the skill of the student including those in the practical laboratory, skills lab, skills station that uses mannequins/ paper case/simulated patients/real patients as the context demands
Core	A competency that is necessary in order to complete the requirements of the subject (traditional must know)
Non-Core	A competency that is optional in order to complete the requirements of the subject (traditional nice (good) to know/ desirable to know)
National Guidelines	Health programs as relevant to the competency that are part of the National Health Program

Domains of learning

K	Knowledge
S	Skill
A	Attitude
C	Communication

Levels of competency

K	Knows	A knowledge attribute - Usually enumerates or describes
KH	Knows how	A higher level of knowledge - is able to discuss or analyze
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret/ demonstrate a complex procedure requiring thought, knowledge and behavior
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Note:

In the table of competency - the highest level of competency acquired is specified and implies that the lower levels have been acquired already. Therefore, when a student is able to SH - Show how - an informed consent is obtained - it is presumed that the preceding steps - the knowledge, the analytical skills, the skill of communicating have all been obtained.

It may also be noted that attainment of the highest level of competency may be obtained through steps spread over several subjects or phases and not necessarily in the subject or the phase in which the competency has been identified.

Volume II

Competency based Undergraduate Curriculum

in

Medicine and Allied subjects

COMMUNITY MEDICINE (CODE: CM)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
COMMUNITY MEDICINE									
Topic: Concept of Health and Disease Number of competencies: (10) Number of procedures that require certification:(NIL)									
CM1.1	Define and describe the concept of Public Health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.2	Define health; describe the concept of holistic health including concept of spiritual health and the relativeness & determinants of health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.3	Describe the characteristics of agent, host and environmental factors in health and disease and the multi factorial etiology of disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.4	Describe and discuss the natural history of disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.5	Describe the application of interventions at various levels of prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.6	Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC)	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.7	Enumerate and describe health indicators	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.8	Describe the Demographic profile of India and discuss its impact on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.9	Demonstrate the role of effective Communication skills in health in a simulated environment	S	SH	Y	DOAP sessions	Skill Assessment		AETCOM	
CM1.10	Demonstrate the important aspects of the doctor patient relationship in a simulated environment	S	SH	Y	DOAP sessions	Skill Assessment		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Relationship of social and behavioural to health and disease Number of competencies: (5) Number of procedures that require certification: (NIL)									
CM2.1	Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community	S	SH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce/ Skill assessment			
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status	S	SH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce/ Skill assessment			
CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior	S	SH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce/ Skill assessment			
CM2.4	Describe social psychology, community behaviour and community relationship and their impact on health and disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM2.5	Describe poverty and social security measures and its relationship to health and disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
Topic: Environmental Health Problems Number of competencies: (8) Number of procedures that require certification: (NIL)									
CM3.1	Describe the health hazards of air, water, noise, radiation and pollution	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, ENT	
CM3.2	Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce			
CM3.3	Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/ diarrheal diseases	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Microbiology, General Medicine, Pediatrics	
CM3.4	Describe the concept of solid waste, human excreta and sewage disposal	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM3.5	Describe the standards of housing and the effect of housing on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM3.6	Describe the role of vectors in the causation of diseases. Also discuss National Vector Borne disease Control Program	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Microbiology	
CM3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures	S	SH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce/ Skill assessment		Microbiology	
CM3.8	Describe the mode of action, application cycle of commonly used insecticides and rodenticides	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pharmacology	
Topic: Principles of health promotion and education Number of competencies: (3) Number of procedures that require certification: (NIL)									
CM4.1	Describe various methods of health education with their advantages and limitations	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM4.2	Describe the methods of organizing health promotion and education and counselling activities at individual family and community settings	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM4.3	Demonstrate and describe the steps in evaluation of health promotion and education program	S	SH	Y	Small group session, DOAP session	Written / Viva voce/ Skill assessment			
Topic: Nutrition Number of competencies: (08) Number of procedures that require certification: (NIL)									
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.2	Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method	S	SH	Y	DOAP sessions	Skill Assessment		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment	S	SH	Y	DOAP sessions	Skill Assessment		General Medicine, Pediatrics	
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	
CM5.7	Describe food hygiene	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
CM5.8	Describe and discuss the importance and methods of food fortification and effects of additives and adulteration	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	
Topic: Basic statistics and its applications Number of competencies: (04) Number of procedures that require certification: (NIL)									
CM6.1	Formulate a research question for a study	K	KH	Y	Small group discussion, Lecture, DOAP sessions	Written / Viva voce/ Skill assessment		General Medicine, Pediatrics	
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	S	SH	Y	Small group, Lecture, DOAP sessions	Written / Viva voce/ Skill assessment		General Medicine, Pediatrics	
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written / Viva voce/ Skill assessment		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM6.4	Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written / Viva voce/ Skill assessment		General Medicine, Pediatrics	
Topic: Epidemiology Number of competencies: (09) Number of procedures that require certification: (NIL)									
CM7.1	Define Epidemiology and describe and enumerate the principles, concepts and uses	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.2	Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and non-communicable diseases	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.3	Enumerate, describe and discuss the sources of epidemiological data	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.4	Define, calculate and interpret morbidity and mortality indicators based on given set of data	S	SH	Y	Small group, DOAP sessions	Written/ Skill assessment		General Medicine	
CM7.5	Enumerate, define, describe and discuss epidemiological study designs	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.6	Enumerate and evaluate the need of screening tests	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	
CM7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	Microbiology
CM7.8	Describe the principles of association, causation and biases in epidemiological studies	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.9	Describe and demonstrate the application of computers in epidemiology	S	KH	Y	Small group discussion, DOAP sessions	Written			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Epidemiology of communicable and non- communicable diseases Number of competencies:(7) Number of procedures that require certification:(NIL)									
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	Microbiology, Pathology
CM8.2	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM8.3	Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.4	Describe the principles and enumerate the measures to control a disease epidemic	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.5	Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.6	Educate and train health workers in disease surveillance, control & treatment and health education	S	SH	Y	DOAP sessions	Skill assessment			
CM8.7	Describe the principles of management of information systems	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
Topic: Demography and vital statistics Number of competencies: (07) Number of procedures that require certification: (NIL)									
CM9.1	Define and describe the principles of Demography, Demographic cycle, Vital statistics	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates	S	SH	Y	Lecture, Small group discussion, DOAP sessions	Skill assessment		Obstetrics & Gynaecology, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM9.3	Enumerate and describe the causes of declining sex ratio and its social and health implications	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM9.4	Enumerate and describe the causes and consequences of population explosion and population dynamics of India.	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM9.5	Describe the methods of population control	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology	
CM9.6	Describe the National Population Policy	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM9.7	Enumerate the sources of vital statistics including census, SRS, NFHS, NSSO etc	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
Topic: Reproductive maternal and child health Number of competencies:(09) Number of procedures that require certification: (NIL)									
CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.2	Enumerate and describe the methods of screening high risk groups and common health problems	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics, Obstetrics & Gynaecology	
CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics, Obstetrics & Gynaecology	
CM10.4	Describe the reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.5	Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics	
CM10.6	Enumerate and describe various family planning methods, their advantages and shortcomings	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM10.7	Enumerate and describe the basis and principles of the Family Welfare Program including the organization, technical and operational aspects	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.8	Describe the physiology, clinical management and principles of adolescent health including ARSH	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.9	Describe and discuss gender issues and women empowerment	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
Topic: Occupational Health Number of competencies: (05) Number of procedures that require certification: (NIL)									
CM11.1	Enumerate and describe the presenting features of patients with occupational illness including agriculture	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.2	Describe the role, benefits and functioning of the employees state insurance scheme	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.3	Enumerate and describe specific occupational health hazards, their risk factors and preventive measures	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.4	Describe the principles of ergonomics in health preservation	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.5	Describe occupational disorders of health professionals and their prevention & management	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
Topic: Geriatric services Number of competencies: (04) Number of procedures that require certification: (NIL)									
CM12.1	Define and describe the concept of Geriatric services	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM12.2	Describe health problems of aged population	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM12.3	Describe the prevention of health problems of aged population	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CM12.4	Describe National program for elderly	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
Topic: Disaster Management Number of competencies: (04) Number of procedures that require certification: (NIL)									
CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.3	Describe man made disasters in the world and in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.4	Describe the details of the National Disaster management Authority	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
Topic: Hospital waste management Number of competencies: (03) Number of procedures that require certification: (NIL)									
CM14.1	Define and classify hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written / Viva voce			Microbiology
CM14.2	Describe various methods of treatment of hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written / Viva voce			Microbiology
CM14.3	Describe laws related to hospital waste management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
Topic: Mental Health Number of competencies: (03) Number of procedures that require certification: (NIL)									
CM15.1	Define and describe the concept of mental Health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM15.2	Describe warning signals of mental health disorder	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM15.3	Describe National Mental Health program	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Health planning and management Number of competencies: (04) Number of procedures that require certification: (NIL)									
CM16.1	Define and describe the concept of Health planning	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM16.2	Describe planning cycle	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM16.3	Describe Health management techniques	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM16.4	Describe health planning in India and National policies related to health and health planning	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
Topic: Health care of the communitiy Number of competencies:(05) Number of procedures that require certification: (NIL)									
CM17.1	Define and describe the concept of health care to community	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.2	Describe community diagnosis	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.3	Describe primary health care, its components and principles	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.4	Describe National policies related to health and health planning and millennium development goals	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.5	Describe health care delivery in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
Topic: International Health Number of competencies: (2) Number of procedures that require certionat(NIL)									
CM18.1	Define and describe the concept of International health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM18.2	Describe roles of various international health agencies	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Essential Medicine		Number of competencies: (3)			Number of procedures that require certification: (NIL)				
CM19.1	Define and describe the concept of Essential Medicine List (EML)	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Pharmacology
CM19.2	Describe roles of essential medicine in primary health care	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Pharmacology
CM19.3	Describe counterfeit medicine and its prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Pharmacology
Topic: Recent advances in Community Medicine		Number of competencies: (04)			Number of procedures that require certification: (NIL)				
CM20.1	List important public health events of last five years	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM20.2	Describe various issues during outbreaks and their prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM 20.3	Describe any event important to Health of the Community	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM 20.4	Demonstrate awareness about laws pertaining to practice of medicine such as Clinical establishment Act and Human Organ Transplantation Act and its implications	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Intergration									
Physiology									
PY9.6	Enumerate the contraceptive methods for male and female. Discuss their advantages & disadvantages	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Biochemistry									
BI8.5	Summarize the nutritional importance of commonly used items of food including fruits and vegetables.(macro-molecules & its importance)	K	KH	Y	Lectures, Small group discussions	Written/ Viva voce		Community Medicine, General Medicine, Pediatrics	
Pathology									
PA12.1	Enumerate and describe the pathogenesis of disorders caused by air pollution, tobacco and alcohol	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Community Medicine
PA26.5	Define and describe the etiology, types, exposure, environmental influence, pathogenesis, stages, morphology, microscopic appearance and complications of Occupational lung disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Community Medicine	
PA26.7	Define and describe the etiology, types, exposure, genetics environmental influence, pathogenesis, morphology, microscopic appearance and complications of mesothelioma	K	KH	N	Lecture, Small group discussion	Written / Viva voce		General Medicine, Community Medicine	
Microbiology									
MI1.3	Describe the epidemiological basis of common infectious diseases	K	KH	Y	Lecture	Written/ Viva voce			Community Medicine
MI8.4	Describe the etiologic agents of emerging Infectious diseases. Discuss the clinical course and diagnosis	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Community Medicine	Community Medicine
MI8.5	Define Healthcare Associated Infections (HAI) and enumerate the types. Discuss the factors that contribute to the development of HAI and the methods for prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
MI8.6	Describe the basics of Infection control	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
MI8.7	Demonstrate Infection control practices and use of Personal Protective Equipments (PPE)	S	P	Y	DOAP session	Skill assessment	3 each in (Hand hygiene & PPE)	General Surgery	Community Medicine
MI8.16	Describe the National Health Programs in the prevention of common infectious disease (for information purpose only as taught in CM)	K	K	Y	Lecture	Written / Viva voce			
Pharmacology									
PH1.55	Describe and discuss the following National Health programmes including Immunisation, Tuberculosis, Leprosy, Malaria, HIV, Filaria, Kala Azar, Diarrhoeal diseases, Anaemia & nutritional disorders, Blindness, Non-communicable diseases, Cancer and Iodine deficiency	K	KH	Y	Lecture	Written / Viva voce			Community Medicine
Forensic Medicine & Toxicology									
FM2.33	Demonstrate ability to use local resources whenever required like in mass disaster situations	A & C	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Community Medicine	
Dermatology, Venereology & Leprosy									
DR9.1	Classify, describe the epidemiology, etiology, microbiology pathogenesis and clinical presentations and diagnostic features of Leprosy	K	KH	Y	Lecture, Small group discussions	Written / Viva voce		General Medicine	Microbiology, Community Medicine
DR9.5	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for various classes of leprosy based on national guidelines	K	KH	Y	Lecture, Small group discussions	Written / Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.6	Describe the treatment of Leprosy based on the WHO guidelines	K	KH	Y	Lecture, Small group discussions	Written / Viva voce		General Medicine	Pharmacology, Community Medicine
Ophthalmology									
OP9.4	Enumerate, describe and discuss the causes of avoidable blindness and the National Programs for Control of Blindness (including vision 2020)	K	KH	Y	Lecture, Small group discussions	Written / Viva voce			Community Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Psychiatry									
PS19.1	Describe the relevance, role and status of community psychiatry	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PS19.2	Describe the objectives strategies and contents of the of the National Mental Health Programme	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PS19.4	Enumerate and describe the salient features of the prevalent mental health laws in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PS19.5	Describe the concept and principles of preventive psychiatry and mental health promotion (positive mental health); and community education	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
General Medicine									
IM2.1	Discuss and describe the epidemiology, antecedents and risk factors for atherosclerosis and ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pathology, Physiology, Community Medicine	
IM4.3	Discuss and describe the common causes, pathophysiology and manifestations of fever in various regions in India including bacterial, parasitic and viral causes (e.g. Dengue, Chikungunya, Typhus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM9.15	Describe the national programs for anemia prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pharmacology, Community Medicine	
IM12.12	Describe and discuss the iodisation programs of the government of India	K	KH	Y	Lecture, Bedside clinic	short note		Community Medicine	
IM14.4	Describe and discuss the impact of environmental factors including eating habits, food, work, environment and physical activity on the incidence of obesity	K	K	Y	Lectures, Small group discussions	short note/ Viva voce		Pathology, Community Medicine	
IM24.18	Describe the impact of the demographic changes in ageing on the population	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM25.1	Describe and discuss the response and the influence of host immune status, risk factors and comorbidities on zoonotic diseases (e.g. Leptospirosis, Rabies) and non-febrile infectious disease (e.g. Tetanus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.2	Discuss and describe the common causes, pathophysiology and manifestations of these diseases	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.4	Elicit document and present a medical history that helps delineate the aetiology of these diseases that includes the evolution and pattern of symptoms, risk factors, exposure through occupation and travel	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Community Medicine	
IM25.13	Counsel the patient and family on prevention of various infections due to environmental issues	C	SH	Y	DOAP session	Skill assessment		Community Medicine, General Medicine	
Obstetrics & Gynaecology									
OG1.1	Define and discuss birth rate, maternal mortality and morbidity	K	KH	Y	Lecture, Small group discussions	Short notes		Community Medicine	
OG1.2	Define and discuss perinatal mortality and morbidity including perinatal and neonatal mortality and morbidity audit	K	KH	Y	Lecture, Small group discussions	Short notes		Community Medicine	Pediatrics
OG8.1	Enumerate describe and discuss the objectives of antenatal care, assessment of period of gestation; screening for high-risk factors	K	KH	Y	Small group discussions, Bedside clinics, Lecture	Written / Viva voce/ Skill assessment		Community Medicine	
OG19.2	Counsel in a simulated environment, contraception and puerperal sterilisation	S/A/C	SH	Y	DOAP session	Skill assessment		Community Medicine	
OG21.1	Describe and discuss the temporary and permanent methods of contraception, indications, technique and complications; selection of patients, side effects and failure rate including OC, male contraception, emergency contraception and IUCD	K	KH	Y	Lecture, Small group discussions, Bedside clinics	Written / Viva voce/ Skill assessment		Community Medicine	
OG33.3	Describe and demonstrate the screening for cervical cancer in a simulated environment	K/S	SH	Y	DOAP session	Skill assessment		Community Medicine	
Pediatrics									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE3.5	Discuss the role of the child developmental unit in management of developmental delay	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE3.7	Visit a Child Developmental unit and observe its functioning	S	KH	Y	Lecture, Small group discussion	Log book Entry		Community Medicine	
PE8.1	Define the term Complementary Feeding	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE8.2	Discuss the principles the initiation, attributes , frequency, techniques and hygiene related to complementary feeding including	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PE8.3	Enumerate the common complimentary foods	K	K	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PE8.4	Elicit history on the Complementary Feeding habits	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment		Community Medicine	
PE8.5	Counsel and educate mothers on the best practices in Complimentary Feeding	A/C	SH	Y	DOAP session	Document in Log Book		Community Medicine	
PE9.1	Describe the age related nutritional needs of infants, children and adolescents including micronutrients and vitamins	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine, Biochemistry	
PE9.2	Describe the tools and methods for Assessment and classification of Nutritional status of infants, children and adolescents	K	KH	Y	Lecture, Small group discussion,	Written / Viva voce		Community Medicine	
PE9.4	Elicit, Document and present an appropriate nutritional history and perform a dietary recall	S	SH	Y	Bedside clinic, Skill Lab	Skill Assessment		Community Medicine	
PE9.5	Calculate the age related Calorie requirement in Health and Disease and identify gap	S	SH	Y	Bedside clinics, Small group discussion	Skill assessment		Community Medicine	
PE9.6	Assess and classify the nutrition status of infants, children and adolescents and recognize deviations	S	SH	Y	Bedside clinic, Small group discussion	Skill Assessment		Community Medicine	
PE9.7	Plan an appropriate diet in Health and disease	S	SH	N	Bedside clinic, Small group discussion	Document in logbook		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE10.4	Identify children with under nutrition as per IMNCI criteria and plan referral	S	SH	Y	DOAP session	Document in log book		Community Medicine	
PE17.1	State the vision and outline the goals, strategies and plan of action of NHM and other important national programs pertaining to maternal and child health including RMNCH A+, RBSK, RKSK, JSSK mission Indradhanush and ICDS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE17.2	Analyse the outcomes and appraise the monitoring and evaluation of NHM	K	KH	Y	Debate	Written/ Viva voce		Community Medicine	
PE18.1	List and explain the components, plans, outcomes of Reproductive child health (RCH) program and appraise the monitoring and evaluation	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	Obstetrics & Gynaecology
PE18.2	Explain preventive interventions for Child survival and safe motherhood	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	Obstetrics & Gynaecology
PE18.3	Conduct Antenatal examination of women independently and apply at-risk approach in antenatal care	S	SH	Y	Bedside clinics	Skill station		Community Medicine	Obstetrics & Gynaecology
PE18.4	Provide intra-natal care and conduct a normal Delivery in a simulated environment	S	SH	Y	DOAP session, Skills lab	Document in Log Book		Community Medicine	Obstetrics & Gynaecology
PE18.6	Perform Postnatal assessment of newborn and mother, provide advice on breast feeding, weaning and on family planning	S	SH	Y	Bedside clinics, Skill Lab	Skill Assessment		Community Medicine	Obstetrics & Gynaecology
PE18.8	Observe the implementation of the program by Visiting the Rural Health Centre	S	KH	Y	Bedside clinics, Skill Lab	Document in log book		Community Medicine	Obstetrics & Gynaecology
PE19.1	Explain the components of the Universal immunization Program and the sub National Immunization Programs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.2	Explain the epidemiology of Vaccine preventable diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.3	Vaccine description with regard to classification of vaccines, strain used, dose, route, schedule, risks, benefits and side effects, indications and contraindications	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology	
PE19.4	Define cold chain and discuss the methods of safe storage and handling of vaccines	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE19.5	Discuss immunization in special situations – HIV positive children, immunodeficiency, preterm , organ transplants, those who received blood and blood products, splenectomised children, Adolescents, travellers	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine, Microbiology	
PE19.8	Demonstrate willingness to participate in the National and sub national immunisation days	A	SH	Y	Lecture, Small group discussion	Document in Log Book		Community Medicine	
PE19.12	Observe the Administration the UIP vaccines	S	SH	Y	DOAP session	Document in Log Book		Community Medicine	
PE29.5	Discuss the National anaemia Control program	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
General Surgery									
SU7.1	Describe the Planning and conduct of Surgical audit	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
SU7.2	Describe the principles and steps of clinical research in surgery	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
Respiratory Medicine									
CT1.1	Describe and discuss the epidemiology of tuberculosis and its impact on the work, life and economy of India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
CT1.4	Describe the epidemiology, the predisposing factors and microbial and therapeutic factors that determine resistance to drugs	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine, Microbiology, Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT1.15	Prescribe an appropriate antituberculosis regimen based on the location of disease, smear positivity and negativity and co-morbidities based on current national guidelines including directly observed tuberculosis therapy (DOTS)	K	SH	Y	Bedside clinic, Small group discussion, Lecture	Skill assessment		Pharmacology, Community Medicine	
CT1.16	Describe the appropriate precautions, screening, testing and indications for chemoprophylaxis for contacts and exposed health care workers	K	KH	Y	Bedside clinic, Small group discussion	Written		Community Medicine	
CT1.18	Educate health care workers on national programs of Tuberculosis and administering and monitoring the DOTS program	C	SH	Y	DOAP session	Skill assessment		Community Medicine	
CT2.24	Recognise the impact of OAD on patient's quality of life, well being, work and family	A	KH	Y	Small group discussion, Bedside clinic	Observation by faculty		Community Medicine	
CT2.25	Discuss and describe the impact of OAD on the society and workplace	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
CT2.26	Discuss and describe preventive measures to reduce OAD in workplaces	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Community Medicine	
CT2.27	Demonstrate an understanding of patient's inability to change working, living and environmental factors that influence progression of airway disease	A	KH	Y	Small group discussion, Bedside clinic	Observation by faculty		Community Medicine	

GENERAL MEDICINE (CODE: IM)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
GENERAL MEDICINE									
Topic: Heart Failure		Number of competencies: (30)			Number of procedures that require certification : (01)				
IM1.1	Describe and discuss the epidemiology, pathogenesis clinical evolution and course of common causes of heart disease including: rheumatic/ valvular, ischemic, hypertrophic inflammatory	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.2	Describe and discuss the genetic basis of some forms of heart failure	K	KH	N	Lecture, Small group discussion	Written		Pathology, Physiology	
IM1.3	Describe and discuss the aetiology microbiology pathogenies and clinical evolution of rheumatic fever, criteria, degree of rheumatic activity and rheumatic valvular heart disease and its complications including infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Microbiology	
IM1.4	Stage heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.5	Describe ,discuss and differentiate the processes involved in R Vs L heart failure, systolic vs diastolic failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.6	Describe and discuss the compensatory mechanisms involved in heart failure including cardiac remodelling and neurohormonal adaptations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.7	Enumerate, describe and discuss the factors that exacerbate heart failure including ischemia, arrhythmias, anemia, thyrotoxicosis, dietary factors drugs etc.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.8	Describe and discuss the pathogenesis and development of common arrhythmias involved in heart failure particularly atrial fibrillation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM1.9	Describe and discuss the clinical presentation and features, diagnosis, recognition and management of acute rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM1.10	Elicit document and present an appropriate history that will establish the diagnosis, cause and severity of heart failure including: presenting complaints, precipitating and exacerbating factors, risk factors exercise tolerance, changes in sleep patterns, features suggestive of infective endocarditis	S	SH	Y	Bedside clinic	Skill assessment			
IM1.11	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and estimate its severity including: measurement of pulse, blood pressure and respiratory rate, jugular venous forms and pulses, peripheral pulses, conjunctiva and fundus, lung, cardiac examination including palpation and auscultation with identification of heart sounds and murmurs, abdominal distension and splenic palpation	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.12	Demonstrate peripheral pulse, volume, character, quality and variation in various causes of heart failure	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.13	Measure the blood pressure accurately, recognise and discuss alterations in blood pressure in valvular heart disease and other causes of heart failure and cardiac tamponade	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.14	Demonstrate and measure jugular venous distension	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.15	Identify and describe the timing, pitch quality conduction and significance of precordial murmurs and their variations	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.16	Generate a differential diagnosis based on the clinical presentation and prioritise it based on the most likely diagnosis	K	KH	Y	Bedside clinic, Small group discussion	Skill assessment			
IM1.17	Order and interpret diagnostic testing based on the clinical diagnosis including 12 lead ECG, Chest radiograph, blood cultures	K	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM1.18	Perform and interpret a 12 lead ECG	S	P	Y	Bedside clinic, DOAP session	Skill assessment	3		
IM1.19	Enumerate the indications for and describe the findings of heart failure with the following conditions including: 2D echocardiography, brain natriuretic peptide, exercise testing, nuclear medicine testing and coronary angiogram	S	KH	N	Lecture, Small group discussion, Bedside clinic	Skill assessment		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM1.20	Determine the severity of valvular heart disease based on the clinical and laboratory and imaging features and determine the level of intervention required including surgery	C	SH	Y	Small group discussion, Lecture, Bedside clinic	Written/ Skill assessment			
IM1.21	Describe and discuss and identify the clinical features of acute and subacute endocarditis, echocardiographic findings, blood culture and sensitivity and therapy	K	KH/SH	Y	Bedside clinic, Small group discussion, Lecture	Skill assessment			
IM1.22	Assist and demonstrate the proper technique in collecting specimen for blood culture	S	SH	Y	DOAP session	Skill assessment		Microbiology	
IM1.23	Describe, prescribe and communicate non pharmacologic management of heart failure including sodium restriction, physical activity and limitations	S/C	SH	Y	Lecture, Small group discussion	Skill assessment			
IM1.24	Describe and discuss the pharmacology of drugs including indications, contraindications in the management of heart failure including diuretics, ACE inhibitors, Beta blockers, aldosterone antagonists and cardiac glycosides	K	KH	Y	Lecture, Small group discussion	Viva voce/written		Pharmacology	
IM1.25	Enumerate the indications for valvuloplasty, valvotomy, coronary revascularization and cardiac transplantation	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Viva voce/written			
IM1.26	Develop document and present a management plan for patients with heart failure based on type of failure, underlying aetiology	S	SH	Y	Bedside clinic, Skill assessment, Small group discussion	Bedside clinic/ Skill assessment/written			
IM1.27	Describe and discuss the role of penicillin prophylaxis in the prevention of rheumatic heart disease	K	KH	Y	Bedside clinic, Small group discussion	Written		Microbiology, Pharmacology	
IM1.28	Enumerate the causes of adult presentations of congenital heart disease and describe the distinguishing features between cyanotic and acyanotic heart disease	K	KH	Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment/written			
IM1.29	Elicit document and present an appropriate history, demonstrate correctly general examination, relevant clinical findings and formulate document and present a management plan for an adult patient presenting with a common form of congenital heart disease	K	KH	Y	Bedside clinic, Small group discussion	Skill assessment/ written			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM1.30	Administer an intramuscular injection with an appropriate explanation to the patient	S	SH	Y	Bedside clinic, Skill assessment	Log book documentation of completion		Pharmacology	
Topic: Acute Myocardial Infarction/ IHD Number of competencies: (24) Number of procedures that require certification : (02)									
IM2.1	Discuss and describe the epidemiology, antecedents and risk factors for atherosclerosis and ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Community Medicine	
IM2.2	Discuss the aetiology of risk factors both modifiable and non modifiable of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.3	Discuss and describe the lipid cycle and the role of dyslipidemia in the pathogenesis of atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
IM2.4	Discuss and describe the pathogenesis natural history, evolution and complications of atherosclerosis and IHD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM2.5	Define the various acute coronary syndromes and describe their evolution, natural history and outcomes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM2.6	Elicit document and present an appropriate history that includes onset evolution, presentation risk factors, family history, comorbid conditions, complications, medication, history of atherosclerosis, IHD and coronary syndromes	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM2.7	Perform, demonstrate and document a physical examination including a vascular and cardiac examination that is appropriate for the clinical presentation	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM2.8	Generate document and present a differential diagnosis based on the clinical presentation and prioritise based on “cannot miss”, most likely diagnosis and severity	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM2.9	Distinguish and differentiate between stable and unstable angina and AMI based on the clinical presentation	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM2.10	Order, perform and interpret an ECG	S	P	Y	Bedside clinic, DOAP session	Skill assessment	3		

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM2.11	Order and interpret a Chest X-ray and markers of acute myocardial infarction	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM2.12	Choose and interpret a lipid profile and identify the desirable lipid profile in the clinical context	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Biochemistry	
IM2.13	Discuss and enumerate the indications for and findings on echocardiogram, stress testing and coronary angiogram	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM2.14	Discuss and describe the indications for admission to a coronary care unit and supportive therapy for a patient with acute coronary syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM2.15	Discuss and describe the medications used in patients with an acute coronary syndrome based on the clinical presentation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM2.16	Discuss and describe the indications for acute thrombolysis, PTCA and CABG	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM2.17	Discuss and describe the indications and methods of cardiac rehabilitation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM2.18	Discuss and describe the indications, formulations, doses, side effects and monitoring for drugs used in the management of dyslipidemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Biochemistry	
IM2.19	Discuss and describe the pathogenesis, recognition and management of complications of acute coronary syndromes including arrhythmias, shock, LV dysfunction, papillary muscle rupture and pericarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM2.20	Discuss and describe the assessment and relief of pain in acute coronary syndromes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM2.21	Observe and participate in a controlled environment an ACLS program	S	KH	N	DOAP session	NA			
IM2.22	Perform and demonstrate in a mannequin BLS	S	P	Y	DOAP session	Skill assessment	1		

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM2.23	Describe and discuss the indications for nitrates, anti platelet agents, gpIIb IIIa inhibitors, beta blockers, ACE inhibitors etc in the management of coronary syndromes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM2.24	Counsel and communicate to patients with empathy lifestyle changes in atherosclerosis / post coronary syndromes	C/A	SH	Y	DOAP session	Skill assessment		AETCOM	
Topic: Pneumonia Number of competencies: (19) Number of procedures that require certification: (NIL)									
IM3.1	Define, discuss, describe and distinguish community acquired pneumonia, nosocomial pneumonia and aspiration pneumonia	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Human Anatomy, Pathology, Microbiology	
IM3.2	Discuss and describe the aetiologies of various kinds of pneumonia and their microbiology depending on the setting and immune status of the host	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
IM3.3	Discuss and describe the pathogenesis, presentation, natural history and complications of pneumonia	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Microbiology	
IM3.4	Elicit document and present an appropriate history including the evolution, risk factors including immune status and occupational risk	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM3.5	Perform, document and demonstrate a physical examination including general examination and appropriate examination of the lungs that establishes the diagnosis, complications and severity of disease	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM3.6	Generate document and present a differential diagnosis based on the clinical features, and prioritise the diagnosis based on the presentation	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM3.7	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum gram stain, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing and ABG	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM3.8	Demonstrate in a mannequin and interpret results of an arterial blood gas examination	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM3.9	Demonstrate in a mannequin and interpret results of a pleural fluid aspiration	S	SH	Y	DOAP session	Skill assessment			
IM3.10	Demonstrate the correct technique in a mannequin and interpret results of a blood culture	S	SH	Y	DOAP session	Skill assessment		Microbiology	
IM3.11	Describe and enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialised testing	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	
IM3.12	Select, describe and prescribe based on the most likely aetiology, an appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum	S	SH	Y	Bed side clinic, DOAP session	Skill Assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM3.13	Select, describe and prescribe based on culture and sensitivity appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum.	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Written/ Viva voce		Pharmacology, Microbiology	
IM3.14	Perform and interpret a sputum gram stain and AFB	S	P	Y	DOAP session	Skill assessment		Microbiology	
IM3.15	Describe and enumerate the indications for hospitalisation in patients with pneumonia	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM3.16	Describe and enumerate the indications for isolation and barrier nursing in patients with pneumonia	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM3.17	Describe and discuss the supportive therapy in patients with pneumonia including oxygen use and indications for ventilation	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM3.18	Communicate and counsel patient on family on the diagnosis and therapy of pneumonia	C/A	SH	Y	DOAP session	Skill assessment			
IM3.19	Discuss, describe, enumerate the indications and communicate to patients on pneumococcal and influenza vaccines	S/C	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
Topic: Fever and febrile syndromes Number of competencies: (26) Number of procedures that require certification : (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM4.1	Describe and discuss the febrile response and the influence of host immune status, risk factors and comorbidities on the febrile response	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.2	Describe and discuss the influence of special populations on the febrile response including: the elderly, immune suppression, malignancy and neutropenia, HIV and travel	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.3	Discuss and describe the common causes, pathophysiology and manifestations of fever in various regions in India including bacterial, parasitic and viral causes (e.g.Dengue, Chikungunya, Typhus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM4.4	Describe and discuss the pathophysiology and manifestations of inflammatory causes of fever	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.5	Describe and discuss the pathophysiology and manifestations of malignant causes of fever including hematologic and lymph node malignancies	K	KH	Y	Lecture, Small group discussion	Written		Pathology, Microbiology	
IM4.6	Discuss and describe the pathophysiology and manifestations of malaria	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.7	Discuss and describe the pathophysiology and manifestations of the sepsis syndrome	K	K	Y	Lecture, Small group discussion	Written			
IM4.8	Discuss and describe the pathophysiology, aetiology and clinical manifestations of fever of unknown origin (FUO) including in a normal host, neutropenic host, nosocomial host and a host with HIV disease	K	K	Y	Lecture, Small group discussion	Written		Microbiology	
IM4.9	Elicit document and present a medical history that helps delineate the aetiology of fever that includes the evolution and pattern of fever, associated symptoms, immune status, comorbidities, risk factors, exposure through occupation, travel and environment and medication use	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM4.10	Perform a systematic examination that establishes the diagnosis and severity of presentation that includes: general skin mucosal and lymph node examination, chest and abdominal examination (including examination of the liver and spleen)	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM4.11	Generate a differential diagnosis and prioritise based on clinical features that help distinguish between infective, inflammatory, malignant and rheumatologic causes	K	SH	Y	Bedside clinic, DOAP session	Written/ Viva voce			
IM4.12	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH	Y	Bedside clinic, Skill assessment	Skill assessment		Pathology, Microbiology	
IM4.13	Perform and interpret a sputum gram stain	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	
IM4.14	Perform and interpret a sputum AFB	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	
IM4.15	Perform and interpret a malarial smear	S	SH	Y	DOAP session	Log book/ documentation/ Skill assessment		Microbiology	
IM4.16	Enumerate the indications and describe the findings in tests of inflammation and specific rheumatologic tests, serologic testing for pathogens including HIV, bone marrow aspiration and biopsy	K	KH	N	Lecture, Small group discussion	Written		Pathology	
IM4.17	Observe and assist in the performance of a bone marrow aspiration and biopsy in a simulated environment	S	SH	N	Skills lab	Log book/ documentation/ DOAP session		Pathology	
IM4.18	Enumerate the indications for use of imaging in the diagnosis of febrile syndromes	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
IM4.19	Assist in the collection of blood and wound cultures	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM4.20	Interpret a PPD (Mantoux)	S	SH	Y	DOAP session	Log book/ documentation		Microbiology	
IM4.21	Develop and present an appropriate diagnostic plan based on the clinical presentation, most likely diagnosis in a prioritised and cost effective manner	K	KH	Y	Bedside clinic, Skill assessment	Skill assessment			
IM4.22	Describe and discuss the pharmacology, indications, adverse reactions, interactions of antimalarial drugs and basis of resistance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM4.23	Prescribe drugs for malaria based on the species identified, prevalence of drug resistance and national programs	S	SH	Y	Small group discussion	Skill assessment		Microbiology, Pharmacology	
IM4.24	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH	Y	DOAP session	Skill assessment			
IM4.25	Communicate to the patient and family the diagnosis and treatment	C	SH	Y	DOAP session	Skill assessment		AETCOM	
IM4.26	Counsel the patient on malarial prevention	C	SH	Y	DOAP session	Skill assessment		Microbiology, Pharmacology	
Topic: Liver disease Number of competencies: (18) Number of procedures that require certification : (NIL)									
IM5.1	Describe and discuss the physiologic and biochemical basis of hyperbilirubinemia	K	K	Y	Lecture, Small group discussion	Written/Viva voce		Pathology, Physiology	
IM5.2	Describe and discuss the aetiology and pathophysiology of liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM5.3	Describe and discuss the pathologic changes in various forms of liver disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM5.4	Describe and discuss the epidemiology, microbiology, immunology and clinical evolution of infective (viral) hepatitis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
IM5.5	Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM5.6	Describe and discuss the pathophysiology, clinical evolution and complications of cirrhosis and portal hypertension including ascites, spontaneous bacterial peritonitis, hepatorenal syndrome and hepatic encephalopathy	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM5.7	Enumerate and describe the causes and pathophysiology of drug induced liver injury	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Pharmacology	
IM5.8	Describe and discuss the pathophysiology, clinical evolution and complications cholelithiasis and cholecystitis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
IM5.9	Elicit document and present a medical history that helps delineate the aetiology of the current presentation and includes clinical presentation, risk factors, drug use, sexual history, vaccination history and family history	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM5.10	Perform a systematic examination that establishes the diagnosis and severity that includes nutritional status, mental status, jaundice, abdominal distension ascites, features of portosystemic hypertension and hepatic encephalopathy	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM5.11	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology for the presenting symptom	K	KH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM5.12	Choose and interpret appropriate diagnostic tests including: CBC, bilirubin, function tests, Hepatitis serology and ascitic fluid examination in patient with liver diseases.	S	KH	Y	Bedside clinic, DOAP session	Skill assessment		Pathology	
IM5.13	Enumerate the indications for ultrasound and other imaging studies including MRCP and ERCP and describe the findings in liver disease	K	K	Y	Bedside clinic, Small group discussion	Viva voce/ Written		Radiodiagnosis	General Surgery
IM5.14	Outline a diagnostic approach to liver disease based on hyperbilirubinemia, liver function changes and hepatitis serology	S	SH	Y	Bedside clinic, Small group discussion	Viva voce/ Written		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM5.15	Assist in the performance and interpret the findings of an ascitic fluid analysis	S	KH	Y	DOAP session	documentation in log book			
IM5.16	Describe and discuss the management of hepatitis, cirrhosis, portal hypertension, ascites spontaneous, bacterial peritonitis and hepatic encephalopathy	K	KH	Y	Written, Small group discussion	Skill assessment/ Written/ Viva voce		Pharmacology	General Surgery
IM5.17	Enumerate the indications, precautions and counsel patients on vaccination for hepatitis	K/C	SH	Y	Written, Small group discussion	Written/ Viva voce		Microbiology	
IM5.18	Enumerate the indications for hepatic transplantation	K	K	Y	Written, Small group discussion	Written/ Viva voce			General Surgery
Topic: HIV Number of competencies: (23) Number of procedures that require certification : (NIL)									
IM6.1	Describe and discuss the symptoms and signs of acute HIV seroconversion	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
IM6.2	Define and classify HIV AIDS based on the CDC criteria	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.3	Describe and discuss the relationship between CDC count and the risk of opportunistic infections	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.4	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related opportunistic infections	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology	
IM6.5	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related malignancies	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Pathology, Microbiology	
IM6.6	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related skin and oral lesions	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce		Pathology, Microbiology	
IM6.7	Elicit document and present a medical history that helps delineate the aetiology of the current presentation and includes risk factors for HIV, mode of infection, other sexually transmitted diseases, risks for opportunistic infections and nutritional status	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM6.8	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology for the presenting symptom	S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment			
IM6.9	Choose and interpret appropriate diagnostic tests to diagnose and classify the severity of HIV-AIDS including specific tests of HIV, CDC	K	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment		Pathology, Microbiology	
IM6.10	Choose and interpret appropriate diagnostic tests to diagnose opportunistic infections including CBC, sputum examination and cultures, blood cultures, stool analysis, CSF analysis and Chest radiographs	S	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment			
IM6.11	Enumerate the indications and describe the findings for CT of the chest and brain and MRI	K	K	N	Small group discussion, Lecture, Bedside clinic	Written/ Viva voce		Radiodiagnosis	
IM6.12	Enumerate the indications for and interpret the results of: pulse oximetry, ABG, Chest Radiograph	K	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment			
IM6.13	Describe and enumerate the indications and side effects of drugs for bacterial, viral and other types of diarrhea	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
IM6.14	Perform and interpret AFB sputum	S	P	Y	DOAP session	Skill assessment		Microbiology	
IM6.15	Demonstrate in a model the correct technique to perform a lumbar puncture	S	SH	Y	Simulation	Skill assessment		Microbiology	
IM6.16	Discuss and describe the principles of HAART, the classes of antiretrovirals used, adverse reactions and interactions	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM6.17	Discuss and describe the principles and regimens used in post exposure prophylaxis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
IM6.18	Enumerate the indications and discuss prophylactic drugs used to prevent HIV related opportunistic infections	K/C	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM6.19	Counsel patients on prevention of HIV transmission	C	SH	Y	DOAP session	Skills assessment		AETCOM	
IM6.20	Communicate diagnosis, treatment plan and subsequent follow up plan to patients	C	SH	Y	DOAP session	Skills assessment		AETCOM	
IM6.21	Communicate with patients on the importance of medication adherence	C	SH	Y	DOAP session	Skills assessment		AETCOM	
IM6.22	Demonstrate understanding of ethical and legal issues regarding patient confidentiality and disclosure in patients with HIV	K/A	SH	Y	DOAP session, Small group discussion	Viva voce/ Written/ Skill Assessment		AETCOM	
IM6.23	Demonstrate a non-judgemental attitude to patients with HIV and to their lifestyles	A	SH	Y	Small group discussion	observation by teacher		AETCOM	
Topic: Rheumatologic problems Number of competencies: (27) Number of procedures that require certification: (NIL)									
IM7.1	Describe the pathophysiology of autoimmune disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM7.2	Describe the genetic basis of autoimmune disease	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM7.3	Classify cause of joint pain based on the pathophysiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM7.4	Develop a systematic clinical approach to joint pain based on the pathophysiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.5	Describe and discriminate acute, subacute and chronic causes of joint pain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.6	Discriminate, describe and discuss arthralgia from arthritis and mechanical from inflammatory causes of joint pain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.7	Discriminate, describe and discuss distinguishing articular from periarticular complaints	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.8	Determine the potential causes of joint pain based on the presenting features of joint involvement	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM7.9	Describe the common signs and symptoms of articular and periarticular diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.10	Describe the systemic manifestations of rheumatologic disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM7.11	Elicit document and present a medical history that will differentiate the aetiologies of disease	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM7.12	Perform a systematic examination of all joints, muscle and skin that will establish the diagnosis and severity of disease	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			Orthopedics
IM7.13	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K/S	KH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written			
IM7.14	Describe the appropriate diagnostic work up based on the presumed aetiology	K	KH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written			
IM7.15	Enumerate the indications for and interpret the results of : CBC, anti-CCP, RA, ANA, DNA and other tests of autoimmunity	K	SH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Pathology	
IM7.16	Enumerate the indications for arthrocentesis	K	K	Y	Small group discussion, Lecture	Written/ Viva voce			Orthopedics
IM7.17	Enumerate the indications and interpret plain radiographs of joints	K	SH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Radiodiagnosis	Orthopedics
IM7.18	Communicate diagnosis, treatment plan and subsequent follow up plan to patients	C	SH	Y	DOAP session	Skill assessment/ Written			
IM7.19	Develop an appropriate treatment plan for patients with rheumatologic diseases	K	KH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written			
IM7.20	Select, prescribe and communicate appropriate medications for relief of joint pain	K/C	SH	Y	DOAP session	Skill assessment/ Written		Pharmacology	Orthopedics
IM7.21	Select, prescribe and communicate preventive therapy for crystalline arthropathies	K/C	SH	Y	DOAP session	Skill assessment/ Written		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM7.22	Select, prescribe and communicate treatment option for systemic rheumatologic conditions	K/C	SH	Y	DOAP session	Skill assessment/ Written		Pharmacology	
IM7.23	Describe the basis for biologic and disease modifying therapy in rheumatologic diseases	K	KH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Pharmacology	
IM7.24	Communicate and incorporate patient preferences in the choice of therapy	C/A	SH	Y	DOAP session	Skill assessment		AETCOM	
IM7.25	Develop and communicate appropriate follow up and monitoring plans for patients with rheumatologic conditions	C	SH	Y	DOAP session	Skill assessment			
IM7.26	Demonstrate an understanding of the impact of rheumatologic conditions on quality of life, well being, work and family	A	SH	Y	DOAP session	Skill assessment			
IM7.27	Determine the need for specialist consultation	K	K	Y	Small group discussion, Lecture	Viva voce			
Topic: Hypertension Number of competencies: (20) Number of procedures that require certification: (NIL)									
IM8.1	Describe and discuss the epidemiology, aetiology and the prevalence of primary and secondary hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.2	Describe and discuss the pathophysiology of hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM8.3	Describe and discuss the genetic basis of hypertension	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.4	Define and classify hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.5	Describe and discuss the differences between primary and secondary hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.6	Define, describe and discuss and recognise hypertensive urgency and emergency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM8.7	Describe and discuss the clinical manifestations of the various aetiologies of secondary causes of hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.8	Describe, discuss and identify target organ damage due to hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM8.9	Elicit document and present a medical history that includes: duration and levels, symptoms, comorbidities, lifestyle, risk factors, family history, psychosocial and environmental factors, dietary assessment, previous and concomitant therapy	K	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM8.10	Perform a systematic examination that includes : an accurate measurement of blood pressure, fundus examination, examination of vasculature and heart	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM8.11	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM8.12	Describe the appropriate diagnostic work up based on the presumed aetiology	K	KH	Y	Small group discussion	Skill assessment/ Written/ Viva voce			
IM8.13	Enumerate the indications for and interpret the results of : CBC, Urine routine, BUN, Cr, Electrolytes, Uric acid, ECG	K	KH	Y	Small group discussion	Skill assessment/ Written/ Viva voce			
IM8.14	Develop an appropriate treatment plan for essential hypertension	K	KH	Y	Small group discussion	Written/ Viva voce		Pharmacology	
IM8.15	Recognise, prioritise and manage hypertensive emergencies	S	SH	Y	DOAP session	Skill assessment/ Written		Pharmacology	
IM8.16	Develop and communicate to the patient lifestyle modification including weight reduction, moderation of alcohol intake, physical activity and sodium intake	C	SH	Y	DOAP session	Skill assessment			
IM8.17	Perform and interpret a 12 lead ECG	S	P	Y	DOAP session	documentation in log book/ skills station			
IM8.18	Incorporate patient preferences in the management of HTN	A/C	SH	Y	DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM8.19	Demonstrate understanding of the impact of Hypertension on quality of life, well being, work and family	A	SH	Y	Bedside clinic, DOAP session	observation by faculty			
IM8.20	Determine the need for specialist consultation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Anemia Number of competencies: (21) Number of procedures that require certification : (NIL)									
IM9.1	Define, describe and classify anemia based on red blood cell size and reticulocyte count	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM9.2	Describe and discuss the morphological characteristics, aetiology and prevalence of each of the causes of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM9.3	Elicit document and present a medical history that includes symptoms, risk factors including GI bleeding, prior history, medications, menstrual history, and family history	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
IM9.4	Perform a systematic examination that includes : general examination for pallor, oral examination, DOAP session of hyper dynamic circulation, lymph node and splenic examination	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM9.5	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology	
IM9.6	Describe the appropriate diagnostic work up based on the presumed aetiology	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology	
IM9.7	Describe and discuss the meaning and utility of various components of the hemogram	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.8	Describe and discuss the various tests for iron deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.9	Order and interpret tests for anemia including hemogram, red cell indices, reticulocyte count, iron studies, B12 and folate	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology	
IM9.10	Describe, perform and interpret a peripheral smear and stool occult blood	S	SH	P	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM9.11	Describe the indications and interpret the results of a bone marrow aspirations and biopsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.12	Describe, develop a diagnostic plan to determine the aetiology of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.13	Prescribe replacement therapy with iron, B12, folate	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pharmacology	
IM9.14	Describe the national programs for anemia prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Community Medicine	
IM9.15	Communicate the diagnosis and the treatment appropriately to patients	C	SH	Y	DOAP session	Skill assessment			
IM9.16	Incorporate patient preferences in the management of anemia	C	SH	Y	DOAP session	Skill assessment			
IM9.17	Describe the indications for blood transfusion and the appropriate use of blood components	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology	
IM9.18	Describe the precautions required necessary when performing a blood transfusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
IM9.19	Assist in a blood transfusion	S	SH	Y	Bedside clinic	document in log book			
IM9.20	Communicate and counsel patients with methods to prevent nutritional anemia	C	SH	Y	DOAP session	Skill assessment			
IM9.21	Determine the need for specialist consultation	K	KH	Y	Lecture, Small group discussion	Written			
Topic: Acute Kidney Injury and Chronic renal failure Number of competencies: (31) Number of procedures that require certification: (NIL)									
IM10.1	Define, describe and differentiate between acute and chronic renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.2	Classify, describe and differentiate the pathophysiologic causes of acute renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM10.3	Describe the pathophysiology and causes of pre renal ARF, renal and post renal ARF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.4	Describe the evolution, natural history and treatment of ARF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.5	Describe and discuss the aetiology of CRF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.6	Stage Chronic Kidney Disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.7	Describe and discuss the pathophysiology and clinical findings of uraemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.8	Classify, describe and discuss the significance of proteinuria in CKD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.9	Describe and discuss the pathophysiology of anemia and hyperparathyroidism in CKD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.10	Describe and discuss the association between CKD glycemia and hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.11	Describe and discuss the relationship between CAD risk factors and CKD and in dialysis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM10.12	Elicit document and present a medical history that will differentiate the aetiologies of disease, distinguish acute and chronic disease, identify predisposing conditions, nephrotoxic drugs and systemic causes	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM10.13	Perform a systematic examination that establishes the diagnosis and severity including determination of volume status, presence of edema and heart failure, features of uraemia and associated systemic disease	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM10.14	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	KH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM10.15	Describe the appropriate diagnostic work up based on the presumed aetiology	K	SH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce			
IM10.16	Enumerate the indications for and interpret the results of : renal function tests, calcium, phosphorus, PTH, urine electrolytes, osmolality, Anion gap	K	KH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology	
IM10.17	Describe and calculate indices of renal function based on available laboratories including FENa (Fractional Excretion of Sodium) and CrCl (Creatinine Clearance)	S	SH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology	
IM10.18	Identify the ECG findings in hyperkalemia	S	SH	Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce			
IM10.19	Enumerate the indications and describe the findings in renal ultrasound	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis	
IM10.20	Describe and discuss the indications to perform arterial blood gas analysis: interpret the data	S	P	Y	DOAP session	documentation in log book			
IM10.21	Describe and discuss the indications for and insert a peripheral intravenous catheter	S	P	Y	DOAP session, Bedside clinic	documentation in logbook			
IM10.22	Describe and discuss the indications, demonstrate in a model and assist in the insertion of a central venous or a dialysis catheter	S	SH	N	DOAP session	Skill assessment with model			
IM10.23	Communicate diagnosis treatment plan and subsequent follow up plan to patients	C	SH	Y	DOAP session	Skill assessment			
IM10.24	Counsel patients on a renal diet	K	SH	Y	DOAP session	Skill assessment			
IM10.25	Identify and describe the priorities in the management of ARF including diet, volume management, alteration in doses of drugs, monitoring and indications for dialysis	K/C	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM10.26	Describe and discuss supportive therapy in CKD including diet, anti hypertensives, glycemic therapy, dyslipidemia, anemia, hyperkalemia, hyperphosphatemia and secondary hyperparathyroidism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM10.27	Describe and discuss the indications for renal dialysis	C/A	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM10.28	Describe and discuss the indications for renal replacement therapy	C	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM10.29	Describe discuss and communicate the ethical and legal issues involved in renal replacement therapy	C/A	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM10.30	Recognise the impact of CKD on patient's quality of life well being work and family	A	K	Y	Lecture, Small group discussion, Bedside clinic	observation by faculty			
IM10.31	Incorporate patient preferences in to the care of CKD	A/C	KH	Y	Lecture, Small group discussion, Bedside clinic	observation by faculty			
Topic: Diabetes Mellitus Number of competencies: (24) Number of procedures that require certification : (02)									
IM11.1	Define and classify diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM11.2	Describe and discuss the epidemiology and pathogenesis and risk factors and clinical evolution of type 1 diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM11.3	Describe and discuss the epidemiology and pathogenesis and risk factors economic impact and clinical evolution of type 2 diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM11.4	Describe and discuss the genetic background and the influence of the environment on diabetes	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
IM11.5	Describe and discuss the pathogenesis and temporal evolution of microvascular and macrovascular complications of diabetes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM11.6	Describe and discuss the pathogenesis and precipitating factors, recognition and management of diabetic emergencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM11.7	Elicit document and present a medical history that will differentiate the aetiologies of diabetes including risk factors, precipitating factors, lifestyle, nutritional history, family history, medication history, co-morbidities and target organ disease	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM11.8	Perform a systematic examination that establishes the diagnosis and severity that includes skin, peripheral pulses, blood pressure measurement, fundus examination, detailed examination of the foot (pulses, nervous and deformities and injuries)	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM11.9	Describe and recognise the clinical features of patients who present with a diabetic emergency	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce			
IM11.10	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce			
IM11.11	Order and interpret laboratory tests to diagnose diabetes and its complications including: glucoses, glucose tolerance test, glycosylated hemoglobin, urinary micro albumin, ECG, electrolytes, ABG, ketones, renal function tests and lipid profile	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pathology	
IM11.12	Perform and interpret a capillary blood glucose test	S	P	Y	Bedside clinic, DOAP session	Skill assessment	2	Pathology, Biochemistry	
IM11.13	Perform and interpret a urinary ketone estimation with a dipstick	S	P	Y	Bedside clinic, DOAP session	Skill assessment	2	Pathology, Biochemistry	
IM11.14	Recognise the presentation of hypoglycaemia and outline the principles on its therapy	K	KH	Y	Small Group discussion, Lecture	Written/ Viva voce			
IM11.15	Recognise the presentation of diabetic emergencies and outline the principles of therapy	K	KH	Y	Small Group discussion, Lecture	Written/ Viva voce			
IM11.16	Discuss and describe the pharmacologic therapies for diabetes their indications, contraindications, adverse reactions and interactions	K	KH	Y	Small Group discussion, Lecture	Written/ Viva voce		Pharmacology	
IM11.17	Outline a therapeutic approach to therapy of T2Diabetes based on presentation, severity and complications in a cost effective manner	K	KH	Y	Small Group discussion, Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM11.18	Describe and discuss the pharmacology, indications, adverse reactions and interactions of drugs used in the prevention and treatment of target organ damage and complications of Type II Diabetes including neuropathy, nephropathy, retinopathy, hypertension, dyslipidemia and cardiovascular disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM11.19	Demonstrate and counsel patients on the correct technique to administer insulin	S/C	SH	Y	DOAP session	Skill assessment		Pharmacology	
IM11.20	Demonstrate to and counsel patients on the correct technique of self monitoring of blood glucoses	S/C	SH	Y	DOAP session	Skill assessment			
IM11.21	Recognise the importance of patient preference while selecting therapy for diabetes	A	KH	Y	DOAP session	faculty observation			
IM11.22	Enumerate the causes of hypoglycaemia and describe the counter hormone response and the initial approach and treatment	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM11.23	Describe the precipitating causes, pathophysiology, recognition, clinical features, diagnosis, stabilisation and management of diabetic ketoacidosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM11.24	Describe the precipitating causes, pathophysiology, recognition, clinical features, diagnosis, stabilisation and management of Hyperosmolar non ketotic state	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Thyroid dysfunction Number of competencies: (15) Number of procedures that require certification : (NIL)									
IM12.1	Describe the epidemiology and pathogenesis of hypothyroidism and hyperthyroidism including the influence of iodine deficiency and autoimmunity in the pathogenesis of thyroid disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM12.2	Describe and discuss the genetic basis of some forms of thyroid dysfunction	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
IM12.3	Describe and discuss the physiology of the hypothalamopituitary - thyroid axis, principles of thyroid function testing and alterations in physiologic function	K	K	Y	Lecture, Small group discussion	Short notes		Pathology, Physiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM12.4	Describe and discuss the principles of radio iodine uptake in the diagnosis of thyroid disorders	K	KH	Y	Lecture, Small group discussion	Short notes/ Viva voce			
IM12.5	Elicit document and present an appropriate history that will establish the diagnosis cause of thyroid dysfunction and its severity	S	SH	Y	Bedside clinic	Skill assessment/ Short case			
IM12.6	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and severity including systemic signs of thyrotoxicosis and hypothyroidism, palpation of the pulse for rate and rhythm abnormalities, neck palpation of the thyroid and lymph nodes and cardiovascular findings	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			General Surgery
IM12.7	Demonstrate the correct technique to palpate the thyroid	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Surgery
IM12.8	Generate a differential diagnosis based on the clinical presentation and prioritise it based on the most likely diagnosis	K	KH	Y	Bedside clinic, small group discussion	Short case			General Surgery
IM12.9	Order and interpret diagnostic testing based on the clinical diagnosis including CBC, thyroid function tests and ECG and radio iodine uptake and scan	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Surgery
IM12.10	Identify atrial fibrillation, pericardial effusion and bradycardia on ECG	S	SH	Y	Bedside clinic, lab	Skill assessment			General Surgery
IM12.11	Interpret thyroid function tests in hypo and hyperthyroidism	S	SH	Y	Bedside clinic, lab	Skill assessment			General Surgery
IM12.12	Describe and discuss the iodisation programs of the government of India	K	KH	Y	Lecture, Bedside clinic	Short note		Community Medicine	
IM12.13	Describe the pharmacology, indications, adverse reaction, interactions of thyroxine and antithyroid drugs	K	KH	Y	Lecture, Small group discussion	Viva voce/ Short note		Pharmacology	General Surgery
IM12.14	Write and communicate to the patient appropriately a prescription for thyroxine based on age, sex, and clinical and biochemical status	S/C	SH	Y	Skill assessment	Skill assessment		Pharmacology	
IM12.15	Describe and discuss the indications of thionamide therapy, radio iodine therapy and surgery in the management of thyrotoxicosis	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Common malignancies		Number of competencies: (19)			Number of procedures that require certification : (NIL)				
IM13.1	Describe the clinical epidemiology and inherited & modifiable risk factors for common malignancies in India	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Biochemistry	
IM13.2	Describe the genetic basis of selected cancers	K	K	N	Lecture, Small group discussion	Short note/ Viva voce		Pathology	
IM13.3	Describe the relationship between infection and cancers	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Microbiology	
IM13.4	Describe the natural history, presentation, course, complications and cause of death for common cancers	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	
IM13.5	Describe the common issues encountered in patients at the end of life and principles of management	K	K	N	Lecture, Small group discussion	Short note/ Viva voce			
IM13.6	Describe and distinguish the difference between curative and palliative care in patients with cancer	K	K	N	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology	
IM13.7	Elicit document and present a history that will help establish the aetiology of cancer and includes the appropriate risk factors, duration and evolution	S	K	Y	Bedside clinic	Skill assessment/ Short case			General Surgery
IM13.8	Perform and demonstrate a physical examination that includes an appropriate general and local examination that excludes the diagnosis, extent spread and complications of cancer	S	SH	Y	Bedside clinic	Skill assessment/ short case			General Surgery
IM13.9	Demonstrate in a mannequin the correct technique for performing breast exam, rectal examination and cervical examination and pap smear	S	K	Y	Bedside clinic	Skill assessment/ Short case		Human Anatomy	General Surgery
IM13.10	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	K	Y	Bedside clinic	Skill assessment/ Short case			General Surgery
IM13.11	Order and interpret diagnostic testing based on the clinical diagnosis including CBC and stool occult blood and prostate specific antigen	S	K	Y	Bedside clinic	Skill assessment/ Short case			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM13.12	Describe the indications and interpret the results of Chest X Ray, mammogram, skin and tissue biopsies and tumor markers used in common cancers	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Radiodiagnosis	
IM13.13	Describe and assess pain and suffering objectively in a patient with cancer	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery
IM13.14	Describe the indications for surgery, radiation and chemotherapy for common malignancies	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery
IM13.15	Describe the need, tests involved, their utility in the prevention of common malignancies	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pathology	
IM13.16	Demonstrate an understanding and needs and preferences of patients when choosing curative and palliative therapy	A/C	KH	Y	Bedside clinic, small group discussion	Short note/ Viva voce		AETCOM	
IM13.17	Describe and enumerate the indications, use, side effects of narcotics in pain alleviation in patients with cancer	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	Anesthesiology
IM13.18	Describe and discuss the ethical and the medico legal issues involved in end of life care	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		AETCOM	
IM13.19	Describe the therapies used in alleviating suffering in patients at the end of life	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		AETCOM	
Topic: Obesity Number of competencies: (15) Number of procedures that require certification: (NIL)									
IM14.1	Define and measure obesity as it relates to the Indian population	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM14.2	Describe and discuss the aetiology of obesity including modifiable and non-modifiable risk factors and secondary causes	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	
IM14.3	Describe and discuss the monogenic forms of obesity	K	K	N	Lecture, Small group discussion	Short note/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM14.4	Describe and discuss the impact of environmental factors including eating habits, food, work, environment and physical activity on the incidence of obesity	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Community Medicine	
IM14.5	Describe and discuss the natural history of obesity and its complications	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	
IM14.6	Elicit and document and present an appropriate history that includes the natural history, dietary history, modifiable risk factors, family history, clues for secondary causes and motivation to lose weight	S	SH	Y	Bedside clinic, Skills lab	Skill assessment			
IM14.7	Perform, document and demonstrate a physical examination based on the history that includes general examination, measurement of abdominal obesity, signs of secondary causes and comorbidities	S	SH	Y	Bedside clinic, Skills lab	Skill assessment			
IM14.8	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH	Y	Bedside clinic, Skills lab	Skill assessment/ Short note/ Viva voce			
IM14.9	Order and interpret diagnostic tests based on the clinical diagnosis including blood glucose, lipids, thyroid function tests etc.	S	SH	Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce			
IM14.10	Describe the indications and interpret the results of tests for secondary causes of obesity	K	KH	Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce			
IM14.11	Communicate and counsel patient on behavioural, dietary and lifestyle modifications	C	SH	Y	Bedside clinic, Skills lab	Skill assessment			
IM14.12	Demonstrate an understanding of patient's inability to adhere to lifestyle instructions and counsel them in a non - judgemental way	A/C	SH	Y	Bedside clinic, Skills lab	Skill assessment			
IM14.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for obesity	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology	
IM14.14	Describe and enumerate the indications and side effects of bariatric surgery	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM14.15	Describe and enumerate and educate patients, health care workers and the public on measures to prevent obesity and promote a healthy lifestyle	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
Topic: GI bleeding Number of competencies: (18) Number of procedures that require certification : (NIL)									
IM15.1	Enumerate, describe and discuss the aetiology of upper and lower GI bleeding	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.2	Enumerate, describe and discuss the evaluation and steps involved in stabilizing a patient who presents with acute volume loss and GI bleed	S	SH	Y	DOAP session, Small group discussion, Lecture	Written/ Viva voce/ Skill assessment		Pathology	General Surgery
IM15.3	Describe and discuss the physiologic effects of acute blood and volume loss	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Physiology	General Surgery
IM15.4	Elicit and document and present an appropriate history that identifies the route of bleeding, quantity, grade, volume loss, duration, etiology, comorbid illnesses and risk factors	S	SH	Y	Bedside clinic	Skill assessment			General Surgery
IM15.5	Perform, demonstrate and document a physical examination based on the history that includes general examination, volume assessment and appropriate abdominal examination	S	SH	Y	Bedside clinic, Skills lab	Skill assessment			General Surgery
IM15.6	Distinguish between upper and lower gastrointestinal bleeding based on the clinical features	S	KH	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM15.7	Demonstrate the correct technique to perform an anal and rectal examination in a mannequin or equivalent	S	SH	Y	DOAP session	Skill assessment			General Surgery
IM15.8	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH	Y	Bedside clinic, Skills lab	Skill assessment/ Short note/ Viva voce			General Surgery
IM15.9	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, PT and PTT, stool examination, occult blood, liver function tests, H.pylori test.	S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment/ Short note/ Viva voce		Pathology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM15.10	Enumerate the indications for endoscopy, colonoscopy and other imaging procedures in the investigation of Upper GI bleeding	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
IM15.11	Develop, document and present a treatment plan that includes fluid resuscitation, blood and blood component transfusion, and specific therapy for arresting blood loss	S	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.12	Enumerate the indications for whole blood, component and platelet transfusion and describe the clinical features and management of a mismatched transfusion	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.13	Observe cross matching and blood / blood component transfusion	S	SH	Y	Bedside clinic	Short note/ Viva voce/ Skill assessment		Pathology	General Surgery
IM15.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of pressors used in the treatment of Upper GI bleed	K	K	Y	Lecture, Small group discussion	Short note/Viva voce		Pharmacology	General Surgery
IM15.15	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of acid peptic disease including Helicobacter pylori	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	General Surgery
IM15.16	Enumerate the indications for endoscopic interventions and Surgery	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM15.17	Determine appropriate level of specialist consultation	S	K	Y	Small group discussion				General Surgery
IM15.18	Counsel the family and patient in an empathetic non-judgmental manner on the diagnosis and therapeutic options	S	SH	Y	DOAP session	Skill assessment			General Surgery
Topic: Diarrheal disorder Number of competencies: (17) Number of procedures that require certification : (NIL)									
IM16.1	Describe and discuss the aetiology of acute and chronic diarrhea including infectious and non infectious causes	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
IM16.2	Describe and discuss the acute systemic consequences of diarrhea including its impact on fluid balance	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM16.3	Describe and discuss the chronic effects of diarrhea including malabsorption	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM16.4	Elicit and document and present an appropriate history that includes the natural history, dietary history, travel , sexual history and other concomitant illnesses	S	SH	Y	Bedside clinic, Skills lab	Skill assessment		Microbiology, Pathology	
IM16.5	Perform, document and demonstrate a physical examination based on the history that includes general examination, including an appropriate abdominal examination	S	SH	Y	Bedside clinic, Skills lab	Skill assessment			
IM16.6	Distinguish between diarrhea and dysentery based on clinical features	S	KH	Y	Lecture, Small group discussion	Short note/ Viva voce			
IM16.7	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH	Y	Bedside clinic, Skills lab	Skill assessment/ short note/ Viva voce			
IM16.8	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, and stool examination	S	SH	Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce		Microbiology, Pathology	
IM16.9	Identify common parasitic causes of diarrhea under the microscope in a stool specimen	S	SH	Y	DOAP session	Skill assessment		Microbiology	
IM16.10	Identify vibrio cholera in a hanging drop specimen	S	SH	Y	DOAP session	Skill Assessment		Microbiology	
IM16.11	Enumerate the indications for stool cultures and blood cultures in patients with acute diarrhea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
IM16.12	Enumerate and discuss the indications for further investigations including antibodies, colonoscopy, diagnostic imaging and biopsy in the diagnosis of chronic diarrhea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	General Surgery
IM16.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for parasitic causes of diarrhea	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	
IM16.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for bacterial and viral diarrhea	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM16.15	Distinguish based on the clinical presentation Crohn's disease from Ulcerative Colitis	S	SH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM16.16	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy including immunotherapy	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology	
IM16.17	Describe and enumerate the indications for surgery in inflammatory bowel disease	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
Topic: Headache Number of competencies: (14) Number of procedures that require certification : (NIL)									
IM17.1	Define and classify headache and describe the presenting features, precipitating factors, aggravating and relieving factors of various kinds of headache	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Human Anatomy	
IM17.2	Elicit and document and present an appropriate history including aura, precipitating aggravating and relieving factors, associated symptoms that help identify the cause of headaches	S	SH	Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment			
IM17.3	Classify migraine and describe the distinguishing features between classical and non classical forms of migraine	K	KH	Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment			
IM17.4	Perform and demonstrate a general neurologic examination and a focused examination for signs of intracranial tension including neck signs of meningitis	S	SH	Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment			
IM17.5	Generate document and present a differential diagnosis based on the clinical features, and prioritise the diagnosis based on the presentation	S	SH	Y	Bedside clinic, Small group discussion	Bedside clinic/ skill assessment			
IM17.6	Choose and interpret diagnostic testing based on the clinical diagnosis including imaging	S	SH	Y	Lecture, Small group discussion, Bedside clinic	Skill Assessment			
IM17.7	Enumerate the indications and describe the findings in the CSF in patients with meningitis	K	K	Y	Small group discussion, Bedside clinic	Skill Assessment		Microbiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM17.8	Demonstrate in a mannequin or equivalent the correct technique for performing a lumbar puncture	S	SH	Y	DOAP session	Skill assessment		Microbiology, Pathology	
IM17.9	Interpret the CSF findings when presented with various parameters of CSF fluid analysis	S	SH	Y	Small group discussion, Bedside clinic	Skill assessment		Microbiology, Pathology	
IM17.10	Enumerate the indications for emergency care admission and immediate supportive care in patients with headache	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
IM17.11	Describe the indications, pharmacology, dose, side effects of abortive therapy in migraine	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM17.12	Describe the indications, pharmacology, dose, side effects of prophylactic therapy in migraine	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM17.13	Describe the pharmacology, dose, adverse reactions and regimens of drugs used in the treatment of bacterial, tubercular and viral meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM17.14	Counsel patients with migraine and tension headache on lifestyle changes and need for prophylactic therapy	A/C	SH	N	DOAP session	Skill Assessment		Pharmacology	Psychiatry
Topic: Cerebrovascular accident Number of competencies: (17) Number of procedures that require certification : (NIL)									
IM18.1	Describe the functional and the vascular anatomy of the brain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
IM18.2	Classify cerebrovascular accidents and describe the aetiology, predisposing genetic and risk factors pathogenesis of hemorrhagic and non hemorrhagic stroke	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
IM18.3	Elicit and document and present an appropriate history including onset, progression, precipitating and aggravating relieving factors, associated symptoms that help identify the cause of the cerebrovascular accident	S	SH	Y	Bedside clinic	Skill assessment		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM18.4	Identify the nature of the cerebrovascular accident based on the temporal evolution and resolution of the illness	K	KH	Y	Bedside clinic, Small group discussion	Skill Assessment			
IM18.5	Perform, demonstrate & document physical examination that includes general and a detailed neurologic examination as appropriate, based on the history	S	SH	Y	Bedside clinic, DOAP session	Skill Assessment			
IM18.6	Distinguish the lesion based on upper vs lower motor neuron, side, site and most probable nature of the lesion	K/S	SH	Y	Bedside clinic, DOAP session	Skill Assessment		Physiology	
IM18.7	Describe the clinical features and distinguish, based on clinical examination, the various disorders of speech	K/S	SH	N	Bedside clinic, DOAP session	Skill Assessment		Physiology	
IM18.8	Describe and distinguish, based on the clinical presentation, the types of bladder dysfunction seen in CNS disease	K	KH	Y	Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
IM18.9	Choose and interpret the appropriate diagnostic and imaging test that will delineate the anatomy and underlying cause of the lesion	S	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Viva voce/ Skill assessment		Radiodiagnosis	
IM18.10	Choose and interpret the appropriate diagnostic testing in young patients with a cerebrovascular accident (CVA)	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM18.11	Describe the initial supportive management of a patient presenting with a cerebrovascular accident (CVA)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM18.12	Enumerate the indications for and describe acute therapy of non hemorrhagic stroke including the use of thrombolytic agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM18.13	Enumerate the indications for and describe the role of anti platelet agents in non hemorrhagic stroke	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM18.14	Describe the initial management of a hemorrhagic stroke	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM18.15	Enumerate the indications for surgery in a hemorrhagic stroke	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM18.16	Enumerate the indications describe and observe the multidisciplinary rehabilitation of patients with a CVA	S	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Physical Medicine & Rehabilitation
IM18.17	Counsel patient and family about the diagnosis and therapy in an empathetic manner	A/C	SH	Y	DOAP session	Skill assessment			
Topic: Movement disorders Number of competencies: (09) Number of procedures that require certification : (NIL)									
IM19.1	Describe the functional anatomy of the locomotor system of the brain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology	
IM19.2	Classify movement disorders of the brain based on distribution, rhythm, repetition, exacerbating and relieving factors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM19.3	Elicit and document and present an appropriate history including onset, progression precipitating and aggravating relieving factors, associated symptoms that help identify the cause of the movement disorders	S	SH	Y	Bedside clinic	Skill assessment			
IM19.4	Perform, demonstrate and document a physical examination that includes a general examination and a detailed neurologic examination using standard movement rating scales	S	SH	Y	Bedside clinic	Skill assessment			
IM19.5	Generate document and present a differential diagnosis and prioritise based on the history and physical examination	S	SH	Y	Bedside clinic	Skill assessment			
IM19.6	Make a clinical diagnosis regarding on the anatomical location, nature and cause of the lesion based on the clinical presentation and findings	S	SH	Y	Bedside clinic	Skill assessment			
IM19.7	Choose and interpret diagnostic and imaging tests in the diagnosis of movement disorders	S	SH	Y	Bedside clinic, Small group session	Skill assessment/ Written/ Viva voce		Radiodiagnosis	
IM19.8	Discuss and describe the pharmacology, dose, side effects and interactions used in the drug therapy of Parkinson's syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM19.9	Enumerate the indications for use of surgery and botulinum toxin in the treatment of movement disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Envenomation		Number of competencies: (09)			Number of procedures that require certification : (NIL)				
IM20.1	Enumerate the local poisonous snakes and describe the distinguishing marks of each	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM20.2	Describe, demonstrate in a volunteer or a mannequin and educate (to other health care workers / patients) the correct initial management of patient with a snake bite in the field	S	SH	Y	DOAP session	Skill assessment/ Written/ Viva voce		Forensic Medicine	
IM20.3	Describe the initial approach to the stabilisation of the patient who presents with snake bite	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine	
IM20.4	Elicit and document and present an appropriate history, the circumstance, time, kind of snake, evolution of symptoms in a patient with snake bite	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Forensic Medicine	
IM20.5	Perform a systematic examination, document and present a physical examination that includes general examination, local examination, appropriate cardiac and neurologic examination	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM20.6	Choose and interpret the appropriate diagnostic testing in patients with snake bites	S	SH	Y	Small group discussion	Written/ Viva voce			
IM20.7	Enumerate the indications and describe the pharmacology, dose, adverse reactions, hypersensitivity reactions of anti snake venom	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM20.8	Describe the diagnosis, initial approach stabilisation and therapy of scorpion envenomation	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM20.9	Describe the diagnosis initial approach stabilisation and therapy of bee sting allergy	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
Topic: Poisoning		Number of competencies: (08)			Number of procedures that require certification : (NIL)				
IM21.1	Describe the initial approach to the stabilisation of the patient who presents with poisoning	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM21.2	Enumerate the common plant poisons seen in your area and describe their toxicology, clinical features, prognosis and specific approach to detoxification	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.3	Enumerate the common corrosives used in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.4	Enumerate the commonly observed drug overdose in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology	
IM21.5	Observe and describe the functions and role of a poison center in suspected poisoning	S	KH	Y	DOAP session	document in log book		Forensic Medicine, Pharmacology	
IM21.6	Describe the medico legal aspects of suspected suicidal or homicidal poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Forensic Medicine, Pharmacology	
IM21.7	Counsel family members of a patient with suspected poisoning about the clinical and medico legal aspects with empathy	A/C	SH	Y	DOAP session	Skill assessment		Forensic Medicine, Pharmacology	
IM21.8	Enumerate the indications for psychiatric consultation and describe the precautions to be taken in a patient with suspected suicidal ideation / gesture	K	KH	Y	DOAP session	Skill assessment		Forensic Medicine, Psychiatry	
Topic: Mineral, Fluid Electrolyte and Acid base Disorder Number of competencies: (13) Number of procedures that require certification : (NIL)									
IM22.1	Enumerate the causes of hypercalcemia and distinguish the features of PTH vs non PTH mediated hypercalcemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
IM22.2	Describe the aetiology, clinical manifestations, diagnosis and clinical approach to primary hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	General Surgery
IM22.3	Describe the approach to the management of hypercalcemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
IM22.4	Enumerate the components and describe the genetic basis of the multiple endocrine neoplasia syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM22.5	Enumerate the causes and describe the clinical features and the correct approach to the diagnosis and management of the patient with hyponatremia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM22.6	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hyponatremia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM22.7	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypokalemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM22.8	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hyperkalemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM22.9	Enumerate the causes and describe the clinical and laboratory features of metabolic acidosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.10	Enumerate the causes of describe the clinical and laboratory features of metabolic alkalosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.11	Enumerate the causes and describe the clinical and laboratory features of respiratory acidosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.12	Enumerate the causes and describe the clinical and laboratory features of respiratory alkalosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
IM22.13	Identify the underlying acid based disorder based on an ABG report and clinical situation	S	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology	
Topic: Nutritional and Vitamin Deficiencies Number of competencies: (05) Number of procedures that require certification: (NIL)									
IM23.1	Discuss and describe the methods of nutritional assessment in an adult and calculation of caloric requirements during illnesses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.2	Discuss and describe the causes and consequences of protein caloric malnutrition in the hospital	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.5	Counsel and communicate to patients in a simulated environment with illness on an appropriate balanced diet	S	SH	Y	DOAP session	Skill assessment			
Topic: Geriatrics Number of competencies: (22) Number of procedures that require certification : (NIL)									
IM24.1	Describe and discuss the epidemiology, pathogenesis, clinical evolution, presentation and course of common diseases in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.2	Perform multidimensional geriatric assessment that includes medical, psycho-social and functional components	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Psychiatry	
IM24.3	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of acute confusional states	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.4	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of vascular events in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.5	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of depression in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
IM24.6	Describe and discuss the aetiopathogenesis causes, clinical presentation, difference in discussion presentation identification, functional changes, acute care, stabilization, management and rehabilitation of dementia in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			AETCOM

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM24.7	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of personality changes in the elderly	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
IM24.8	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of osteoporosis in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.9	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of CVA in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.10	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of COPD in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Respiratory Medicine
IM24.11	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of the elderly undergoing surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology, General Surgery
IM24.12	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of degenerative joint disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM24.13	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of falls in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation
IM24.14	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of common fractures in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM24.15	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of vision and visual loss in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Ophthalmology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM24.16	Describe and discuss the principles of physical and social rehabilitation, functional assessment, role of physiotherapy and occupational therapy in the management of disability in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation
IM24.17	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of hearing loss in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			ENT
IM24.18	Describe the impact of the demographic changes in ageing on the population	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
IM24.19	Enumerate and describe the social problems in the elderly including isolation, abuse, change in family structure and their impact on health.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
IM24.20	Enumerate and describe social interventions in the care of elderly including domiciliary discussion services, rehabilitation facilities, old age homes and state interventions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
IM24.21	Enumerate and describe ethical issues in the care of the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			AETCOM
IM24.22	Describe and discuss the aetiopathogenesis, clinical presentation, complications, assessment and management of nutritional disorders in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
Topic: Miscellaneous Infections		Number of competencies: (13)			Number of procedures that require certification : (NIL)				
IM25.1	Describe and discuss the response and the influence of host immune status, risk factors and comorbidities on zoonotic diseases (e.g. Leptospirosis, Rabies) and non-febrile infectious disease (e.g. Tetanus)	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.2	Discuss and describe the common causes, pathophysiology and manifestations of these diseases	K	K	Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine	
IM25.3	Describe and discuss the pathophysiology and manifestations of these diseases	K	KH	Y	Lecture, Small group discussion	Written		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM25.4	Elicit document and present a medical history that helps delineate the aetiology of these diseases that includes the evolution and pattern of symptoms, risk factors, exposure through occupation and travel	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Community Medicine	
IM25.5	Perform a systematic examination that establishes the diagnosis and severity of presentation that includes: general skin, mucosal and lymph node examination, chest and abdominal examination (including examination of the liver and spleen)	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM25.6	Generate a differential diagnosis and prioritise based on clinical features that help distinguish between infective, inflammatory, malignant and rheumatologic causes	K	SH	Y	Bedside clinic, DOAP session	Written/ Viva voce			
IM25.7	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, blood biochemistry, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH	Y	Bedside clinic, Skill assessment	Skill assessment		Pathology, Microbiology	
IM25.8	Enumerate the indications for use of newer techniques in the diagnosis of these infections	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
IM25.9	Assist in the collection of blood and other specimen cultures	S	SH	Y	DOAP session	Log book documentation		Microbiology	
IM25.10	Develop and present an appropriate diagnostic plan based on the clinical presentation, most likely diagnosis in a prioritised and cost effective manner	K	KH	Y	Bedside clinic, Skill assessment	Skill assessment			
IM25.11	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH	Y	DOAP session	Skill assessment		Microbiology, Pharmacology	
IM25.12	Communicate to the patient and family the diagnosis and treatment of identified infection	C	SH	Y	DOAP session	Skill assessment		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM25.13	Counsel the patient and family on prevention of various infections due to environmental issues	C	SH	Y	DOAP session	Skill assessment		Community Medicine, General Medicine	
Topic: The role of the physician in the community Number of competencies: (49) Number of procedures that require certification : (NIL)									
IM26.1	Enumerate and describe professional qualities and roles of a physician	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.2	Describe and discuss the commitment to lifelong learning as an important part of physician growth	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.3	Describe and discuss the role of non maleficence as a guiding principle in patient care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.4	Describe and discuss the role of autonomy and shared responsibility as a guiding principle in patient care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.5	Describe and discuss the role of beneficence of a guiding principle in patient care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.6	Describe and discuss the role of a physician in health care system	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.7	Describe and discuss the role of justice as a guiding principle in patient care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.8	Identify discuss medicolegal, socioeconomic and ethical issues as it pertains to organ donation	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.9	Identify, discuss and defend medicolegal, sociocultural, economic and ethical issues as it pertains to rights, equity and justice in access to health care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.10	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to confidentiality in patient care	K	KH	Y	Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM26.11	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to patient autonomy, patient rights and shared responsibility in health care	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.12	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to decision making in health care including advanced directives and surrogate decision making	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.13	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to decision making in emergency care including situations where patients do not have the capability or capacity to give consent	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.14	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to research in human subjects	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.15	Identify, discuss and defend, medicolegal,socio-cultural and ethical issues as they pertain to consent for surgical procedures	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.16	Identify, discuss and defend medicolegal, socio-cultural, professional and ethical issues as it pertains to the physician patient relationship (including fiduciary duty)	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.17	Identify, discuss physician's role and responsibility to society and the community that she/ he serves	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.18	Identify, discuss and defend medicolegal, socio-cultural, professional and ethical issues in physician- industry relationships	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.19	Demonstrate ability to work in a team of peers and superiors	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM26.20	Demonstrate ability to communicate to patients in a patient, respectful, non threatening, non judgemental and empathetic manner	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM26.21	Demonstrate respect to patient privacy	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM26.22	Demonstrate ability to maintain confidentiality in patient care	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
IM26.23	Demonstrate a commitment to continued learning	S	SH	Y	Small group discussion	Skill assessment/ Viva voce			
IM26.24	Demonstrate respect in relationship with patients, fellow team members, superiors and other health care workers	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.25	Demonstrate responsibility and work ethics while working in the health care team	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.26	Demonstrate ability to maintain required documentation in health care (including correct use of medical records)	S	SH	Y	Small group discussion	Skill assessment/ Viva voce			
IM26.27	Demonstrate personal grooming that is adequate and appropriate for health care responsibilities	S	SH	Y	Small group discussion	Skill assessment			
IM26.28	Demonstrate adequate knowledge and use of information technology that permits appropriate patient care and continued learning	S	SH	Y	Small group discussion	Skill assessment/ Viva voce			
IM26.29	Communicate diagnostic and therapeutic options to patient and family in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.30	Communicate care options to patient and family with a terminal illness in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.31	Demonstrate awareness of limitations and seeks help and consultations appropriately	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.32	Demonstrate appropriate respect to colleagues in the profession	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.33	Demonstrate an understanding of the implications and the appropriate procedures and response to be followed in the event of medical errors	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.34	Identify conflicts of interest in patient care and professional relationships and describe the correct response to these conflicts	S	SH	Y	Small group discussion	Skill assessment/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM26.35	Demonstrate empathy in patient encounters	S	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce			
IM26.36	Demonstrate ability to balance personal and professional priorities	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.37	Demonstrate ability to manage time appropriately	S	SH	Y	Small group discussion	Skill assessment/ Viva voce			
IM26.38	Demonstrate ability to form and function in appropriate professional networks	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.39	Demonstrate ability to pursue and seek career advancement	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.40	Demonstrate ability to follow risk management and medical error reduction practices where appropriate	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.41	Demonstrate ability to work in a mentoring relationship with junior colleagues	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.42	Demonstrate commitment to learning and scholarship	S	SH	N	Small group discussion	Skill assessment/ Viva voce			
IM26.43	Identify, discuss and defend medicolegal, sociocultural, economic and ethical issues as they pertain to in vitro fertilisation donor insemination and surrogate motherhood	K	KH	N	Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
IM26.44	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues pertaining to medical negligence	K	KH	N	Small group discussion	Written/ Viva voce			
IM26.45	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues pertaining to malpractice	K	KH	N	Small group discussion	Written/ Viva voce			
IM26.46	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues in dealing with impaired physicians	K	KH	N	Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
IM26.47	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to refusal of care including do not resuscitate and withdrawal of life support	K	KH	Y	Small group discussion	Written/ Viva voce			
IM26.48	Demonstrate altruism	S	SH	Y	Small group discussion	Written/ Viva voce			
IM26.49	Administer informed consent and appropriately address patient queries to a patient being enrolled in a research protocol in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Written/ Viva voce			
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								

Integration

Human Anatomy									
AN5.6	Describe the concept of anastomoses and collateral circulation with significance of end-artries	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN7.5	Describe principles of sensory and motor innervation of muscles	K	KH	N	Lecture	Written		General Medicine	Physiology
AN7.6	Describe concept of loss of innervation of a muscle with its applied anatomy	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
AN20.8	Identify & demonstrate palpation of femoral, popliteal, post tibial, anti tibial & dorsalis pedis blood vessels in a simulated environment	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		General Medicine	
AN20.9	Identify & demonstrate Palpation of vessels (femoral, popliteal,dorsalis pedis,post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small saphenous veins	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		General Medicine, General Surgery	
AN22.4	Describe anatomical basis of ischaemic heart disease	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN22.7	Mention the parts, position and arterial supply of the conducting system of heart	K	KH	Y	Lecture	Written		General Medicine	Physiology
AN24.1	Mention the blood supply, lymphatic drainage and nerve supply of pleura, extent of pleura and describe the pleural recesses and their applied anatomy	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Medicine	Physiology
AN24.2	Identify side, external features and relations of structures which form root of lung & bronchial tree and their clinical correlate	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Medicine	Physiology
AN24.3	Describe a bronchopulmonary segment	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN25.3	Describe fetal circulation and changes occurring at birth	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN25.4	Describe embryological basis of: 1) atrial septal defect, 2)ventricular septal defect, 3) Fallot's tetralogy & 4) tracheo-oesophageal fistula	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.5	Describe developmental basis of congenital anomalies, transposition of great vessels, dextrocardia, patent ductus arteriosus and coarctation of aorta	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.7	Identify structures seen on a plain x-ray chest (PA view)	K/S	SH	Y	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN25.8	Identify and describe in brief a barium swallow	K/S	SH	N	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN25.9	Demonstrate surface marking of lines of pleural reflection, Lung borders and fissures, Trachea, Heart borders, Apex beat & Surface projection of valves of heart	K/S	SH	Y	Practical	Viva voce/ Skill assessment		General Medicine, Pediatrics	Physiology
AN28.7	Explain the anatomical basis of facial nerve palsy	K	KH	Y	Lecture	Written		General Medicine	
AN50.3	Describe lumbar puncture (site, direction of the needle, structures pierced during the lumbar puncture)	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN56.1	Describe & identify various layers of meninges with its extent & modifications	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Medicine	
AN56.2	Describe circulation of CSF with its applied anatomy	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN57.4	Enumerate ascending & descending tracts at mid thoracic level of spinal cord	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN57.5	Describe anatomical basis of syringomyelia	K	KH	N	Lecture	Written		General Medicine	Physiology
AN58.4	Describe anatomical basis & effects of medial & lateral medullary syndrome	K	KH	N	Lecture	Written		General Medicine	Physiology
AN60.3	Describe anatomical basis of cerebellar dysfunction	K	KH	N	Lecture	Written		General Medicine	Physiology
AN61.3	Describe anatomical basis & effects of Benedict's and Weber's syndrome	K	KH	N	Lecture	Written		General Medicine	Physiology
AN62.2	Describe & demonstrate surfaces, sulci, gyri, poles, & functional areas of cerebral hemisphere	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Medicine	Physiology
AN62.3	Describe the white matter of cerebrum	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.5	Describe boundaries, parts, gross relations, major nuclei and connections of dorsal thalamus, hypothalamus, epithalamus, metathalamus and subthalamus	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Physiology
AN62.6	Describe & identify formation, branches & major areas of distribution of circle of Willis	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Medicine	Physiology
AN74.1	Describe the various modes of inheritance with examples	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN74.2	Draw pedigree charts for the various types of inheritance & give examples of diseases of each mode of inheritance	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	
AN74.3	Describe multifactorial inheritance with examples	K	KH	Y	Lecture	Written		General Medicine	
AN74.4	Describe the genetic basis & clinical features of Achondroplasia, Cystic Fibrosis, Vitamin D resistant rickets, Hemophilia, Duchene's muscular dystrophy & Sickle cell anaemia	K	KH	N	Lecture	Written		General Medicine, Pediatrics	
Physiology									
PY3.12	Explain the gradation of muscular activity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PY3.13	Describe muscular dystrophy: myopathies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Human Anatomy
PY4.9	Discuss the physiology aspects of: peptic ulcer, gastro-oesophageal reflux disease, vomiting, diarrhoea, constipation, Adynamic ileus, Hirschsprung's disease	S	SH	Y	Lecture, Small group discussion	Practical/ Viva voce		General Medicine	Biochemistry
PY5.5	Describe the physiology of electrocardiogram (E.C.G), its applications and the cardiac axis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PY5.6	Describe abnormal ECG, arrhythmias, heart block and myocardial Infarction	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Human Anatomy
PY5.10	Describe & discuss regional circulation including microcirculation, lymphatic circulation, coronary, cerebral, capillary, skin, foetal, pulmonary and splanchnic circulation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PY5.13	Record and interpret normal ECG in a volunteer or simulated environment	S	SH	Y	DOAP sessions	Practical/OSPE/Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PY5.16	Record Arterial pulse tracing using finger plethysmography in a volunteer or simulated environment	S	SH	N	DOAP sessions, Computer assisted learning methods	Practical/OSPE/Viva voce		General Medicine	
PY7.7	Describe artificial kidney, dialysis and renal transplantation	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PY11.14	Demonstrate Basic Life Support in a simulated environment	S	SH	Y	DOAP sessions	OSCE		General Medicine Anaesthesiology	
Biochemistry									
BI2.4	Describe and discuss enzyme inhibitors as poisons and drugs, therapeutic enzymes and the clinical utility of various serum enzymes as markers of pathological conditions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI2.5	Describe and discuss the clinical utility of various serum enzymes as markers of pathological conditions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI2.6	Discuss use of enzymes in laboratory investigations (Enzyme-based assays)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI2.7	Interpret laboratory results of enzyme activities & describe the clinical utility of various enzymes as markers of pathological conditions	K	KH	Y	Lecture, Small group discussion, DOAP sessions	Written/ Viva voce		Pathology, General Medicine	
BI3.4	Define and differentiate the pathways of carbohydrate metabolism (glycolysis, gluconeogenesis, glycogen metabolism, HMP shunt)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI3.5	Describe and discuss the regulation, functions and integration of carbohydrate along with associated diseases/disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI3.8	Discuss and interpret laboratory results of analytes associated with metabolism of carbohydrates	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	
BI3.9	Discuss the mechanism and significance of blood glucose regulation in health and disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
BI3.10	Interpret the results of blood glucose levels and other laboratory investigations related to disorders of carbohydrate metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.1	Describe and discuss main classes of lipids (Essential/non-essential fatty acids, cholesterol and hormonal steroids, triglycerides, major phospholipids and sphingolipids) relevant to human system and their major functions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.2	Describe the processes involved in digestion and absorption of dietary lipids and also the key features of their metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.3	Explain the regulation of lipoprotein metabolism & associated disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.4	Describe the structure and functions of lipoproteins, their functions, interrelations & relations with atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.5	Interpret laboratory results of analytes associated with metabolism of lipids	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.6	Describe the therapeutic uses of prostaglandins and inhibitors of eicosanoid synthesis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI4.7	Interpret laboratory results of analytes associated with metabolism of lipids	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI5.2	Describe and discuss functions of proteins and structure-function relationships in relevant areas e.g., hemoglobin and selected hemoglobinopathies	K	KH	Y	Lecture, Small group discussion	Viva voce/ Skill assessment		Pathology, General Medicine	Physiology
BI5.5	Interpret laboratory results of analytes associated with metabolism of proteins	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.1	Discuss the metabolic processes that take place in specific organs in the body in the fed and fasting states	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.4	Discuss the laboratory results of analytes associated with gout & Lesch Nyhan syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
BI6.5	Describe the biochemical role of vitamins in the body and explain the manifestations of their deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.7	Describe the processes involved in maintenance of normal pH, water & electrolyte balance of body fluids and the derangements associated with these	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.8	Discuss and interpret results of Arterial Blood Gas (ABG) analysis in various disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.9	Describe the functions of various minerals in the body, their metabolism and homeostasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Physiology
BI6.10	Enumerate and describe the disorders associated with mineral metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI6.11	Describe the functions of haem in the body and describe the processes involved in its metabolism and describe porphyrin metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.12	Describe the major types of haemoglobin and its derivatives found in the body and their physiological/ pathological relevance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology
BI6.13	Describe the functions of the kidney, liver, thyroid and adrenal glands	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.14	Describe the tests that are commonly done in clinical practice to assess the functions of these organs (kidney, liver, thyroid and adrenal glands)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI6.15	Describe the abnormalities of kidney, liver, thyroid and adrenal glands.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, General Medicine	Physiology, Human Anatomy
BI7.4	Describe applications of recombinant DNA technology, PCR in the diagnosis and treatment of diseases with genetic basis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
BI7.7	Describe the role of oxidative stress in the pathogenesis of conditions such as cancer, complications of diabetes mellitus and atherosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	
BI8.1	Discuss the importance of various dietary components and explain importance of dietary fibre	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.2	Describe the types and causes of protein energy malnutrition and its effects	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.3	Provide dietary advice for optimal health in childhood and adult, in disease conditions like diabetes mellitus, coronary artery disease and in pregnancy.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI8.4	Describe the causes (including dietary habits), effects and health risks associated with being overweight/ obesity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	
BI8.5	Summarize the nutritional importance of commonly used items of food including fruits and vegetables (macro-molecules & its importance)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, General Medicine, Pediatrics	
BI9.2	Discuss the involvement of ECM components in health and disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI10.4	Describe & discuss innate and adaptive immune responses, self/non-self recognition and the central role of T-helper cells in immune responses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pathology	Physiology
BI11.4	Perform urine analysis to estimate and determine normal and abnormal constituents	S	P	Y	Lecture, Small group discussion	Skill assessment	1	General Medicine	Physiology
BI11.5	Describe screening of urine for inborn errors & describe the use of paper chromatography	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
BI11.17	Explain the basis and rationale of biochemical tests done in the following conditions: - diabetes mellitus, - dyslipidemia, - myocardial infarction, - renal failure, gout, - proteinuria, - nephrotic syndrome, - edema, - jaundice, - liver diseases, pancreatitis, disorders of acid- base balance, thyroid disorders.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine Pathology	
BI11.22	Calculate albumin: globulin (AG) ratio and creatinine clearance	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI11.23	Calculate energy content of different food Items, identify food items with high and low glycemic index and explain the importance of these in the diet	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
BI11.24	Enumerate advantages and/or disadvantages of use of unsaturated, saturated and trans fats in food.	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
BI1.26	Calculate albumin: globulin (AG) ratio and creatinine clearance	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	
BI1.27	Calculate energy content of different food Items, identify food items with high and low glycemic index and explain the importance of these in the diet	S	SH	N	Lecture, Small group discussion	Skill assessment		General Medicine	
BI1.28	Enumerate advantages and/or disadvantages of use of unsaturated, saturated and trans fats in food	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
Pathology									
PA6.1	Define and describe edema its types pathogenesis and clinical correlations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA9.4	Define autoimmunity. Enumerate autoimmune disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA9.5	Define and describe the pathogenesis of systemic lupus erythematosus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA9.6	Define and describe the pathogenesis and pathology of HIV and AIDS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA9.7	Define and describe the pathogenesis of other common autoimmune diseases	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA10.1	Define and describe the pathogenesis and pathology of malaria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.2	Define and describe the pathogenesis and pathology of cysticercosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.3	Define and describe the pathogenesis and pathology of leprosy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA10.4	Define and describe the pathogenesis and pathology of common bacterial, viral, protozoal and helminthic diseases	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA12.3	Describe the pathogenesis of obesity and its consequences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.1	Describe hematopoiesis and extramedullary hematopoiesis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.2	Describe the role of anticoagulants in hematology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.3	Define and classify anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.4	Enumerate and describe the investigation of anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA13.5	Perform, Identify and describe the peripheral blood picture in anemia	S	SH	Y	DOAP session	Skill assessment		General Medicine	
PA14.2	Describe the etiology, investigations and differential diagnosis of microcytic hypochromic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA14.3	Identify and describe the peripheral smear in microcytic anemia	S	SH	Y	DOAP session	Skill assessment		General Medicine	
PA15.1	Describe the metabolism of Vitamin B12 and the etiology and pathogenesis of B12 deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA15.2	Describe the laboratory investigations of macrocytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA15.4	Enumerate the differences and describe the etiology and distinguishing features of megaloblastic and non-megaloblastic macrocytic anemia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA16.1	Define and classify hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.2	Describe the pathogenesis and clinical features and hematologic indices of hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.3	Describe the pathogenesis, features, hematologic indices and peripheral blood picture of sickle cell anemia and thalassemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.4	Describe the etiology pathogenesis, hematologic indices and peripheral blood picture of Acquired hemolytic anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA16.5	Describe indices and peripheral blood smear	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA 17.1	Enumerate the etiology, pathogenesis and findings in aplastic anemia	K	K	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA17.2	Enumerate the indications and describe the findings in bone marrow aspiration and biopsy	K	K	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA19.6	Enumerate and differentiate the causes of splenomegaly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA21.3	Differentiate platelet from clotting disorders based on the clinical and hematologic features	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA21.4	Define and describe disseminated intravascular coagulation, its laboratory findings and diagnosis of disseminated intravascular coagulation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA21.5	Define and describe disseminated intravascular coagulation its laboratory findings and diagnosis of Vitamin K deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA22.4	Enumerate blood components and describe their clinical uses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA22.6	Describe transfusion reactions and enumerate the steps in the investigation of a transfusion reaction	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA24.2	Describe the etiology, pathogenesis, pathology, microbiology, clinical and microscopic features of peptic ulcer disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA24.3	Describe and identify the microscopic features of peptic ulcer	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA25.1	Describe bilirubin metabolism, enumerate the etiology and pathogenesis of jaundice, distinguish between direct and indirect hyperbilirubinemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, General Medicine	
PA25.2	Describe the pathophysiology and pathologic changes seen in hepatic failure and their clinical manifestations, complications and consequences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.3	Describe the etiology and pathogenesis of viral and toxic hepatitis: distinguish the causes of hepatitis based on the clinical and laboratory features. Describe the pathology, complications and consequences of hepatitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA25.4	Describe the pathophysiology, pathology and progression of alcoholic liver disease including cirrhosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.5	Describe the etiology, pathogenesis and complications of portal hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA25.6	Interpret a liver function and viral hepatitis serology panel. Distinguish obstructive from non obstructive jaundice based on clinical features and liver function tests	S	P	Y	DOAP session	Skill assessment	1	General Medicine	
PA26.1	Define and describe the etiology, types, pathogenesis, stages, morphology and complications of pneumonia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.2	Describe the etiology, gross and microscopic appearance and complications of lung abscess	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.3	Define and describe the etiology, types, pathogenesis, stages, morphology and complications and evaluation of Obstructive airway disease (OAD) and bronchiectasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	Microbiology
PA26.4	Define and describe the etiology, types, pathogenesis, stages, morphology microscopic appearance and complications of tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA26.5	Define and describe the etiology, types, exposure, environmental influence, pathogenesis, stages, morphology, microscopic appearance and complications of Occupational lung disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
PA26.6	Define and describe the etiology, types, exposure, genetics environmental influence, pathogenesis, stages, morphology, microscopic appearance,metastases and complications of tumors of the lung and pleura	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA26.7	Define and describe the etiology, types, exposure, genetics environmental influence, pathogenesis, morphology, microscopic appearance and complications of mesothelioma	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
PA27.1	Distinguish arteriosclerosis from atherosclerosis. Describe the pathogenesis and pathology of various causes and types of arteriosclerosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.2	Describe the etiology, dynamics, pathology types and complications of aneurysms including aortic aneurysms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA27.3	Describe the etiology, types, stages pathophysiology pathology and complications of heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA27.4	Describe the etiology, pathophysiology, pathology, gross and microscopic, features, criteria and complications of rheumatic fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.5	Describe the epidemiology, risk factors, etiology, pathophysiology, pathology, presentations, gross and microscopic, features, diagnostic tests and complications of ischemic heart disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.6	Describe the etiology, pathophysiology, pathology, gross and microscopic, features diagnosis and complications of infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA27.7	Describe the etiology, pathophysiology, pathology, gross and microscopic, features diagnosis and complications of pericarditis and pericardial effusion	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA27.8	Interpret abnormalities in cardiac function testing in acute coronary syndromes	S	SH	Y	DOAP session	Skill Assessment		Physiology, General Medicine	
PA27.9	Classify and describe the etiology, types, pathophysiology, pathology, gross and microscopic features, diagnosis and complications of cardiomyopathies	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Physiology	
PA27.10	Describe the etiology, pathophysiology, pathology features and complications of syphilis on the cardiovascular system	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
PA28.3	Define and describe the etiology, precipitating factors, pathogenesis, pathology, laboratory urinary findings, progression and complications of acute renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.4	Define and describe the etiology, precipitating factors, pathogenesis, pathology, laboratory urinary findings progression and complications of chronic renal failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA28.5	Define and classify glomerular diseases. Enumerate and describe the etiology, pathogenesis, mechanisms of glomerular injury, pathology, distinguishing features and clinical manifestations of glomerulonephritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA28.6	Define and describe the etiology, pathogenesis, pathology, laboratory, urinary findings, progression and complications of IgA nephropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.7	Enumerate and describe the findings in glomerular manifestations of systemic disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.8	Enumerate and classify diseases affecting the tubular interstitium	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.9	Define and describe the etiology, pathogenesis, pathology, laboratory, urinary findings, progression and complications of acute tubular necrosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.11	Define classify and describe the etiology, pathogenesis pathology, laboratory, urinary findings, distinguishing features, progression and complications of vascular disease of the kidney	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA28.12	Define classify and describe the genetics, inheritance etiology, pathogenesis, pathology, laboratory, urinary findings, distinguishing features, progression and complications of cystic disease of the kidney	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
PA28.15	Describe the etiology, genetics, pathogenesis, pathology, presenting features and progression of thrombotic angiopathies	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA31.4	Enumerate and describe the etiology, hormonal dependency and pathogenesis of gynecomastia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA32.1	Enumerate, classify and describe the etiology, pathogenesis, pathology and iodine dependency of thyroid swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
PA32.2	Describe the etiology, cause, iodine dependency, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.3	Describe the etiology, pathogenesis, manifestations, laboratory and imaging features and course of thyrotoxicosis/ hypothyroidism	K	KH	Y	Lecture, Small group	Written/ Viva voce		Physiology, General Medicine	
PA32.4	Classify and describe the epidemiology, etiology, pathogenesis, pathology, clinical laboratory features, complications and progression of diabetes mellitus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.5	Describe the etiology, genetics, pathogenesis, manifestations, laboratory and morphologic features of hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.7	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of adrenal insufficiency	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.8	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications of Cushing's syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PA32.9	Describe the etiology, pathogenesis, manifestations, laboratory and morphologic features of adrenal neoplasms	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
PA33.5	Classify and describe the etiology, immunology, pathogenesis, manifestations, radiologic and laboratory features, diagnostic criteria and complications of rheumatoid arthritis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PA35.1	Describe the etiology, types and pathogenesis, differentiating factors, CSF findings in meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PA35.3	Identify the etiology of meningitis based on given CSF parameters	S	P	Y	DOAP session	Skill Assessment	1	General Medicine	Microbiology
Microbiology									
MI2.1	Describe the etiologic agents in rheumatic fever and their diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.2	Describe the classification, etio-pathogenesis, clinical features and discuss the diagnostic modalities of Infective endocarditis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.3	Identify the microbial agents causing Rheumatic heart disease & infective Endocarditis	S	SH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI2.4	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.5	Describe the etio-pathogenesis and discuss the clinical evolution and the laboratory diagnosis of kala-azar, malaria, filariasis and other common parasites prevalent in India	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI2.6	Identify the causative agent of malaria and filariasis	K/S	SH	Y	DOAP session	Skill assessment		General Medicine	
MI2.7	Describe the epidemiology, the etio- pathogenesis evolution complications, opportunistic infections, diagnosis prevention and the principles of management of HIV	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI3.1	Enumerate the microbial agents causing diarrhea and dysentery. Describe the epidemiology, morphology, pathogenesis, clinical features, and diagnostic modalities of these agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI3.2	Identify the common etiologic agents of diarrhea and dysentery	S	SH	Y	DOAP session	Skill assessment		General Medicine, Paediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
MI3.3	Describe the enteric fever pathogens and discuss the evolution of the clinical course, the laboratory diagnosis of the diseases caused by them	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.4	Identify the different modalities for diagnosis of enteric fever. Choose the appropriate test related to the duration of illness	S	KH	Y	DOAP session	Skill assessment		General Medicine	Pathology
MI3.5	Enumerate the causative agents of food poisoning and discuss the pathogenesis, clinical course and laboratory diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology
MI3.6	Describe the etio-pathogenesis of Acid peptic disease (APD) and the clinical course. Discuss the diagnosis and management of the causative agent of APD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Pathology
MI3.7	Describe the epidemiology, the etio- pathogenesis and discuss the viral markers in the evolution of Viral hepatitis. Discuss the modalities in the diagnosis, and prevention of viral hepatitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
MI3.8	Choose the appropriate laboratory test in the diagnosis of viral hepatitis	K	KH	Y	Small group discussion, Case discussion	Written/ Viva voce/ OSPE		General Medicine	Pathology
MI4.1	Enumerate the microbial agents causing anaerobic infections. Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of anaerobic infections	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
MI5.1	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of meningitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI5.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of encephalitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI5.3	Identify the microbial agents causing meningitis	S	SH	Y	DOAP session	Skill assessment		General Medicine, Paediatrics	
MI6.1	Describe the etio-pathogenesis, laboratory diagnosis and prevention of Infections of upper and lower respiratory tract	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
MI6.2	Identify the common etiologic agents of upper respiratory tract infections (Gram Stain)	S	P	Y	DOAP session	Skill assessment	3	General Medicine	
MI6.3	Identify the common etiologic agents of lower respiratory tract infections (Gram Stain & Acid fast stain).	S	P	Y	DOAP session	Skill assessment	3	General Medicine	
MI7.3	Describe the etio-pathogenesis, clinical features, the appropriate method for specimen collection, and discuss the laboratory diagnosis of Urinary tract infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
MI8.1	Enumerate the microbial agents and their vectors causing Zoonotic diseases. Describe the morphology, mode of transmission, pathogenesis and discuss the clinical course, laboratory diagnosis and prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
MI8.2	Describe the etio-pathogenesis of opportunistic infections (OI) and discuss the factors contributing to the occurrence of OI, and the laboratory diagnosis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Pathology
MI8.3	Describe the role of oncogenic viruses in the evolution of virus associated malignancy	K	KH	Y	Lecture	Written		General Medicine	Pathology
MI8.4	Describe the etiologic agents of emerging Infectious diseases. Discuss the clinical course and diagnosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
MI8.5	Define Healthcare Associated Infections (HAI) and enumerate it types. Discuss the factors that contribute to the development of HAI and the methods for prevention	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Community Medicine	
Pharmacology									
PH1.12	Calculate the dosage of drugs using appropriate formulae for an individual patient, including children, elderly and patient with renal dysfunction	K/S	SH	Y	Lecture, practical	Written/ Viva voce		Pediatrics, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.16	Describe mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs which act by modulating autacoids, including: Anti-histaminics, 5-HT modulating drugs, NSAIDs, Drugs for gout, Anti-rheumatic drugs, drugs for migraine	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH1.21	Describe the symptoms and management of methanol and ethanol poisonings	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
PH1.25	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs acting on blood, like anticoagulants, antiplatelets, fibrinolytics, plasma expanders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PH1.26	Describe mechanisms of action, types, doses, side effects, indications and contraindications of the drugs modulating the renin angiotensin and aldosterone system	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, General Medicine	
PH1.27	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of Antihypertensive drugs and drugs used in shock	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PH1.28	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in ischemic heart disease (stable, unstable angina and myocardial infarction), peripheral vascular disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
PH1.29	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in congestive heart failure	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pathology
PH1.30	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used as Antiarrhythmics	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PH1.31	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in the management of dyslipidemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.34	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs used as below: 1. Acid-peptic disease and GERD 2. Antiemetics and prokinetics 3. Antidiarrhoeals 4. Laxatives 5. Inflammatory Bowel Disease 6. Irritable Bowel Disorders, biliary and pancreatic diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PH1.35	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in hematological disorders like: 1. Drugs used in anemias 2. Colony Stimulating factors	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Physiology	Pharmacology
PH1.36	Describe the mechanism of action, types, doses, side effects, indications and contraindications of drugs used in endocrine disorders (diabetes mellitus, thyroid disorders and osteoporosis)	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Pathology, Pharmacology
PH1.43	Describe and discuss the rational use of antimicrobials including antibiotic stewardship program	K	KH	Y	Lecture	Written/ Viva voce		General Medicine Pediatrics	Microbiology, Pharmacology
PH1.47	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of the drugs used in malaria, KALA-AZAR, amebiasis and intestinal helminthiasis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	Microbiology
PH1.52	Describe management of common poisoning, insecticides, common sting and bites	K	KH	Y	Lecture	Written/ Viva voce		General Medicine	
PH2.4	Demonstrate the correct method of calculation of drug dosage in patients including those used in special situations	S	SH	Y	DOAP sessions	Skills assessment		Pediatrics, Pharmacology	
PH3.1	Write a rational, correct and legible generic prescription for a given condition and communicate the same to the patient	S/C	P	Y	Skill station	Skill station	5	General Medicine	
PH3.3	Perform a critical evaluation of the drug promotional literature	S	P	Y	Skill Lab	Maintenance of log book/ Skill station	3	General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PH3.5	To prepare and explain a list of P-drugs for a given case/condition	S	P	Y	Skill station	Maintenance of log book	3	General Medicine	
PH5.1	Communicate with the patient with empathy and ethics on all aspects of drug use	A/C	SH	Y	Small group discussion	Skill station		General Medicine	
PH5.4	Explain to the patient the relationship between cost of treatment and patient compliance	A/C	SH	Y	Small group discussion	Short note/ Viva voce		General Medicine	
Community Medicine									
CM3.1	Describe the health hazards of air, water, noise, radiation and pollution	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, ENT	
CM3.3	Describe the aetiology and basis of water borne diseases/jaundice/hepatitis/ diarrheal diseases	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Microbiology, General Medicine, Pediatrics	
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
CM5.2	Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method	S	SH	Y	DOAP sessions	Skill Assessment		General Medicine, Pediatrics	
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment	S	SH	Y	DOAP sessions	Skill Assessment		General Medicine, Pediatrics	
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
CM6.1	Formulate a research question for a study	K	KH	Y	Small group discussion, Lecture, DOAP sessions	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.4	Enumerate, discuss and demonstrate common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM7.1	Define Epidemiology and describe and enumerate the principles, concepts and uses	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine	
CM7.2	Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and non-communicable diseases	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine	
CM7.3	Enumerate, describe and discuss the sources of epidemiological data	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine	
CM7.4	Define, calculate and interpret morbidity and mortality indicators based on given set of data	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	
CM7.5	Enumerate, define, describe and discuss epidemiological study designs.	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM7.6	Enumerate and evaluate the need of screening tests	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	
CM7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures.	S	SH	Y	Small group discussion, DOAP sessions	Written/ Skill assessment		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
CM7.8	Describe the principles of association, causation and biases in epidemiological studies	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine	
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	Microbiology Pathology
CM8.2	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine	
CM8.3	Enumerate and describe disease-specific National Health Programs including their prevention and treatment of a case	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	
CM8.4	Describe the principles and enumerate the measures to control a disease epidemic	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	
CM8.5	Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM12.1	Define and describe the concept of Geriatric services	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
CM12.2	Describe health problems of aged population	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
CM12.3	Describe the prevention of health problems of aged population	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
CM12.4	Describe National program for elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
CM13.3	Describe man made disasters in the world and in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.4	Describe the details of the National Disaster management Authority	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
Forensic Medicine & Toxicology									
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially – maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres. -- maintenance of medico-legal register like accident register. - documents of issuance of wound certificate - documents of issuance of drunkenness certificate. - documents of issuance of sickness and fitness certificate. - documents for issuance of death certificate. - documents of Medical Certification of Cause of Death - Form Number4 and 4A - documents for estimation of age by physical, dental and radiological examination and issuance of certificate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Pediatrics	
FM2.34	Demonstrate ability to use local resources whenever required like in mass disaster situations	A & C	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine, AETCOM	
FM3.22	Define and discuss impotence, sterility, frigidity, sexual dysfunction, premature ejaculation. Discuss the causes of impotence and sterility in male and female	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Medicine	
FM5.5	Describe & discuss Delirium tremens	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry, General Medicine	
FM8.6	Describe the general symptoms, principles of diagnosis and management of common poisons encountered in India.	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/Viva voce/OSCE		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
FM8.7	Describe simple Bedside clinic tests to detect poison/drug in a patient's body fluids	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/Viva voce/OSCE		Pharmacology, General Medicine	
FM8.8	Describe basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Caustics Inorganic – sulphuric, nitric, and hydrochloric acids Organic- Carbolic Acid (phenol), Oxalic and acetylsalicylic acids .	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.2	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Phosphorus, Iodine, Barium	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.3	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Arsenic, lead, mercury, copper, iron, cadmium and thallium	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.4	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ethanol, methanol, ethylene glycol	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM9.5	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Organophosphates, Carbamates, Organochlorines, Pyrethroids, Paraquat, Aluminium and Zinc phosphide	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
FM9.6	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ammonia, carbon monoxide, hydrogen cyanide & derivatives, methyl isocyanate, tear (riot control) gases	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM10.1	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: i. Antipyretics – Paracetamol, Salicylates ii. Anti-Infectives (Common antibiotics – an overview) iii. Neuropsychotoxicology Barbiturates, benzodiazepines, phenytoin, lithium, haloperidol, neuroleptics, tricyclics iv. Narcotic Analgesics, Anaesthetics, and Muscle Relaxants v. Cardiovascular Toxicology Cardiotoxic plants – oleander, odollam, aconite, digitalis vi. Gastro-Intestinal and Endocrinal Drugs – Insulin	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pharmacology, General Medicine	
FM11.1	Describe features and management of Snake bite, scorpion sting, bee and wasp sting and spider bite	K	K/KH	Y	Lecture, Small group discussion, Autopsy	Written/Viva voce		General Medicine	
FM12.1	Describe features and management of abuse/poisoning with following camicals: Tobacco, cannabis, amphetamines, cocaine, hallucinogens, designer drugs& solvent	K	K/KH	Y	Lecture, Small group discussion, Autopsy	Written/Viva voce		General Medicine	
FM13.1	Describe toxic pollution of environment, its medico-legal aspects & toxic hazards of occupation and industry	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
FM14.2	Demonstrate the correct technique of clinical examination in a suspected case of poisoning & prepare medico-legal report in a simulated/ supervised environment	S	SH	Y	Bedside clinic (ward/casualty), Small group discussion	Logbook Skill station/Viva voce/ OSCE		General Medicine	
FM14.3	Assist and demonstrate the proper technique in collecting, preserving and dispatch of the exhibits in a suspected case of poisoning, along with clinical examination .	S	SH	Y	Bedside clinic, Small group discussion/DOAP session	Skill lab/Viva voce		General Medicine	
Dermatology, Venereology & Leprosy									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
DR9.1	Classify, describe the epidemiology, etiology, microbiology pathogenesis and clinical presentations and diagnostic features of Leprosy	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Microbiology, Community Medicine
DR9.2	Demonstrate (and classify based on) the clinical features of leprosy including an appropriate neurologic examination	S	SH	Y	Lecture, Small group discussion	Bedside clinic session/ Skill assessment		General Medicine	
DR9.4	Enumerate, describe and identify lepra reactions and supportive measures and therapy of lepra reactions	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Pharmacology
DR9.5	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for various classes of leprosy based on national guidelines	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.6	Describe the treatment of Leprosy based on the WHO guidelines	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.7	Enumerate and describe the complications of leprosy and its management, including understanding disability and stigma.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Psychiatry
DR10.1	Identify and classify syphilis based on the presentation and clinical manifestations	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR10.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Pharmacology, Microbiology
DR10.4	Describe the prevention of congenital syphilis	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	
DR10.5	Counsel in a non-judgemental and empathetic manner patients on prevention of sexually transmitted diseases	C	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	
DR10.6	Describe the etiology, diagnostic and clinical features of non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
DR10.7	Identify and differentiate based on the clinical features non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	Microbiology
DR10.8	Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Pharmacology, Microbiology
DR10.9	Describe the syndromic approach to ulcerative sexually transmitted disease	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	
DR10.10	Describe the etiology, diagnostic and clinical features and management of gonococcal and non gonococcal urethritis	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	
DR11.1	Describe the etiology, pathogenesis and clinical features of the dermatologic manifestations of HIV and its complications including opportunistic infections	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		General Medicine	Microbiology
DR11.2	Identify and distinguish the dermatologic manifestations of HIV its complications, opportunistic infections and adverse reactions	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	Microbiology
DR11.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for dermatologic lesions in HIV	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Microbiology
DR12.7	Identify and distinguish fixed drug eruptions and Steven Johnson syndrome from other skin lesions	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	Pathology, Microbiology
DR16.1	Identify and distinguish skin lesions of SLE	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	Pathology
DR16.2	Identify and distinguish Raynaud's phenomenon	S	SH	Y	Lecture, Small group discussion	Skill assessment		General Medicine	Pathology
DR17.1	Enumerate and identify the cutaneous findings in vitamin A deficiency	K/S	SH	Y	Lecture, Small group discussion	Skill assessment/ Viva voce		General Medicine, Pediatrics, Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
DR17.2	Enumerate and describe the various skin changes in Vitamin B complex deficiency	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.3	Enumerate and describe the various changes in Vitamin C deficiency	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.4	Enumerate and describe the various changes in Zinc deficiency	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine, Pediatrics, Biochemistry	
DR18.1	Enumerate the cutaneous features of Type 2 diabetes	K	K	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
DR18.2	Enumerate the cutaneous features of hypo- & hyperthyroidism	K	K	Y	Lecture, Small group discussion	Written/Viva voce		General Medicine	
Anesthesiology									
AS2.1	Enumerate the indications, describe the steps and demonstrate in a simulated environment basic life support in adults children and neonates	S	SH	N	DOAP session	Skill assessment		General Medicine, Pediatrics	
AS2.2	Enumerate the indications, describe the steps and demonstrate in a simulated environment advanced life support in adults and children	S	SH	N	DOAP session	Skill assessment		General Medicine	
AS3.1	Describe the principles of preoperative evaluation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery, General Medicine
AS3.2	Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.3	Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AS3.4	Choose and interpret appropriate testing for patients undergoing Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.5	Determine the readiness for General Surgery in a patient based on the preoperative evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS7.2	Enumerate and describe the criteria for admission and discharge of a patient to an ICU	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Medicine
AS7.3	Observe and describe the management of an unconscious patient	S	KH	Y	Lecture, Small group discussion DOAP session	Written/ Viva voce		Physiology	General Medicine
AS7.4	Observe and describe the basic setup process of a ventilator	S	KH	Y	Lecture, Small group discussion DOAP session	Written/ Viva voce		Physiology	General Medicine
AS7.5	Observe and describe the principles of monitoring in an ICU	S	KH	Y	Lecture, Small group discussion DOAP session	Written/ Viva voce			General Medicine
AS8.4	Describe the principles of pain management in palliative care	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine
AS8.5	Describe the principles of pain management in the terminally ill	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine
AS10.4	Define and describe common medical and medication errors in anaesthesia	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine
Otorhinolaryngology (ENT)									
EN4.53	Describe the Clinical features, Investigations and principles of management of HIV manifestations of the ENT	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
Ophthalmology									
OP5.2	Define, enumerate and describe the aetiology, associated systemic conditions, clinical features, complications, indications for referral and management of scleritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
OP6.3	Enumerate systemic conditions that can present as iridocyclitis and describe their ocular manifestations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
OP9.3	Describe the role of refractive error correction in a patient with headache and enumerate the indications for referral	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Dentistry									
DE1.4	Discuss the role of dental caries as a focus of sepsis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, General Medicine	
Psychiatry									
PS3.7	Enumerate and describe common organic psychiatric disorders, magnitude, etiology and clinical features	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS3.8	Enumerate and describe the essential investigations in patients with organic psychiatric disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS4.1	Describe the magnitude and etiology of alcohol and substance use disorders	K	KH	Y	Lecture, Small group discussion	Lecture/ Small group discussion			General Medicine
PS4.2	Elicit, describe and document clinical features of alcohol and substance use disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS4.3	Enumerate and describe the indications and interpret laboratory and other tests used in alcohol and substance abuse disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS4.4	Describe the treatment of alcohol and substance abuse disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PS4.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in alcohol and substance abuse	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS10.1	Enumerate and describe the magnitude and etiology of somatoform, dissociative and conversion disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS10.2	Enumerate, elicit, describe and document clinical features in patients with somatoform, dissociative and conversion disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS10.3	Enumerate and describe the indications and interpret laboratory and other tests used in somatoform, dissociative and conversion disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS10.4	Describe the treatment of somatoform disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS10.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in somatoform, dissociative and conversion disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS12.1	Enumerate and describe the magnitude and etiology of psychosomatic disorders	K	KH	Y	Lecture Small group discussion	Written/ Viva voce			General Medicine
PS12.2	Enumerate, elicit, describe and document clinical features in patients with magnitude and etiology of psychosomatic disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS12.3	Enumerate and describe the indications and interpret laboratory and other tests of psychosomatic disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS12.4	Describe the treatment of psychosomatic disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS16.1	Enumerate and describe common psychiatric disorders in the elderly including dementia, depression and psychosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS16.2	Describe the aetiology and magnitude of psychiatric illness in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS16.3	Describe the therapy of psychiatric illness in elderly including psychosocial and behavioural therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PS16.4	Demonstrate family education in a patient with psychiatric disorders occurring in the elderly in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
Obstetrics & Gynaecology									
OG12.1	Define, classify and describe the etiology and pathophysiology, early detection, investigations; principles of management of hypertensive disorders of pregnancy and eclampsia, complications of eclampsia	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.2	Define, Classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anemia in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.3	Define, Classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of diabetes in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.4	Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of heart diseases in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.5	Describe the clinical features, detection, effect of pregnancy on the disease and impact of the disease on pregnancy complications and management in pregnancy of urinary tract infections	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.6	Describe the clinical features, detection, effect of pregnancy on the disease and impact of the disease on pregnancy complications and management in pregnancy of liver disease	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.7	Describe and discuss Screening, risk factors, management of mother and newborn with HIV	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
Pediatrics									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE14.3	Discuss the risk factors, clinical features, diagnosis and management of Organophosphorous poisoning	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PE32.3	Interpret normal Karyotype and recognize Trisomy 21	S	SH	Y	Bedside clinics, Skills lab	Log book			General Medicine
PE32.9	Discuss the referral criteria and multidisciplinary approach to management of Turner Syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Obstetrics & Gynecology
General Surgery									
SU22.6	Describe and discuss the clinical features of hypo- & hyperparathyroidism and the principles of their management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
SU23.2	Describe the etiology, clinical features and principles of management of disorders of adrenal gland	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
Orthopaedics									
OR5.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of various inflammatory disorder of joints	K	K/KH	Y	Lecture, Small group Discussion, Bedside clinic	Written/ Viva voce OSCE			General Medicine
OR11.1	Describe and discuss the aetiopathogenesis, Clinical features, Investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves	K	K/H	Y	Lecture Small Group discussion, case discussion	Written/ Viva voce OSCE		Human Anatomy	General Medicine, General surgery
Physical Medicine & Rehabilitation									
PM1.2	Define and describe disability, its cause, and magnitude, identification and prevention of disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM1.3	Define and describe the methods to identify and prevent disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PM1.4	Enumerate the rights and entitlements of differently abled persons	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM2.1	Describe the causes of disability in the patient with a cerebrovascular accident	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	General Medicine
PM2.2	Describe and discuss the treatment of rigidity and spasticity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM2.3	Describe and discuss the principles of early mobilizations, mobility aids and splints	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM2.4	Describe and discuss the impact of comorbidities on the rehabilitation of the patient with cerebrovascular accident	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM4.1	Describe the common patterns, clinical features, investigations, diagnosis and treatment of common causes of arthritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM4.5	Demonstrate correct assessment of muscle strength and range of movements	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			General Medicine Orthopedics
PM6.1	Perform and demonstrate a clinical examination of sensory and motor deficits of peripheral nerve	S	SH	Y	Bedside clinic	Skill assessment			General Medicine
PM6.2	Enumerate the indications and describe the principles of nerve conduction velocity and EMG	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM7.4	Assess bowel and bladder function and identify common patterns of bladder dysfunction	S	KH	Y	Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM7.6	Enumerate the indications and describe the pharmacology and side effects of commonly used drugs in neuropathic bladder	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PM7.7	Enumerate and describe common life threatening complications following SCI like Deep vein Thrombosis, Aspiration Pneumonia, Autonomic dysreflexia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PM8.1	Describe the clinical features, evaluation, diagnosis and management of disability following traumatic brain injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics General Surgery
PM8.2	Describe and discuss cognitive dysfunction like deficits in attention, memory and communication	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.3	Describe and discuss common behavior and mood changes following TBI	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.4	Describe metabolic co-morbidities like SIADH, diabetes mellitus, insipidus and endocrine dysfunction following TBI	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.5	Describe the Vocational opportunities and community based rehabilitation following TBI	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM 9.1	Describe rehabilitative aspects as they pertain to the elderly including patients with dementia, depression, incontinence immobility and nutritional needs	K	KH	Y	Lecture, Small group	Written Viva voce			General Medicine Psychiatry
Radiotherapy									
RT1.3	Enumerate, describe and discuss classification and staging of cancer (AJCC, FIGO etc.)	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery General Medicine

RESPIRATORY MEDICINE (CODE: CT)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
RESPIRATORY MEDICINE									
Topic:Tuberculosis		Number of competencies: (19)			Number of procedures that require certification : (01)				
CT1.1	Describe and discuss the epidemiology of tuberculosis and its impact on the work, life and economy of India	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT1.2	Describe and discuss the microbiology of tubercle bacillus, mode of transmission, pathogenesis, clinical evolution and natural history of pulmonary and extra pulmonary forms (including lymph node, bone and CNS)	K	KH	Y	Lecture, Small group discussion	written		Microbiology	
CT1.3	Discuss and describe the impact of co-infection with HIV and other co-morbid conditions. Like diabetes on the natural history of tuberculosis	K	K	Y	Lecture, Small group discussion	written		Microbiology	
CT1.4	Describe the epidemiology, the predisposing factors and microbial and therapeutic factors that determine resistance to drugs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Pharmacology	
CT1.5	Elicit, document and present an appropriate medical history that includes risk factor, contacts, symptoms including cough and fever CNS and other manifestations	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT1.6	Demonstrate and perform a systematic examination that establishes the diagnosis based on the clinical presentation that includes a a) general examination, b) examination of the chest and lung including loss of volume, mediastinal shift, percussion and auscultation (including DOAP session of lung sounds and added sounds) c) examination of the lymphatic system and d) relevant CNS examination	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT1.7	Perform and interpret a PPD (mantoux) and describe and discuss the indications and pitfalls of the test	S	P	Y	DOAP session	Maintenance of log book		Microbiology	
CT1.8	Generate a differential diagnosis based on the clinical history and evolution of the disease that prioritises the most likely diagnosis	K	K	Y	Bedside clinic, Small group discussion	Bedside clinic/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT1.9	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing	K	K	Y	Bedside clinic, DOAP session	Skill assessment			
CT1.10	Perform and interpret an AFB stain	S	P	Y	DOAP session	Skill assessment	1	Microbiology	
CT1.11	Assist in the performance, outline the correct tests that require to be performed and interpret the results of a pleural fluid aspiration	S	SH	Y	Skill assessment	Skill assessment			
CT1.12	Enumerate the indications for tests including: serology, special cultures and polymerase chain reaction and sensitivity testing	K	KH	Y	Small group discussion, Lecture	Short note/ Viva voce		Microbiology	
CT1.13	Describe and discuss the origin, indications, technique of administration, efficacy and complications of the BCG vaccine	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
CT1.14	Describe and discuss the pharmacology of various anti-tuberculous agents, their indications, contraindications, interactions and adverse reactions	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	
CT1.15	Prescribe an appropriate antituberculosis regimen based on the location of disease, smear positivity and negativity and co-morbidities based on current national guidelines including directly observed tuberculosis therapy (DOTS)	K	SH	Y	Bedside clinic, Small group discussion, Lecture	Skill assessment		Pharmacology, Community Medicine	
CT1.16	Describe the appropriate precautions, screening, testing and indications for chemoprophylaxis for contacts and exposed health care workers	K	KH	Y	Bedside clinic, Small group discussion	Written		Community Medicine	
CT1.17	Define criteria for the cure of Tuberculosis; describe and recognise the features of drug resistant tuberculosis, prevention and therapeutic regimens	S	P	Y	Lecture, Small group discussion	Written			
CT1.18	Educate health care workers on National Program of Tuberculosis and administering and monitoring the DOTS program	C	SH	Y	DOAP session	Skill assessment		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT1.19	Communicate with patients and family in an empathetic manner about the diagnosis, therapy	S	P	Y	DOAP session	Skill assessment		AETCOM	
Topic: Obstructive airway disease Number of competencies: (28) Number of procedures that require certification : (01)									
CT2.1	Define and classify obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.2	Describe and discuss the epidemiology, risk factors and evolution of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology , Pathology	
CT2.3	Enumerate and describe the causes of acute episodes in patients with obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.4	Describe and discuss the physiology and pathophysiology of hypoxia and hypercapnea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.5	Describe and discuss the genetics of alpha 1 antitrypsin deficiency in emphysema	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.6	Describe the role of the environment in the cause and exacerbation of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
CT2.7	Describe and discuss allergic and non-allergic precipitants of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
CT2.8	Elicit document and present a medical history that will differentiate the aetiologies of obstructive airway disease, severity and precipitants	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT2.9	Perform a systematic examination that establishes the diagnosis and severity that includes measurement of respiratory rate, level of respiratory distress, effort tolerance, breath sounds, added sounds, identification of signs of consolidation pleural effusion and pneumothorax	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT2.10	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ Written			
CT2.11	Describe, discuss and interpret pulmonary function tests	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Physiology, Pathology	
CT2.12	Perform and interpret peak expiratory flow rate	S	P	Y	Bedside clinic, DOAP session	documentation in log book/ Skill assessment	3		
CT2.13	Describe the appropriate diagnostic work up based on the presumed aetiology	S	SH	Y	Bedside clinic, Small group discussion	Written/ Skill assessment			
CT2.14	Enumerate the indications for and interpret the results of : pulse oximetry, ABG, Chest Radiograph	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.15	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.16	Discuss and describe therapies for OAD including bronchodilators, leukotriene inhibitors, mast cell stabilisers, theophylline, inhaled and systemic steroids, oxygen and immunotherapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
CT2.17	Describe and discuss the indications for vaccinations in OAD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.18	Develop a therapeutic plan including use of bronchodilators and inhaled corticosteroids	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
CT2.19	Develop a management plan for acute exacerbations including bronchodilators, systemic steroids, antimicrobial therapy	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.20	Describe and discuss the principles and use of oxygen therapy in the hospital and at home	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.21	Describe discuss and counsel patients appropriately on smoking cessation	K/C	SH	Y	DOAP session	Skill assessment		AETCOM	
CT2.22	Demonstrate and counsel patient on the correct use of inhalers	S/C	SH	Y	DOAP session	Skill assessment			
CT2.23	Communicate diagnosis treatment plan and subsequent follow up plan to patients	K/C	SH	Y	DOAP session	Skill assessment			
CT2.24	Recognise the impact of OAD on patient's quality of life, well being, work and family	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty		Community Medicine	
CT2.25	Discuss and describe the impact of OAD on the society and workplace	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT2.26	Discuss and describe preventive measures to reduce OAD in workplaces	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT2.27	Demonstrate an understanding of patient's inability to change working, living and environmental factors that influence progression of airway disease	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty		Community Medicine	
CT2.28	Demonstrate an understanding for the difficulties faced by patients during smoking cessation	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty			
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Integration									
Physiology									
PY6.8	Demonstrate the correct technique to perform & interpret Spirometry	S	SH	Y	DOAP sessions	Skill assessment/ Viva voce		Respiratory Medicine	
Pharmacology									
PH1.32	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in bronchial asthma and COPD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.33	Describe the mechanism of action, types, doses, side effects, indications and contraindications of the drugs used in cough (antitussives, expectorants/ mucolytics)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.44	Describe the first line antitubercular drugs, their mechanisms of action, side effects and doses.	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	
PH1.45	Describe the drugs used in MDR and XDR Tuberculosis	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	Microbiology
General Medicine									
IM24.10	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of COPD in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Respiratory Medicine
Pediatrics									
PE28.19	Describe the etio-pathogenesis, clinical features, diagnosis, management and prevention of asthma in children	S	SH	Y	Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce		Respiratory Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE28.20	Counsel the child with asthma on the correct use of inhalers in a simulated environment	S	P	Y	Bedside clinics, Small group discussion, Lecture	Skills Assessment/ Written/ Viva voce	3	Respiratory Medicine	
PE34.1	Discuss the epidemiology, clinical features, clinical types, complications of Tuberculosis in Children and Adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.2	Discuss the various diagnostic tools for childhood tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.5	Able to elicit, document and present history of contact with tuberculosis in every patient encounter	S	SH	Y	Bedside clinics, Skill lab	Skill Assessment			Respiratory Medicine
PE34.6	Identify a BCG scar	S	P	Y	Bed side clinics, Skills lab	Skill Assessment	3	Microbiology	Respiratory Medicine
PE34.7	Interpret a Mantoux test	S	P	Y	Bed side clinics Skills lab	Skill assessment	3	Microbiology	Respiratory Medicine
PE34.8	Interpret a Chest Radiograph	S	SH	Y	Bedside clinics Skills lab	Skill assessment		Radiodiagnosis	Respiratory Medicine
PE34.9	Interpret blood tests in the context of laboratory evidence for tuberculosis	S	SH	N	Bed side clinics, Small group discussion	Log book		Microbiolgy	Respiratory Medicine
PE34.10	Discuss the various samples for demonstraing the organism eg Gastric Aspirate, Sputum , CSF, FNAC	K	KH	Y	Bed side clinics, Small group discussion	Written/ Viva voce		Microbiolgy	Respiratory Medicine
PE34.11	Perform AFB staining	S	P	Y	DOAP session	Log book/Journal	3	Microbiology	Respiratory Medicine
PE34.12	Enumerate the indications and discuss the limitations of methods of culturing M.Tuberculi	K	KH	Y	Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine

PEDIATRICS (CODE: PE)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PEDIATRICS									
Topic: Normal Growth and Development Number of competencies : (07) Number of procedures that require certification: (02)									
PE1.1	Define the terminologies Growth and development and discuss the factors affecting normal growth and development	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE1.2	Discuss and describe the patterns of growth in infants, children and adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE1.3	Discuss and describe the methods of assessment of growth including use of WHO and Indian national standards. Enumerate the parameters used for assessment of physical growth in infants, children and adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE1.4	Perform Anthropometric measurements, document in growth charts and interpret	S	P	Y	Small group discussion	Document in Log book	3		
PE1.5	Define development and discuss the normal developmental mile stones with respect to motor, behaviour, social, adaptive and language	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE1.6	Discuss the methods of assessment of development	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE1.7	Perform Developmental assessment and interpret	S	P	N	Bedside clinics, Skills Lab	Document in Log book	3		
Topic: Common problems related to Growth Number of competencies:(06) Number of procedures that require certification: (NIL)									
PE2.1	Discuss the etio-pathogenesis, clinical features and management of a child who fails to thrive	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE2.2	Assessment of a child with failing to thrive including eliciting an appropriate history and examination	S	SH	Y	Bedside clinics	Skills Station			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE2.3	Counselling a parent with failing to thrive child	A/C	SH	Y	OSPE	Document in Log book		AETCOM	
PE2.4	Discuss the etio-pathogenesis, clinical features and management of a child with short stature	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE2.5	Assessment of a child with short stature: Elicit history, perform examination, document and present	S	SH	Y	Bedside clinics, Skill lab	Skill Assessment			
PE2.6	Enumerate the referral criteria for growth related problems	K	K	Y	Small group discussion	Written/ Viva voce			
Topic: Common problems related to Development -1 (Developmental delay , Cerebral palsy) Number of competencies:(08) Number of procedures that require certification: (NIL)									
PE3.1	Define, enumerate and discuss the causes of developmental delay and disability including intellectual disability in children	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE3.2	Discuss the approach to a child with developmental delay	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE3.3	Assessment of a child with developmental delay - Elicit document and present history	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE3.4	Counsel a parent of a child with developmental delay	S	SH	Y	DOAP session	Document in Log Book			
PE3.5	Discuss the role of the child developmental unit in management of developmental delay	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE3.6	Discuss the referral criteria for children with developmental delay	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE3.7	Visit a Child Developmental Unit and observe its functioning	S	KH	Y	Lecture, Small group discussion	Log book Entry		Community Medicine	
PE3.8	Discuss the etio-pathogenesis, clinical presentation and multi-disciplinary approach in the management of Cerebral palsy	K	KH	Y	Lecture, Small group, Bedside clinics	Written/ Viva voce			Physical Medicine & Rehabilitation

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Common problems related to Development-2 (Scholastic backwardness, Learning Disabilities , Autism , ADHD) Number of competencies: (06) Number of procedures that require certification: (NIL)									
PE4.1	Discuss the causes and approach to a child with scholastic backwardness	K	K	N	Lecture, Small group discussion	Written			
PE4.2	Discuss the etiology, clinical features, diagnosis and management of a child with Learning Disabilities	K	K	N	Lecture, Small group discussion	Written			
PE4.3	Discuss the etiology, clinical features, diagnosis and management of a child with Attention Deficit Hyperactivity Disorder (ADHD)	K	K	N	Lecture, Small group discussion	Written			
PE4.4	Discuss the etiology, clinical features, diagnosis and management of a child with Autism	K	K	N	Lecture, Small group discussion	Written			
PE4.5	Discuss the role of Child Guidance clinic in children with Developmental problems	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
PE4.6	Visit to the Child Guidance Clinic	S	KH	N	Lecture, Small group discussion	Document in Log Book			
Topic: Common problems related to behavior Number of competencies: (11) Number of procedures that require certification: (NIL)									
PE5.1	Describe the clinical features, diagnosis and management of thumb sucking	K	K	N	Lecture, Small group discussion	Written			
PE5.2	Describe the clinical features, diagnosis and management of Feeding problems	K	K	N	Lecture, Small group discussion	Written			
PE5.3	Describe the clinical features, diagnosis and management of nail biting	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE5.4	Describe the clinical features, diagnosis and management of Breath Holding spells	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE5.5	Describe the clinical features, diagnosis and management of temper tantrums	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE5.6	Describe the clinical features, diagnosis and management of Pica	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE5.7	Describe the clinical features, diagnosis and management of Fussy infant	K	K	N	Lecture, Small group discussion	Written			Psychiatry
PE5.8	Discuss the etiology, clinical features and management of Enuresis	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE5.9	Discuss the etiology, clinical features and management of Encopresis	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE5.10	Discuss the role of child guidance clinic in children with behavioural problems and the referral criteria	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE5.11	Visit to Child Guidance Clinic and observe functioning	K	KH	N	Lecture, Small group discussion	Document in Log Book			
Topic: Adolescent Health & common problems related to Adolescent Health Number of competencies: (13) Number of procedures that require certification: (NIL)									
PE6.1	Define Adolescence and stages of adolescence	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE6.2	Describe the physical, physiological and psychological changes during adolescence (Puberty)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.3	Discuss the general health problems during adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE6.4	Describe adolescent sexuality and common problems related to it	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.5	Explain the Adolescent Nutrition and common nutritional problems	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE6.6	Discuss the common Adolescent eating disorders (Anorexia Nervosa, Bulimia)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.7	Describe the common mental health problems during adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.8	Respecting patient privacy and maintaining confidentiality while dealing with adolescence	A	SH	Y	Bedside clinics	Document in log book			AETCOM
PE6.9	Perform routine Adolescent Health check up including eliciting history, performing examination including SMR (Sexual Maturity Rating), growth assessments (using Growth charts) and systemic exam including thyroid and Breast exam and the HEADSS screening	S	SH	Y	Bedside clinics	Skills station			
PE6.10	Discuss the objectives and functions of AFHS (Adolescent Friendly Health Services) and the referral criteria	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE6.11	Visit to the Adolescent Clinic	S	KH	Y	DOAP session	Document in Log Book			
PE6.12	Enumerate the importance of obesity and other NCD in adolescents	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE6.13	Enumerate the prevalence and the importance of recognition of sexual drug abuse in adolescents and children	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
Topic: To promote and support optimal Breast feeding for Infants Number of competencies: (11) Number of procedures that require certification: (01)									
PE7.1	Awareness on the cultural beliefs and practices of breast feeding	K	K	N	Lecture, Small group discussion	Viva			Obstetrics & Gynaecology
PE7.2	Explain the physiology of lactation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE7.3	Describe the composition and types of breast milk and discuss the differences between cow's milk and Human milk	K	KH	Y	Lecture, debate	Written/ Viva voce		Physiology	
PE7.4	Discuss the advantages of breast milk	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE7.5	Observe the correct technique of breast feeding and distinguish right from wrong techniques	S	P	Y	Bedside clinics, Skills lab	Skill Assessment	3		
PE7.6	Enumerate the baby friendly hospital initiatives	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE7.7	Perform breast examination and identify common problems during lactation such as retracted nipples, cracked nipples, breast engorgement, breast abscess	S	SH	Y	Bedside clinics, Skill Lab	Skill Assessment			Obstetrics & Gynaecology, AETCOM
PE7.8	Educate mothers on ante natal breast care and prepare mothers for lactation	A/C	SH	Y	DOAP session	Document in Log Book			AETCOM
PE7.9	Educate and counsel mothers for best practices in Breast feeding	A/C	SH	Y	DOAP session	Document in Log Book			Obstetrics & Gynaecology, AETCOM
PE7.10	Respects patient privacy	A	SH	Y	DOAP session	Document in Log Book			AETCOM
PE7.11	Participate in Breast Feeding Week Celebration	A	SH	Y	DOAP session	Document in Log Book			
Topic: Complementary Feeding Number of competencies : (05) Number of procedures that require certification: (NIL)									
PE8.1	Define the term Complementary Feeding	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE8.2	Discuss the principles, the initiation, attributes, frequency, techniques and hygiene related to Complementary Feeding including IYCF	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE8.3	Enumerate the common complimentary foods	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE8.4	Elicit history on the Complementary Feeding habits	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment		Community Medicine	
PE8.5	Counsel and educate mothers on the best practices in Complimentary Feeding	A/C	SH	Y	DOAP session	Document in Log Book		Community Medicine	

Topic: Normal nutrition, assessment and monitoring

Numbcompetencies : (07)

Number of procedures that require certification: (NIL)

PE9.1	Describe the age related nutritional needs of infants, children and adolescents including micronutrients and vitamins	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Biochemistry	
PE9.2	Describe the tools and methods for assessment and classification of nutritional status of infants, children and adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE9.3	Explains the Calorific value of common Indian foods	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE9.4	Elicit document and present an appropriate nutritional history and perform a dietary recall	S	SH	Y	Bedside clinic, Skills lab	Skill Assessment		Community Medicine	
PE9.5	Calculate the age related calorie requirement in Health and Disease and identify gap	S	SH	Y	Bedside clinics, Small group discussion	Skill assessment		Community Medicine	
PE9.6	Assess and classify the nutrition status of infants, children and adolescents and recognize deviations	S	SH	Y	Bedside clinic, Small group discussion	Skill Assessment		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE9.7	Plan an appropriate diet in health and disease	S	SH	N	Bedside clinic, Small group discussion	Document in logbook		Community Medicine	
Topic: Provide nutritional support , assessment and monitoring for common nutritional problems Number of competencies: (06) Number of procedures that require certification: (NIL)									
PE10.1	Define and describe the etio-pathogenesis, classify including WHO classification, clinical features, complication and management of Severe Acute Malnourishment (SAM) and Moderate Acute Malnutrition (MAM)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
PE10.2	Outline the clinical approach to a child with SAM and MAM	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
PE10.3	Assessment of a patient with SAM and MAM, diagnosis, classification and planning management including hospital and community based intervention, rehabilitation and prevention	S	SH	Y	Bedside clinics, Skills lab	Skill station		Physiology, Biochemistry	
PE10.4	Identify children with under nutrition as per IMNCI criteria and plan referral	S	SH	Y	DOAP session	Document in log book		Community Medicine	
PE10.5	Counsel parents of children with SAM and MAM	S	SH	Y	Bedside clinic, Skills Station	Document in Log book		AETCOM	
PE10.6	Enumerate the role of locally prepared therapeutic diets and ready to use therapeutic diets	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Obesity in children Number of competencies: (06) Number of procedures that require certification: (01)									
PE11.1	Describe the common etiology, clinical features and management of obesity in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE11.2	Discuss the risk approach for obesity and discuss the prevention strategies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE11.3	Assessment of a child with obesity with regard to eliciting history including physical activity, charting and dietary recall	S	SH	Y	Bedside clinics, Standardized patients	Document in log book			
PE11.4	Examination including calculation of BMI, measurement of waist hip ratio, identifying external markers like acanthosis, striae, pseudogynaecomastia etc	S	SH	Y	Bedside clinics, Standardized patients, Videos	Skills Station			
PE11.5	Calculate BMI, document in BMI chart and interpret	S	P	Y	Bedside clinics, Small group discussion	Document in log book	3		
PE11.6	Discuss criteria for referral	K	K	Y	Small group discussion	Viva voce			
Topic: Micronutrients in Health and disease-1 (Vitamins ADEK, B Complex and C) Number of competencies: (21) Number of procedures that require certification: (NIL)									
PE12.1	Discuss the RDA, dietary sources of Vitamin A and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.2	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin A	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.3	Identify the clinical features of dietary deficiency / excess of Vitamin A	S	SH	Y	Bedside clinics, Small group discussion	Document in log book		Biochemistry	
PE12.4	Diagnose patients with Vitamin A deficiency, classify and plan management	S	SH	N	Bedside clinics, Skill Station	Document in log book		Biochemistry	
PE12.5	Discuss the Vitamin A prophylaxis program and their recommendations	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE12.6	Discuss the RDA, dietary sources of Vitamin D and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.7	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin D (Rickets and Hypervitaminosis D)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.8	Identify the clinical features of dietary deficiency of Vitamin D	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Biochemistry, Physiology, Pathology	
PE12.9	Assess patients with Vitamin D deficiency, diagnose, classify and plan management	S	SH	Y	Bedside clinics	Document in log book		Biochemistry, Physiology, Pathology	
PE12.10	Discuss the role of screening for Vitamin D deficiency	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE12.11	Discuss the RDA, dietary sources of Vitamin E and their role in health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.12	Describe the causes, clinical features, diagnosis and management of deficiency of Vitamin E	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.13	Discuss the RDA, dietary sources of Vitamin K and their role in health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.14	Describe the causes, clinical features, diagnosis management and prevention of deficiency of Vitamin K	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology	
PE12.15	Discuss the RDA, dietary sources of Vitamin B and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.16	Describe the causes, clinical features, diagnosis and management of deficiency of B complex Vitamins	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE12.17	Identify the clinical features of Vitamin B complex deficiency	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Biochemistry	
PE12.18	Diagnose patients with Vitamin B complex deficiency and plan management	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Biochemistry	
PE12.19	Discuss the RDA , dietary sources of Vitamin C and their role in Health and disease	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.20	Describe the causes, clinical features, diagnosis and management of deficiency of Vitamin C (scurvy)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE12.21	Identify the clinical features of Vitamin C deficiency	S	SH	N	Bedside clinics, Skill lab	Document in log book		Biochemistry	
Topic: Micronutrients in Health and disease -2: Iron, Iodine, Calcium, Magnesium Number of competencies: (14) Number of procedures that require certification: (NIL)									
PE13.1	Discuss the RDA, dietary sources of Iron and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry	
PE13.2	Describe the causes, diagnosis and management of Fe deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry	
PE13.3	Identify the clinical features of dietary deficiency of Iron and make a diagnosis	S	SH	Y	Bedside clinics, Skills lab	Document in log book		Pathology, Biochemistry	
PE13.4	Interpret hemogram and Iron Panel	S	SH	Y	Bedside clinic, Small group discussion	Skill Assessment		Pathology, Biochemistry	
PE13.5	Propose a management plan for Fe deficiency anaemia	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment		Pathology, Pharmacology	
PE13.6	Discuss the National anaemia control program and its recommendations	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE13.7	Discuss the RDA , dietary sources of Iodine and their role in Health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.8	Describe the causes, diagnosis and management of deficiency of Iodine	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.9	Identify the clinical features of Iodine deficiency disorders	S	SH	N	Lecture, Bedside clinic	Written/ Viva voce		Biochemistry	
PE13.10	Discuss the National Goiter Control program and their recommendations	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Community Medicine	
PE13.11	Discuss the RDA, dietary sources of Calcium and their role in health and disease	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.12	Describe the causes, clinical features, diagnosis and management of Ca Deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.13	Discuss the RDA, dietary sources of Magnesium and their role in health and disease	K	K	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
PE13.14	Describe the causes, clinical features, diagnosis and management of Magnesium Deficiency	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Biochemistry	
Topic: Toxic elements and free radicals and oxygen toxicity Number of competencies: (05) Number of procedures that require certification (NIL)									
PE14.1	Discuss the risk factors, clinical features, diagnosis and management of Lead Poisoning	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PE14.2	Discuss the risk factors, clinical features, diagnosis and management of Kerosene ingestion	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE14.3	Discuss the risk factors, clinical features, diagnosis and management of Organophosphorous poisoning	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE14.4	Discuss the risk factors, clinical features, diagnosis and management of paracetamol poisoning	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PE14.5	Discuss the risk factors, clinical features, diagnosis and management of Oxygen toxicity	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Fluid and electrolyte balance Number of competencies:(07) Number of procedures that require certification:(NIL)									
PE15.1	Discuss the fluid and electrolyte requirement in health and disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE15.2	Discuss the clinical features and complications of fluid and electrolyte imbalance and outline the management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE15.3	Calculate the fluid and electrolyte requirement in health	S	SH	Y	Bedside clinics, Small group discussion	Skill Assessment			
PE15.4	Interpret electrolyte report	S	SH	Y	Bedside clinics, Small group discussion	Skill Assessment			
PE15.5	Calculate fluid and electrolyte imbalance	S	SH	Y	Bedside clinics, Small group discussion	Skill Assessment			
PE15.6	Demonstrate the steps of inserting an IV cannula in a model	S	SH	Y	Skills Lab	mannequin			
PE15.7	Demonstrate the steps of inserting an interosseous line in a mannequin	S	SH	Y	Skills Lab	mannequin			
Topic: Integrated Management of Neonatal and Childhood Illnesses (IMNCI) Guideline Number of competencies:(03) Number of procedures that require certification: (NIL)									
PE16.1	Explain the components of Integrated Management of Neonatal and Childhood Illnesses (IMNCI) guidelines and method of Risk stratification	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE16.2	Assess children <2 months using IMNCI Guidelines	S	SH	Y	DOAP session	Document in log Book			
PE16.3	Assess children >2 to 5 years using IMNCI guidelines and Stratify Risk	S	SH	Y	DOAP session	Document in log Book			
Topic: The National Health programs, NHM Number of competencies:(02) Number of procedures that require certification: (NIL)									
PE17.1	State the vision and outline the goals, strategies and plan of action of NHM and other important national programs pertaining to maternal and child health including RMNCH A+, RBSK, RKSK, JSSK mission Indradhanush and ICDS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE17.2	Analyse the outcomes and appraise the monitoring and evaluation of NHM	K	KH	Y	Debate	Written/ Viva voce		Community Medicine	
Topic: The National Health Programs: RCH Number of competencies: (08) Number of procedures that require certification: (NIL)									
PE18.1	List and explain the components, plan, outcome of Reproductive Child Health (RCH) program and appraise its monitoring and evaluation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	Obstetrics & Gynaecology
PE18.2	Explain preventive interventions for child survival and safe motherhood	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	Obstetrics & Gynaecology
PE18.3	Conduct Antenatal examination of women independently and apply at-risk approach in antenatal care	S	SH	Y	Bedside clinics	Skill station		Community Medicine	Obstetrics & Gynaecology
PE18.4	Provide intra-natal care and conduct a normal delivery in a simulated environment	S	SH	Y	DOAP session, Skills lab	Document in Log Book		Community Medicine	Obstetrics & Gynaecology
PE18.5	Provide intra-natal care and observe the conduct of a normal delivery	S	SH	Y	DOAP session	Document in Log Book			Obstetrics & Gynaecology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE18.6	Perform Postnatal assessment of newborn and mother, provide advice on breast feeding, weaning and on family planning	S	SH	Y	Bed side clinics, Skill Lab	Skill Assessment		Community Medicine	Obstetrics & Gynaecology
PE18.7	Educate and counsel caregivers of children	A	SH	Y	Postnatal ward, standardized patient	Skill Assessment		AETCOM	
PE18.8	Observe the implementation of the program by visiting the Rural Health Centre	S	KH	Y	Bed side clinics, Skill Lab	Document in log book		Community Medicine	Obstetrics & Gynaecology
Topic: National Programs, RCH - Universal Immunizations program Number of competencies: (16) Number of procedures that require certification: (01)									
PE19.1	Explain the components of the Universal Immunization Program and the National Immunization Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry	
PE19.2	Explain the epidemiology of Vaccine preventable diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry	
PE19.3	Vaccine description with regard to classification of vaccines, strain used, dose, route, schedule, risks, benefits and side effects, indications and contraindications	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry	
PE19.4	Define cold chain and discuss the methods of safe storage and handling of vaccines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry	
PE19.5	Discuss immunization in special situations – HIV positive children, immunodeficiency, pre-term, organ transplants, those who received blood and blood products, splenectomised children, adolescents, travellers	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry	
PE19.6	Assess patient for fitness for immunization and prescribe an age appropriate immunization schedule	S	P	Y	Out Patient clinics Skills lab	Skill Assessment	5		

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE19.7	Educate and counsel a patient for immunization	A/C	SH	Y	DOAP session	Document in Log Book			
PE19.8	Demonstrate willingness to participate in the National and sub national immunisation days	A	SH	Y	Lecture, Small group discussion	Document in Log Book		Community Medicine	
PE19.9	Describe the components of safe vaccine practice – Patient education/ counselling; adverse events following immunization, safe injection practices, documentation and Medico-legal implications	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			AETCOM
PE19.10	Observe the handling and storing of vaccines	S	SH	Y	DOAP session	Written/ Viva voce			
PE19.11	Document Immunization in an immunization record	S	SH	Y	Out Patient clinics, Skills lab	Skill assessment			
PE19.12	Observe the administration of UIP vaccines	S	SH	Y	DOAP session	Document in Log Book		Community Medicine	
PE19.13	Demonstrate the correct administration of different vaccines in a mannequin	S	SH	Y	DOAP session	Document in Log Book			
PE19.14	Practice Infection control measures and appropriate handling of the sharps	S	SH	Y	DOAP session	Document in Log Book			
PE19.15	Explain the term implied consent in Immunization services	K	K	Y	Small group discussion	Written/ Viva voce			
PE19.16	Enumerate available newer vaccines and their indications including pentavalent pneumococcal, rotavirus, JE, typhoid IPV & HPV	K	K	N	Lecture, Small group discussion	Written/ Viva voce			

Topic: Care of the Normal New born, and High risk New born

Number of competencies: (20)

Number of procedures that require certification: (NIL)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE20.1	Define the common neonatal nomenclatures including the classification and describe the characteristics of a Normal Term Neonate and High Risk Neonates	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.2	Explain the care of a normal neonate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.3	Perform Neonatal resuscitation in a manikin	S	SH	Y	DOAP session	Log book entry of Performance			
PE20.4	Assessment of a normal neonate	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE20.5	Counsel / educate mothers on the care of neonates	A/C	SH	Y	DOAP session	Log book documentation			
PE20.6	Explain the follow up care for neonates including Breast Feeding, Temperature maintenance, immunization, importance of growth monitoring and red flags	S	SH	Y	DOAP session	Log book entry			Obstetrics & Gynaecology
PE20.7	Discuss the etiology, clinical features and management of Birth asphyxia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.8	Discuss the etiology, clinical features and management of respiratory distress in New born including meconium aspiration and transient tachypnoea of newborn	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.9	Discuss the etiology, clinical features and management of Birth injuries	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.10	Discuss the etiology, clinical features and management of Hemorrhagic disease of New born	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE20.11	Discuss the clinical characteristics, complications and management of Low birth weight (preterm and Small for gestation)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.12	Discuss the temperature regulation in neonates, clinical features and management of Neonatal Hypothermia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.13	Discuss the temperature regulation in neonates, clinical features and management of Neonatal Hypoglycemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.14	Discuss the etiology, clinical features and management of Neonatal hypocalcemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.15	Discuss the etiology, clinical features and management of Neonatal seizures	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.16	Discuss the etiology, clinical features and management of Neonatal Sepsis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.17	Discuss the etiology, clinical features and management of Perinatal infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.18	Identify and stratify risk in a sick neonate using IMNCI guidelines	S	SH	Y	DOAP session	Document in Log Book			
PE20.19	Discuss the etiology, clinical features and management of Neonatal hyperbilirubinemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE20.20	Identify clinical presentations of common surgical conditions in the new born including TEF, esophageal atresia, anal atresia, cleft lip and palate, congenital diaphragmatic hernia and causes of acute abdomen	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Genito-Urinary system Number of competencies: (17) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE21.1	Enumerate the etio-pathogenesis, clinical features, complications and management of Urinary Tract infection in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE21.2	Enumerate the etio-pathogenesis, clinical features, complications and management of acute post-streptococcal Glomerular Nephritis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.3	Discuss the approach and referral criteria to a child with Proteinuria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.4	Discuss the approach and referral criteria to a child with Hematuria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
PE21.5	Enumerate the etio-pathogenesis, clinical features, complications and management of Acute Renal Failure in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.6	Enumerate the etio-pathogenesis, clinical features, complications and management of Chronic Renal Failure in Children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.7	Enumerate the etio-pathogenesis, clinical features, complications and management of Wilms Tumor	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE21.8	Elicit, document and present a history pertaining to diseases of the Genitourinary tract	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			General Surgery
PE21.9	Identify external markers for Kidney disease, like Failing to thrive, hypertension, pallor, Ichthyosis, anasarca	S	SH	Y	Bedside clinics, Skills lab	Document in log book			
PE21.10	Analyse symptom and interpret the physical findings and arrive at an appropriate provisional / differential diagnosis	S	SH	Y	Bedside clinics, Skills lab	Log book			
PE21.11	Perform and interpret the common analytes in a Urine examination	S	SH	Y	Bedside clinics, Skills lab	Skill assessment		Biochemistry, Pathology	
PE21.12	Interpret report of Plain X Ray of KUB	S	SH	Y	Bedside clinics, Skills lab	Log book		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE21.13	Enumerate the indications for and Interpret the written report of Ultra sonogram of KUB	S	SH	Y	Bedside clinics, Skills lab	Log book		Radiodiagnosis	
PE21.14	Recognize common surgical conditions of the abdomen and genitourinary system and enumerate the indications for referral including acute and subacute intestinal obstruction, appendicitis, pancreatitis, perforation intussusception, Phimosis, undescended testis, Chordee, hypospadiasis, Torsion testis, hernia Hydrocele, Vulval Synechiae	S	SH	Y	Bedside clinics, Skills lab	Log book assessment			General Surgery
PE21.15	Discuss and enumerate the referral criteria for children with genitourinary disorder	S	SH	Y	Bedside clinics, Skills lab	Log book assessment			
PE21.16	Counsel / educate a patient for referral appropriately	A/C	SH	Y	DOAP session	Document in Log book		AETCOM	
PE21.17	Describe the etiopathogenesis, grading, clinical features and management of hypertension in children	K	KH	Y	Lecture, Small group discussion	Short notes			
Topic: Approach to and recognition of a child with possible Rheumatologic problem Number of competencies: (03) Number of procedures that require certification:(NIL)									
PE22.1	Enumerate the common Rheumatological problems in children. Discuss the clinical approach to recognition and referral of a child with Rheumatological problem	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE22.2	Counsel a patient with Chronic illness	S	SH	N	Bedside clinics Skills lab	Log book			
PE22.3	Describe the diagnosis and management of common vasculitic disorders including Henoch Schonlein Purpura, Kawasaki Disease, SLE, JIA	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
Topic: Cardiovascular system- Heart Diseases Number of competencies: (18) Number of procedures that require certification:(NIL)									
PE23.1	Discuss the Hemodynamic changes, clinical presentation, complications and management of Acyanotic Heart Diseases –VSD, ASD and PDA	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE23.2	Discuss the Hemodynamic changes, clinical presentation, complications and management of Cyanotic Heart Diseases – Fallot's Physiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.3	Discuss the etio-pathogenesis, clinical presentation and management of cardiac failure in infant and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.4	Discuss the etio-pathogenesis, clinical presentation and management of Acute Rheumatic Fever in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.5	Discuss the clinical features, complications, diagnosis, management and prevention of Acute Rheumatic Fever	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
PE23.6	Discuss the etio-pathogenesis, clinical features and management of Infective endocarditis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology, Microbiology	
PE23.7	Elicit appropriate history for a cardiac disease, analyse the symptoms e.g. breathlessness, chest pain, tachycardia, feeding difficulty, failing to thrive, reduced urinary output, swelling, syncope, cyanotic spells, Suck rest cycle, frontal swelling in infants. Document and present	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE23.8	Identify external markers of a cardiac disease e.g. Cyanosis, Clubbing, dependent edema, dental caries, arthritis, erythema rash, chorea, subcutaneous nodules, Oslers node, Janeway lesions and document	S	SH	Y	Bedside clinics, Skills Lab	Skill Assessment			
PE23.9	Record pulse, blood pressure, temperature and respiratory rate and interpret as per the age	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE23.10	Perform independently examination of the cardiovascular system – look for precordial bulge, pulsations in the precordium, JVP and its significance in children and infants, relevance of percussion in Pediatric examination, Auscultation and other system examination and document	S	SH	Y	Bedside clinics, Skills lab	Skill station			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE23.11	Develop a treatment plan and prescribe appropriate drugs including fluids in cardiac diseases, anti -failure drugs, and inotropic agents	S	SH	Y	Bedside clinics, Skills lab	log book			
PE23.12	Interpret a chest X ray and recognize Cardiomegaly	S	SH	Y	Bedside clinics, Skills lab	Log book entry		Radiodiagnosis	
PE23.13	Choose and Interpret blood reports in Cardiac illness	S	P	Y	Bedside clinics, Small group discussion	Log book entry			
PE23.14	Interpret Pediatric ECG	S	SH	Y	Bedside clinics, Skills lab	Log book entry			
PE23.15	Use the ECHO reports in management of cases	S	SH	Y	Bedside clinics	Log book entry		Radiodiagnosis	
PE23.16	Discuss the indications and limitations of Cardiac catheterization	K	K	N	Small group discussion	Viva voce			
PE23.17	Enumerate some common cardiac surgeries like BT shunt, Potts and Waterston's and corrective surgeries	K	K	N	Small group discussion	Viva voce			
PE23.18	Demonstrate empathy while dealing with children with cardiac diseases in every patient encounter	A	SH	Y	Small group discussion	Document in Log Book		AETCOM	
Topic:Diarrhoeal diseases and Dehydration Number of competencies: (17) Number of procedures that require certification:(03)									
PE24.1	Discuss the etio-pathogenesis, classification, clinical presentation and management of diarrheal diseases in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	
PE24.2	Discuss the classification and clinical presentation of various types of diarrheal dehydration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE24.3	Discuss the physiological basis of ORT, types of ORS and the composition of various types of ORS	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE24.4	Discuss the types of fluid used in Paediatric diarrheal diseases and their composition	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE24.5	Discuss the role of antibiotics, antispasmodics, anti-secretory drugs, probiotics, anti-emetics in acute diarrheal diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
PE24.6	Discuss the causes, clinical presentation and management of persistent diarrhoea in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE24.7	Discuss the causes, clinical presentation and management of chronic diarrhoea in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE24.8	Discuss the causes, clinical presentation and management of dysentery in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology	
PE24.9	Elicit, document and present history pertaining to diarrheal diseases	S	SH	Y	Bedside clinics, Skills lab	Skill assessment			
PE24.10	Assess for signs of dehydration, document and present	S	SH	Y	Bedside clinics, Skills lab	Skill assessment			
PE24.11	Apply the IMNCI guidelines in risk stratification of children with diarrheal dehydration and refer	S	SH	Y	Bedside clinics, Skills lab	Document in Log book			
PE24.12	Perform and interpret stool examination including Hanging Drop	S	SH	N	Bedside clinics, Skills lab	Log book		Microbiology	
PE24.13	Interpret RFT and electrolyte report	S	SH	Y	Bedside clinics, Small group discussion	Document in Log Book			
PE24.14	Plan fluid management as per the WHO criteria	S	SH	Y	Bedside clinics, Small group activity	Skills Station			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE24.15	Perform NG tube insertion in a manikin	S	P	Y	DOAP session	Document in Log book	2		
PE24.16	Perform IV cannulation in a model	S	P	Y	DOAP session	Document in Log book	2		
PE24.17	Perform Interosseous insertion model	S	P	Y	DOAP session	Document in Log book	2		
Topic: Malabsorption Number of competencies: (01) Number of procedures that require certification:(NIL)									
PE25.1	Discuss the etio-pathogenesis, clinical presentation and management of Malabsorption in Children and its causes including celiac disease	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
Topic: Acute and chronic liver disorders Number of competencies: (13) Number of procedures that require certification: (NIL)									
PE26.1	Discuss the etio-pathogenesis, clinical features and management of acute hepatitis in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.2	Discuss the etio-pathogenesis, clinical features and management of Fulminant Hepatic Failure in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.3	Discuss the etio-pathogenesis, clinical features and management of chronic liver diseases in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology	
PE26.4	Discuss the etio-pathogenesis, clinical features and management of Portal Hypertension in children	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Pathology	
PE26.5	Elicit document and present the history related to diseases of Gastrointestinal system	S	SH	Y	Bedside clinics, Skills lab	Skills Station			
PE26.6	Identify external markers for GI and Liver disorders e.g.. Jaundice, Pallor, Gynaecomastia, Spider angioma, Palmar erythema, Icthyosis, Caput medusa, Clubbing, Failing to thrive, Vitamin A and D deficiency	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE26.7	Perform examination of the abdomen, demonstrate organomegaly, ascites etc.	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE26.8	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	S	SH	Y	Bedside clinics, Skill lab	Skill Assessment			
PE26.9	Interpret Liver Function Tests, viral markers, ultra sonogram report	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment		Pathology	
PE26.10	Demonstrate the technique of liver biopsy in a Perform Liver Biopsy in a simulated environment	S	SH	Y	DOAP session	Document in log book			
PE26.11	Enumerate the indications for Upper GI endoscopy	K	K	N	Small group discussion	Viva voce			
PE26.12	Discuss the prevention of Hep B infection – Universal precautions and Immunisation	K	KH	Y	Lecture, Small group activity	Written/ Viva voce		Microbiology	
PE26.13	Counsel and educate patients and their family appropriately on liver diseases	A/C	P	y	Bedside clinics, Skills lab	Document in log book			
Topic: Pediatric Emergencies – Common Pediatric Emergencies Number of competencies: (35) Number of procedures that require certification:(10)									
PE27.1	List the common causes of morbidity and mortality in the under five children	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.2	Describe the etio-pathogenesis, clinical approach and management of cardiorespiratory arrest in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.3	Describe the etio-pathogenesis of respiratory distress in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE27.4	Describe the clinical approach and management of respiratory distress in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.5	Describe the etio-pathogenesis, clinical approach and management of Shock in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.6	Describe the etio-pathogenesis, clinical approach and management of Status epilepticus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.7	Describe the etio-pathogenesis, clinical approach and management of an unconscious child	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.8	Discuss the common types, clinical presentations and management of poisoning in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.9	Discuss oxygen therapy, in Pediatric emergencies and modes of administration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.10	Observe the various methods of administering Oxygen	S	KH	Y	Demonstration	Document in log book			
PE27.11	Explain the need and process of triage of sick children brought to health facility	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.12	Enumerate emergency signs and priority signs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.13	List the sequential approach of assessment of emergency and priority signs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.14	Assess emergency signs and prioritize	S	SH	Y	DOAP session, Skills lab	Skills Assessment			
PE27.15	Assess airway and breathing: recognise signs of severe respiratory distress. Check for cyanosis, severe chest indrawing, grunting	S	P	Y	DOAP session, Skills lab	Skills Assessment	3		

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE27.16	Assess airway and breathing. Demonstrate the method of positioning of an infant & child to open airway in a simulated environment	S	P	Y	DOAP session, Skills Lab	Skills Assessment	3		
PE27.17	Assess airway and breathing: administer oxygen using correct technique and appropriate flow rate	S	P	Y	DOAP session, Skills Lab	Skills Assessment	3		
PE27.18	Assess airway and breathing: perform assisted ventilation by Bag and mask in a simulated environment	S	P	Y	DOAP session, Skills lab	Skills Assessment	3		
PE27.19	Check for signs of shock i.e. pulse, Blood pressure, CRT	S	P	Y	DOAP session, Skills Lab	Skills Assessment	3		
PE27.20	Secure an IV access in a simulated environment	S	P	Y	DOAP session, Skills Lab	Skills Assessment	3		
PF27.21	Choose the type of fluid and calculate the fluid requirement in shock	S	P	Y	DOAP session, Small group activity	Skills Assessment	3		
PE27.22	Assess level of consciousness & provide emergency treatment to a child with convulsions/ coma - Position an unconscious child - Position a child with suspected trauma - Administer IV/per rectal Diazepam for a convulsing child in a simulated environment	S	P	Y	DOAP session, Skills Lab	Skills Assessment	3		
PE27.23	Assess for signs of severe dehydration	S	P	Y	Bedside clinics, Skills lab	Skill station	3		
PE27.24	Monitoring and maintaining temperature: define hypothermia. Describe the clinical features, complications and management of Hypothermia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.25	Describe the advantages and correct method of keeping an infant warm by skin to skin contact	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE27.26	Describe the environmental measures to maintain temperature	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.27	Assess for hypothermia and maintain temperature	S	SH	Y	Skills lab	Skills Assessment			
PE27.28	Provide BLS for children in manikin	S	P	Y	Skills Lab		3		
PE.27.29	Discuss the common causes, clinical presentation, medico-legal implications of abuse	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE27.30	Demonstrate confidentiality with regard to abuse	A	SH	Y	Skills lab, standardized patients	Skills Station			
PE27.31	Assess child for signs of abuse	S	SH	Y	DOAP session, Skills lab	Log book			
PE27.32	Counsel parents of dangerously ill / terminally ill child to break a bad news	S	SH	Y	DOAP session	Document in Log book			
PE27.33	Obtain Informed Consent	S	SH	Y	DOAP session	Document in Log book			
PE27.34	Willing to be a part of the ER team	A	SH	Y	DOAP session	Document in Log book			
PE27.35	Attends to emergency calls promptly	A	SH	Y	DOAP session	Document in Log Book			
Topic: Respiratory system Number of competencies: (20) Number of procedures that require certification: (NIL)									
PE28.1	Discuss the etio-pathogenesis, clinical features and management of Naso pharyngitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.2	Discuss the etio-pathogenesis of Pharyngo Tonsillitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE28.3	Discuss the clinical features and management of Pharyngo Tonsillitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.4	Discuss the etio-pathogenesis, clinical features and management of Acute Otitis Media (AOM)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.5	Discuss the etio-pathogenesis, clinical features and management of Epiglottitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.6	Discuss the etio-pathogenesis, clinical features and management of Acute laryngo- trachea-bronchitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.7	Discuss the etiology, clinical features and management of Stridor in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.8	Discuss the types, clinical presentation, and management of foreign body aspiration in infants and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.9	Elicit, document and present age appropriate history of a child with upper respiratory problem including Stridor	S	SH	Y	Bedside clinics, skill lab	Skill Assessment		ENT	
PE28.10	Perform otoscopic examination of the ear	S	SH	Y	DOAP session	Skills Assessment		ENT	
PE28.11	Perform throat examination using tongue depressor	S	SH	Y	DOAP session	Skills Assessment		ENT	
PE28.12	Perform examination of the nose	S	SH	Y	DOAP session	Skills Assessment		ENT	
PE28.13	Analyse the clinical symptoms and interpret physical findings and make a provisional / differential diagnosis in a child with ENT symptoms	S	SH	Y	Bedside clinics	Skills Assessment			
PE28.14	Develop a treatment plan and document appropriately in a child with upper respiratory symptoms	S	SH	Y	Bedside clinics	Skills Assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE28.15	Stratify risk in children with stridor using IMNCI guidelines	S	SH	Y	Bedside clinics	Log book documentation			
PE28.16	Interpret blood tests relevant to upper respiratory problems	S	SH	N	Bedside clinics, Small group discussion	Log book			
PE28.17	Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in pediatric chest X-rays	S	SH	Y	Bedside clinics, Small group discussion	Skills Assessment		ENT, Radiodiagnosis	
PE28.18	Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of lower respiratory infections including bronchiolitis, wheeze associated LRTI Pneumonia and empyema	S	SH	Y	Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce			
PE28.19	Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of asthma in children	S	SH	Y	Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce		Respiratory Medicine	
PE28.20	Counsel the child with asthma on the correct use of inhalers in a simulated environment	S	SH	Y	Bedside clinics, Small group discussion, Lecture	Skills Assessment/ Written/ Viva voce		Respiratory Medicine	
Topic: Anemia and other Hemato-oncologic disorders in children Number of competencies: (20) Number of procedures that require certification: (NIL)									
PE29.1	Discuss the etio-pathogenesis, clinical features, classification and approach to a child with anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.2	Discuss the etio-pathogenesis, clinical features and management of Iron Deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE29.3	Discuss the etiopathogenesis, clinical features and management of VIT B12, Folate deficiency anaemia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.4	Discuss the etio-pathogenesis, clinical features and management of Hemolytic anemia, Thalassemia Major, Sickle cell anaemia, Hereditary spherocytosis, Auto-immune hemolytic anaemia and hemolytic uremic syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
PE29.5	Discuss the National Anaemia Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PE29.6	Discuss the cause of thrombocytopenia in children: describe the clinical features and management of Idiopathic Thrombocytopenic Purpura (ITP)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.7	Discuss the etiology, classification, pathogenesis and clinical features of Hemophilia in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.8	Discuss the etiology, clinical presentation and management of Acute Lymphoblastic Leukemia in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.9	Discuss the etiology, clinical presentation and management of lymphoma in children	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	
PE29.10	Elicit, document and present the history related to Hematology	S	SH	Y	Bedside clinics, Skills lab	Skills Station			
PE29.11	Identify external markers for hematological disorders e.g.. Jaundice, Pallor, Petechiae purpura, Ecchymosis, Lymphadenopathy, bone tenderness, loss of weight, Mucosal and large joint bleed	S	SH	Y	Bedside clinics, Skills lab	Skill assessment			
PE29.12	Perform examination of the abdomen, demonstrate organomegaly	S	SH	Y	Bedside clinics, Skills lab	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE29.13	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	S	SH	Y	Bedside clinics, Skill lab	Skill assessment			
PE29.14	Interpret CBC, LFT	S	SH	Y	Bedside clinics, Skills lab	Skill assessment			
PE29.15	Perform and interpret peripheral smear	S	SH	Y	DOAP session	Document in log book			
PE29.16	Discuss the indications for Hemoglobin electrophoresis and interpret report	K	K	N	Small group discussion	Viva voce		Biochemistry	
PE29.17	Demonstrate performance of bone marrow aspiration in manikin	S	SH	Y	Skills lab	Document in log Book			
PE29.18	Enumerate the referral criteria for Hematological conditions	S	SH	Y	Bedside clinics, Small group activity	Viva voce			
PE29.19	Counsel and educate patients about prevention and treatment of anemia	A/C	SH	Y	Bedside clinics, Skills lab	Document in log book			
PE29.20	Enumerate the indications for splenectomy and precautions	K	K	N	Small group Activity	Viva voce			
Topic: Systemic Pediatrics-Central Nervous system Number of competencis: (23) Number of procedures that require certification:(NIL)									
PE30.1	Discuss the etio-pathogenesis, clinical features , complications, management and prevention of meningitis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.2	Distinguish bacterial, viral and tuberculous meningitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.3	Discuss the etio-pathogenesis, classification, clinical features, complication and management of Hydrocephalus in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE30.4	Discuss the etio-pathogenesis, classification, clinical features, and management of Microcephaly in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.5	Enumerate the Neural tube defects. Discuss the causes, clinical features, types, and management of Neural Tube defect	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.6	Discuss the etio-pathogenesis, clinical features, and management of Infantile hemiplegia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.7	Discuss the etio-pathogenesis, clinical features, complications and management of Febrile seizures in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.8	Define epilepsy. Discuss the pathogenesis, clinical types, presentation and management of Epilepsy in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.9	Define status Epilepticus. Discuss the clinical presentation and management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.10	Discuss the etio-pathogenesis, clinical features and management of Mental retardation in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.11	Discuss the etio-pathogenesis, clinical features and management of children with cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.12	Enumerate the causes of floppiness in an infant and discuss the clinical features, differential diagnosis and management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.13	Discuss the etio-pathogenesis, clinical features, management and prevention of Poliomyelitis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE30.14	Discuss the etio-pathogenesis, clinical features and management of Duchene muscular dystrophy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.15	Discuss the etio-pathogenesis, clinical features and management of Ataxia in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE30.16	Discuss the approach to and management of a child with headache	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE30.17	Elicit document and present an age appropriate history pertaining to the CNS	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE30.18	Demonstrate the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE30.19	Analyse symptoms and interpret physical findings and propose a provisional / differential diagnosis	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
PE30.20	Interpret and explain the findings in a CSF analysis	S	SH	Y	Small group discussion	Log book		Microbiology	
PE30.21	Enumerate the indication and discuss the limitations of EEG, CT, MRI	K	K	N	Bedside clinics	Log book			
PE30.22	Interpret the reports of EEG, CT, MRI	S	SH	Y	Bedside clinics, Skills lab	Log book		Radiodiagnosis	
PE30.23	Perform in a mannequin lumbar puncture. Discuss the indications, contraindication of the procedure	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			
Topic: Allergic Rhinitis , Atopic Dermatitis, Bronchial Asthma , Urticaria Angioedema Number of competencies: (12) Number of procedures that require certification: (NIL)									
PE31.1	Describe the etio-pathogenesis, management and prevention of Allergic Rhinitis in Children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE31.2	Recognize the clinical signs of Allergic Rhinitis	S	SH	Y	Bedside clinics' Skill Lab	Skill Assessment		ENT	
PE31.3	Describe the etio-pathogenesis, clinical features and management of Atopic dermatitis in Children	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		ENT	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE31.4	Identify Atopic dermatitis and manage	S	SH		Bedside clinics Skills lab	Skill Assessment		Dermatology, Venereology & Leprosy	
PE31.5	Discuss the etio-pathogenesis, clinical types, presentations, management and prevention of childhood Asthma	K	KH	Y	Lecture Small group discussion	Written/ Viva voce			
PE31.6	Recognise symptoms and signs of Asthma	S	SH	Y	Bedside clinic, Small group activity	Skill Assessment			
PE31.7	Develop a treatment plan for Asthma appropriate to clinical presentation & severity	S	SH	Y	Bedside clinic, Small group activity	Skill Assessment			
PE31.8	Enumerate criteria for referral	K	KH	Y	Bedside clinic, Small group activity	Written/ Viva voce			
PE31.9	Interpret CBC and CX Ray in Asthma	S	SH	Y	Bedside clinic, Small group activity	Skill Assessment			
PE31.10	Enumerate the indications for PFT	K	K	N	Bedside clinic, Small group activity	Viva voce			
PE31.11	Observe administration of Nebulisation	S	SH	Y	DOAP session	Document in log book			
PE31.12	Discuss the etio-pathogenesis, clinical features and complications and management of Urticaria Angioedema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Chromosomal Abnormalities Number of competencies: (13) Number of procedures that require certification: (NIL)									
PE32.1	Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counselling in Down's Syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE32.2	Identify the clinical features of Down's Syndrome	S	SH	Y	Bedside clinics, Skills lab	log book		General Medicine	
PE32.3	Interpret normal Karyotype and recognize Trisomy 21	S	SH	Y	Bedside clinics, Skills lab	Log book			General Medicine
PE32.4	Discuss the referral criteria and Multidisciplinary approach to management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE32.5	Counsel parents regarding 1. Present child 2. Risk in the next pregnancy	A/C	SH	N	Bedside clinics, Skills lab	Log book			
PE32.6	Discuss the genetic basis, risk factors, clinical features, complications, prenatal diagnosis, management and genetic counselling in Turner's Syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Obstetrics & Gynaecology	
PE32.7	Identify the clinical features of Turner Syndrome	S	SH	N	Bedside clinics, Skills lab	Log book		General Medicine	
PE32.8	Interpret normal Karyotype and recognize the Turner Karyotype	S	SH	N	Bedside clinics, Skills lab	log book		General Medicine, Obstetrics & Gynaecology	
PE32.9	Discuss the referral criteria and multidisciplinary approach to management of Turner Syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Obstetrics & Gynaecology
PE32.10	Counsel parents regarding 1. Present child 2. Risk in the next pregnancy	A/C	SH	N	Bedside clinics, Skills lab	Log book			
PE32.11	Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counselling in Klinefelter Syndrome	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE32.12	Identify the clinical features of Klinefelter Syndrome	S	SH	N	Bedside clinics, Skills lab	Log book		General Medicine	
PE32.13	Interpret normal Karyotype and recognize the Klinefelter Karyotype	S	SH	N	Bedside clinics, Skills lab	Log book		General Medicine	
Topic: Endocrinology Number of competencies: (11) Number of procedures that require certification: (02)									
PE33.1	Describe the etio-pathogenesis clinical features, management of Hypothyroidism in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PE33.2	Recognize the clinical signs of Hypothyroidism and refer	S	SH	Y	Bedside clinics, Skill Lab	Skill Assessment			
PE33.3	Interpret and explain neonatal thyroid screening report	S	SH	Y	Bedside clinics, Small group discussion	Skill Assessment			
PE33.4	Discuss the etio-pathogenesis, clinical types, presentations, complication and management of Diabetes mellitus in children	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce			
PE33.5	Interpret Blood sugar reports and explain the diagnostic criteria for Type 1 Diabetes	S	SH	Y	Bedside clinic, small group activity	Skill Assessment			
PE33.6	Perform and interpret Urine Dip Stick for Sugar	S	P	Y	DOAP session	Skill Assessment	3	Biochemistry	
PE33.7	Perform genital examination and recognize Ambiguous Genitalia and refer appropriately	S	SH	Y	Bedside clinic Skills lab	Skill Assessment			
PE33.8	Define precocious and delayed Puberty	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE33.9	Perform Sexual Maturity Rating (SMR) and interpret	S	SH	Y	Bedside clinics Skills Lab	Skill Assessment			
PE33.10	Recognize precocious and delayed Puberty and refer	S	SH	Y	Bedside clinics Skills Lab	log book			
PE33.11	Identify deviations in growth and plan appropriate referral	S	P	Y	Bedside clinics Skills Lab	log book	2		
Topic:Vaccine preventable Diseases - Tuberculosis Number of competencies: (20) Number of procedures that require certification: (03)									
PE34.1	Discuss the epidemiology, clinical features, clinical types, complications of Tuberculosis in Children and Adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.2	Discuss the various diagnostic tools for childhood tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.5	Able to elicit, document and present history of contact with tuberculosis in every patient encounter	S	SH	Y	Bedside clinics, Skill lab	Skill Assessment			Respiratory Medicine
PE34.6	Identify a BCG scar	S	P	Y	Bedside clinics, Skills lab	Skill Assessment	3	Microbiology	Respiratory Medicine
PE34.7	Interpret a Mantoux test	S	P	Y	Bedside clinics Skills lab	Skill assessment	3	Microbiology	Respiratory Medicine
PE34.8	Interpret a Chest Radiograph	S	SH	Y	Bedside clinics Skills lab	Skill assessment		Radiodiagnosis	Respiratory Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE34.9	Interpret blood tests in the context of laboratory evidence for tuberculosis	S	SH	N	Bedside clinics, Small group discussion	log book		Microbiology	Respiratory Medicine
PE34.10	Discuss the various samples for demonstrating the organism e.g. Gastric Aspirate, Sputum , CSF, FNAC	K	KH	Y	Bedside clinics, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.11	Perform AFB staining	S	P	Y	DOAP session	Log book/Journal	3	Microbiology	Respiratory Medicine
PE34.12	Enumerate the indications and discuss the limitations of methods of culturing M.Tuberculi	K	KH	Y	Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.13	Enumerate the newer diagnostic tools for Tuberculosis including BACTEC CBNAAT and their indications	K	K	N	Lecture, Small group discussion	Written/ Viva voce			
PE34.14	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of fever in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE34.15	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with exanthematous illnesses like Measles, Mumps, Rubella & Chicken pox	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE34.16	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Diphtheria, Pertussis, Tetanus.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE34.17	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Typhoid	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PE34.18	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Dengue, Chikungunya and other vector born diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE34.19	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of children with Common Parasitic infections, malaria, leishmaniasis, filariasis, helminthic infestations, amebiasis, giardiasis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
PE34.20	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Rickettsial diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
Topic: The role of the physician in the community									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN25.5	Describe developmental basis of congenital anomalies, transposition of great vessels, dextrocardia, patent ductus arteriosus and coarctation of aorta	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics	Physiology
AN25.9	Demonstrate surface marking of lines of pleural reflection, Lung borders and fissures, Trachea, Heart borders, Apex beat & surface projection of valves of heart	K/S	SH	Y	Practical	Viva voce/ skill assessment		General Medicine, Pediatrics	Physiology
AN63.2	Describe anatomical basis of congenital hydrocephalus	K	KH	N	Lecture	Written		Pediatrics	Physiology
AN64.3	Describe various types of open neural tube defects with its embryological basis	K	KH	N	Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
AN74.1	Describe the various modes of inheritance with examples	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	
AN74.2	Draw pedigree charts for the various types of inheritance & give examples of diseases of each mode of inheritance	K	KH	Y	Lecture	Written		General Medicine, Pediatrics	
AN74.4	Describe the genetic basis & clinical features of Achondroplasia, Cystic Fibrosis, Vitamin D resistant rickets, Hemophilia, Duchene's muscular dystrophy & Sickle cell anaemia	K	KH	N	Lecture	Written		General Medicine, Pediatrics	
AN75.1	Describe the structural and numerical chromosomal aberrations	K	KH	Y	Lecture	Written		Pediatrics	
AN75.2	Explain the terms mosaics and chimeras with example	K	KH	N	Lecture	Written		Pediatrics	
AN75.3	Describe the genetic basis & clinical features of Prader Willi syndrome, Edward syndrome & Patau syndrome	K	KH	N	Lecture	Written		Pediatrics	
AN75.4	Describe genetic basis of variation; polymorphism and mutation	K	KH	Y	Lecture	Written		Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AN75.5	Describe the principles of genetic counselling	K	KH	Y	Lecture	Written		Pediatrics, Obstetrics & Gynaecology	
Physiology									
PY11.6	Describe physiology of Infancy	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PY11.9	Interpret growth charts	K	KH	Y	Small group teaching	Practical/OSPE/ Viva voce		Pediatrics	
PY11.10	Interpret anthropometric assessment of infants	K	KH	Y	Small group teaching	Practical/OSPE/Viva voce		Pediatrics	
Biochemistry									
BI5.3	Describe the digestion and absorption of dietary proteins	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI5.4	Describe common disorders associated with protein metabolism	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI7.3	Describe gene mutations and basic mechanism of regulation of gene expression	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
BI7.4	Describe applications of recombinant DNA technology, PCR in the diagnosis and treatment of diseases with genetic basis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	
BI8.1	Discuss the importance of various dietary components and explain importance of dietary fibre	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	
BI8.2	Describe the types and causes of protein energy malnutrition and its effects	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
BI8.5	Summarize the nutritional importance of commonly used items of food including fruits and vegetables. (macro-molecules & its importance)	K	KH	Y	Lecture , Small group discussion	Written/ Viva voce		Community Medicine, General Medicine, Pediatrics	
BI10.5	Describe antigens and concepts involved in vaccine development	K	KH	Y	Lecture , Small group discussion	Written/ Viva voce		Pathology, Pediatrics, Microbiology	
Pathology									
PA12.2	Describe the pathogenesis of disorders caused by protein calorie malnutrition and starvation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Pediatrics	
PA21.2	Classify and describe the etiology, pathogenesis and pathology of vascular and platelet disorders including ITP and hemophilias	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA28.12	Define, classify and describe the genetics, inheritance etiology, pathogenesis, pathology, laboratory, urinary findings, distinguishing features, progression and complications of cystic disease of the kidney	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
PA28.14	Classify and describe the etiology, genetics, pathogenesis, pathology, presenting features, progression and spread of renal tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PA31.4	Enumerate and describe the etiology, hormonal dependency and pathogenesis of gynecomastia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine	
PA35.2	Classify and describe the etiology, genetics, pathogenesis, pathology, presentation sequelae and complications of CNS tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
Microbiology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
MI1.8	Describe the mechanisms of immunity and response of the host immune system to infections	K	KH	Y	Lecture	Written/ Viva voce		Pediatrics	Pathology
MI1.9	Discuss the immunological basis of vaccines and describe the Universal Immunisation schedule	K	KH	Y	Lecture	Written/ Viva voce		Paediatrics	
MI1.10	Describe the immunological mechanisms in immunological disorder (hypersensitivity, autoimmune disorders and immunodeficiency states) and discuss the laboratory methods used in detection	K	KH	Y	Lecture	Written/ Viva voce		Paediatrics	
MI3.1	Enumerate the microbial agents causing diarrhea and dysentery. Describe the epidemiology, morphology, pathogenesis, clinical features, and diagnostic modalities of these agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI3.2	Identify the common etiologic agents of diarrhea and dysentery	S	SH	Y	DOAP session	Skill assessment		General Medicine, Paediatrics	
MI5.1	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of meningitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI5.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of encephalitis	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Paediatrics	Pathology
MI5.3	Identify the microbial agents causing meningitis	S	SH	Y	DOAP session	Skill assessment		General Medicine, Paediatrics	
Pharmacology									
PH1.12	Calculate the dosage of drugs using appropriate formulae for an individual patient, including children, elderly and patient with renal dysfunction	K/S	SH	Y	Lecture, practical	Written/ Viva voce		Pediatrics, General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.43	Describe and discuss the rational use of antimicrobials including antibiotic stewardship program	K	KH	Y	Lecture	Written/ Viva voce		General Medicine Pediatrics	Microbiology
PH1.56	Describe basic aspects of Geriatric and Pediatric pharmacology	K	KH	Y	Lecture	Written/ Viva voce		Pediatrics	
PH2.4	Demonstrate the correct method of calculation of drug dosage in patients including those used in special situations	S	SH	Y	DOAP sessions	Skills assessment		Pharmacology, General Medicine	
Community Medicine									
CM3.3	Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/ diarrheal diseases	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Microbiology, General Medicine, Pediatrics	
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
CM5.2	Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method	S	SH	Y	DOAP session	Skill Assessment		General Medicine, Pediatrics	
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment	S	SH	Y	DOAP session	Skill Assessment		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics	
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
CM5.8	Describe and discuss the importance and methods of food fortification and effects of additives and adulteration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
CM6.1	Formulate a research question for a study	K	KH	Y	Small group, Lecture, DOAP session	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	S	SH	Y	Small group discussion, Lecture, DOAP session	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs	S	SH	Y	Small group discussion, Lecture, DOAP session	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM6.4	Enumerate, discuss and demonstrate common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion	S	SH	Y	Small group discussion, Lecture, DOAP session	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics	
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	Microbiology, Pathology
CM8.3	Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	
CM8.4	Describe the principles and enumerate the measures to control a disease epidemic	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
CM8.5	Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates	S	SH	Y	Lecture, Small group discussion, DOAP sessions	Skill assessment		Obstetrics & Gynaecology, Pediatrics	
CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.2	Enumerate and describe the methods of screening high risk groups and common health problems	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.4	Describe the reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.5	Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Pediatrics	
Forensic Medicine & Toxicology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially – maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres. -- maintenance of medico-legal register like accident register. -- documents of issuance of wound certificate -- documents of issuance of drunkenness certificate. -- documents of issuance of sickness and fitness certificate. -- documents for issuance of death certificate. -- documents of Medical Certification of Cause of Death - Form Number 4 and 4A -- documents for estimation of age by physical, dental and radiological examination and issuance of certificate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Paediatrics	
FM2.27	Define and discuss infanticide, foeticide and stillbirth	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Pediatrics	
FM2.28	Describe and discuss signs of intrauterine death, signs of live birth, viability of foetus, age determination of foetus, DOAP session of ossification centres, Hydrostatic test, Sudden infants death syndrome and Munchausen's syndrome by proxy	K	KH	Y	Lecture, Small group discussions, Autopsy, DOAP session	Written/ Viva voce/ OSCE		Pediatrics, Human Anatomy	
FM3.29	Describe and discuss child abuse and battered baby syndrome	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
Dermatology, Venereology & Leprosy									
DR5.1	Describe the etiology, microbiology, pathogenesis, natural history, clinical features, presentations and complications of scabies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
DR5.2	Identify and differentiate scabies from other lesions	S	SH	Y	Bedside clinic	Skill assessment		Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
DR5.3	Enumerate and describe the pharmacology, administration and adverse reaction of pharmacotherapies for scabies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Pharmacology
DR6.1	Describe the etiology, pathogenesis and diagnostic features of pediculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR6.2	Identify and differentiate pediculosis from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment		Pediatrics	
DR7.1	Describe the etiology, microbiology, pathogenesis, clinical presentations and diagnostic features of dermatophytes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR8.1	Describe the etiology, microbiology, pathogenesis, clinical presentations and diagnostic features of common viral infections of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR17.1	Enumerate and identify the cutaneous findings in vitamin A deficiency	K/S	SH	Y	Lecture, Small group discussion, Bedside clinic	Skill assessment/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.2	Enumerate and describe the various skin changes in Vitamin B complex deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.3	Enumerate and describe the various changes in Vitamin C deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.4	Enumerate and describe the various changes in Zinc deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
Anesthesiology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
AS2.1	Enumerate the indications, describe the steps and demonstrate in a simulated environment basic life support in adults children and neonates	S	SH	N	DOAP session	Skill assessment		General Medicine, Pediatrics	
Psychiatry									
PS14.1	Enumerate and describe the magnitude and etiology of psychiatric disorders occurring in childhood and adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS14.2	Enumerate, elicit, describe and document clinical features in patients with psychiatric disorders occurring in childhood and adolescence	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	
PS14.3	Describe the treatment of stress related disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS14.4	Demonstrate family education in a patient with psychiatric disorders occurring in childhood and adolescence in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	
PS14.5	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychiatric disorders occurring in childhood and adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS15.1	Describe the aetiology and magnitude of mental retardation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS15.2	Describe and discuss intelligence quotient and its measurement	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS15.3	Elicit and document a history and clinical examination and choose appropriate investigations in a patient with mental retardation	K/S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	
PS15.4	Describe the psychosocial interventions and treatment used in mental retardation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
General Medicine									
IM23.1	Discuss and describe the methods of nutritional assessment in an adult and calculation of caloric requirements during illnesses	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.2	Discuss and describe the causes and consequences of protein caloric malnutrition in the hospital	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	Pediatrics
Obstetrics & Gynecology									
OG1.2	Define and discuss perinatal mortality and morbidity including perinatal and neonatal mortality and morbidity audit	K	KH	Y	Lecture, Small group discussion	Short notes		Community Medicine	Pediatrics
OG18.1	Describe and discuss the assessment of maturity of the newborn, diagnosis of birth asphyxia, principles of resuscitation, common problems	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
OG18.2	Demonstrate the steps of neonatal resuscitation in a simulated environment	S	SH	Y	DOAP session	Skill assessment			Pediatrics
OG18.3	Describe and discuss the diagnosis of birth asphyxia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
OG18.4	Describe the principles of resuscitation of the newborn and enumerate the common problems encountered	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration	Horizontal Integration
Physical Medicine & Rehabilitation									
PM3.1	Describe and discuss the clinical features, types, evaluation, diagnosis and management of cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	Pediatrics
PM3.2	Recognize, describe and discuss the spectrum of multiple disability : cognitive, motor, visual and hearing in cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM3.3	Recognize, describe and discuss the role of special education in children with learning disabilities	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM3.4	Demonstrate spasticity, rigidity and dystonia in children with cerebral palsy	S	SH	Y	DOAP session, Small group discussion, Bedside clinic	Skill assessment			Pediatrics
PM3.5	Enumerate the indications and describe the therapies for spasticity including medications, serial casts, nerve blocks, botulinum toxin injections	K	KH	Y	Lecture, Small group discussion			Pharmacology	Pediatrics, Orthopedics
PM3.6	Enumerate the indications and describe prevention of joint subluxations and contractures by proper positioning, and use of special chairs, and appliances	K	KH	Y	DOAP session, Small group discussion, Bedside clinic				Pediatrics
PM3.7	Enumerate the first aid measures to be used in patients with seizures	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM4.2	Describe and discuss the principles of management of chronic pain and role of common modalities (moist heat, ultrasound, Short wave diathermy)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics

PSYCHIATRY (CODE: PS)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PSYCHIATRY									
Topic: Doctor patient relationship		Number of competencies: (04)			Number of procedures that require certification: (NIL)				
PS1.1	Establish rapport and empathy with patients	A/C	SH	Y	DOAP session	Skill station			
PS1.2	Describe the components of communication	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS1.3	Demonstrate breaking of bad news in a simulated environment	A/C	SH	Y	DOAP session	Skill station			
PS1.4	Describe and demonstrate the importance of confidentiality in patient encounters	A/C	SH	Y	DOAP session	Faculty observation			
Topic: Mental health		Number of competencies: (05)			Number of procedures that require certification:(NIL)				
PS2.1	Define stress and describe its components and causes	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PS2.2	Describe the role of time management, study skills, balanced diet and sleep wake habits in stress avoidance	K	KH	Y	Lecture, Small group discussion	Viva voce			
PS2.3	Define and describe the principles and components of learning memory and emotions	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PS2.4	Describe the principles of personality development and motivation	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PS2.5	Define and distinguish normality and abnormality	K	K	Y	Lecture, Small group discussion	Viva voce			
Topic: Introduction to psychiatry		Number of competencies: (12)			Number of procedures that require certification: (NIL)				
PS3.1	Describe the growth of psychiatry as a medical specialty, its history and contribution to society	K	KH	Y	Lecture	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS3.2	Enumerate, describe and discuss important signs & symptoms of common mental disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS3.3	Elicit, present and document a history in patients presenting with a mental disorder	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS3.4	Describe the importance of establishing rapport with patients	S/A	SH	Y	Bedside clinic, DOAP session	Skill assessment/ Faculty observation			
PS3.5	Perform, demonstrate and document a minimal examination	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS3.6	Describe and discuss biological, psychological & social factors & their interactions in the causation of mental disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS3.7	Enumerate and describe common organic psychiatric disorders, magnitude, etiology and clinical features	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS3.8	Enumerate and describe the essential investigations in patients with organic psychiatric disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS3.9	Describe the steps and demonstrate in a simulated environment family education in patients with organic psychiatric disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS3.10	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychiatric disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS3.11	Enumerate the appropriate conditions for specialist referral in patients with psychiatric disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PS3.12	Describe, discuss and distinguish psychotic & non-psychotic (Mood, Anxiety, Stress related) disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Psychotic disorders		Number of competencies: (07)			Number of procedures that require certification: (NIL)				
PS4.1	Describe the magnitude and etiology of alcohol and substance use disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS4.2	Elicit, describe and document clinical features of alcohol and substance use disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS4.3	Enumerate and describe the indications and interpret laboratory and other tests used in alcohol and substance abuse disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS4.4	Describe the treatment of alcohol and substance abuse disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS4.5	Demonstrate family education in a patient with alcohol and substance abuse in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		AETCOM	
PS4.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in alcohol and substance abuse	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS4.7	Enumerate the appropriate conditions for specialist referral in patients with alcohol and substance abuse disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Psychotic disorders		Number of competencies: (06)			Number of procedures that require certification: (NIL)				
PS5.1	Classify and describe the magnitude and etiology of schizophrenia & other psychotic disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS5.2	Enumerate, elicit, describe and document clinical features, positive s	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS5.3	Describe the treatment of schizophrenia including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS5.4	Demonstrate family education in a patient with schizophrenia in a simulated environment	K/S/A/C	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS5.5	Enumerate and describe the pharmacologic basis and side effects of drugs used in schizophrenia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS5.6	Enumerate the appropriate conditions for specialist referral in patients with psychotic disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Depression		Number of competencies: (07)			Number of procedures that require certification: (NIL)				

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS6.1	Classify and describe the magnitude and etiology of depression	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS6.2	Enumerate, elicit, describe and document clinical features in patients with depression	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS6.3	Enumerate and describe the indications and interpret laboratory and other tests used in depression	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS6.4	Describe the treatment of depression including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS6.5	Demonstrate family education in a patient with depression in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS6.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in depression	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS6.7	Enumerate the appropriate conditions for specialist referral in patients with depression	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Bipolar disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS7.1	Classify and describe the magnitude and etiology of bipolar disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS7.2	Enumerate, elicit, describe and document clinical features in patients with bipolar disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS7.3	Enumerate and describe the indications and interpret laboratory and other tests used in bipolar disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS7.4	Describe the treatment of bipolar disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS7.5	Demonstrate family education in a patient with bipolar disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS7.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in bipolar disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS7.7	Enumerate the appropriate conditions for specialist referral in patients with bipolar disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Anxiety disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS8.1	Enumerate and describe the magnitude and etiology of anxiety disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS8.2	Enumerate, elicit, describe and document clinical features in patients with anxiety disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS8.3	Enumerate and describe the indications and interpret laboratory and other tests used in anxiety disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS8.4	Describe the treatment of anxiety disorders including behavioural and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS8.5	Demonstrate family education in a patient with anxiety disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS8.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in anxiety disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS8.7	Enumerate the appropriate conditions for specialist referral in anxiety disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Stress related disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS9.1	Enumerate and describe the magnitude and etiology of stress related disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS9.2	Enumerate, elicit, describe and document clinical features in patients with stress related disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS9.3	Enumerate and describe the indications and interpret laboratory and other tests used in stress related disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS9.4	Describe the treatment of stress related disorders including behavioural and psychosocial therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS9.5	Demonstrate family education in a patient with stress related disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS9.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in stress related disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS9.7	Enumerate the appropriate conditions for specialist referral in stress disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Somatoform disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS10.1	Enumerate and describe the magnitude and etiology of somatoform, dissociative and conversion disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS10.2	Enumerate, elicit, describe and document clinical features in patients with somatoform, dissociative and conversion disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS10.3	Enumerate and describe the indications and interpret laboratory and other tests used in somatoform, dissociative and conversion disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS10.4	Describe the treatment of somatoform disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS10.5	Demonstrate family education in a patient with somatoform, dissociative and conversion disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS10.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in somatoform, dissociative and conversion disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS10.7	Enumerate the appropriate conditions for specialist referral in patients with somato form dissociative and conversion disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Personality disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS11.1	Enumerate and describe the magnitude and etiology of personality disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS11.2	Enumerate, elicit, describe and document clinical features in patients with personality disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS11.3	Enumerate and describe the indications and interpret laboratory and other tests used in personality disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS11.4	Describe the treatment of personality disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS11.5	Demonstrate family education in a patient with personality disorders in a simulated environment	S/A/C	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS11.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in personality disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS11.7	Enumerate the appropriate conditions for specialist referral	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Psychosomatic disorders Number of competencies: (07) Number of procedures that require certification: (NIL)									
PS12.1	Enumerate and describe the magnitude and etiology of psychosomatic disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS12.2	Enumerate, elicit, describe and document clinical features in patients with magnitude and etiology of psychosomatic disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS12.3	Enumerate and describe the indications and interpret laboratory and other tests of psychosomatic disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Medicine
PS12.4	Describe the treatment of psychosomatic disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PS12.5	Demonstrate family education in a patient with psychosomatic disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS12.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychosomatic disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS12.7	Enumerate the appropriate conditions for specialist referral	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
Topic: Psychosexual and gender identity disorders		Number of competencies: (07)			Number of procedures that require certification: (NIL)				
PS13.1	Enumerate and describe the magnitude and etiology of psychosexual and gender identity disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS13.2	Enumerate, elicit, describe and document clinical features in patients with magnitude and etiology of psychosexual and gender identity disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS13.3	Enumerate and describe the indications and interpret laboratory and other tests used in psychosexual and gender identity disorders	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS13.4	Describe the treatment of psychosexual and gender identity disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
PS13.5	Demonstrate family education in a patient with psychosexual and gender identity disorders in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			
PS13.6	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychosexual and gender identity disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS13.7	Enumerate the appropriate conditions for specialist referral	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Psychiatric disorders in childhood and adolescence		Number of competencies: (06)			Number of procedures that require certification: (NIL)				
PS14.1	Enumerate and describe the magnitude and etiology of psychiatric disorders occurring in childhood and adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS14.2	Enumerate, elicit, describe and document clinical features in patients with psychiatric disorders occurring in childhood and adolescence	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS14.3	Describe the treatment of stress related disorders including behavioural, psychosocial and pharmacologic therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS14.4	Demonstrate family education in a patient with psychiatric disorders occurring in childhood and adolescence in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	
PS14.5	Enumerate and describe the pharmacologic basis and side effects of drugs used in psychiatric disorders occurring in childhood and adolescence	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS14.6	Enumerate the appropriate conditions for specialist referral in children and adolescents with psychiatric disorders	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Mental retardation Number of competencies: (04) Number of procedures that require certification: (NIL)									
PS15.1	Describe the aetiology and magnitude of mental retardation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS15.2	Describe and discuss intelligence quotient and its measurement	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
PS15.3	Elicit and document a history and clinical examination and choose appropriate investigations in a patient with mental retardation	K/S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Pediatrics	
PS15.4	Describe the psychosocial interventions and treatment used in mental retardation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
Topic: Psychiatric disorders in the elderly Number of competencies: (05) Number of procedures that require certification: (NIL)									
PS16.1	Enumerate and describe common psychiatric disorders in the elderly including dementia, depression and psychosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PS16.2	Describe the aetiology and magnitude of psychiatric illness in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
PS16.3	Describe the therapy of psychiatric illness in elderly including psychosocial and behavioural therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS16.4	Demonstrate family education in a patient with psychiatric disorders occurring in the elderly in a simulated environment	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		General Medicine	
PS16.5	Enumerate the appropriate conditions for specialist referral in psychiatric disorders in the elderly	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Psychiatric emergencies Number of competencies: (03) Number of procedures that require certification: (NIL)									
PS17.1	Enumerate and describe the recognition and clinical presentation of psychiatric emergencies (Suicide, Deliberate Self Harm, Violent behaviour)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS17.2	Describe the initial stabilisation and management of psychiatric emergencies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PS17.3	Enumerate the appropriate conditions for specialist referral in patients with psychiatric emergencies	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Therapeutics Number of competencies: (03) Number of procedures that require certification: (NIL)									
PS18.1	Enumerate the indications and describe the pharmacology, dose and side effects of commonly use drugs in psychiatric disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharamcology	
PS18.2	Enumerate the indications for modified electroconvulsive therapy	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
PS18.3	Enumerate and describe the principles and role of psychosocial interventions in psychiatric illness including psychotherapy, behavioural therapy and rehabilitation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Miscellaneous Number of competencies: (06) Number of procedures that require certification: (NIL)									
PS19.1	Describe the relevance, role and status of community psychiatry	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PS19.2	Describe the objectives strategies and contents of the National Mental Health Act	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PS19.3	Describe and discuss the basic legal and ethical issues in psychiatry	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine & Toxicology, AETCOM	
PS19.4	Enumerate and describe the salient features of the prevalent mental health laws in India	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PS19.5	Describe the concept and principles of preventive psychiatry and mental health promotion (positive mental health); and community education	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
PS19.6	Enumerate and describe the identifying features and the principles of participatory management of mental illness occurring during and after disasters	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Physiology									
PY10.7	Describe and discuss functions of cerebral cortex, basal ganglia, thalamus, hypothalamus, cerebellum and limbic system and their abnormalities	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	Human Anatomy
PY10.8	Describe and discuss behavioural and EEG characteristics during sleep and mechanism responsible for its production	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	
PY10.9	Describe and discuss the physiological basis of memory, learning and speech	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Psychiatry	
PY10.12	Identify normal EEG forms	S	S	Y	Small group teaching	OSPE/Viva voce		Psychiatry	
Pharmacology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PH1.19	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of the drugs which act on CNS, (including anxiolytics, sedatives & hypnotics, antipsychotic, antidepressant drugs, antimaniacs, opioid agonists and antagonists, drugs used for neurodegenerative disorders, antiepileptics drugs)	K	KH	Y	Lecture	Written/ Viva voce		Psychiatry, Physiology	
PH1.20	Describe the effects of acute and chronic ethanol intake. Describe the symptoms and management of methanol and ethanol poisonings	K	KH	Y	Lecture, Small group discussions	Written/ Viva voce		Psychiatry	
PH1.22	Describe drugs of abuse (dependence, addiction, stimulants, depressants, psychedelics, drugs used for criminal offences)	K	KH	Y	Lecture, Small group discussions	Written/Viva voce		Psychiatry	Forensic Medicine
PH1.23	Describe the process and mechanism of drug deaddiction	K/ S	KH	Y	Lecture, Small group discussions	Written/Viva voce		Psychiatry	
PH5.5	Demonstrate an understanding of the caution in prescribing drugs likely to produce dependence and recommend the line of management	K	KH	Y	Small group discussion	Short note/Viva voce		Psychiatry	
PH5.6	Demonstrate ability to educate public & patients about various aspects of drug use including drug dependence and OTC drugs.	A/C	SH	Y	Small group discussion	Skill station		Psychiatry	
Community Medicine									
CM15.1	Define and describe the concept of mental Health	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
CM15.2	Describe warning signals of mental health disorder	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
CM15.3	Describe National Mental Health program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
Forensic Medicine & Toxicology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
FM3.17	Describe and discuss the sexual perversions fetichism, transvestism, voyeurism, sadism, necrophagia, masochism, exhibitionism, frotteurism, Necrophilia	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Psychiatry	
FM5.1	Classify common mental illnesses including post-traumatic stress disorder (PTSD)	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.2	Define, classify and describe delusions, hallucinations, illusion, lucid interval and obsessions with exemplification	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.3	Describe civil and criminal responsibilities of a mentally ill person	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.4	Differentiate between true insanity from feigned insanity	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
FM5.5	Describe & discuss Delirium tremens	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry, General Medicine	
FM5.6	Describe the Indian Mental Health Act, 1987 with special reference to admission, care and discharge of a mentally ill person	K	K/KH	N	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	
General Medicine									
IM17.14	Counsel patients with migraine and tension headache on lifestyle changes and need for prophylactic therapy	A/C	SH	N	DOAP session	Skill Assessment		Pharmacology	Psychiatry
IM21.8	Enumerate the indications for psychiatric consultation and describe the precautions to be taken in a patient with suspected suicidal ideation / gesture	K	KH	Y	DOAP session	Skill assessment		Forensic Medicine, Psychiatry	
IM24.2	Perform multidimensional geriatric assessment that includes medical, psycho-social and functional components	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Psychiatry	
IM24.5	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of depression in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
IM24.7	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of personality changes in the elderly	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
IM24.19	Enumerate and describe the social problems in the elderly including isolation, abuse, change in family structure and their impact on health	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
Pediatrics									
PE1.2	Discuss and describe the patterns of growth in infants, children and Adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE1.3	Discuss and describe the methods of assessment of growth including use of WHO and Indian national standards. Enumerate the parameters used for assessment of physical growth in infants, children and adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE1.5	Define development and discuss the normal developmental milestones with respect to motor, behaviour, social, adaptive and language	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE5.4	Describe the clinical features, diagnosis and management of Breath Holding spells	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE5.5	Describe the clinical features, diagnosis and management of Temper tantrums	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE5.7	Describe the clinical features, diagnosis and management of Fussy infant	K	K	N	Lecture, Small group discussion	Written			Psychiatry
PE5.10	Discuss the role of child guidance clinic in children with Behavioral problems and the referral criteria	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.2	Describe the physical, physiological and psychological changes during Adolescence (Puberty)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
PE6.4	Describe Adolescent sexuality and common problems related to it	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.5	Explain Adolescent Nutrition and common nutritional problems	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.6	Discuss the common Adolescent Eating disorders (Anorexia Nervosa, Bulimia)	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
PE6.7	Describe the common mental health problems during Adolescence	K	KH	Y	Lecture, Small Group discussion	Written/ Viva voce			Psychiatry
PE6.13	Enumerate the prevalence and the importance of recognition of sexual drug abuse in adolescents and children	K	K	N	Lecture, Small group discussion	Written/ Viva voce			Psychiatry
Physical Medicine & Rehabilitation									
PM 9.1	Describe rehabilitative aspects as they pertain to the elderly including patients with dementia, depression, incontinence immobility and nutritional needs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Psychiatry
Dermatology, Venereology & Leprosy									
DR9.7	Enumerate and describe the complications of leprosy and its management, including understanding disability and stigma	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	Pharmacology, Psychiatry
Forensic Medicine & Toxicology									
FM2.5	Discuss moment of death, modes of death- coma, asphyxia and syncope	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Psychiatry	Pathology
FM3.14	SEXUAL OFFENCES Describe and discuss the examination of the victim of an alleged case of rape, and the preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic, DOAP session	Written/ Viva voce / OSCE		Obstetrics & Gynaecology, Psychiatry	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
FM3.15	SEXUAL OFFENCES Describe and discuss examination of accused and victim of sodomy, preparation of report, framing of opinion, preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic, DOAP session	Written/ Viva voce / OSCE		Obstetrics & Gynaecology, Psychiatry	
FM3.16	SEXUAL OFFENCES Describe and discuss adultery and unnatural sexual offences- sodomy, incest, lesbianism, buccal coitus, bestiality, indecent assault and preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Psychiatry	

DERMATOLOGY, VENEROLOGY AND LEPROSY (CODE: DR)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DERMATOLOGY, VENEREOLOGY & LEPROSY									
Topic: Acne Number of competencies:(03) Number of procedures that require certificaion:(NIL)									
DR1.1	Enumerate the causative and risk factors of acne	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
DR1.2	Identify and grade the various common types of acne	S	SH	Y	Bedside clinic	Skill assessment			
DR1.3	Describe the treatment and preventive measures for various kinds of acne	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Vitiligo Number of competencies: (02) Number of procedures that require certificaion:(NIL)									
DR2.1	Identify and differentiate vitiligo from other causes of hypopigmented lesions	S	S	Y	Bedside clinic	Skill assessment			
DR2.2	Describe the treatment of vitiligo	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Papulosquamous disorders Number of competencies:(03) Number of procedures that require certificaion:(NIL)									
DR3.1	Identify and distinguish psoriatic lesions from other causes	K	SH	Y	Bedside clinic	Skill assessment/ Written/ Viva voce			
DR3.2	Demonstrate the grattage test	S	SH	Y	Bedside clinic	Skill assessment			
DR3.3	Enumerate the indications for and describe the various modalities of treatment of psoriasis including topical, systemic and phototherapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Lichen Planus Number of competencies:(02) Number of procedures that require certificaion:(NIL)									
DR4.1	Identify and distinguish lichen planus lesions from other causes	S	SH	Y	Bedside clinic	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR4.2	Enumerate and describe the treatment modalities for lichen planus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Scabies Number of competencies:(03) Number of procedures that require certificaion:(NIL)									
DR5.1	Describe the etiology, microbiology, pathogenesis, natural history, clinical features, presentations and complications of scabies in adults and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	
DR5.2	Identify and differentiate scabies from other lesions in adults and children	S	SH	Y	Bedside clinic	Skill assessment		Pediatrics	
DR5.3	Enumerate and describe the pharmacology, administration and adverse reaction of pharmacotherapies for scabies	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Pharmacology
Topic: Pediculosis Number of competencies : (02) Number of procedures that require certificaion:(NIL)									
DR6.1	Describe the etiology pathogenesis and diagnostic features of pediculosis in adults and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR6.2	Identify and differentiate pediculosis from other skin lesions in adults and children	S	SH	Y	Bedside clinic	Skill assessment		Pediatrics	
Topic: Fungal Infections Number of competencies: (03) Number of procedures that require certificaion:(NIL)									
DR7.1	Describe the etiology, microbiology, pathogenesis and clinical presentations and diagnostic features of dermatophytes in adults and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR7.2	Identify Candida species in fungal scrapings and KOH mount	S	SH	Y	DOAP session	Skill assessment			Microbiology
DR7.3	Describe the pharmacology and action of antifungal (systemic and topical) agents. Enumerate side effects of antifungal therapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology, Pharmacology
Topic: Viral infections Number of competencies (07) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR8.1	Describe the etiology, microbiology, pathogenesis and clinical presentations and diagnostic features of common viral infections of the skin in adults and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pediatrics	Microbiology
DR8.2	Identify and distinguish herpes simplex and herpes labialis from other skin lesions	S	SH	Y	DOAP session	Skill assessment			
DR8.3	Identify and distinguish herpes zoster and varicella from other skin lesions	S	SH	Y	DOAP session	Skill assessment			
DR8.4	Identify and distinguish viral warts from other skin lesions	S	SH	Y	DOAP session	Skill assessment			
DR8.5	Identify and distinguish molluscum contagiosum from other skin lesions	S	SH	Y	DOAP session	Skill assessment			
DR8.6	Enumerate the indications, describe the procedure and perform a Tzanck smear	S	SH	Y	DOAP session	Skill assessment			
DR8.7	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for common viral illnesses of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology
Topic: Leprosy Number of competencies: (07) Number of procedures that require certification: (NIL)									
DR9.1	Classify, describe the epidemiology, etiology, microbiology, pathogenesis, clinical presentations and diagnostic features of Leprosy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology, Community Medicine
DR9.2	Demonstrate (and classify based on) the clinical features of leprosy including an appropriate neurologic examination	S	SH	Y	Bedside clinic	Bedside clinic/ Skill assessment		General Medicine	
DR9.3	Enumerate the indications and observe the performance of a slit skin smear in patients with leprosy	S	KH	Y	Bedside clinic, DOAP session	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR9.4	Enumerate, describe and identify lepra reactions and supportive measures and therapy of lepra reactions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology
DR9.5	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for various classes of leprosy based on national guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.6	Describe the treatment of Leprosy based on the WHO guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Community Medicine
DR9.7	Enumerate and describe the complications of leprosy and its management, including understanding disability and stigma.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Psychiatry
Topic: Sexually Transmitted Diseases Number of competencies: (11) Number of procedures that require certification:(NIL)									
DR10.1	Identify and classify syphilis based on the presentation and clinical manifestations	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR10.2	Identify spirochete in a dark ground microscopy	S	SH	Y	DOAP session	Skill assessment			Microbiology
DR10.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Microbiology
DR10.4	Describe the prevention of congenital syphilis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
DR10.5	Counsel in a non-judgemental and empathetic manner patients on prevention of sexually transmitted disease	C	SH	Y	DOAP session	Skill assessment		General Medicine	
DR10.6	Describe the etiology, diagnostic and clinical features of non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR10.7	Identify and differentiate based on the clinical features non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR10.8	Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the non-syphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Microbiology
DR10.9	Describe the syndromic approach to ulcerative sexually transmitted disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
DR10.10	Describe the etiology, diagnostic and clinical features and management of gonococcal and non-gonococcal urethritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
DR10.11	Describe the etiology, diagnostic and clinical features and management of vaginal discharge	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
Topic: HIV Number of competencies: (03) Number of procedures that require certification: (NIL)									
DR11.1	Describe the etiology, pathogenesis and clinical features of the dermatologic manifestations of HIV and its complications including opportunistic infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Microbiology
DR11.2	Identify and distinguish the dermatologic manifestations of HIV, its complications, opportunistic infections and adverse reactions	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Microbiology
DR11.3	Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for dermatologic lesions in HIV	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	Pharmacology, Microbiology
Topic: Dermatitis and Eczema Number of competencies: (07) Number of procedures that require certification: (NIL)									
DR12.1	Describe the aetiopathogenesis of eczema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR12.2	Identify eczema and differentiate it from lichenification and changes of aging	S	SH	Y	Bedside clinic	Skill assessment			
DR12.3	Classify and grade eczema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
DR12.4	Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the treatment of eczema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
DR12.5	Define erythroderma. Enumerate and identify the causes of erythroderma. Discuss the treatment	S	KH	Y	Bedside clinic	Written/ Skill assessment			
DR12.6	Identify and distinguish exfoliative dermatitis from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment			
DR12.7	Identify and distinguish fixed drug eruptions and Steven Johnson syndrome from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Pathology, Microbiology
Topic: Vesicubullous Lesions Number of competencies:(03) Number of procedures that require certificaion:(NIL)									
DR13.1	Distinguish bulla from vesicles	S	SH	Y	Bedside clinic	Skill assessment			
DR13.2	Demonstrate the Tzanck test, nikolsky sign and bulla spread sign	S	SH	Y	Bedside clinic	Skill assessment			
DR13.3	Calculate the body surface area of involvement of vesiculobullous lesions	S	SH	Y	Bedside clinic	Skill assessment			
Topic: Urticaria Angioedema Number of competencies: (05) Number of procedures that require certificaion:(NIL)									
DR14.1	Describe the etiology, pathogenesis and clinical precipitating features and classification of Urticaria and angioedema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Microbiology, Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR14.2	Identify and distinguish urticarial from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment			
DR14.3	Demonstrate dermographism	S	SH	Y	Bedside clinic	Skill assessment			
DR14.4	Identify and distinguish angioedema from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment			
DR14.5	Enumerate the indications and describe the pharmacology indications and adverse reactions of drugs used in the urticaria and angioedema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pharmacology
Topic: Pyoderma Number of competencies: (04) Number of procedures that require certification:(NIL)									
DR15.1	Identify and distinguish folliculitis impetigo and carbuncle from other skin lesions	S	SH	Y	Bedside clinic	Skill assessment			
DR15.2	Identify staphylococcus on a gram stain	S	SH	Y	Bedside clinic	Skill assessment			Microbiology
DR15.3	Enumerate the indications and describe the pharmacology, indications and adverse reactions of topical and systemic drugs used in treatment of pyoderma	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	Microbiology, Pharmacology
DR15.4	Enumerate the indications for surgical referral	S	KH	Y	DOAP session	Written/ Viva voce		General Surgery	
Topic: Collagen Vascular disease Number of competencies: (02) Number of procedures that require certification:(NIL)									
See also major competencies listed in General Medicine									
DR16.1	Identify and distinguish skin lesions of SLE	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Pathology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DR16.2	Identify and distinguish Raynaud's phenomenon	S	SH	Y	Bedside clinic	Skill assessment		General Medicine	Pathology
Topic: Nutritional Deficiencies and Skin Number of competencies: (04) Number of procedures that require certification:(NIL)									
DR17.1	Enumerate and identify the cutaneous findings in vitamin A deficiency	K/S	SH	Y	Lecture, Small group discussion, Bedside clinic	Skill assessment/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.2	Enumerate and describe the various skin changes in Vitamin B complex deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.3	Enumerate and describe the various changes in Vitamin C deficiency	K	KH	Y	Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
DR17.4	Enumerate and describe the various changes in Zinc deficiency	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Biochemistry	
Topic: Systemic diseases and the skin Number of competencies:(02) Number of procedures that require certification:(NIL)									
DR18.1	Enumerate the cutaneous features of Type 2 diabetes	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
DR18.2	Enumerate the cutaneous features of hypo/hyper-thyroidism	K	K	Y	Lecture, Small group	Written/ Viva voce		General Medicine	

Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.

Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,

Column F: DOAP session – Demonstrate, Observe, Assess, Perform.

Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation

Integration

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Human Anatomy									
AN4.2	Describe structure & function of skin with its appendages	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		Dermatology, Venereology & Leprosy	
AN4.4	Describe modifications of deep fascia with its functions	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		Dermatology, Venereology & Leprosy	
AN4.5	Explain principles of skin incisions	K	KH	N	Lecture	Written		Dermatology, Venereology & Leprosy	
Pathology									
PA34.1	Describe the risk factors, pathogenesis, pathology and natural history of squamous cell carcinoma of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.2	Describe the risk factors, pathogenesis, pathology and natural history of basal cell carcinoma of the skin	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.3	Describe the distinguishing features between a nevus and melanoma. Describe the etiology, pathogenesis, risk factors, morphology, clinical features and metastases of melanoma	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy	
PA34.4	Identify, distinguish and describe common tumors of the skin	S	SH	N	DOAP session	Skill Assessment		Dermatology, Venereology & Leprosy	

Microbiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
MI4.3	Describe the etio-pathogenesis of Skin and soft tissue infections and discuss the clinical course, and the laboratory diagnosis.	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy, General Surgery	
MI7.2	Describe the etio-pathogenesis and discuss the laboratory diagnosis of sexually transmitted infections. Recommend preventive measures, wherever relevant.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Dermatology, Venereology & Leprosy, Obstetrics & Gynaecology	

Pharmacology

PH1.46	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of antileprotic drugs	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy	Microbiology
PH1.57	Describe drugs used in skin disorders	K	KH	Y	Lecture	Written/ Viva voce		Dermatology, Venereology & Leprosy	

Pediatrics

PE31.4	Identify Atopic dermatitis and manage	S	SH		Bedside clinics, Skill Lab	Skill Assessment		Dermatology, Venereology & Leprosy	

PHYSICAL MEDICINE & REHABILITATION (CODE: PM)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PHYSICAL MEDICINE & REHABILITATION									
Topic: Introduction to Physical Medicine		Number of competencies: (04)			Number of procedures that require certification:(NIL)				
PM1.1	Define and describe the scope of physical Medicine and Rehabilitation and functional restoration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
PM1.2	Define and describe disability, its cause, and magnitude, identification and prevention of disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM1.3	Define and describe the methods to identify and prevent disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM1.4	Enumerate the rights and entitlements of differently abled persons	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
Topic: Cerebrovascular accident		Number of competencies: (04)			Number of procedures that require certification:(NIL)				
PM2.1	Describe the causes of disability in the patient with a cerebrovascular accident	K	KH	Y	Lecture, small group discussion	Written/ Viva voce		Human Anatomy	General Medicine
PM2.2	Describe and discuss the treatment of rigidity and spasticity	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM2.3	Describe and discuss the principles of early mobilizations, mobility aids and splints	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM2.4	Describe and discuss the impact of co-morbidities on the rehabilitation of the patient with cerebrovascular accident	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
Topic: Cerebral Palsy		Number of competencies: (07)			Number of procedures that require certification: (NIL)				
PM3.1	Describe and discuss the clinical features, types, evaluation, diagnosis and management of cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	Pediatrics

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM3.2	Recognize, Describe and discuss the spectrum of multiple disability: cognitive, motor, visual and hearing in cerebral palsy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM3.3	Recognize describe and discuss the role of special education in children with learning disabilities	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM3.4	Demonstrate spasticity rigidity and dystonia in children with cerebral palsy	S	SH	Y	DOAP session, Small group discussion, Bedside clinic	Skill assessment			Pediatrics
PM3.5	Enumerate the indications and describe the therapies for spasticity including medications, serial casts, nerve blocks, botulinum toxin injections	K	KH	Y	Lecture, Small group discussion			Pharmacology	Pediatrics, Orthopedics
PM3.6	Enumerate the indications and describe prevention of joint subluxations and contractures by proper positioning, and use of special chairs, and appliances	K	KH	Y	DOAP session, Small group discussion, Bedside clinic				Pediatrics
PM3.7	Enumerate the first aid measures to be used in patients with seizures	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
Topic: Musculoskeletal system Number of competencies : (05) Number of procedures that require certification: (NIL)									
PM4.1	Describe the common patterns, clinical features, investigations, diagnosis and treatment of common causes of arthritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM4.2	Describe and discuss the principles of management of chronic pain and role of common modalities (moist heat, ultrasound, Short wave diathermy)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
PM4.3	Observe in a mannequin or equivalent the administration of an intra-articular injection	S	KH	N	DOAP session	Skill assessment			Orthopedics
PM4.4	Describe the role of exercise as a therapeutic modality	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM4.5	Demonstrate correct assessment of muscle strength and range of movements	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			General Medicine, Orthopedics
Topic: Amputation Number of competencies : (04) Number of procedures that require certification: (NIL)									
PM5.1	Enumerate the indications and describe the principles of amputation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, General Surgery
PM5.2	Describe the principles of early mobilization, evaluation of the residual limb, contralateral limb and the influence of co-morbidities	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM5.3	Demonstrate the correct use of crutches in ambulation and postures to correct contractures and deformities	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			Orthopedics
PM5.4	Identify the correct prosthesis for common amputations	S	SH	Y	DOAP session	Skill assessment written			Orthopedics
Topic: Lower motor neruon lesion Number of competencies :(04) Number of procedures that require certification: (NIL)									
PM6.1	Perform and demonstrate a clinical examination of sensory and motor deficits of peripheral nerve	S	SH	Y	Bedside clinic	Skill assessment			General Medicine
PM6.2	Enumerate the indications and describe the principles of nerve conduction velocity and EMG	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM6.3	Describe the principles principles of skin traction, serial casts and surgical treatment including contracture release, tendon transfer, osteotomies and arthrodesis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM6.4	Describe the principles of orthosis for ambulation in PPRP	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
Topic: Spinal injury Number of competencies:(09) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM7.1	Describe and discuss the clinical features, diagnostic work up and management of spinal cord injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM7.2	Describe and demonstrate process of transfer, application of collar restraints while maintaining airway and prevention of secondary injury in a mannequin/model	S	SH	Y	DOAP session, Small group discussion, Bedside clinic	Skill assessment			Orthopedics
PM7.3	Perform and demonstrate a correct neurological examination in a patient with spinal injury and determine the neurologic level of injury	S	SH	Y	Bed side clinic	Skill assessment			Orthopedics
PM7.4	Assess bowel and bladder function and identify common patterns of bladder dysfunction	S	KH	Y	Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM7.5	Enumerate the indications and identify the common mobility aids and appliances, wheel chairs	S	S	Y	DOAP session	Skill assessment /Viva voce			Orthopedics
PM7.6	Enumerate the indications and describe the pharmacology and side effects of commonly used drugs in neuropathic bladder	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Medicine
PM7.7	Enumerate and describe common life threatening complications following SCI like Deep vein Thrombosis, Aspiration Pneumonia, Autonomic dysreflexia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM7.8	Enumerate the causes of, describe and classify Pressure Sores,their prevention, and treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
PM7.9	Enumerate the indications of debridement, and Split thickness skin grafting.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
Topic: Traumatic brain injury (TBI) Number of competencies:(05) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM8.1	Describe the clinical features, evaluation, diagnosis and management of disability following traumatic brain injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics, General Surgery
PM8.2	Describe and discuss cognitive dysfunction like deficits in attention, memory and communication.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.3	Describe and discuss common behavior and mood changes following TBI.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.4	Describe metabolic co-morbidities like SIADH, diabetes mellitus, insipidus and endocrine dysfunction following TBI	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
PM8.5	Describe the vocational opportunities and community based rehabilitation following TBI	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
Topic: Geriatrics Number of competencies:(01) Number of procedures that require certification: (NIL)									
PM 9.1	Describe rehabilitative aspects as they pertain to the elderly including patients with dementia, depression, incontinence immobility and nutritional needs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Psychiatry
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								

Integration

General Medicine									
IM18.16	Enumerate the indications, describe and observe the multidisciplinary rehabilitation of patients with a CVA	S	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Physical Medicine & Rehabilitation
IM24.13	Describe and discuss the aetiopathogenesis,clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of falls in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/S H/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM24.16	Describe and discuss the principles of physical and social rehabilitation, functional assessment, role of physiotherapy and occupational therapy in the management of disability in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation

Pediatrics

PE3.8	Discuss the etio-pathogenesis, clinical presentation and multi-disciplinary approach in the management of Cerebral palsy	K	KH	Y	Lecture, Small group discussion, Bed side clinics	Written/ Viva voce			Physical Medicine & Rehabilitation

List of contributing subject Experts

1. Human Anatomy

- Dr. Praveen R Singh, Professor & Head, Department of Anatomy, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Nachiket Shankar, Associate Professor, Department of Anatomy, St. John's Medical College & Hospital, Bangalore

2. Physiology

- Dr. Mario Vaz, Professor, Department of Physiology, St. John's Medical College & Hospital, Bangalore
- Dr. Jayashree Sengupta, Former Professor & Head, Department of Physiology, All India Institute of Medical Sciences, New Delhi.
- Dr Hasmukh D Shah, Professor & Head, Department of Physiology, Pramukhswami Medical College, Karamsad, Gujarat

3. Biochemistry

- Dr. Nibhriti Das, Professor, Department of Biochemistry, All India Institute of Medical Sciences, New Delhi
- Dr. S. P. Singh, Professor, Department of Biochemistry, Maharani Laxmi Bai Medical College, Jhansi, Uttar Pradesh
- Dr. Hitesh N Shah, Professor & Head, Department of Biochemistry, Pramukhswami Medical College, Karamsad, Gujarat

4. Pharmacology

- Dr. S. K. Maulik, Professor, Department of Pharmacology, All India Institute of Medical Sciences, New Delhi
- Dr. Vandana Roy, Professor, Department of Pharmacology, Maulana Azad Medical College, New Delhi

5. Pathology

- Dr. S. Datta Gupta, Professor, Department of Pathology, All India Institute of Medical Sciences, New Delhi
- Dr. Uma Chaturvedi, Professor, C-1303, Freedom Park Life, Sector- 57, Gurugram

6. Microbiology

- Dr. S. Geetalakshmi, Dean, Professor, Department of Microbiology, Stanley Medical College, Chennai, Tamil Nadu.
- Dr. Padma Srikanth, Professor, Department of Microbiology, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suman Singh, Professor, Department of Microbiology, Pramukhswami Medical College, Karamsad, Gujarat

7. Forensic Medicine & Toxicology

- Dr. Sanjeev Lalwani, Professor & Registrar (Academics), Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. T. D. Dogra, Former Director & Former Head, Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi; currently, Vice Chancellor, SGT University, Gurugram
- Col. Ravi Rautji, Professor & Head, Department of Forensic Medicine, Commanding Officer, Directorate General of Medical Services (Army), New Delhi
- Dr. S.D. Nanandkar, Professor & Head, Department of Forensic Medicine, Grant Government Medical College & Sir J.J. Group of Hospitals, Mumbai
- Dr. Indrajit L. Khandekar, In-charge CFMU and Associate Professor, Department of Forensic Medicine & Toxicology, MGIMS and Kasturba Hospital, Sewagram, Wardha.
- Dr. S. B. Punpale, Professor & Head, Department of Forensic Medicine, B. J. Medical College, Pune, Maharashtra

8. Community Medicine

- Dr. B. S. Garg, Professor & Head, Department of Community Medicine, Mahatama Gandhi Institute of Medical Sciences, Wardha, Sewagram, Maharashtra
- Dr. Umesh Kapil, Professor, Department of Community Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. Sanjay Zodpey, Director, Public Health Foundation of India, Isid Campus, 4 Institutional Area, Vasant Kunj, New Delhi
- Dr. Saudan Singh, Professor, Department of Community Medicine, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. Dinesh Kumar, Professor, Department of Community Medicine, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Pankaj B. Shah, Professor, Department of Community Medicine, Sri Ramachandra Medical College & Research Institute, Chennai.

9. General Medicine & Respiratory Medicine

- Dr. Krishna G. Seshadri, Visiting Professor, Endocrinology & Metabolism, Balaji Vidyapeeth, Puducherry
- Dr. M. K. Bhatnagar, Director Professor, Department of General Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Aparna Agarwal, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Anil Gurtoo, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi

10. Pediatrics

- Dr. Harish Chellani, Professor of Pediatrics, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. A. K. Dutta, Former Head, Kalawati Saran Children's Hospital, New Delhi

- Dr. S. Aneja, Director Professor & Head, Department of Pediatrics, Kalawati Saran Children's Hospital, New Delhi
- Dr. Latha Ravichandran, Professor, Deartment of Paediatrics, Sri Ramachandra Medical College & Research Institute, Chennai.

11. Psychiatry

- Dr. Rakesh Kumar Chadda, Department of Psychiatry, All India Institute of Medical Sciences, New Delhi
- Dr. N. M. Patil, Professor, Department of Psychiatry, Jawaharlal Nehru Medical College, Belagavi
- Dr. Rajesh Rastogi, Consultant & Head Department of Psychiatry, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi.
- Dr. Jagdish R Varma, Associate Professor, Department of Psychiatry, Pramukhswami Medical College, Karamsad, Gujarat

12. Dermatology, Venereology & Leprosy

- Dr. R. K. Gautam, Professor, Department of Dermatology, Venereology & Leprosy, Dr. Ram Manohar Lohia Hospital, New Delhi.
- Dr. Sujay Khandpur, Professor, Department of Dermatology, Venereology & Leprosy, All India Institute of Medical Sciences, New Delhi
- Dr. S. Murugan, Associate Professor of Dermatology, Sri Ramachandra Medical College & Research Institute, Chennai

13. Physical Medicine and Rehabilitation

- Dr. Sanjay Wadhwa, Professor, Department of Physical Medicine & Rehabilitation, All India Institute of Medical Sciences, New Delhi
- Dr. George Tharion, Head, Department of Physical Medicine & Rehabilitation, Christian Medical College, Vellore, Tamil Nadu

- Dr. Jagdish Menon, Professor & Head, Department of Orthopaedics and Dept. of Physical & Rehabilitative Medicine, Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry

14. General Surgery

- Dr. N Ananthakrishnan, 2A Vairam Enclave, Siddhananda Nagar, Pondicherry -605005.
- Dr. P. V. Chalam, Former Professor, Department of Surgery, Gandhi Medical College, Secunderabad, Telengana.
- Dr. Dinesh Bhatnagar, Professor, Department of General Surgery, North Delhi Municipal Corporation Medical College, Hindu Rao Hospital, Malka Ganj, Delhi

15. Ophthalmology

- Dr. Smita Singh, Professor, Department of Ophthalmology, Mahatma Gandhi Institute of Medical Sciences, Wardha

16. Oto-rhino-laryngology

- Dr. Achal Gulati, Director Professor, Department of ENT, Maulana Azad Medical College, New Delhi
- Dr. Ravi Kumar, Professor & Head, Department of ENT, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suma Mathew, Professor, Department of ENT, Christian Medical College, Vellore, Tamil Nadu

17. Obstetrics and Gynaecology

- Dr. Neerja Bhatla, Professor, Department of Obstetrics & Gynecology, All India Institute of Medical Sciences, New Delhi
- Dr. Annie Regi, Professor & Head, Department of Obstetrics & Gynecology, Christian Medical College, Vellore, Tamil Nadu
- Dr. Usha Vishwanath, Professor, Department of Obstetrics & Gynecology, Sri Ramachandra Medical College & Research Institute, Chennai

18. Orthopaedics

- Dr. P.V. Vijayaraghavan, Vice Chancellor & Professor of Orthopedics, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Raj Bahadur, Professor & Head, Department of Orthopaedics, Postgraduate Institute of Medical Sciences, Chandigarh
- Dr. SC. Goel, Professor, Department of Orthopaedics, Institute of Medical Sciences, BHU, Varanasi, Uttar Pradesh

19. Anaesthesiology

- Dr. Baljit Singh, Director Professor of Anaesthesia, G. B. Pant Hospital, Delhi
- Dr. Ramesh Keshav, Department of Anaesthesia, Dr. Ram Manohar Lohia Hospital, New Delhi
- Dr. Mridula Pawar, Consultant & Head, Department of Anaesthesia, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi

20. Radio- Diagnosis

- Dr. Kishor Taori (late), Professor & Head, Department of Radiodiagnosis, Government Medical College, Nagpur

21. Radiotherapy

- Dr. P. K. Jhulka, Dean & Professor of Radiotherapy, All India Institute of Medical Sciences, New Delhi.
- Dr. Shyam Shrivastava, Head, Department of Radiation, Tata Memorial Hospital, Mumbai

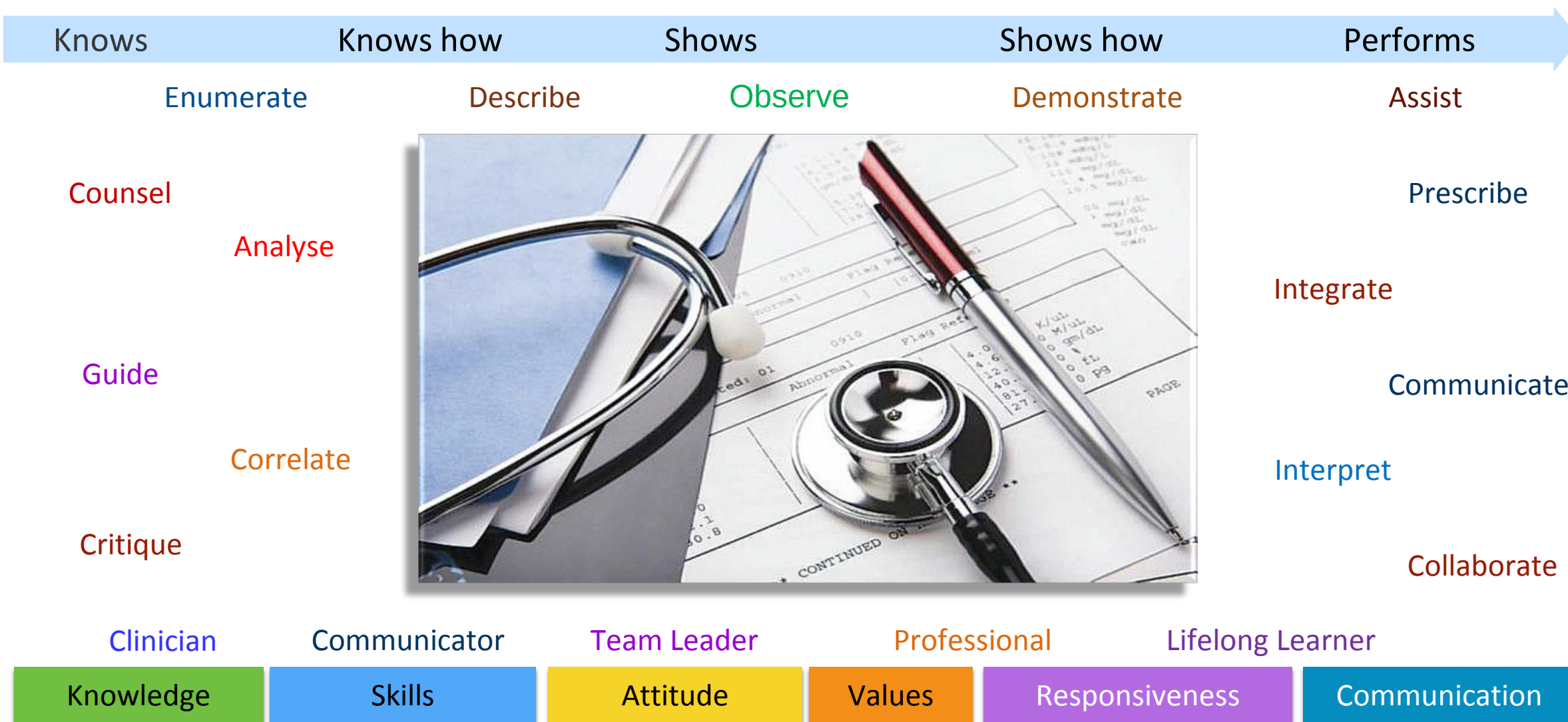
22. Dentistry

- Dr. Sridevi Padmanabhan, Professor, Department of Orthodontics, Faculty of Dental Sciences, Sri Ramchandra Medical College & Research Institute, Chennai



MEDICAL COUNCIL OF INDIA

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE



**COMPETENCY BASED UNDERGRADUATE CURRICULUM
FOR THE
INDIAN MEDICAL GRADUATE
2018**



**Medical Council of India
Pocket-14, Sector- 8, Dwarka
New Delhi 110 077**

दूरभाष/Phone : 25367033, 25367035, 25367036

फैक्स /Fax : 0091-11-25367024

ई-मेल /E-mail : mci@bol.net.in

वेबसाइट /Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,

फेस-1, नई दिल्ली-110077

Pocket- 14, Sector- 8, Dwarka,

Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड

BOARD OF GOVERNORS IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

FOREWORD

The Medical Council of India, aware of its responsibilities in creation of trained health manpower, has been engaged for the past few years in updating the medical curriculum for undergraduates and postgraduates to be in consonance with the changing health needs of the country. The task of updating and reorganization of the postgraduate curriculum in nearly 50 broad specialty disciplines to the competency pattern was accomplished by the Academic Cell of the Council with the help of subject experts and members of its Reconciliation Board and have been uploaded on the Council Website for use of the medical fraternity.

The Council visualized that the Indian Medical Graduate, at the end of the undergraduate training program, should be able to recognize "health for all" as a national goal and should be able to fulfill his/her societal obligations towards the realization of this goal. To fulfill the mandate of the undergraduate medical curriculum which is to produce a clinician, who understands and is able to provide preventive, promotive, curative, palliative and holistic care to his patients, the curriculum must enunciate clearly the competencies the student must be imparted and must have learnt, with clearly defined teaching-learning strategies and effective methods of assessment. The student should be trained to effectively communicate with patients and their relatives in a manner respectful of the patient's preferences, values, beliefs, confidentiality and privacy and to this purpose, a book on Attitude, Ethics & Communication was prepared by the Medical Council of India; the teaching faculty of medical colleges have been receiving training on this module since 2015.

दूरभाष / Phone : 25367033, 25367035,
25367036

फैक्स / Fax : 0091-11-25367024

ई-मेल / E-mail : mci@bol.net.in

वेबसाइट / Website : www.mciindia.org



पॉकेट -14, सेक्टर-8, द्वारका,
फेस-1, नई दिल्ली-110077
Pocket- 14, Sector- 8, Dwarka,
Phase – 1, New Delhi-110077

भारतीय आयुर्विज्ञान परिषद के अधिक्रमण में शासी बोर्ड
BOARD OF GOVERNORS
IN SUPERSESSION OF MEDICAL COUNCIL OF INDIA

-2-

Competency based Medical Education provides an effective outcome-based strategy where various domains of teaching including teaching learning methods and assessment form the framework of competencies. Keeping this objective as the core ingredient, the Medical Council of India with the help of panel of experts drawn from across the country, laid the basic framework for the revised undergraduate medical curriculum. Over the past four years, a group of highly committed medical professionals working as Members of the MCI Reconciliation Board developed this information into a document incorporating appropriate teaching-learning strategies, tools and techniques of teaching, and modes of assessment which have culminated in the current competency based undergraduate curriculum. We understand that maximum efforts were made to encourage integrated teaching between traditional subject areas using a problem-based learning approach starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both the understanding and resolution of the problem. All efforts have been made to de-emphasize compartmentalisation of disciplines so as to achieve both horizontal and vertical integration in different phases. We are proud of their work accomplishment and congratulate them in the onerous task accomplished.

It gives us great satisfaction to state that the '**competency based undergraduate curriculum**' that has been prepared by the Medical Council of India would definitely serve the cause of medical education and in creating a competent Indian Medical Graduate to serve the community.

BOARD OF GOVERNORS

Contributors

1. Dr. Avinash Supe

Chairman, Reconciliation Board
Director (ME & MH) and Dean
Professor, Departments of G I Surgery and Medical Education
Seth GSMC and KEM Hospital
Mumbai - 400012

2. Dr. Krishna G. Seshadri

Member, Reconciliation Board
Member, Board of Management
Visiting Professor, Departments of Endocrinology, Diabetes and Medical Education
Sri Balaji Vidyapeeth
Puducherry - 607 403

3. Dr. Praveen Singh

Member, Reconciliation Board
Professor and Head, Departments of Anatomy and Medical Education
Convenor, MCI Nodal Centre
Pramukhswami Medical College
Karamsad, Gujarat - 388325

4. Dr. R. Sajith Kumar

Member, Reconciliation Board
Professor and Head, Departments of Infectious Disease and Medical Education
Convenor, MCI Nodal Centre
Government Medical College
Kottayam, Kerala - 686008

5. Dr. PV Chalam

Member, Reconciliation Board
Principal & Professor, Department of Surgery
Bhaskar Medical College, RR Dist.
Telangana - 500075

6. Dr. Subir K. Maulik

Member, Reconciliation Board
Professor, Department of Pharmacology
All India Institute of Medical Sciences
New Delhi-110029

7. Dr. Dinesh Kumar Badyal

Member, Reconciliation Board
Professor and Head, Department of Pharmacology
Professor, Department of Medical Education
Co-Convenor, MCI Nodal Centre
Christian Medical College
Ludhiana - 141008, Punjab

8. Dr. Alka Rawekar

Member, Reconciliation Board
Professor, Departments of Physiology and Medical Education
Head, Department of Physiology
Co-Convenor, MCI Nodal Centre
Jawaharlal Nehru Medical College
Sawangi (Meghe), Wardha - 442004, Maharashtra

9. Dr. Sunita Y Patil

Member, Reconciliation Board
Professor, Departments of Pathology and Medical Education
Resource Faculty, MCI Nodal Centre
Jawaharlal Nehru Medical College, KLE Academy of Higher Education & Research
Belagavi - 590 010, Karnataka

10. Dr. M. Rajalakshmi

Chief Consultant, Academic Cell
Medical Council of India
New Delhi-110077

Grant of Copyright to the Competency based Undergraduate Curriculum

The Competency based Undergraduate Curriculum for MBBS students prepared by subject experts was scrutinized by members of the Reconciliation Board and Academic Cell. The contents, embodied in this document, have received Copyright from the Register of Copyrights, Copyright Office, Government of India with Registration Number L-63913/2016.

Reproducing any part of this document in any form must be with the prior written permission of the competent authorities of the Medical Council of India.

The most recent version of this document may be obtained from the Medical Council of India.

How to cite this document: Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 1; pg --- (give page nos.)

Contents Vol. I

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Pre-clinical and Para-clinical subjects		
1.	Human Anatomy	AN	41
2.	Physiology	PY	92
3.	Biochemistry	BI	119
4.	Pharmacology	PH	136
5.	Pathology	PA	160
6.	Microbiology	MI	205
7.	Forensic Medicine & Toxicology	FM	228
(iv)	List of contributing subject experts		252

Contents Vol. II

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Medicine and Allied subjects		
1.	Community Medicine	CM	41
2.	General Medicine	IM	60
3.	Respiratory Medicine	CT	143
4.	Pediatrics	PE	150
5.	Psychiatry	PS	203
6.	Dermatology, Venereology & Leprosy	DR	219
7.	Physical Medicine & Rehabilitation	PM	229
(iv)	List of contributing subject experts		235

Contents Vol. III

Sl. No.	Subject	Legend	Page No.
(i)	Preamble		11
(ii)	How to use the Manual		14
(iii)	Definitions used in the Manual		37
	Competency based Undergraduate Curriculum in Surgery and Allied subjects		
1.	General Surgery	SU	41
2.	Ophthalmology	OP	79
3.	Otorhinolaryngology	EN	89
4.	Obstetrics & Gynaecology	OG	102
5.	Orthopedics	OR	130
6.	Anesthesiology	AS	145
7.	Radiodiagnosis	RD	154
8.	Radiotherapy	RT	160
9.	Dentistry	DE	163
(iv)	List of contributing subject experts		166

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE

Preamble

The new Graduate Medical Education Regulations attempts to stand on the shoulder of the contributions and the efforts of resource persons, teachers and students (past and present). It intends to take the learner to provide health care to the evolving needs of the nation and the world.

More than twenty years have passed since the existing Regulations on Graduate Medical Education, 1997 was notified, necessitating a relook at all aspects of the various components in the existing regulations and adapt them to the changing demography, socio-economic context, perceptions, values and expectations of stakeholders. Emerging health care issues particularly in the context of emerging diseases, impact of advances in science and technology and shorter distances on diseases and their management also need consideration. The strong and forward looking fundamentals enshrined in the Regulations on Graduate Medical Education, 1997 has made this job easier. A comparison between the 1997 Regulations and proposed Graduate Medical Education Regulations, 2018 will reveal that the 2018 Regulations have evolved from several key principles enshrined in the 1997 Regulations.

The thrust in the new regulations is continuation and evolution of thought in medical education making it more learner-centric, patient-centric, gender-sensitive, outcome -oriented and environment appropriate. The result is an outcome driven curriculum which conforms to global trends. Emphasis is made on alignment and integration of subjects both horizontally and vertically while respecting the strengths and necessity of subject-based instruction and assessment. This has necessitated a deviation from using “broad competencies”; instead, the reports have written end of phase subject (sub) competencies. These “sub-competencies” can be mapped to the global competencies in the Graduate Medical Education Regulations.

A significant attempt has been made in the outcome driven undergraduate curriculum to provide the orientation and the skills necessary for life-long learning to enable proper care of the patient. In particular, the curriculum provides for early clinical exposure, electives and longitudinal care. Skill acquisition is an indispensable component of the learning process in medicine. The curriculum reinforces this aspect by necessitating certification of certain essential skills. The experts and the writing group have factored in patient availability, access, consent, number of students in a class etc. in suggesting skill acquisition and assessment methods; use of skills labs, simulated and guided environments are encouraged. In the pre-internship years,- the highest level of skill acquisition is a show how (SH) in a simulated or guided environment; few skills require independent performance and certification - these are marked with P (for performance). Opportunity to ‘perform’ these skills will be available during internship.

The importance of ethical values, responsiveness to the needs of the patient and acquisition of communication skills is underscored by providing dedicated curriculum time in the form of a longitudinal program based on Attitude, Ethics and Communication (AETCOM) competencies. Great emphasis has been placed on collaborative and inter-disciplinary teamwork, professionalism, altruism and respect in professional relationships with due sensitivity to differences in thought, social and economic position and gender.

In addition to the above, an attempt has been made to allow students from diverse educational streams and backgrounds to transition appropriately through a Foundation Course. Dedicated time has been allotted for self directed learning and co-curricular activities.

Formative and internal assessments have been streamlined to achieve the objectives of the curriculum. Minor tweaks to the summative assessment have been made to reflect evolving thought and regulatory requirements. Curricular governance and support have been strengthened, increasing the involvement of Curriculum Committee and Medical Education Departments/Units.

The curriculum document in conjunction with the new Graduate Medical Education Regulations (GMR), when notified, must be seen as a “living document” that should evolve as stakeholder requirements and aspirations change. We hope that the current GMR does just that. The Medical Council of India is

grateful to all the teachers, subject experts, process experts, patients, students and trainees who have contributed through invaluable inputs, intellectual feedbacks and valuable time spent to make this possible. This document would not have been possible without the dedicated and unstinting intellectual, mental and time-consuming efforts of the members of the Reconciliation Board of the Council and the Academic Cell of MCI.

How to use the Manual

This Manual is intended for curriculum planners in an institution to design learning and assessment experiences for the MBBS student. Contents created by subject experts have been curated to provide guidance for the curriculum planners, leaders and teachers in medical schools. They must be used with reference to and in the context of the Regulations.

Section 1

Competencies for the Indian Medical Graduate

Section 1 - provides the global competencies extracted from the Graduate Medical Education Regulations, 2018. The global competencies identified as defining the roles of the **Indian Medical Graduate** are the broad competencies that the learner has to aspire to achieve; teachers and curriculum planners must ensure that the learning experiences are aligned to this Manual.

Extract from the Graduate Medical Education Regulations, 2018

2. Objectives of the Indian Graduate Medical Training Programme

The undergraduate medical education program is designed with a goal to create an “Indian Medical Graduate” (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a physician of first contact of the community while being globally relevant. To achieve this, the following national and institutional goals for the learner of the Indian Medical Graduate training program are hereby prescribed:-

2.1. National Goals

At the end of undergraduate program, the Indian Medical Graduate should be able to:

- (a) recognize “health for all” as a national goal and health right of all citizens and by undergoing training for medical profession fulfill his/her social obligations towards realization of this goal.
- (b) learn every aspect of National policies on health and devote herself/himself to its practical implementation.
- (c) achieve competence in practice of holistic medicine, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- (d) develop scientific temper, acquire educational experience for proficiency in profession and promote healthy living.
- (e) become exemplary citizen by observance of medical ethics and fulfilling social and professional obligations, so as to respond to national aspirations.

2.2. Institutional Goals

In consonance with the national goals, each medical institution should evolve institutional goals to define the kind of trained manpower (or professionals) they intend to produce. The Indian Medical Graduates coming out of a medical institute should:

- (a) be competent in diagnosis and management of common health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations.
- (b) be competent to practice preventive, promotive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
- (c) appreciate rationale for different therapeutic modalities, be familiar with the administration of the "essential drugs" and their common side effects.
- (d) be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude towards the patients in discharging one's professional responsibilities.

- (e) possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine, action research and documentation skills.
- (f) be familiar with the basic factors which are essential for the implementation of the National Health Programs including practical aspects of the following:
 - (i) Family Welfare and Maternal and Child Health (MCH);
 - (ii) Sanitation and water supply;
 - (iii) Prevention and control of communicable and non-communicable diseases;
 - (iv) Immunization;
 - (v) Health Education;
 - (vi) Indian Public Health Standards (IPHS) at various level of service delivery;
 - (vii) Bio-medical waste disposal; and
 - (viii) Organizational and or institutional arrangements.
- (g) acquire basic management skills in the area of human resources, materials and resource management related to health care delivery, General and hospital management, principal inventory skills and counseling.
- (h) be able to identify community health problems and learn to work to resolve these by designing, instituting corrective steps and evaluating outcome of such measures.
- (i) be able to work as a leading partner in health care teams and acquire proficiency in communication skills.
- (j) be competent to work in a variety of health care settings.
- (k) have personal characteristics and attitudes required for professional life including personal integrity, sense of responsibility and dependability and ability to relate to or show concern for other individuals.

All efforts must be made to equip the medical graduate to acquire the skills as detailed in Table 11 Certifiable procedural skills – A Comprehensive list of skills recommended as desirable for Bachelor of Medicine and Bachelor of Surgery (MBBS) – Indian Medical Graduate, as given in the Graduate Medical Education Regulations, 2018

2.3. Goals for the Learner

In order to fulfil this goal, the Indian Medical Graduate must be able to function in the following roles appropriately and effectively:-

- 2.3.1. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
- 2.3.2. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
- 2.3.3. Communicator with patients, families, colleagues and community.
- 2.3.4. Lifelong learner committed to continuous improvement of skills and knowledge.
- 2.3.5. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession.

3. Competency Based Training Programme of the Indian Medical Graduate

Competency based learning would include designing and implementing medical education curriculum that focuses on the desired and observable ability in real life situations. In order to effectively fulfil the roles as listed in clause 2, the Indian Medical Graduate would have obtained the following set of competencies at the time of graduation:

3.1. *Clinician, who understands and provides preventive, promotive, curative, palliative and holistic care with compassion*

- 3.1.1 Demonstrate knowledge of normal human structure, function and development from a molecular, cellular, biologic, clinical, behavioral and social perspective.
- 3.1.2. Demonstrate knowledge of abnormal human structure, function and development from a molecular, cellular, biological, clinical, behavioural and social perspective.
- 3.1.3 Demonstrate knowledge of medico-legal, societal, ethical and humanitarian principles that influence health care.

- 3.1.4 Demonstrate knowledge of national and regional health care policies including the National Health Mission that incorporates National Rural Health Mission (NRHM) and National Urban Health Mission (NUHM), frameworks, economics and systems that influence health promotion, health care delivery, disease prevention, effectiveness, responsiveness, quality and patient safety.
- 3.1.5. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.6. Demonstrate ability to elicit and record from the patient, and other relevant sources including relatives and caregivers, a history that is contextual to gender, age, vulnerability, social and economic status, patient preferences, beliefs and values.
- 3.1.7 Demonstrate ability to perform a physical examination that is complete and relevant to disease identification, disease prevention and health promotion.
- 3.1.8 Demonstrate ability to perform a physical examination that is contextual to gender, social and economic status, patient preferences and values.
- 3.1.9 Demonstrate effective clinical problem solving, judgment and ability to interpret and integrate available data in order to address patient problems, generate differential diagnoses and develop individualized management plans that include preventive, promotive and therapeutic goals.
- 3.1.10 Maintain accurate, clear and appropriate record of the patient in conformation with legal and administrative frameworks.
- 3.1.11 Demonstrate ability to choose the appropriate diagnostic tests and interpret these tests based on scientific validity, cost effectiveness and clinical context.
- 3.1.12 Demonstrate ability to prescribe and safely administer appropriate therapies including nutritional interventions, pharmacotherapy and interventions based on the principles of rational drug therapy, scientific validity, evidence and cost that conform to established national and regional health programmes and policies for the following:
 - i) Disease prevention,
 - ii) Health promotion and cure,
 - iii) Pain and distress alleviation, and
 - iv) Rehabilitation and palliation.

- 3.1.13 Demonstrate ability to provide a continuum of care at the primary and/or secondary level that addresses chronicity, mental and physical disability.
- 3.1.14 Demonstrate ability to appropriately identify and refer patients who may require specialized or advanced tertiary care.
- 3.1.15 Demonstrate familiarity with basic, clinical and translational research as it applies to the care of the patient.

3.2. *Leader and member of the health care team and system*

- 3.2.1 Work effectively and appropriately with colleagues in an inter-professional health care team respecting diversity of roles, responsibilities and competencies of other professionals.
- 3.2.2 Recognize and function effectively, responsibly and appropriately as a health care team leader in primary and secondary health care settings.
- 3.2.3 Educate and motivate other members of the team and work in a collaborative and collegial fashion that will help maximize the health care delivery potential of the team.
- 3.2.4 Access and utilize components of the health care system and health delivery in a manner that is appropriate, cost effective, fair and in compliance with the national health care priorities and policies, as well as be able to collect, analyze and utilize health data.
- 3.2.5 Participate appropriately and effectively in measures that will advance quality of health care and patient safety within the health care system.
- 3.2.6 Recognize and advocate health promotion, disease prevention and health care quality improvement through prevention and early recognition: in a) life style diseases and b) cancer, in collaboration with other members of the health care team.

3.3. *Communicator with patients, families, colleagues and community*

- 3.3.1 Demonstrate ability to communicate adequately, sensitively, effectively and respectfully with patients in a language that the patient understands and in a manner that will improve patient satisfaction and health care outcomes.
- 3.3.2 Demonstrate ability to establish professional relationships with patients and families that are positive, understanding, humane, ethical, empathetic, and trustworthy.
- 3.3.3 Demonstrate ability to communicate with patients in a manner respectful of patient's preferences, values, prior experience, beliefs, confidentiality and privacy.

3.3.4 Demonstrate ability to communicate with patients, colleagues and families in a manner that encourages participation and shared decision-making.

3.4. Lifelong learner committed to continuous improvement of skills and knowledge

3.4.1. Demonstrate ability to perform an objective self-assessment of knowledge and skills, continue learning, refine existing skills and acquire new skills.

3.4.2. Demonstrate ability to apply newly gained knowledge or skills to the care of the patient.

3.4.3. Demonstrate ability to introspect and utilize experiences, to enhance personal and professional growth and learning.

3.4.4. Demonstrate ability to search (including through electronic means), and critically reevaluate the medical literature and apply the information in the care of the patient.

3.4.5. Be able to identify and select an appropriate career pathway that is professionally rewarding and personally fulfilling.

3.5. *Professional who is committed to excellence, is ethical, responsive and accountable to patients, community and the profession*

3.5.1. Practice selflessness, integrity, responsibility, accountability and respect.

3.5.2. Respect and maintain professional boundaries between patients, colleagues and society.

3.5.3. Demonstrate ability to recognize and manage ethical and professional conflicts.

3.5.4. Abide by prescribed ethical and legal codes of conduct and practice.

3.5.5. Demonstrate a commitment to the growth of the medical profession as a whole.

Section 2

Subject-wise outcomes

Section 2 contains subject-wise outcomes so called “sub-competencies” that must be achieved at the end of instruction in that subject. These are organised in tables and have two parts. The core subject outcomes are in first part. The second part in the same document (titled Integration) contains outcomes/competencies in other subjects which have been identified by experts in those subjects as requiring alignment or integration with the core subject.

Outcomes (competencies) in each subject are grouped according to topics number-wise. It is important to review the individual outcomes (competencies) in the light of the topic outcomes as a whole. For each competency outlined - the learning domains (Knowledge, Skill, Attitude, Communication) are identified. The expected level of achievement in that subject is identified as – [knows (K), knows how (KH), shows how (SH), perform (P)]. As a rule, ‘perform’ indicates independent performance without supervision and is required rarely in the pre-internship period. The outcome is a core (Y - must achieve) or a non-core (N - desirable) outcome. Suggested learning and assessment methods (these are suggestions) and explanation of the terms used are given under the section “definitions used in this document”. The suggested number of times a skill must be performed independently for certification in the learner’s log book is also given. Last two columns indicate subjects within the same phase and other phases with which the topic can be taught - together - aligned (temporal coordination), shared, correlated or nested.

The number of topics and competencies in each subject are given below:

Topics & outcomes in Pre-clinical & Para-clinical subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Human Anatomy	82	409
2.	Physiology	11	137
3.	Biochemistry	11	89
4.	Pharmacology	05	85
5.	Pathology	36	182
6.	Microbiology	08	54
7.	Forensic Medicine & Toxicology	14	162
	Total	167	1118

Topics & outcomes in Medicine and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	Community Medicine	20	107
2.	General Medicine	26	506
3.	Respiratory Medicine	02	47
4.	Pediatrics	35	406
5.	Psychiatry	19	117
6.	Dermatology, Venereology & Leprosy	18	73
7.	Physical Medicine & Rehabilitation	09	43
	Total	129	1299

Topics & outcomes in Surgery and Allied subjects

Sr. No.	Subjects	Number of topics	Number of outcomes
1.	General Surgery	30	133
2.	Ophthalmology	09	60
3.	Otorhinolaryngology	04	76
4.	Obstetrics & Gynaecology	38	126
5.	Orthopedics	14	39
6.	Anesthesiology	10	46
7.	Radiodiagnosis	01	13
8.	Radiotherapy	05	16
9.	Dentistry	05	23
	Total	116	532

Section 3

Sample topics used for alignment & integration

Section 3 contains a sample selection of topics that run across the phases which can be used for alignment and integration. These are suggestions and institutions can select their own set of topics which can run across phases.

It is important to design the curriculum with a view to ensure with several broad outcomes in mind: a) achievement of the broad competencies by the learner at the end of the MBBS program, b) retain the subject - wise character of learning and assessment and ensure that phase-wise subject outcomes are met and assessed, c) teaching topics that are similar together thereby reducing redundancy and allowing the learner to integrate the concept as the most important step in integration (alignment or temporal coordination) (see document on integration), and d) align learning and assessment experiences to the outcome and the level of achievement specified.

Understanding the competencies table

Understanding the competencies table

A	B	C	D	E	F	G	H	I	J
No.	Competencies	Domain	K/KH/SH/P	Core	Suggested Teaching Learning Method	Suggested Assessment method	No. required to certify (P)	Vertical Integration	Horizontal Integration
Physiology									
Summary Name of Topic: General Physiology Number of Competencies: (08)									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM25.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Unique number of the competency. First two alphabets represent the subject (see list); number following alphabet reflects topic number, following period is a running number.

Description of competency

Identifies the domain or domains addressed
 K - Knowledge
 S - Skill
 A - Attitude
 C - Communication

Identifies the level of competency required based on the Miller's pyramid
 K - Knows
 KH - Knows How
 S - Skill
 SH - Show How
 P - Perform independently

Identifies if the competency is core or desirable.
 Y indicates Core;
 N-non-core

Identifies the suggested learning method.
 DOAP - Demonstrate (by Student) Observe, Assist Perform)

Identifies the suggested assessment method
 Skill assessment - Clinics, Skills lab, Practicals etc.

no of times a skill needs to be done independently to be certified for independent performance;
 Rarely used in UG

Subject (s) in other phases with which the competency can be vertically integrated to increase relevance or improve basic understanding

Subject (s) in the same phase with which the competency can be horizontally integrated or aligned to allow a more wholesome understanding

***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning objectives from competencies

Deriving learning objectives from competencies

K	Knows	A knowledge attribute – Usually enumerates or describes
KH	Knows how	A higher level of knowledge – is able to discuss or analyse
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret / demonstrate a complex procedure requiring thought, knowledge and behaviour
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

PA42.1*	At the end of the session the phase II student must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the phase II student must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the phase II student must be able to describe the CSF features for a given etiology of meningitis accurately
PA42.4*	At the end of the session the phase II student must be able to identify the aetiology of meningitis correctly from a given set of CSF parameters

- Audience - who will do the behavior
- Behavior - What should the learner be able to do?
- Condition - Under what conditions should the learner be able to do it?
- Degree – How well must it be done

Objective: Statement of what a learner should be able to do at the end of a specific learning experience
***Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents**

Deriving learning methods from competencies

Deriving learning methods from competencies

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the Phase II student must be able to enumerate the most common causes of meningitis correctly	Lecture	small group discussion
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Related objectives can be combined into one teaching session	
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given etiologic of meningitis accurately		
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	small group discussion, practical session	

*Numbers given are for illustrative purposes only and should not be compared with the same in curriculum documents

Deriving assessment methods from competencies

Deriving assessment methods from competencies-1

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

PA42.3*	Identify the etiology of meningitis based on given CSF parameters	K/S	SH	Y

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

PA42.1*	At the end of the session the ~~Phase II student~~ must be able to enumerate the most common causes of meningitis correctly	Short note or part of structured essay: Enumerate 5 causes of meningitis based on their prevalence in India
PA42.2*	At the end of the session the Phase II student must be able to enumerate the components of a CSF analysis correctly	Short note or part of structured essay: Enumerate the components tested in a CSF analysis
PA42.3*	At the end of the session the Phase II student must be able to describe the CSF features for a given aetiology of meningitis accurately	Short note or part of structured essay: Describe the CSF findings that are characteristic of tuberculous meningitis
PA42.4*	At the end of the session the Phase II student must the able to identify the aetiology of meningitis correctly from a given set of CSF parameters	Short note / part of the structured essay/ Skill station/ Viva voce Review the CSF findings in the following patient and identify (write or vocalise) the most likely etiology

* Numbers given are for illustrative purposes only and should not be compared with numbers in the curriculum document

Deriving assessment methods from competencies-2

Competency: An **observable** ability of a health professional, **integrating multiple components** such as knowledge, skills, values and attitudes.

MI2.4*	List the common microbial agents causing anemia. Describe the morphology, mode of infection and discuss the pathogenesis, clinical course, diagnosis and prevention and treatment of the common microbial agents causing Anemia.	K	KH	Y	Didactic Small group discussion	Written/ Viva voce	Medicine	Pathology

Objective: Statement of what a learner should be able to do at the end of a specific learning experience

MI2.1*	Enumerate the common microbial agents causing anaemia
MI2.2*	Describe the morphology of agent (1,2 etc)
MI2.3*	Describe the mode of infection of agent in humans
MI2.4*	Discuss the pathogenesis of anemia caused by agent
MI2.5*	Describe the clinical course of infection by agent
MI2.6*	Enumerate the diagnostic tests to identify the aetiology of agent as a cause of anemia
MI2.7*	Discuss the methods to prevent infection by agent
MI2.8*	Describe the treatment of infection by agent

Integrate concept - not necessarily teachers
Plan session with teachers of both subjects -teachers from both subjects usually not needed. Ensure redundancy and duplication by reviewing both subjects



Horizontally aligned and integrated with pathology

Vertically integrated with General Medicine



Integrate concept - not necessarily teachers Plan session with teachers from both phases. Make a decision on how much of the information needs to be brought down to this phase to make it relevant. Consider how a competency can ascend over phases: for eg. - can be at a KH -(know how) in phase II but becomes SH in phase III. For vertical integration with clinical subjects, use of a case to link the concept (a well written paper, case is sufficient). Using teachers from both phases is rarely required

The concept of integration

Concept of integration used in the Manual

Integration is a learning experience that allows the learner to perceive relationships from blocks of knowledge and develop a unified view of its basis and its application. The GMR 2018 applies these principles to the extent that will retain the strengths of silo - based education and assessment while providing experiences that will allow learners to integrate concepts.

Keeping this in mind, the Regulations recommend temporal coordination as described by Harden (called alignment in this document) as the major method to be followed allowing similar topics in different subjects to be thought separately but during the same time frame (Figure 1a).

In a small proportion - not to exceed 20% of the total curriculum an attempt can be made to Share (Figure 1b) topics or Correlate (Figure 1c) topics by using an integration session. The integration session most preferred will be a case based discussion in an appropriate format ensuring that elements in the same phase (horizontal) and from other phases are addressed. Care must be taken to ensure that achievement phase - based objectives are given primacy - the integrative elements from other phases are used only to provide adequate recall and understand the clinical application of concepts. It must be emphasized that integration does not necessarily require multiple teachers in each class. Experts from each phase and subject may be involved in the lesson planning but not it in its delivery unless deemed necessary.

As much as possible the necessary correlates from other phases must also be introduced while discussing a topic in a given subject - Nesting (Figure 1d) (Harden). Topics that cannot be aligned and integrated must be provided adequate time in the curriculum throughout the year.

Assessment will continue to be subject based. However, efforts must be made to ensure that phase appropriate correlates are tested to determine if the learner has internalized and integrated the concept and its application.

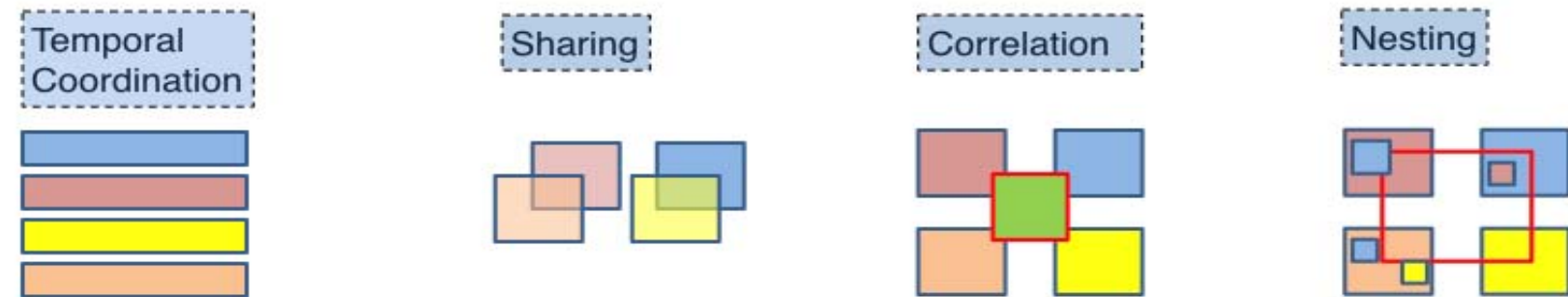


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement a teaching program c. Correlation: the emphasis remains on disciplines or subjects with subject-based courses taking up most of the curriculum time. Within this framework, an integrated teaching session or course is introduced in addition to the subject-based teaching (green box with red border) d. Nesting: the teacher targets, within a subject-based course, skills relating to other subjects. Adapted from Harden R Med Edu 2000. 34; 551

Definitions used in the Manual

- 1. Goal:** A projected state of affairs that a person or system plans to achieve.
In other words: Where do you want to go? or What do you want to become?
- 2. Competency:** The habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served.
In other words: What should you have? or What should have changed?
- 3. Objective:** Statement of what a learner should be able to do at the end of a specific learning experience.
In other words: What the Indian Medical Graduate should know, do, or behave.

Action Verbs used in this manual

Knowledge	Skill	Attitude/communicate
Enumerate	Identify	Counsel
List	Demonstrate	Inform
Describe	Perform under supervision	Demonstrate understanding of
Discuss	Perform independently	
Differentiate	Document	
Define	Present	
Classify	Record	
Choose	Interpret	
Elicit		
Report		

Note:

1. Specified essential competencies only will be required to be performed independently at the end of the final year MBBS.
2. The word ‘perform’ or ‘do’ is used ONLY if the task has to be done on patients or in laboratory practical in the pre/para- clinical phases.
3. Most tasks that require performance during undergraduate years will be performed under supervision.
4. If a certification to perform independently has been done, then the number of times the task has to be performed under supervision will be indicated in the last column.

Explanation of terms used in this manual

Lecture	Any instructional large group method including traditional lecture and interactive lecture
Small group discussion	Any instructional method involving small groups of students in an appropriate learning context
DOAP (Demonstration- Observation - Assistance - Performance)	A practical session that allows the student to observe a demonstration, assist the performer, perform in a simulated environment, perform under supervision or perform independently
Skill assessment	A session that assesses the skill of the student including those in the practical laboratory, skills lab, skills station that uses mannequins/ paper case/simulated patients/real patients as the context demands
Core	A competency that is necessary in order to complete the requirements of the subject (traditional must know)
Non-Core	A competency that is optional in order to complete the requirements of the subject (traditional nice (good) to know/ desirable to know)
National Guidelines	Health programs as relevant to the competency that are part of the National Health Program

Domains of learning

K	Knowledge
S	Skill
A	Attitude
C	Communication

Levels of competency

K	Knows	A knowledge attribute - Usually enumerates or describes
KH	Knows how	A higher level of knowledge - is able to discuss or analyze
S	Shows	A skill attribute: is able to identify or demonstrate the steps
SH	Shows how	A skill attribute: is able to interpret/ demonstrate a complex procedure requiring thought, knowledge and behavior
P	Performs (under supervision or independently)	Mastery for the level of competence - When done independently under supervision a pre-specified number of times - certification or capacity to perform independently results

Note:

In the table of competency - the highest level of competency acquired is specified and implies that the lower levels have been acquired already. Therefore, when a student is able to SH - Show how - an informed consent is obtained - it is presumed that the preceding steps - the knowledge, the analytical skills, the skill of communicating have all been obtained.

It may also be noted that attainment of the highest level of competency may be obtained through steps spread over several subjects or phases and not necessarily in the subject or the phase in which the competency has been identified.

Volume III

Competency based Undergraduate Curriculum in Surgery and Allied subjects

GENERAL SURGERY (CODE: SU)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
GENERAL SURGERY									
Topic: Metabolic response to injury Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU1.1	Describe Basic concepts of homeostasis, enumerate the metabolic changes in injury and their mediators.	K	KH	Y	Lecture, Bed side clinic, Small group discussion	Written/ Viva voce		Physiology, Biochemistry	
SU1.2	Describe the factors that affect the metabolic response to injury.	K	KH	Y	Lecture, Bed side clinic, Small group discussion	Written/ Viva voce		Biochemistry	
SU1.3	Describe basic concepts of perioperative care.	K	KH	Y	Lecture, Bed side clinic, Small group discussion	Written/ Viva voce			
Topic: Shock Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU2.1	Describe Pathophysiology of shock, types of shock & principles of resuscitation including fluid replacement and monitoring.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology	
SU2.2	Describe the clinical features of shock and its appropriate treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU2.3	Communicate and counsel patients and families about the treatment and prognosis of shock demonstrating empathy and care	A/C	SH	Y	DOAP session	Skill assessment		AETCOM	
Topic: Blood and blood components Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU3.1	Describe the Indications and appropriate use of blood and blood products and complications of blood transfusion.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
SU3.2	Observe blood transfusions.	S	SH	Y	Small group discussion, DOAP session	Skills assessment/ Log book			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU3.3	Counsel patients and family/ friends for blood transfusion and blood donation.	A/C	SH	Y	DOAP session	Skills assessment			
Topic: Burns Number of competencies: (04) Number of procedures that require certification: (NIL)									
SU4.1	Elicit document and present history in a case of Burns and perform physical examination. Describe Pathophysiology of Burns.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	
SU4.2	Describe Clinical features, Diagnose type and extent of burns and plan appropriate treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU4.3	Discuss the Medicolegal aspects in burn injuries.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU4.4	Communicate and counsel patients and families on the outcome and rehabilitation demonstrating empathy and care.	A /C	SH	Y	Small group discussion, Role play, Skills assessment	Viva voce			
Topic: Wound healing and wound care Number of competencies: (04) Number of procedures that require certification: (NIL)									
SU5.1	Describe normal wound healing and factors affecting healing.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
SU5.2	Elicit, document and present a history in a patient presenting with wounds.	C	SH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU5.3	Differentiate the various types of wounds, plan and observe management of wounds.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU5.4	Discuss medico legal aspects of wounds	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Surgical infections Number of competencies: (02) Number of procedures that require certification: (NIL)									
SU6.1	Define and describe the aetiology and pathogenesis of surgical Infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU6.2	Enumerate Prophylactic and therapeutic antibiotics Plan appropriate management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Surgical Audit and Research Number of competencies: (02) Number of procedures that require certification: (NIL)									
SU7.1	Describe the Planning and conduct of Surgical audit	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
SU7.2	Describe the principles and steps of clinical research in General Surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
Topic: Ethics Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU8.1	Describe the principles of Ethics as it pertains to General Surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment	-	Forensic Medicine, AETCOM	
SU8.2	Demonstrate Professionalism and empathy to the patient undergoing General Surgery	A/C	SH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Forensic Medicine, AETCOM	
SU8.3	Discuss Medico-legal issues in surgical practice	A/C	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Forensic Medicine, AETCOM	
Topic: Investigation of surgical patient Number of competencies (03) Number of procedures that require certification: (NIL)									
SU9.1	Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient	C	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Microbiology, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU9.2	Biological basis for early detection of cancer and multidisciplinary approach in management of cancer	C	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU9.3	Communicate the results of surgical investigations and counsel the patient appropriately	C	SH	Y	DOAP session	Skill assessment			
Topic: Pre, intra and post- operative management. Number of competencies: (04) Number of procedures that require certification: (NIL)									
SU10.1	Describe the principles of perioperative management of common surgical procedures	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU10.2	Describe the steps and obtain informed consent in a simulated environment	S/A/C	SH	Y	DOAP session	Skill assessment/ Log book		AETCOM	
SU10.3	Observe common surgical procedures and assist in minor surgical procedures; Observe emergency lifesaving surgical procedures.	S	KH	Y	DOAP sessions	Log book			
SU10.4	Perform basic surgical Skills such as First aid including suturing and minor surgical procedures in simulated environment	S	P	Y	DOAP session	Skill assessment			
Topic: Anaesthesia and pain management Number of competencies: (06) Number of procedures that require certification: (NIL)									
SU11.1	Describe principles of Preoperative assessment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anaesthesiology
SU11.2	Enumerate the principles of general, regional, and local Anaesthesia.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anaesthesiology
SU11.3	Demonstrate maintenance of an airway in a mannequin or equivalent	S	SH	Y	DOAP session	Skill assessment			Anaesthesiology
SU11.4	Enumerate the indications and principles of day care General Surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU11.5	Describe principles of providing post-operative pain relief and management of chronic pain.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anaesthesiology
SU11.6	Describe Principles of safe General Surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Nutrition and fluid therapy Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU12.1	Enumerate the causes and consequences of malnutrition in the surgical patient	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
SU12.2	Describe and discuss the methods of estimation and replacement of the fluid and electrolyte requirements in the surgical patient	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Physiology	
SU12.3	Discuss the nutritional requirements of surgical patients, the methods of providing nutritional support and their complications	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce		Biochemistry	
Topic: Transplantation Number of competencies: (04) Number of procedures that require certification: (NIL)									
SU13.1	Describe the immunological basis of organ transplantation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU13.2	Discuss the Principles of immunosuppressive therapy.Enumerate Indications, describe surgical principles, management of organ transplantation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology	
SU13.3	Discuss the legal and ethical issues concerning organ donation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		AETCOM	
SU13.4	Counsel patients and relatives on organ donation in a simulated environment	S	SH	Y	DOAP session	Skill assessment		AETCOM	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Basic Surgical Skills Number of competencies: (04) Number of procedures that require certification: (NIL)									
SU14.1	Describe Aseptic techniques, sterilization and disinfection.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU14.2	Describe Surgical approaches, incisions and the use of appropriate instruments in Surgery in general.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU14.3	Describe the materials and methods used for surgical wound closure and anastomosis (sutures, knots and needles)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU14.4	Demonstrate the techniques of asepsis and suturing in a simulated environment	S	SH	Y	DOAP session	Skill assessment/ Log book			
Topic: Biohazard disposal Number of competencies: (01) Number of procedures that require certification: (NIL)									
SU15.1	Describe classification of hospital waste and appropriate methods of disposal.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
Topic: Minimally invasive General Surgery Number of competencies: (01) Number of procedures that require certification: (NIL)									
SU16.1	Minimally invasive General Surgery: Describe indications advantages and disadvantages of Minimally invasive General Surgery	K	K	Y	Lecture, Demonstration, Bedside clinic, Discussion	Theory/ Practical / Orals/Written/ Viva voce			
Topic: Trauma Number of competencies: (10) Number of procedures that require certification: (NIL)									
SU17.1	Describe the Principles of FIRST AID	S	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.2	Demonstrate the steps in Basic Life Support. Transport of injured patient in a simulated environment	S	SH	Y	DOAP session	Skill assessment			Anaesthesiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU17.3	Describe the Principles in management of mass casualties	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.4	Describe Pathophysiology, mechanism of head injuries	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.5	Describe clinical features for neurological assessment and GCS in head injuries	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.6	Chose appropriate investigations and discuss the principles of management of head injuries	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.7	Describe the clinical features of soft tissue injuries. Chose appropriate investigations and discuss the principles of management.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.8	Describe the pathophysiology of chest injuries.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.9	Describe the clinical features and principles of management of chest injuries.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU17.10	Demonstrate Airway maintenance. Recognize and manage tension pneumothorax, hemothorax and flail chest in simulated environment.	S	SH	Y	DOAP session	Skill assessment/ Log book			Anaesthesiology
Topic: Skin and subcutaneous tissue Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU18.1	Describe the pathogenesis, clinical features and management of various cutaneous and subcutaneous infections.	K	KH	Y	Lecture, Small group Discussion	Written/ Viva voce			
SU18.2	Classify skin tumors Differentiate different skin tumors and discuss their management.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU18.3	Describe and demonstrate the clinical examination of surgical patient including swelling and order relevant investigation for diagnosis. Describe and discuss appropriate treatment plan.	S	SH	Y	Bedside clinic, Small group discussion, DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Developmental anomalies of face, mouth and jaws Number of competencies: (02) Number of procedures that require certification: (NIL)									
SU19.1	Describe the etiology and classification of cleft lip and palate	K	KH	Y	Lecture, Small group Discussion	Written/ Viva voce		Human Anatomy	
SU19.2	Describe the Principles of reconstruction of cleft lip and palate	K	KH	Y	Lecture, Small group Discussion	Written/ Viva voce		Human Anatomy	
Topic: Oropharyngeal cancer Number of competencies: (02) Number of procedures that require certification: (NIL)									
SU20.1	Describe etiopathogenesis of oral cancer symptoms and signs of oropharyngeal cancer.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
SU20.2	Enumerate the appropriate investigations and discuss the Principles of treatment.	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Disorders of salivary glands Number of competencies: (02) Number of procedures that require certification: (NIL)									
SU21.1	Describe surgical anatomy of the salivary glands, pathology, and clinical presentation of disorders of salivary glands	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU21.2	Enumerate the appropriate investigations and describe the Principles of treatment of disorders of salivary glands	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Endocrine General Surgery: Thyroid and parathyroid Number of competencies: (06) Number of procedures that require certification: (NIL)									
SU22.1	Describe the applied anatomy and physiology of thyroid	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
SU22.2	Describe the etiopathogenesis of thyroidal swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU22.3	Demonstrate and document the correct clinical examination of thyroid swellings and discuss the differential diagnosis and their management	S	SH	Y	Bedside clinic	Skill assessment			
SU22.4	Describe the clinical features, classification and principles of management of thyroid cancer	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU22.5	Describe the applied anatomy of parathyroid	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
SU22.6	Describe and discuss the clinical features of hypo - and hyperparathyroidism and the principles of their management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
Topic: Adrenal glands Number of competencies: (03) Number of procedures that require certification: (NIL)									
SU23.1	Describe the applied anatomy of adrenal glands	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
SU23.2	Describe the etiology, clinical features and principles of management of disorders of adrenal gland	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
SU23.3	Describe the clinical features, principles of investigation and management of Adrenal tumors	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Pancreas		Number of competencies: (03)			Number of procedures that require certification: (NIL)				
SU24.1	Describe the clinical features, principles of investigation, prognosis and management of pancreatitis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
SU24.2	Describe the clinical features, principles of investigation, prognosis and management of pancreatic endocrine tumours	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
SU24.3	Describe the principles of investigation and management of Pancreatic disorders including pancreatitis and endocrine tumors.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
Topic: Breast		Number of competencies: (05)			Number of procedures that require certification: (NIL)				
SU25.1	Describe applied anatomy and appropriate investigations for breast disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU25.2	Describe the etiopathogenesis, clinical features and principles of management of benign breast disease including infections of the breast	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU25.3	Describe the etiopathogenesis, clinical features, Investigations and principles of treatment of benign and malignant tumours of breast.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Radiodiagnosis	
SU25.4	Counsel the patient and obtain informed consent for treatment of malignant conditions of the breast	A/ C	SH	Y	DOAP session	Skill assessment			
SU25.5	Demonstrate the correct technique to palpate the breast for breast swelling in a mannequin or equivalent	S	SH	Y	DOAP session	Skill assessment			
Topic: Cardio-thoracic General Surgery- Chest - Heart and Lungs		Number of competencies: (04)			Number of procedures that require certification: (NIL)				
SU26.1	Outline the role of surgery in the management of coronary heart disease, valvular heart diseases and congenital heart diseases	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU26.3	Describe the clinical features of mediastinal diseases and the principles of management	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
SU26.4	Describe the etiology, pathogenesis, clinical features of tumors of lung and the principles of management	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Vascular diseases Number of competencies: (08) Number of procedures that require certification: (NIL)									
SU27.1	Describe the etiopathogenesis, clinical features, investigations and principles of treatment of occlusive arterial disease.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU27.2	Demonstrate the correct examination of the vascular system and enumerate and describe the investigation of vascular disease	S	SH	Y	DOAP session	Skill assessment			
SU27.3	Describe clinical features, investigations and principles of management of vasospastic disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU27.4	Describe the types of gangrene and principles of amputation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU27.5	Describe the applied anatomy of venous system of lower limb	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
SU27.6	Describe pathophysiology, clinical features, Investigations and principles of management of DVT and Varicose veins	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
SU27.7	Describe pathophysiology, clinical features, investigations and principles of management of Lymph edema, lymphangitis and Lymphomas	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU27.8	Demonstrate the correct examination of the lymphatic system	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
Topic: Abdomen Number of competencies: (18) Number of procedures that require certification: (NIL)									
SU28.1	Describe pathophysiology, clinical features, Investigations and principles of management of Hernias	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU28.2	Demonstrate the correct technique to examine the patient with hernia and identify different types of hernias.	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
SU28.3	Describe causes, clinical features, complications and principles of mangament of peritonitis	K	K	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce			
SU28.4	Describe pathophysiology, clinical features, investigations and principles of management of Intra-abdominal abscess, mesenteric cyst, and retroperitoneal tumors	K	K	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
SU28.5	Describe the applied Anatomy and physiology of esophagus	K	K	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce		Human Anatomy, Physiology	
SU28.6	Describe the clinical features, investigations and principles of management of benign and malignant disorders of esophagus	K	K	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
SU28.7	Describe the applied anatomy and physiology of stomach	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
SU28.8	Describe and discuss the aetiology, the clinical features, investigations and principles of management of congenital hypertrophic pyloric stenosis, Peptic ulcer disease, Carcinoma stomach	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU28.9	Demonstrate the correct technique of examination of a patient with disorders of the stomach	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
SU28.10	Describe the applied anatomy of liver. Describe the clinical features, Investigations and principles of management of liver abscess, hydatid disease, injuries and tumors of the liver	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce		Human Anatomy	
SU28.11	Describe the applied anatomy of spleen. Describe the clinical features, investigations and principles of management of splenic injuries. Describe the post-splenectomy sepsis - prophylaxis	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU28.12	Describe the applied anatomy of biliary system. Describe the clinical features, investigations and principles of management of diseases of biliary system	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce		Human Anatomy	
SU28.13	Describe the applied anatomy of small and large intestine	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce		Human Anatomy	
SU28.14	Describe the clinical features, investigations and principles of management of disorders of small and large intestine including neonatal obstruction and Short gut syndrome	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
SU28.15	Describe the clinical features, investigations and principles of management of diseases of Appendix including appendicitis and its complications.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
SU28.16	Describe applied anatomy including congenital anomalies of the rectum and anal canal	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU28.17	Describe the clinical features, investigations and principles of management of common anorectal diseases	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
SU28.18	Describe and demonstrate clinical examination of abdomen. Order relevant investigations. Describe and discuss appropriate treatment plan	S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment			
Topic: Urinary System Number of competencies: (11) Number of procedures that require certification: (NIL)									
SU29.1	Describe the causes, investigations and principles of management of Hematuria	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.2	Describe the clinical features, investigations and principles of management of congenital anomalies of genitourinary system	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU29.3	Describe the Clinical features, Investigations and principles of management of urinary tract infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
SU29.4	Describe the clinical features, investigations and principles of management of hydronephrosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.5	Describe the clinical features, investigations and principles of management of renal calculi	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.6	Describe the clinical features, investigations and principles of management of renal tumours	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.7	Describe the principles of management of acute and chronic retention of urine	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.8	Describe the clinical features, investigations and principles of management of bladder cancer	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
SU29.9	Describe the clinical features, investigations and principles of management of disorders of prostate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment			
SU29.10	Demonstrate a digital rectal examination of the prostate in a mannequin or equivalent	S	SH	Y	DOAP session	Skill assessment			
SU29.11	Describe clinical features, investigations and management of urethral strictures	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
Topic: Penis, Testis and scrotum Number of competencies: (06) Number of procedures that require certification: (NIL)									
SU30.1	Describe the clinical features, investigations and principles of management of phimosis, paraphimosis and carcinoma penis.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
SU30.2	Describe the applied anatomy clinical features, investigations and principles of management of undescended testis.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU30.3	Describe the applied anatomy clinical features, investigations and principles of management of epididymo-orchitis	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU30.4	Describe the applied anatomy clinical features, investigations and principles of management of varicocele	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU30.5	Describe the applied anatomy, clinical features, investigations and principles of management of Hydrocele	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
SU30.6	Describe classification, clinical features, investigations and principles of management of tumours of testis	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
	Column C: K- Knowledge, S – Skill , A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Human Anatomy									
AN6.3	Explain the concept of lymphoedema and spread of tumors via lymphatics and venous system	K	KH	N	Lecture	Written		General Surgery	
AN9.2	Breast-Describe the location, extent, deep relations, structure, age changes, blood supply, lymphatic drainage, microanatomy and applied anatomy of breast	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN10.4	Describe the anatomical groups of axillary lymph nodes and specify their areas of drainage	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN10.6	Explain the anatomical basis of clinical features of Erb's palsy and Klumpke's paralysis	K	KH	N	Lecture	Written		General Surgery	
AN10.7	Explain anatomical basis of enlarged axillary lymph nodes	K	KH	N	Lecture	Written		General Surgery	
AN11.3	Describe the anatomical basis of Venepuncture of cubital veins	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	
AN12.8	Describe anatomical basis of Claw hand	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN12.10	Explain infection of fascial spaces of palm	K	KH	N	Lecture	Written		General Surgery	
AN12.11	Identify, describe and demonstrate important muscle groups of dorsal forearm with attachments, nerve supply and actions	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN12.12	Identify & describe origin, course, relations, branches (or tributaries), termination of important nerves and vessels of back of forearm	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN12.13	Describe the anatomical basis of Wrist drop	K	KH	Y	Lecture	Written/Viva voce		General Surgery	
AN12.14	Identify & describe compartments deep to extensor retinaculum	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN15.3	Describe and demonstrate boundaries, floor, roof and contents of femoral triangle	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN15.4	Explain anatomical basis of Psoas abscess & Femoral hernia	K	KH	N	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN16.2	Describe anatomical basis of sciatic nerve injury during gluteal intramuscular injections	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN16.3	Explain the anatomical basis of Trendelenburg sign	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN18.3	Explain the anatomical basis of foot drop	K	KH	Y	Lecture, DOAP session	Written/ Viva voce		General Surgery	
AN19.3	Explain the concept of "Peripheral heart"	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN20.4	Explain anatomical basis of enlarged inguinal lymph nodes	K	KH	N	Lecture	Written/ Viva voce		General Surgery	
AN20.5	Explain anatomical basis of varicose veins and deep vein thrombosis	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN20.9	Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small saphenous veins	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		General Medicine General Surgery	
AN23.1	Describe & demonstrate the external appearance, relations, blood supply, nerve supply, lymphatic drainage and applied anatomy of oesophagus	K/S	SH	Y	Practical, Lecture, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN23.2	Describe & demonstrate the extent, relations, tributaries of thoracic duct and enumerate its applied anatomy	K/S	SH	Y	Practical, Lecture, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN23.7	Mention the extent, relations and applied anatomy of lymphatic duct	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN27.1	Describe the layers of scalp, its blood supply, its nerve supply and surgical importance	K	KH	Y	Practical, Lecture	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN28.8	Explain surgical importance of deep facial vein	K	KH	Y	Lecture	Written		General Surgery	
AN28.9	Describe & demonstrate the parts, borders, surfaces, contents, relations and nerve supply of parotid gland with course of its duct and surgical importance	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN28.10	Explain the anatomical basis of Frey's syndrome	K	KH	N	Lecture	Written		General Surgery	
AN29.2	Explain anatomical basis of Erb's & Klumpke's palsy	K	KH	Y	Lecture	Written		General Surgery	
AN29.3	Explain anatomical basis of wry neck	K	KH	N	Lecture	Written		General Surgery	
AN30.1	Describe the cranial fossae & identify related structures.	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/Skill assessment		General Surgery	
AN30.2	Describe & identify major foramina with structures passing through them	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN33.2	Describe & demonstrate attachments, direction of fibres, nerve supply and actions of muscles of mastication	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN33.4	Explain the clinical significance of pterygoid venous plexus	K	KH	Y	Lecture	Written		General Surgery	
AN33.5	Describe the features of dislocation of temporomandibular joint	K	KH	N	Lecture	Written		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN34.1	Describe & demonstrate the morphology, relations and nerve supply of submandibular salivary gland & submandibular ganglion	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN34.2	Describe the basis of formation of submandibular stones	K	KH	N	Lecture	Written		General Surgery	
AN35.2	Describe & demonstrate location, parts, borders, surfaces, relations & blood supply of thyroid gland	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN35.5	Describe & demonstrate extent, drainage & applied anatomy of cervical lymph nodes	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN35.8	Describe the anatomically relevant clinical features of Thyroid swellings	K	KH	N	Lecture	Written		General Surgery	
AN35.9	Describe the clinical features of compression of subclavian artery and lower trunk of brachial plexus by cervical rib	K	KH	N	Lecture	Written		General Surgery	
AN43.5	Demonstrate- 1) Testing of muscles of facial expression, extraocular muscles, muscles of mastication, 2) Palpation of carotid arteries, facial artery, superficial temporal artery, 3) Location of internal and external jugular veins, 4) Location of hyoid bone, thyroid cartilage and cricoid cartilage with their vertebral levels	K/S	SH	Y	Practical	Viva voce/ Skill assessment		General Surgery	
AN43.6	Demonstrate surface projection of Thyroid gland, Parotid gland and duct, Pterion, Common carotid artery, Internal jugular vein, Subclavian vein, External jugular vein, Facial artery in the face & Accessory nerve	K/S	SH	N	Practical	Viva voce/ Skill assessment		General Surgery	
AN44.1	Describe & demonstrate the Planes (transpyloric, transtubercular, subcostal, lateral vertical, linea alba, linea semilunaris), regions & Quadrants of abdomen	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN44.4	Describe & demonstrate extent, boundaries, contents of Inguinal canal including Hesselbach's triangle.	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN44.5	Explain the anatomical basis of inguinal hernia.	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN44.6	Describe & demonstrate attachments of muscles of anterior abdominal wall	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN44.7	Enumerate common Abdominal incisions	K	KH	N	Lecture	Written		General Surgery	
AN46.1	Describe & demonstrate coverings, internal structure, side determination, blood supply, nerve supply, lymphatic drainage & descent of testis with its applied anatomy	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN46.4	Explain the anatomical basis of varicocele	K	KH	N	Lecture	Written		General Surgery	
AN46.5	Explain the anatomical basis of Phimosi s & Circumcision	K	KH	N	Lecture	Written		General Surgery	
AN47.1	Describe & identify boundaries and recesses of Lesser & Greater sac	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN47.2	Name & identify various peritoneal folds & pouches with its explanation.	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN47.3	Explain anatomical basis of Ascites & Peritonitis	K	KH	N	Lecture	Written		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN47.4	Explain anatomical basis of Subphrenic abscess	K	KH	N	Lecture	Written		General Surgery	
AN47.5	Describe & demonstrate major viscera of abdomen under following headings (anatomical position, external and internal features, important peritoneal and other relations, blood supply, nerve supply, lymphatic drainage and applied aspects)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written		General Surgery	
AN47.6	Explain the anatomical basis of Splenic notch, accessory spleens, Kehr's sign, different types of vagotomy, liver biopsy (site of needle puncture), referred pain in cholecystitis, Obstructive jaundice, referred pain around umbilicus, radiating pain of kidney to groin & Lymphatic spread in carcinoma stomach	K	KH	N	Lecture	Written		General Surgery	
AN47.7	Mention the clinical importance of Calot's triangle	K	KH	N	Lecture	Written		General Surgery	
AN47.10	Enumerate the sites of portosystemic anastomosis	K	KH	Y	Lecture	Written		General Surgery	
AN47.11	Explain the anatomic basis of hematemesis & caput medusae in portal hypertension	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN47.14	Describe the abnormal openings of thoracoabdominal diaphragm and diaphragmatic hernia	K	KH	N	Lecture	Written		General Surgery	
AN48.5	Explain the anatomical basis of suprapubic cystostomy, Urinary obstruction in benign prostatic hypertrophy, Retroverted uterus, Prolapse uterus, Internal and external haemorrhoids, Anal fistula, Vasectomy, Tubal pregnancy & Tubal ligation	K	KH	N	Lecture	Written		General Surgery	
AN48.6	Describe neurological basis of automatic bladder	K	KH	N	Lecture	Written		General Surgery	
AN48.7	Mention the lobes involved in benign prostatic hypertrophy & prostatic cancer	K	KH	N	Lecture	Written		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN48.8	Mention the structures palpable during vaginal & rectal examination	K	KH	N	Lecture	Written		Obstetrics & Gynaecology General Surgery	
AN49.4	Describe & demonstrate boundaries, content & applied anatomy of Ischiorectal fossa	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		General Surgery	
AN52.5	Describe the development and congenital anomalies of diaphragm	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN52.6	Describe the development and congenital anomalies of foregut, midgut & hindgut	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN52.7	Describe the development of urinary system	K	KH	Y	Lecture	Written/ Viva voce		General Surgery	
AN53.1	Identify & hold the bone in the anatomical position, describe the salient features, articulations & demonstrate the attachments of muscle groups	K/S	SH	Y	Lecture, DOAP session	Viva voce/ Skill assessment		General Surgery, Obstetrics & Gynaecology	
AN55.1	Demonstrate the surface marking of regions and planes of abdomen, superficial inguinal ring, deep inguinal ring, McBurney's point, Renal Angle & Murphy's point	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		General Surgery	
AN55.2	Demonstrate the surface projections of: stomach, liver, fundus of gall bladder, spleen, duodenum, pancreas, ileocaecal junction, kidneys & root of mesentery	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		General Surgery	
Biochemistry									
BI10.1	Describe the cancer initiation promotion oncogenes & oncogene activation.	K	KH	Y	Lectures, Small group discussion	Written/ viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
BI10.2	Describe various biochemical tumor markers and the biochemical basis of cancer therapy.	K	KH	Y	Lectures, Small group discussion	Written/ viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.3	Describe the cellular and humoral components of the immune system & describe the types and structure of antibody	K	KH	Y	Lectures, Small group discussion	Written/ viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
Pathology									
PA4.1	Define and describe the general features of acute and chronic inflammation including stimuli, vascular and cellular events	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA4.2	Enumerate and describe the mediators of acute inflammation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA5.1	Define and describe the process of repair and regeneration including wound healing and its types	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA6.3	Define and describe shock, its pathogenesis and its stages	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA8.1	Describe the diagnostic role of cytology and its application in clinical care	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA8.2	Describe the basis of exfoliative cytology including the technique, stains used	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		General Surgery	
PA19.1	Enumerate the causes and describe the differentiating features of lymphadenopathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA19.2	Describe the pathogenesis and pathology of tuberculous lymphadenitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA19.4	Describe and discuss the pathogenesis pathology and the differentiating features of Hodgkin's and non-Hodgkin's lymphoma	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA19.5	Identify and describe the features of Hodgkin's lymphoma in a gross and microscopic specimen	S	SH	Y	DOAP session	Skill assessment		General Surgery	
PA19.6	Enumerate and differentiate the causes of splenomegaly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA22.4	Enumerate blood components and describe their clinical uses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
PA24.4	Describe and etiology and pathogenesis and pathologic features of carcinoma of the stomach	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.5	Describe and etiology and pathogenesis and pathologic features of Tuberculosis of the intestine	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.6	Describe and etiology and pathogenesis and pathologic and distinguishing features of inflammatory bowel disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA24.7	Describe the etiology and pathogenesis and pathologic and distinguishing features of carcinoma of the colon	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA25.2	Describe the pathophysiology and pathologic changes seen in hepatic failure and their clinical manifestations, complications and consequences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.4	Describe the pathophysiology, pathology and progression of alcoholic liver disease including cirrhosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA25.5	Describe the etiology, pathogenesis and complications of portal hypertension	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine, General Surgery	
PA28.10	Describe the etiology, pathogenesis, pathology, laboratory findings, distinguishing features progression and complications of acute and chronic pyelonephritis and reflux nephropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA28.13	Define, classify and describe the etiology, pathogenesis, pathology, laboratory urinary findings, distinguishing features, progression and complications of renal stone disease and obstructive uropathy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA28.16	Describe the etiology, genetics, pathogenesis, pathology, presenting features and progression of urothelial tumors	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.1	Classify testicular tumors and describe the pathogenesis, pathology, presenting and distinguishing features, diagnostic tests, progression and spread of testicular tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.2	Describe the pathogenesis, pathology, presenting and distinguishing features, diagnostic tests, progression and spread of carcinoma of the penis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.3	Describe the pathogenesis, pathology, hormonal dependency, presenting and distinguishing features, urologic findings and diagnostic tests of benign prostatic hyperplasia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.4	Describe the pathogenesis, pathology, hormonal dependency, presenting and distinguishing features, diagnostic tests, progression and spread of carcinoma of the prostate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA29.5	Describe the etiology, pathogenesis, pathology and progression of prostatitis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA31.1	Classify and describe the types, etiology, pathogenesis, pathology and hormonal dependency of benign breast disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, General Surgery	
PA31.2	Classify and describe the epidemiology, pathogenesis, classification, morphology, prognostic factors, hormonal dependency, staging and spread of carcinoma of the breast	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA31.3	Describe and identify the morphologic and microscopic features of carcinoma of the breast	S	SH	N	DOAP session	Skill assessment		General Surgery	
PA32.1	Enumerate, classify and describe the etiology, pathogenesis, pathology and iodine dependency of thyroid swellings	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy , Physiology, General Medicine, Pathology	
PA32.6	Describe the etiology, pathogenesis, manifestations, laboratory, morphologic features, complications and metastases of pancreatic cancer	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
PA32.9	Describe the etiology, pathogenesis, manifestations, laboratory and morphologic features of adrenal neoplasms	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology, General Medicine, General Surgery	
Microbiology									
MI1.4	Classify and describe the different methods of sterilization and disinfection. Discuss the application of the different methods in the laboratory, in clinical and surgical practice	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
MI1.5	Choose the most appropriate method of sterilization and disinfection to be used in specific situations in the laboratory, in clinical and surgical practice	K	KH	Y	Small group discussions, Case discussion	Written/ Viva voce/ OSPE		General Surgery	
MI7.1	Describe the etio-pathogenesis and discuss the laboratory diagnosis of infections of genitourinary system	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
MI8.7	Demonstrate Infection control practices and use of Personal Protective Equipments (PPE)	S	P	Y	DOAP session	Skill assessment	3 each in (Hand hygiene & PPE)	General Surgery	Community Medicine
Community Medicine									
CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, General Medicine	
CM13.3	Describe man-made disasters in the world and in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.4	Describe the details of the National Disaster management Authority	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
Forensic Medicine & Toxicology									
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially --maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres. -- maintenance of medico-legal register like accident register. -- documents of issuance of wound certificate -- documents of issuance of drunkenness certificate. -- documents of issuance of sickness and fitness certificate. -- documents for issuance of death certificate. -- documents of Medical Certification of Cause of Death - Form Number 4 and 4A -- documents for estimation of age by physical, dental and radiological examination and issuance of certificate	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Pediatrics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM2.19	Investigation of anaesthetic, operative deaths:Describe and discuss special protocols for conduction of autopsy and for collection, preservation and dispatch of related material evidences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Anesthesiology, General Surgery	
FM2.25	Describe types of injuries, clinical features, patho-physiology, post-mortem findings and medico-legal aspects in cases of burns, scalds, lightening, electrocution and radiations.	K	KH	Y	Lecture, Small group discussion, Autopsy, DOAP session	Written/ Viva voce/ OSPE		General Surgery	
FM3.3	Mechanical injuries and wounds: Define, describe and classify different types of mechanical injuries, abrasion, bruise, laceration, stab wound, incised wound, chop wound, defense wound, self-inflicted/fabricated wounds and their medico-legal aspects.	K	KH	Y	Lectures, Small group discussion, Bed side clinic/ DOAP session	Written/ Viva voce/ OSCE		General Surgery	
FM3.4	Mechanical injuries and wounds: define injury, assault & hurt. Describe IPC pertaining to injuries	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		General Surgery	
FM3.6	Mechanical injuries and wounds:Describe healing of injury and fracture of bones with its medico-legal importance	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	
FM3.8	Mechanical injuries and wounds:Describe and discuss different types of weapons including dangerous weapons and their examination.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	
FM3.9	Firearm injuries:Describe different types of firearms including structure and components, along with description of ammunition propellant charge and mechanism of fire-arms, different types of cartridges and bullets and various terminology in relation of firearm – caliber, range, choking.	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		General Surgery, Orthopaedics	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.10	Firearm injuries: Describe and discuss wound ballistics-different types of firearm injuries, blast injuries and their interpretation, preservation and dispatch of trace evidences in cases of firearm and blast injuries, various tests related to confirmation of use of firearms	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		General Surgery, Orthopaedics	
FM3.11	Regional Injuries: Describe and discuss regional injuries to head (Scalp wounds, fracture skull, intracranial haemorrhages, coup and contrecoup injuries), neck, chest, abdomen, limbs, genital organs, spinal cord and skeleton	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic or autopsy, DOAP session	Written/ Viva voce/ OSCE/OSPE		General Surgery, Orthopaedics	
FM3.12	Regional Injuries: Describe and discuss injuries related to fall from height and vehicular injuries – Primary and Secondary impact, Secondary injuries, crush syndrome, railway spine.	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic or autopsy, DOAP session	Written/ Viva voce/ OSCE/OSPE		General Surgery, Orthopaedics	
Dermatology, Venereology & Leprosy									
DR15.3	Enumerate the indications and describe the pharmacology, indications and adverse reactions of topical and systemic drugs used in treatment of pyoderma	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery	Microbiology, Pharmacology
DR15.4	Enumerate the indications for surgical referral	S	KH	Y	DOAP session	Written/Viva voce		General Surgery	
Anesthesiology									
AS3.1	Describe the principles of preoperative evaluation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery, General Medicine
AS3.2	Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AS3.3	Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.4	Choose and interpret appropriate testing for patients undergoing Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.5	Determine the readiness for General Surgery in a patient based on the preoperative evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS5.6	Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
AS6.3	Describe the common complications encountered by patients in the recovery room, their recognition and principles of management	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
AS9.3	Describe the principles of fluid therapy in the preoperative period	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
AS9.4	Enumerate blood products and describe the use of blood products in the preoperative period	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pathology	General Surgery
AS10.3	Describe the role of communication in patient safety	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		AETCOM	General Surgery
General Medicine									
IM5.8	Describe and discuss the pathophysiology, clinical evolution and complications of cholelithiasis and cholecystitis	K	K	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM5.13	Enumerate the indications for ultrasound and other imaging studies including MRCP and ERCP and describe the findings in liver disease	K	K	Y	Bed side clinic, Small group discussion	Written/ Viva voce		Radiodiagnosis	General Surgery
IM5.16	Describe and discuss the management of hepatitis, cirrhosis, portal hypertension, ascites, spontaneous, bacterial peritonitis and hepatic encephalopathy	K	KH	Y	Written, Small group discussion	Skill assessment/ Written/ Viva voce		Pharmacology	General Surgery
IM5.18	Enumerate the indications for hepatic transplantation	K	K	Y	Written, Small group discussion	Written/ Viva voce			General Surgery
IM12.6	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and severity including systemic signs of thyrotoxicosis and hypothyroidism, palpation of the pulse for rate and rhythm abnormalities, neck palpation of the thyroid and lymph nodes and cardiovascular findings	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			General Surgery
IM12.7	Demonstrate the correct technique to palpate the thyroid	S	SH	Y	Bedside clinic, DOAP session	Skill assessment			General Surgery
IM12.8	Generate a differential diagnosis based on the clinical presentation and prioritise it based on the most likely diagnosis	K	KH	Y	Bedside clinic, small group discussion	Short case			General Surgery
IM12.9	Order and interpret diagnostic testing based on the clinical diagnosis including CBC, thyroid function tests and ECG and radio iodine uptake and scan	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			General Surgery
IM12.10	Identify atrial fibrillation, pericardial effusion and bradycardia on ECG	S	SH	Y	Bedside clinic, lab	Skill assessment			General Surgery
IM12.11	Interpret thyroid function tests in hypo-and hyperthyroidism	S	SH	Y	Bedside clinic, lab	Skill assessment			General Surgery
IM12.13	Describe the pharmacology, indications, adverse reaction, interactions of thyroxine and antithyroid drugs	K	KH	Y	Lecture, Small group discussion	Viva voce/ Short note		Pharmacology	General Surgery
IM12.15	Describe and discuss the indications of thionamide therapy, radio iodine therapy and Surgery in the management of thyrotoxicosis	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce, Skill assessment		Pharmacology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM13.7	Elicit document and present a history that will help establish the aetiology of cancer and includes the appropriate risk factors, duration and evolution	S	K	Y	Bedside clinic	Skill assessment/ Short case			General Surgery
IM13.8	Perform and demonstrate a physical examination that includes an appropriate general and local examination that excludes the diagnosis, extent spread and complications of cancer	S	SH	Y	Bedside clinic	Skill assessment/ Short case			General Surgery
IM13.9	Demonstrate in a mannequin the correct technique for performing breast exam, rectal examination and cervical examination and pap smear	S	K	Y	Bedside clinic	Skill assessment/ Short case		Human Anatomy	General Surgery
IM13.10	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	K	Y	Bedside clinic	Skill assessment/ Short case			General Surgery
IM13.13	Describe and assess pain and suffering objectively in a patient with cancer	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery
IM13.14	Describe the indications for General Surgery, radiation and chemotherapy for common malignancies	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery
IM14.14	Describe and enumerate the indications and side effects of bariatric surgery	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM15.1	Enumerate,describe and discuss the aetiology of upper and lower GI bleeding	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.2	Enumerate describe and discuss the evaluation and steps involved in stabilizing a patient who presents with acute volume loss and GI bleed	S	SH	Y	DOAP session, Small group discussion, Lecture	Written/ Viva voce/ Skill assessment		Pathology	General Surgery
IM15.3	Describe and discuss the physiologic effects of acute blood and volume loss	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Physiology	General Surgery
IM15.4	Elicit document and present an appropriate history that identifies the route of bleeding, quantity, grade, volume loss, duration, etiology, comorbid illnesses and risk factors	S	SH	Y	Bedside clinic	Skill assessment			General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM15.5	Perform, demonstrate and document a physical examination based on the history that includes general examination, volume assessment and appropriate abdominal examination	S	SH	Y	Bedside clinic, Skills lab	Skill assessment			General Surgery
IM15.6	Distinguish between upper and lower gastrointestinal bleeding based on the clinical features	S	KH	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM15.7	Demonstrate the correct technique to perform an anal and rectal examination in a mannequin or equivalent	S	SH	Y	DOAP session	Skill assessment			General Surgery
IM15.8	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH	Y	Bedside clinic, Skills lab	Skill assessment/ Short note/ Viva voce			General Surgery
IM15.9	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, PT and PTT, stool examination, occult blood, liver function tests, H.pylori test.	S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment/ Short note/ Viva voce		Pathology	General Surgery
IM15.10	Enumerate the indications for endoscopy, colonoscopy and other imaging procedures in the investigation of Upper GI bleeding	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce			General Surgery
IM15.11	Develop, document and present a treatment plan that includes fluid resuscitation, blood and blood component transfusion, and specific therapy for arresting blood loss	S	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.12	Enumerate the indications for whole blood, component and platelet transfusion and describe the clinical features and management of a mismatched transfusion	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM15.13	Observe cross matching and blood / blood component transfusion	S	SH	Y	Bedside clinic	Short note/ Viva voce/ Skill assessment		Pathology	General Surgery
IM15.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of pressors used in the treatment of Upper GI bleed	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM15.15	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of acid peptic disease including Helicobacter pylori	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	General Surgery
IM15.16	Enumerate the indications for endoscopic interventions and Surgery	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM15.17	Determine appropriate level of specialist consultation	S	K	Y	Small group discussion				General Surgery
IM15.18	Counsel the family and patient in an empathetic non-judgmental manner on the diagnosis and therapeutic options	S	SH	Y	DOAP session	Skill assessment			General Surgery
IM16.12	Enumerate and discuss the indications for further investigations including antibodies, colonoscopy, diagnostic imaging and biopsy in the diagnosis of chronic diarrhea	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Pathology	General Surgery
IM16.15	Distinguish, based on the clinical presentation, Crohn's disease from ulcerative colitis	S	SH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology	General Surgery
IM16.17	Describe and enumerate the indications for Surgery in inflammatory bowel disease	K	K	Y	Lecture, Small group discussion	Short note/ Viva voce			General Surgery
IM18.15	Enumerate the indications for Surgery in a hemorrhagic stroke	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
IM19.9	Enumerate the indications for use of Surgery and botulinum toxin in the treatment of movement disorders	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	General Surgery
IM22.2	Describe the aetiology, clinical manifestations, diagnosis and clinical approach to primary hyperparathyroidism	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Pathology	General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM24.11	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of the elderly undergoing surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology, General Surgery
Obstetrics & Gynaecology									
OG26.2	Describe the causes, prevention, clinical features, principles of management of genital injuries and fistulae	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Surgery
OG33.2	Describe the principles of management including Surgery and radiotherapy of benign, pre-malignant (CIN) and malignant Lesions of the Cervix	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Surgery
Pediatrics									
PE21.8	Elicit, document and present a history pertaining to diseases of the Genitourinary tract00	S	SH	Y	Bedside clinics, Skills lab	Skill Assessment			General Surgery
PE21.14	Recognize common surgical conditions of the abdomen and genitourinary system and enumerate the indications for referral including acute and subacute intestinal obstruction, appendicitis pancreatitis perforation intussusception, Phimosis, undescended testis, Chordee, hypospadiasis, Torsion testis, hernia Hydrocele, Vulval Synechiae	S	SH	Y	Bed side clinics, Skills lab	Log book assessment			General Surgery
Orthopedics									
OR1.1	Describe and discuss the principles of pre-hospital care and casualty management of a trauma victim including principles of triage	K/S/A/C	K/KH	Y	Lecture with video, Small group discussion	Written/ Viva voce/ OSCE/ Simulation			General Surgery - Anaesthesiology
OR1.2	Describe and discuss the aetiopathogenesis, clinical features, investigations, and principles of management of shock	K/S	K/KH	Y	Lecture	Written/ Viva voce/ OSCE/ Simulation			General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR1.3	Describe and discuss the aetiopathogenesis, clinical features, investigations, and principles of management of soft tissue injuries	K	KH/ SH	Y	Lecture, Small group discussion	Written/ OSCE			General Surgery
OR1.4	Describe and discuss the principles of management of soft tissue injuries	K	K/KH	Y	Lecture, Small group discussion	Written Assesment/ Viva voce			General Surgery
OR3.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of Bone and Joint infections a) Acute Osteomyelitis b) Subacute osteomyelitis c) Acute Suppurative arthritis d) Septic arthritis & HIV infection e) Spirochaetal infection f) Skeletal Tuberculosis	K/S	K/KH/ SH	Y	Lecture, Small group discussion, Video assisted lecture	Written/ Viva voce/ OSCE		Pathology, Microbiology	General surgery
OR3.3	Participate as a member in team for procedures like drainage of abscess, sequestrectomy/ saucerisation and arthrotomy	K/S/A/C	SH	Y	DOAP session, Video demonstration	Viva voce/ OSCE/ Skills assessment			General Surgery
OR4.1	Describe and discuss the clinical features, Investigation and principles of management of Tuberculosis affecting major joints (Hip, Knee) including cold abscess and caries spine	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE		Pathology	General surgery
OR10.1	Describe and discuss the aetiopathogenesis, clinical features, Investigations and principles of management of benign and malignant bone tumours and pathological fractures	K	K/KH	Y	Lecture, Small group discussion, Video assisted interactive lecture	Written/ Viva voce OSCE		Pathology	General surgery, Radiotherapy
OR11.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves	K	K/H	Y	Lecture Small Group discussion, Case discussion	Written/ Viva voce/ OSCE		Human Anatomy	General Medicine, General surgery
Physical Medicine & Rehabilitation									
PM5.1	Enumerate the indications and describe the principles of amputation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, General Surgery

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM7.8	Enumerate the causes of, describe, classify Pressure sores, prevention, and treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
PM7.9	Enumerate the indications of debridement, and Split thickness skin grafting.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery
PM8.1	Describe the clinical features, evaluation, diagnosis and management of disability following traumatic brain injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics, General Surgery
Radiotherapy									
RT1.1	Describe and discuss definition of radiation, mechanism of action of radiation, types of radiation	K	KH	Y	Lecture	Written/ Viva voce			General Surgery Anaesthesiology
RT1.3	Enumerate, describe and discuss and classify staging of cancer (AJCC, FIGO etc.)	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, General Medicine
RT4.5	Describe and discuss role of radiation in management of common malignancies in India (region specific)	K	KH	Y	Lecture, Bed side clinic	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.6	Describe and discuss radiotherapy for benign disease	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.7	Counsel patients regarding acute and late effects of radiation and supportive care	K/A/S	KH	Y	Bedside clinic, Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.8	Describe oncological emergencies and palliative care	K/A/S	K/KH	Y	Lecture, Group discussion	Written/ Viva voce			General Surgery, Obstetrics & Gynaecology
RT5.1	Describe and discuss cancer prevention, screening, vaccination, cancer registry	K	K	Y	Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology

OPHTHALMOLOGY (CODE: OP)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OPHTHALMOLOGY									
Topic: Visual Acuity Assessment		Number of Competenscs: (05)			Number of procedures that require certification : (NIL)				
OP1.1	Describe the physiology of vision	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	
OP1.2	Define, classify and describe the types and methods of correcting refractive errors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP1.3	Demonstrate the steps in performing the visual acuity assessment for distance vision, near vision, colour vision, the pin hole test and the menace and blink reflexes	S	SH	Y	DOAP session, Lecture	Skill assessment/ Logbook			
OP1.4	Enumerate the indications and describe the principles of refractive surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP1.5	Define, enumerate the types and the mechanism by which strabismus leads to amblyopia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Lids and Adnexa, Orbit		Number of Competencies: (08)			Number of procedures that require certification: (NIL)				
OP2.1	Enumerate the causes, describe and discuss the aetiology, clinical presentations and diagnostic features of common conditions of the lid and adnexa including Hordeolum externum/ internum, blepharitis, preseptal cellulitis, dacryocystitis, hemangioma, dermoid, ptosis, entropion, lid lag, lagophthalmos	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
OP2.2	Demonstrate the symptoms & clinical signs of conditions enumerated in OP2.1	S	S	Y	DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP2.3	Demonstrate under supervision clinical procedures performed in the lid including: bells phenomenon, assessment of entropion/ ectropion, perform the regurgitation test of lacrimal sac. massage technique in cong. dacryocystitis, and trichiatic cilia removal by epilation	S	SH	Y	DOAP session, Lecture	Skill assessment			
OP2.4	Describe the aetiology, clinical presentation. Discuss the complications and management of orbital cellulitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP2.5	Describe the clinical features on ocular examination and management of a patient with cavernous sinus thrombosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP2.6	Enumerate the causes and describe the differentiating features, and clinical features and management of proptosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP2.7	Classify the various types of orbital tumours. Differentiate the symptoms and signs of the presentation of various types of ocular tumours	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP2.8	List the investigations helpful in diagnosis of orbital tumors. Enumerate the indications for appropriate referral	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Conjunctiva Number of Competencies (09) Number of procedures that require certification: (NIL)									
OP3.1	Elicit document and present an appropriate history in a patient presenting with a “red eye” including congestion, discharge, pain	S	SH	Y	DOAP session	Skill Assessment			
OP3.2	Demonstrate document and present the correct method of examination of a “red eye” including vision assessment, corneal lustre, pupil abnormality, ciliary tenderness	S	SH	Y	DOAP session	Skill Assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP3.3	Describe the aetiology, pathophysiology, ocular features, differential diagnosis, complications. and management of various causes of conjunctivitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP3.4	Describe the aetiology, pathophysiology, ocular features, differential diagnosis, complications and management of trachoma.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP3.5	Describe the aetiology, pathophysiology, ocular features, differential diagnosis, complications and management of vernal catarrh	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP3.6	Describe the aetiology, pathophysiology, ocular features, differential diagnosis, complications and management of pterygium	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP3.7	Describe the aetiology, pathophysiology, ocular features, differential diagnosis, complications and management of symblepharon	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP3.8	Demonstrate correct technique of removal of foreign body from the eye in a simulated environment	S	SH	Y	DOAP session	Skill assessment			
OP3.9	Demonstrate the correct technique of instillation of eye drops in a simulated environment	S	SH	Y	DOAP session	Skill assessment			
Topic: Corneas Number of Competencies: (10) Number of procedures that require certification: (NIL)									
OP4.1	Enumerate, describe and discuss the types and causes of corneal ulceration	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
OP4.2	Enumerate and discuss the differential diagnosis of infective keratitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP4.3	Enumerate the causes of corneal edema	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.4	Enumerate the causes and discuss the management of dry eye	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.5	Enumerate the causes of corneal blindness	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.6	Enumerate the indications and the types of keratoplasty	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.7	Enumerate the indications and describe the methods of tarsorrhaphy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.8	Demonstrate technique of removal of foreign body in the cornea in a simulated environment	S	SH	Y	DOAP session	Skill assessment			
OP4.9	Describe and discuss the importance and protocols involved in eye donation and eye banking	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP4.10	Counsel patients and family about eye donation in a simulated environment	A/C	SH	Y	DOAP session	Skill assessment			
Topic: Sclera Number of competencies: (02) Number of procedures that require certification : (NIL)									
OP5.1	Define, enumerate and describe the aetiology, associated systemic conditions, clinical features complications indications for referral and management of episcleritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP5.2	Define, enumerate and describe the aetiology, associated systemic conditions, clinical features, complications, indications for referral and management of scleritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Medicine	
Topic: Iris and Anterior chamber Number of Competencies (10) Number of procedures that require certification: (NIL)									
OP6.1	Describe clinical signs of intraocular inflammation and enumerate the features that distinguish granulomatous from non-granulomatous inflammation. Identify acute iridocyclitis from chronic condition	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP6.2	Identify and distinguish acute iridocyclitis from chronic iridocyclitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP6.3	Enumerate systemic conditions that can present as iridocyclitis and describe their ocular manifestations	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine
OP6.4	Describe and distinguish hyphema and hypopyon	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP6.5	Describe and discuss the angle of the anterior chamber and its clinical correlates	K	KH		Lecture, Small group discussion	Written/ Viva voce			
OP6.6	Identify and demonstrate the clinical features and distinguish and diagnose common clinical conditions affecting the anterior chamber	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
OP6.7	Enumerate and discuss the aetiology, the clinical distinguishing features of various glaucomas associated with shallow and deep anterior chamber. Choose appropriate investigations and treatment for patients with above conditions.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP6.8	Enumerate and choose the appropriate investigation for patients with conditions affecting the Uvea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP6.9	Choose the correct local and systemic therapy for conditions of the anterior chamber and enumerate their indications, adverse events and interactions	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP6.10	Counsel patients with conditions of the iris and anterior chamber about their diagnosis, therapy and prognosis in an empathetic manner in a simulated environment	A/C	SH	Y	DOAP session	Skill assessment			
Topic: Lens Number of Competencies: (06) Number of procedures that require certification: (NIL)									
OP7.1	Describe the surgical anatomy and the metabolism of the lens	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Human Anatomy	
OP7.2	Describe and discuss the aetio-pathogenesis, stages of maturation and complications of cataract	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
OP7.3	Demonstrate the correct technique of ocular examination in a patient with a cataract	S	SH	Y	DOAP session	Skill assessment			
OP7.4	Enumerate the types of cataract surgery and describe the steps, intra-operative and post-operative complications of extracapsular cataract extraction surgery.	S	KH	Y	DOAP session, Lecture, Small group discussion	Written/ Viva voce			
OP7.5	To participate in the team for cataract surgery	S	SH	Y	DOAP session	Skill assessment/ Logbook documentation			
OP7.6	Administer informed consent and counsel patients for cataract surgery in a simulated environment	S	SH	Y	DOAP session	Skill Assessment			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Retina & optic Nerve Number of Competencies (05) Number of procedures that require certification : (NIL)									
OP8.1	Discuss the aetiology, pathology, clinical features and management of vascular occlusions of the retina	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Pathology	
OP8.2	Enumerate the indications for laser therapy in the treatment of retinal diseases (including retinal detachment, retinal degenerations, diabetic retinopathy & hypertensive retinopathy)	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			
OP8.3	Demonstrate the correct technique of a fundus examination and describe and distinguish the funduscopic features in a normal condition and in conditions causing an abnormal retinal exam	S	SH	Y	Lecture, Small group discussion	Skill Assessment			
OP8.4	Enumerate and discuss treatment modalities in management of diseases of the retina	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OP8.5	Describe and discuss the correlative anatomy, aetiology, clinical manifestations, diagnostic tests, imaging and management of diseases of the optic nerve and visual pathway	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Miscellaneous Number of Competencies (05) Number of procedures that require certification: (01)									
OP9.1	Demonstrate the correct technique to examine extra ocular movements (Uniocular & Binocular)	S	P	Y	DOAP session	Skill Assessment	5		
OP9.2	Classify, enumerate the types, methods of diagnosis and indications for referral in a patient with heterotropia/ strabismus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ skill assessment			
OP9.3	Describe the role of refractive error correction in a patient with headache and enumerate the indications for referral	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OP9.4	Enumerate, describe and discuss the causes of avoidable blindness and the National Programs for Control of Blindness (including vision 2020)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Community Medicine
OP9.5	Describe the evaluation and enumerate the steps involved in the stabilisation, initial management and indication for referral in a patient with ocular injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.

Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,

Column F: DOAP session – Demonstrate, Observe, Assess, Perform.

Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation

Integration

Human Anatomy									
AN30.5	Explain effect of pituitary tumours on visual pathway	K	KH	N	Lecture	Written		Ophthalmology	
AN31.3	Describe anatomical basis of Horner's syndrome	K	KH	N	Lecture	Written		Ophthalmology	
AN31.5	Explain the anatomical basis of oculomotor, trochlear and abducent nerve palsies along with strabismus	K	KH	Y	Lecture	Written		Ophthalmology	
AN41.1	Describe & demonstrate parts and layers of eyeball	K/S	SH	Y	Practical, Lecture, Small group discussion	Written/ Viva voce		Ophthalmology	
AN41.2	Describe the anatomical aspects of cataract, glaucoma & central retinal artery occlusion	K	KH	N	Lecture	Written		Ophthalmology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN41.3	Describe the position, nerve supply and actions of intraocular muscles	K	KH	N	Lecture	Written		Ophthalmology	
Physiology									
PY10.17	Describe and discuss functional anatomy of eye, physiology of image formation, physiology of vision including colour vision, Refractive errors, colour blindness, Physiology of pupil and light reflex	K	KH	Y	Lecture, Small group discussion	Written/viva		Ophthalmology	
PY10.18	Describe and discuss the physiological basis of lesion in visual pathway	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		Ophthalmology	
PY10.19	Describe and discuss auditory & visual evoke potentials	K	KH	Y	Lecture, Small group discussion	Written/ viva		Ophthalmology	
PY10.20	Demonstrate testing of visual acuity, colour and field of vision in volunteer/ simulated environment	S	P	Y	DOAP sessions	Skill assessment/ Viva voce	1	ENT, Ophthalmology	
Pathology									
PA36.1	Describe the etiology, genetics, pathogenesis, pathology, presentation, sequelae and complications of retinoblastoma	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Ophthalmology	
Pharmacology									
PH1.58	Describe drugs used in Ocular disorders	K	KH	Y	Lecture	Written/ Viva voce		Ophthalmology	
General Medicine									
IM24.15	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of vision and visual loss in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Ophthalmology

OTORHINOLARYNGOLOGY (ENT) (CODE: EN)

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OTORHINOLARYNGOLOGY (ENT)									
Topic: Anatomy and Physiology of ear, nose, throat, head & neck		Number of competencies:(02)			Number of procedures that require certification:(NIL)				
EN1.1	Describe the Anatomy & physiology of ear, nose, throat, head & neck	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Human Anatomy	
EN1.2	Describe the pathophysiology of common diseases in ENT	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		Pathology	
Topic: Clinical Skills		Number of competencies: (15)			Number of procedures that require certification : (NIL)				
EN2.1	Elicit document and present an appropriate history in a patient presenting with an ENT complaint	K/S/A/C	SH	Y	Lecture, Small group discussion, Demonstration	Skill assessment			
EN2.2	Demonstrate the correct use of a headlamp in the examination of the ear, nose and throat	S	SH	Y	DOAP session	Skill assessment/ OSCE			
EN2.3	Demonstrate the correct technique of examination of the ear including Otoscopy	K/S/A	SH	Y	DOAP session, Bedside clinic	Skill assessment/ OSCE			
EN2.4	Demonstrate the correct technique of performance and interpret tuning fork tests	K/S/A	SH	Y	DOAP session, Bedside clinic	Skill assessment/ OSCE			
EN2.5	Demonstrate the correct technique of examination of the nose & paranasal sinuses including the use of nasal speculum	S	SH	Y	DOAP session, Bedside clinic	Skill assessment/ OSCE			
EN2.6	Demonstrate the correct technique of examining the throat including the use of a tongue depressor	S	SH	Y	DOAP session, Bedside clinic	Skill assessment/ OSCE			
EN2.7	Demonstrate the correct technique of examination of neck including elicitation of laryngeal crepitus	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN2.8	Demonstrate the correct technique to perform and interpret pure tone audiogram & impedance audiogram	K/S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
EN2.9	Choose correctly and interpret radiological, microbiological & histological investigations relevant to the ENT disorders	K/S	SH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment			
EN2.10	Identify and describe the use of common instruments used in ENT surgery	K	SH	Y	DOAP session, Bedside clinic	Skill assessment			
EN2.11	Describe and identify by clinical examination malignant & pre- malignant ENT diseases	K/S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN2.12	Counsel and administer informed consent to patients and their families in a simulated environment	S/A/C	SH	Y	DOAP session, Bedside clinic	Skill assessment			
EN2.13	Identify, resuscitate and manage ENT emergencies in a simulated environment (including tracheostomy, anterior nasal packing, removal of foreign bodies in ear, nose, throat and upper respiratory tract)	K/S/A	SH	Y	DOAP session, Bedside clinic	Skill assessment			
EN2.14	Demonstrate the correct technique to instilling topical medications into the ear, nose and throat in a simulated environment	K/S	SH	Y	DOAP session, Bedside clinic	Skill assessment/ OSCE			
EN2.15	Describe the national programs for prevention of deafness, cancer, noise & environmental pollution	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
Topic: Diagnostic and Therapeutic procedures in ENT Number of competencies:(06) Number of procedures that require certification:(NIL)									
EN3.1	Observe and describe the indications for and steps involved in the performance of Otomicroscopic examination in a simulated environment	S	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN3.2	Observe and describe the indications for and steps involved in the performance of diagnostic nasal Endoscopy	S	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN3.3	Observe and describe the indications for and steps involved in the performance of Rigid/Flexible Laryngoscopy	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN3.4	Observe and describe the indications for and steps involved in the removal of foreign bodies from ear, nose & throat	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN3.5	Observe and describe the indications for and steps involved in the surgical procedures in ear, nose & throat	K	KH	N	Lecture, small group discussion, Demonstration	Written/ Viva voce			
EN3.6	Observe and describe the indications for and steps involved in the skills of emergency procedures in ear, nose & throat	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
Topic: Management of diseases of ear, nose & throat Number of competencies: (53) Number of procedures that require certification : (NIL)									
EN4.1	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of Otagia	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.2	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of diseases of the external Ear	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.3	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of ASOM	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.4	Demonstrate the correct technique to hold visualize and assess the mobility of the tympanic membrane and its mobility and interpret and diagrammatically represent the findings	K/S/A	SH	Y	Clinical, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.5	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of OME	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.6	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of Discharging ear	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.7	Elicit document and present a correct history demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of CSOM	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.8	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of CSOM	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.9	Demonstrate the correct technique for syringing wax from the ear in a simulated environment	S	SH	Y	DOAP session	Skill assessment			
EN4.10	Observe and describe the indications for and steps involved in myringotomy and myringoplasty	S	KH	Y	DOAP session	Written/ Viva voce			
EN4.11	Enumerate the indications describe the steps and observe a mastoidectomy	K/S	KH	Y	DOAP session	Written/ Viva voce			
EN4.12	Elicit document and present a correct history demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of Hearing loss	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.13	Describe the clinical features, investigations and principles of management of Otosclerosis	K	KH	Y	Lecture, Small group discussion; Demonstration	Written/ Viva voce/ Skill assessment			
EN4.14	Describe the clinical features, investigations and principles of management of Sudden Sensorineural Hearing Loss	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.15	Describe the clinical features, investigations and principles of management of Noise Induced Hearing Loss	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.16	Observe and describe the indications for and steps involved in the performance of pure tone audiometry	S	KH	Y	DOAP session	Written/ Viva			
EN4.17	Enumerate the indications and interpret the results of an audiogram	S	SH	Y	DOAP session	Skill assessment			
EN4.18	Describe the clinical features, investigations and principles of management of Facial Nerve palsy	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.19	Describe the clinical features, investigations and principles of management of Vertigo	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.20	Describe the clinical features, investigations and principles of management of Meniere's Disease	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.21	Describe the clinical features, investigations and principles of management of Tinnitus	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.22	Elicit document and present a correct history demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Nasal Obstruction	K/S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.23	Describe the clinical features, investigations and principles of management of DNS	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.24	Enumerate the indications observe and describe the steps in a septoplasty	S	KH	Y	DOAP session	Written/ Viva voce			
EN4.25	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Nasal Polyps	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.26	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Adenoids	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.27	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Allergic Rhinitis	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.28	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Vasomotor Rhinitis	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.29	Elicit, document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Acute & Chronic Rhinitis	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.30	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Epistaxis	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.31	Describe the clinical features, investigations and principles of management of trauma to the face & neck	K/S	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN4.32	Describe the clinical features, investigations and principles of management of nasopharyngeal Angiofibroma	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN4.33	Elicit document and present a correct history demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Acute & Chronic Sinusitis	K/S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.34	Describe the clinical features, investigations and principles of management of Tumors of Maxilla	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN4.35	Describe the clinical features, investigations and principles of management of Tumors of Nasopharynx	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.36	Describe the clinical features, investigations and principles of management of diseases of the Salivary glands	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.37	Describe the clinical features, investigations and principles of management of Ludwig's angina	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.38	Elicit document and present a correct history demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of type of dysphagia	K/S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.39	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of squamosal type of Acute & Chronic Tonsillitis	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.40	Observe and describe the indications for and steps involved in a tonsillectomy / adenoidectomy	S	KH	Y	DOAP session	Written/ Viva voce			
EN4.41	Describe the clinical features, investigations and principles of management of Acute & chronic abscesses in relation to Pharynx	K/S	KH	Y	Lecture, Small group discussion Demonstration	Written/ Viva voce			
EN4.42	Elicit, document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of hoarseness of voice	K/S	SH	Y	Lecture, Small group discussion, DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
EN4.43	Describe the clinical features, investigations and principles of management of Acute & Chronic Laryngitis	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN4.44	Describe the clinical features, investigations and principles of management of Benign lesions of the vocal cord	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce			
EN4.45	Describe the clinical features, investigations and principles of management of Vocal cord palsy	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.46	Describe the clinical features, investigations and principles of management of Malignancy of the Larynx & Hypopharynx	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.47	Describe the clinical features, investigations and principles of management of Stridor	K	KH	Y	Lecture, Small group discussion Demonstration	Written/ Viva voce/ Skill assessment			
EN4.48	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of Airway Emergencies	S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
EN4.49	Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of foreign bodies in the air & food passages	S	SH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.50	Observe and describe the indications for and steps involved in tracheostomy	S	KH	Y	DOAP session	Written/ Viva voce			
EN4.51	Observe and describe the care of the patient with a tracheostomy	S	KH	Y	DOAP session	Written/ Viva voce			
EN4.52	Describe the Clinical features, Investigations and principles of management of diseases of Oesophagus	K	ENT	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment			
EN4.53	Describe the clinical features, investigations and principles of management of HIV manifestations of the ENT	K	KH	N	Lecture, Small group discussion, Demonstration	Written/ Viva voce/ Skill assessment		General Medicine	
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								

Integration

Human Anatomy									
AN36.1	Describe the (1) morphology, relations, blood supply and applied anatomy of palatine tonsil and (2) composition of soft palate	K	KH	Y	Lecture	Written		ENT	
AN36.2	Describe the components and functions of waldeyer's lymphatic ring	K	KH	Y	Lecture	Written		ENT	
AN36.3	Describe the boundaries and clinical significance of pyriform fossa	K	KH	N	Lecture	Written		ENT	
AN36.4	Describe the anatomical basis of tonsillitis, tonsillectomy, adenoids and peri-tonsillar abscess	K	KH	N	Lecture	Written		ENT	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN36.5	Describe the clinical significance of Killian's dehiscence	K	KH	N	Lecture	Written		ENT	
AN37.1	Describe & demonstrate features of nasal septum, lateral wall of nose, their blood supply and nerve supply	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN37.2	Describe location and functional anatomy of paranasal sinuses	K	KH	Y	Lecture	Written		ENT	
AN37.3	Describe anatomical basis of sinusitis & maxillary sinus tumours	K	KH	N	Lecture	Written		ENT	
AN38.1	Describe the morphology, identify structure of the wall, nerve supply, blood supply and actions of intrinsic and extrinsic muscles of the larynx	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN38.2	Describe the anatomical aspects of laryngitis	K	KH	N	Lecture	Written		ENT	
AN38.3	Describe anatomical basis of recurrent laryngeal nerve injury	K	KH	N	Lecture	Written		ENT	
AN39.2	Explain the anatomical basis of hypoglossal nerve palsy	K	KH	N	Lecture	Written		ENT	
AN40.1	Describe & identify the parts, blood supply and nerve supply of external ear	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN40.2	Describe & demonstrate the boundaries, contents, relations and functional anatomy of middle ear and auditory tube	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		ENT	
AN40.3	Describe the features of internal ear	K	KH	N	Lecture	Written		ENT	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN40.4	Explain anatomical basis of otitis externa and otitis media	K	KH	N	Lecture	Written		ENT	
AN40.5	Explain anatomical basis of myringotomy	K	KH	N	Lecture	Written		ENT	
Physiology									
PY10.13	Describe and discuss perception of smell and taste sensation	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		ENT	
PY10.15	Describe and discuss functional anatomy of ear and auditory pathways & physiology of hearing	K	KH	Y	Lecture, Small group discussion	Written/Viva voce		ENT	
PY10.16	Describe and discuss pathophysiology of deafness. Describe hearing tests	K	KH	Y	Lecture, Small group discussion	Written /Viva voce		ENT	
PY10.20	Demonstrate (i) hearing (ii) testing for smell and (iii) taste sensation in volunteer/ simulated environment	S	P	Y	DOAP sessions	Skill assessment/ Viva voce	1 each x 3	ENT, Ophthalmology	
Community Medicine									
CM3.1	Describe the health hazards of air, water, noise, radiation and pollution.	K	KH	Y	Lecture, small group discussion	Written/ Viva voce		General Medicine, ENT	
Dentistry									
DE4.1	Discuss the prevalence of oral cancer and enumerate the common types of cancer that can affect tissues of the oral cavity	K	K	N	Lecture	Viva voce		Pathology	ENT
DE4.2	Discuss the role of etiological factors in the formation of precancerous /cancerous lesions	K	KH	Y	Lecture, Small group discussion	Viva voce		Pathology	ENT
DE4.3	Identify potential pre-cancerous /cancerous lesions	S	SH	N	Observation, Bed side clinics	Skill assessment		Pathology	ENT

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DE4.4	Counsel patients to risks of oral cancer with respect to tobacco, smoking, alcohol and other causative factors	A/C	SH	Y	DOAP session	Document in Log book	2	Pathology	ENT
General Medicine									
IM24.17	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of hearing loss in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			ENT
Pediatrics									
PE14.2	Discuss the risk factors, clinical features, Diagnosis and management of Kerosene ingestion	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.1	Discuss the etio-pathogenesis, clinical features and management of Naso pharyngitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.2	Discuss the etio-pathogenesis of Pharyngo Tonsillitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.3	Discuss the clinical features and management of Pharyngo Tonsillitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.4	Discuss the etio-pathogenesis, clinical features and management of Acute Otitis Media (AOM)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.5	Discuss the etio-pathogenesis, clinical features and management of Epiglottitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.6	Discuss the etio-pathogenesis, clinical features and management of Acute laryngo- trachea-bronchitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.7	Discuss the etiology, clinical features and management of Stridor in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
PE28.8	Discuss the types, clinical presentation, and management of foreign body aspiration in infants and children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE28.9	Elicit, document and present age appropriate history of a child with upper respiratory problem including Stridor	S	SH	Y	Bedside clinics, skill lab	Skill Assessment		ENT	
PE28.10	Perform otoscopic examination of the ear	S	SH	Y	DOAP session	Skill Assessment		ENT	
PE28.11	Perform throat examination using tongue depressor	S	SH	Y	DOAP session	Skill Assessment		ENT	
PE28.12	Perform examination of the nose	S	P	Y	DOAP session	Skill Assessment		ENT	
PE28.17	Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management. Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in pediatric chest X-rays	S	P	Y	Bedside clinics, Small group discussion	Skills Assessment	3	ENT, Radiodiagnosis	
PE31.1	Describe the etio-pathogenesis, management and prevention of Allergic Rhinitis in Children	K	KH	Y	Lecture Small group discussion	Written/ Viva voce		ENT	
PE31.3	Describe the etio-pathogenesis, clinical features and management of Atopic dermatitis in children	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	
General Surgery									
SU20.1	Describe etiopathogenesis of oral cancer, symptoms and signs of pharyngeal cancer. Enumerate the appropriate investigations and discuss the principles of treatment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		ENT	

OBSTETRICS & GYNECOLOGY (CODE: OG)

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OBSTETRICS & GYNAECOLOGY									
Topic: Demographic and Vital Statistics		Number of competencies: (03)			Number of procedures that require certification : (NIL)				
OG1.1	Define and discuss birth rate, maternal mortality and morbidity	K	KH	Y	Lecture, Small group discussion	Short notes		Community Medicine	
OG1.2	Define and discuss perinatal mortality and morbidity including perinatal and neonatal mortality and morbidity audit	K	KH	Y	Lecture, Small group discussion	Short notes		Community Medicine	Pediatrics
OG1.3	Define and discuss still birth and abortion	K	KH	Y	Lecture, Small group discussion	Short notes		Forensic Medicine & Toxicology	
Topic: Anatomy of the female reproductive tract (Basic anatomy and embryology)		Number of competencies: (01)			Number of procedures that require certification : (NIL)				
OG2.1	Describe and discuss the development and anatomy of the female reproductive tract, relationship to other pelvic organs, applied anatomy as related to Obstetrics and Gynaecology.	K	KH	Y	Lecture, Small group discussion	Theory/ Skill station		Human Anatomy	
Topic: Physiology of conception		Number of competencies: (01)			Number of procedures that require certification : (NIL)				
OG3.1	Describe the physiology of ovulation, menstruation, fertilization, implantation and gametogenesis.	K	K	Y	Lecture, seminars	Theory		Physiology	
Topic: Development of the fetus and the placenta		Number of competencies: (01)			Number of procedures that require certification : (NIL)				
OG4.1	Describe and discuss the basic embryology of fetus, factors influencing fetal growth and development, anatomy and physiology of placenta, and teratogenesis	K	K	Y	Lecture, Small group discussion	Theory		Human Anatomy	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Preconception counselling Number of competencies:(02) Number of procedures that require certification : (NIL)									
OG5.1	Describe, discuss and identify pre-existing medical disorders and discuss their management; discuss evidence-based intrapartum care	K/S	SH	Y	Lecture, Bedside clinics	Theory/ clinical assessment			
OG5.2	Determine maternal high risk factors and verify immunization status	K/S	SH	Y	Lecture, Bedside clinics	Theory/ clinical assessment			
Topic: Diagnosis of pregnancy Number of competencies:(01) Number of procedures that require certification : (NIL)									
OG6.1	Describe, discuss and demonstrate the clinical features of pregnancy, derive and discuss its differential diagnosis, elaborate the principles underlying and interpret pregnancy tests.	S	SH	Y	Lecture, Small group discussion, Bedside clinics	Theory/ Clinical assessment/ Viva voce			
Topic: Maternal Changes in pregnancy Number of competencies: (01) Number of procedures that require certification : (NIL)									
OG7.1	Describe and discuss the changes in the genital tract, cardiovascular system, respiratory, haematology, renal and gastrointestinal system in pregnancy	K	KH	Y	Lecture, seminars	Theory		Physiology	
Topic: Antenatal Care Number of competencies: (08) Number of procedures that require certification : (NIL)									
OG8.1	Enumerate, describe and discuss the objectives of antenatal care, assessment of period of gestation; screening for high-risk factors.	K	KH	Y	Small group discussion, Bedside clinics, Lecture	Written/ Viva voce/ Skill assessment		Community Medicine	
OG8.2	Elicit document and present an obstetric history including menstrual history, last menstrual period, previous obstetric history, comorbid conditions, past medical history and surgical history	K/S	SH	Y	Small group discussion, Bedside clinics, Lecture	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG8.3	Describe, demonstrate, document and perform an obstetrical examination including a general and abdominal examination and clinical monitoring of maternal and fetal well-being;	K/S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
OG8.4	Describe and demonstrate clinical monitoring of maternal and fetal well-being	K/S	SH	Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce			
OG8.5	Describe and demonstrate pelvic assessment in a model	K/S	SH	Y	DOAP session	Skill assessment			
OG8.6	Assess and counsel a patient in a simulated environment regarding appropriate nutrition in pregnancy	K/S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
OG8.7	Enumerate the indications for and types of vaccination in pregnancy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG8.8	Enumerate the indications and describe the investigations including the use of ultrasound in the initial assessment and monitoring in pregnancy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Complications in early pregnancy Number of competencies: (05) Number of procedures that require certification: (NIL)									
OG9.1	Classify, define and discusses the aetiology and management of abortions including threatened, incomplete, inevitable, missed and septic	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG9.2	Describe the steps and observe/ assist in the performance of an MTP evacuation	S	SH	Y	DOAP session, Bedside clinic	Viva voce		Forensic Medicine	
OG9.3	Discuss the aetiology, clinical features, differential diagnosis of acute abdomen in early pregnancy (with a focus on ectopic pregnancy) and enumerate the principles of medical and surgical management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG9.4	Discuss the clinical features, laboratory investigations, ultrasonography, differential diagnosis, principles of management and follow up of gestational trophoblastic neoplasms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Radiodiagnosis
OG9.5	Describe the etiopathology, impact on maternal and fetal health and principles of management of hyperemesis gravidarum	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Antepartum haemorrhage Number of competencies: (02) Number of competencies that require certification: (NIL)									
OG10.1	Define, classify and describe the aetiology, pathogenesis, clinical features, ultrasonography, differential diagnosis and management of antepartum haemorrhage in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinic				
OG10.2	Enumerate the indications and describe the appropriate use of blood and blood products, their complications and management.	K	KH	Y	Lecture, Small group discussion			Pathology	
Topic: Multiple pregnancies Number of competencies: (01) Number of procedures that require certification : (NIL)									
OG11.1	Describe the etiopathology, clinical features; diagnosis and investigations, complications, principles of management of multiple pregnancies	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Theory/ OSCE/ Clinical assessment/ Viva voce			
Topic: Medical Disorders in pregnancy Number of competencies: (08) Number of procedures that require certification : (NIL)									
OG12.1	Define, classify and describe the etiology and pathophysiology, early detection, investigations; principles of management of hypertensive disorders of pregnancy and eclampsia, complications of eclampsia.	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG12.2	Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anemia in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.3	Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of diabetes in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.4	Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of heart diseases in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.5	Describe the clinical features, detection, effect of pregnancy on the disease and impact of the disease on pregnancy complications and management of urinary tract infections in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.6	Describe the clinical features, detection, effect of pregnancy on the disease and impact of the disease on pregnancy complications and management of liver disease in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.7	Describe and discuss screening, risk factors, management of mother and newborn with HIV	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Medicine
OG12.8	Describe the mechanism, prophylaxis, fetal complications, diagnosis and management of isoimmunization in pregnancy	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Labour Number of competencies: (05) Number of procedures that require certification : (01)									
OG13.1	Enumerate and discuss the physiology of normal labor, mechanism of labor in occipito-anterior presentation; monitoring of labor including partogram; conduct of labor, pain relief; principles of induction and acceleration of labor; management of third stage of labor.	K/S	KH	Y	Lecture, Small group discussion (with models/ videos/ AV aids, etc.)	Theory/Clinical assessment/ Viva voce			
OG13.2	Define, describe the causes, pathophysiology, diagnosis, investigations and management of preterm labor, PROM and postdated pregnancy	K/S	KH	Y	Lecture, Small group discussion, Bedside clinics	Theory/ OSCE/ Clinical assessment/ Viva voce			
OG13.3	Observe/ assist in the performance of an artificial rupture of membranes	S	SH	N	DOAP session, Bedside clinic	Skill assessment			
OG13.4	Demonstrate the stages of normal labor in a simulated environment / mannequin and counsel on methods of safe abortion.	S	SH	Y	DOAP session	Skill assessment			
OG13.5	Observe and assist the conduct of a normal vaginal delivery	S	P	Y	DOAP session	Log book	10		
Topic: Abnormal Lie and Presentation; Maternal Pelvis Number of competencies: (04) Number of procedures that need certification : (NIL)									
OG14.1	Enumerate and discuss the diameters of maternal pelvis and types	K	KH	Y	Lecture, Small group discussion DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment		Human Anatomy	
OG14.2	Discuss the mechanism of normal labor, Define and describe obstructed labor, its clinical features; prevention; and management	K	KH	Y	Lecture, Small group discussion DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG14.3	Describe and discuss rupture uterus, causes, diagnosis and management.	K	KH	Y	Lecture, Small group discussion DOAP session, Bedside clinic	Written/ Viva voce/ Skill assessment			
OG14.4	Describe and discuss the classification; diagnosis; management of abnormal labor	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ skill assessment			
Topic: Operative obstetrics Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG15.1	Enumerate and describe the indications and steps of common obstetric procedures, technique and complications: Episiotomy, vacuum extraction; low forceps; Caesarean section, assisted breech delivery; external cephalic version; cervical cerclage	S	KH	Y	Lecture, Small group discussion, seminars	Written/ skill assessment			
OG15.2	Observe and assist in the performance of an episiotomy and demonstrate the correct suturing technique of an episiotomy in a simulated environment. Observe/Assist in operative obstetrics cases – including - CS, Forceps, vacuum extraction, and breech delivery	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			
Topic: Complications of the third stage Number of competencies: (03) Number of procedures that require certification : (NIL)									
OG16.1	Enumerate and discuss causes, prevention, diagnosis, management, appropriate use of blood and blood products in postpartum haemorrhage	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ skill assessment			
OG16.2	Describe and discuss uterine inversion – causes, prevention, diagnosis and management.	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG16.3	Describe and discuss causes, clinical features, diagnosis, investigations; monitoring of fetal well-being, including ultrasound and fetal Doppler; principles of management; prevention and counselling in intrauterine growth retardation	K/S	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ skill assessment/ Viva voce			
Topic: Lactation Number of competencies: (03) Number of procedures that require certification : (NIL)									
OG17.1	Describe and discuss the physiology of lactation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG17.2	Counsel in a simulated environment, care of the breast, importance and the technique of breast feeding	S/A/C	SH	Y	DOAP session	Skill assessment			
OG17.3	Describe and discuss the clinical features, diagnosis and management of mastitis and breast abscess	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Care of the new born Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG18.1	Describe and discuss the assessment of maturity of the newborn, diagnosis of birth asphyxia, principles of resuscitation, common problems.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
OG18.2	Demonstrate the steps of neonatal resuscitation in a simulated environment	S	SH	Y	DOAP session	Skill assessment			Pediatrics
OG18.3	Describe and discuss the diagnosis of birth asphyxia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics
OG18.4	Describe the principles of resuscitation of the newborn and enumerate the common problems encountered	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Pediatrics

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Normal and abnormal puerperium. Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG19.1	Describe and discuss the physiology of puerperium, its complications, diagnosis and management; counselling for contraception, puerperal sterilization	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce			
OG19.2	Counsel in a simulated environment, contraception and puerperal sterilisation	S/A/C	SH	Y	DOAP session	Skill assessment		Community Medicine	
OG19.3	Observe/ assist in the performance of tubal ligation	S	KH	Y	DOAP session, intraoperative	Skill assessment			
OG19.4	Enumerate the indications for, describe the steps in and insert and remove an intrauterine device in a simulated environment	S	SH	Y	DOAP session	Skill assessment			
Topic: Medical termination of pregnancy Number of competencies: (03) Number of procedures that require certification : (NIL)									
OG20.1	Enumerate the indications and describe and discuss the legal aspects, indications, methods for first and second trimester MTP; complications and management of complications of Medical Termination of Pregnancy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine	
OG20.2	In a simulated environment administer informed consent to a person wishing to undergo Medical Termination of Pregnancy	S/A/C	SH	Y	DOAP session	Skill assessment		Forensic Medicine	
OG20.3	Discuss Pre-conception and Pre Natal Diagnostic Techniques (PC& PNDT) Act 1994 & its amendments	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		Forensic Medicine	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Contraception Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG21.1	Describe and discuss the temporary and permanent methods of contraception, indications, technique and complications; selection of patients, side effects and failure rate including Ocs, male contraception, emergency contraception and IUCD	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment		Community medicine	
OG21.2	Describe & discuss PPIUCD programme	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce			
Topic: Vaginal discharge Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG22.1	Describe the clinical characteristics of physiological vaginal discharge.	K	KH	Y	Lecture	Theory			
OG22.2	Describe and discuss the etiology (with special emphasis on Candida, T. vaginalis, bacterial vaginosis), characteristics, clinical diagnosis, investigations, genital hygiene, management of common causes and the syndromic management	K	KH	Y	Lecture, Bedside clinics	Written/ Viva voce/ Skill assessment			
Topic: Normal and abnormal puberty Number of competencies: (03) Number of procedures that require certification : (NIL)									
OG23.1	Describe and discuss the physiology of puberty, features of abnormal puberty, common problems and their management	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce			
OG23.2	Enumerate the causes of delayed puberty. Describe the investigation and management of common causes	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG23.3	Enumerate the causes of precocious puberty	K	K	N	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Abnormal uterine bleeding Number of competencies: (01) Number of procedures that require certification: (NIL)									
OG24.1	Define, classify and discuss abnormal uterine bleeding, its aetiology, clinical features, investigations, diagnosis and management	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Amenorrhea Number of competencies: (01) Number of procedures that require certification : (NIL)									
OG25.1	Describe and discuss the causes of primary and secondary amenorrhea, its investigation and the principles of management.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Genital injuries and fistulae Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG26.1	Describe and discuss the etiopathogenesis, clinical features; investigation and implications on health and fertility and management of endometriosis and adenomyosis	K/S	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG26.2	Describe the causes, prevention, clinical features, principles of management of genital injuries and fistulae	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Surgery
Topic: Genital infections Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG27.1	Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of sexually transmitted infections	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG27.2	Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of genital tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
OG27.3	Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of HIV	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG27.4	Describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations, management and long term implications of Pelvic Inflammatory Disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
Topic: Infertility Number of competencies:(04) Number of procedures that require certification : (NIL)									
OG28.1	Describe and discuss the common causes, pathogenesis, clinical features, differential diagnosis; investigations; principles of management of infertility – methods of tubal patency, ovulation induction, assisted reproductive techniques	K	KH	Y	Lecture, seminars, Bedside clinics	Written/ Viva voce			
OG28.2	Enumerate the assessment and restoration of tubal latency	K	K	N	Lecture, seminars, Bedside clinics	Written/ Viva voce			
OG28.3	Describe the principles of ovulation induction	K	KH	Y	Lecture, seminars, Bedside clinics	Written/ Viva voce			
OG28.4	Enumerate the various Assisted Reproduction Techniques	K	K	N	Lecture, seminars, Bedside clinics	Written/ Viva voce			
Topic: Uterine fibroids Number of competencies: (01) Number of procedures that require certification : (NIL)									
OG29.1	Describe and discuss the etiology; pathology; clinical features; differential diagnosis; investigations; principles of management, complications of fibroid uterus	K/A/C	KH	Y	Lecture, Bedside clinics	Theory/ OSCE/ Clinical Assessment/ Viva voce			
Topic: PCOS and hirsutism Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG30.1	Describe and discuss the etiopathogenesis; clinical features; differential diagnosis; investigations; management, complications of PCOS	K/A/C	KH	Y	Lecture	Theory/ OSCE/ Clinical Assessment/ Viva voce			
OG30.2	Enumerate the causes and describe the investigations and management of hyperandrogenism	K	KH	N		Theory/ OSCE/ Clinical Assessment/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Uterine prolapse Number of competencies: (01) Number of procedures that require certification :(NIL)									
OG31.1	Describe and discuss the etiology, classification, clinical features, diagnosis, investigations, principles of management and preventive aspects of prolapse of uterus	K/S	KH	Y	Lecture, small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			
Topic: Menopause Number of competencies: (02) Number of procedures that require certification : (NIL)									
OG32.1	Describe and discuss the physiology of menopause, symptoms, prevention, management and the role of hormone replacement therapy.	K	KH	Y	Lecture, small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			
OG32.2	Enumerate the causes of postmenopausal bleeding and describe its management	K	KH	Y	Lecture, small group discussion Bedside clinics	Written/ Viva voce			
Topic: Benign, Pre-malignant (CIN) and Malignant Lesions of the Cervix Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG33.1	Classify, describe and discuss the etiology, pathology, clinical features, differential diagnosis, investigations and staging of cervical cancer	K/S	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			
OG33.2	Describe the principles of management including surgery and radiotherapy of Benign, Pre-malignant (CIN) and Malignant Lesions of the Cervix	K	KH	Y	Lecture, Small group discussion, Bedside clinics	Written/ Viva voce/ Skill assessment			General Surgery
OG33.3	Describe and demonstrate the screening for cervical cancer in a simulated environment	K/S	SH	Y	DOAP session	Skill assessment		Community Medicine	
OG33.4	Enumerate the methods to prevent cancer of cervix including visual inspection with acetic acid (VIA), visual inspection of cervix with Lugol's iodine (VILI), pap smear and colposcopy	K	K	Y	Lecture, Small group discussion, Bedside clinics	Viva voce/ Written			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Benign and malignant diseases of the uterus and the ovaries Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG34.1	Describe and discuss aetiology, pathology, staging clinical features, differential diagnosis, investigations, staging laparotomy and principles of management of endometrial cancer	K	KH	Y	Lecture, Bedside clinics	Viva voce/ Written/ skill assessment			
OG34.2	Describe and discuss the etiology, pathology, classification, staging of ovarian cancer, clinical features, differential diagnosis, investigations, principal of management including staging laparotomy	K/S	KH	Y	Lecture	Theory/ OSCE/ clinical assessment/ Viva voce			
OG34.3	Describe and discuss the etiology, pathology, classification, staging, clinical features, differential diagnosis, investigations and management of gestational trophoblastic disease	K/S	KH	Y	Lecture	Theory/ OSCE/ clinical assessment/			
OG34.4	Operative Gynaecology : Understand and describe the technique and complications: Dilatation & Curettage (D&C); EA-ECC; cervical biopsy; abdominal hysterectomy; myomectomy; surgery for ovarian tumours; staging laparotomy; vaginal hysterectomy including pelvic floor repair; Fothergill's operation, Laparoscopy; hysteroscopy; management of postoperative complications	K/S	SH	Y	Videos, on manikins, observe procedures and surgeries in OR	Viva voce			
Topic: Obstetrics & Gynecological skills - I Number of competencies: (17) Number of procedures that require certification : (NIL)									
OG35.1	Obtain a logical sequence of history, and perform a humane and thorough clinical examination, excluding internal examinations (per-rectal and per-vaginal)	K/S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.2	Arrive at a logical provisional diagnosis after examination.	K/S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.3	Recognize situations, which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.	K/S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG35.4	Demonstrate interpersonal and communication skills befitting a physician in order to discuss illness and its outcome with patient and family	A/C	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.5	Determine gestational age, EDD and obstetric formula	K/S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.6	Demonstrate ethical behavior in all aspects of medical practice.	A/C	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.7	Obtain informed consent for any examination / procedure	S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.8	Write a complete case record with all necessary details	S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.9	Write a proper discharge summary with all relevant information	S	SH	Y	Bedside clinics	Clinical assessment			
OG35.10	Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.	S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG35.11	Demonstrate the correct use of appropriate universal precautions for self-protection against HIV and hepatitis and counsel patients	S	SH	Y	DOAP session	Skill assessment			
OG35.12	Obtain a PAP smear in a stimulated environment	S	SH	Y	DOAP session	Skill assessment			
OG35.13	Demonstrate the correct technique to perform artificial rupture of membranes in a simulated / supervised environment	S	SH	Y	DOAP session	Skill assessment			
OG35.14	Demonstrate the correct technique to perform and suture episiotomies in a simulated/ supervised environment	S	SH	Y	DOAP session	Skill assessment			
OG35.15	Demonstrate the correct technique to insert and remove an IUD in a simulated/ supervised environment	S	SH	Y	DOAP session	Skill assessment			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG35.16	Diagnose and provide emergency management of antepartum and postpartum hemorrhage in a simulated / guided environment	K/S	SH	Y	DOAP session	Skill assessment			
OG35.17	Demonstrate the correct technique of urinary catheterisation in a simulated/ supervised environment	S	SH	Y	DOAP session	Skill assessment			
Topic: Obstetrics & Gynecological skills - II Number of competencies: (03) Number of procedures that require certification: (NIL)									
OG36.1	Plan and institute a line of treatment, which is need based, cost effective and appropriate for common conditions taking into consideration (a) Patient (b) Disease (c) Socio-economic status (d) Institution/ Governmental guidelines.	K/S	SH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
OG36.2	Organise antenatal, postnatal, well-baby and family welfare clinics	K/S	KH	Y	Bedside clinics	Clinical assessment/ Viva voce			
OG36.3	Demonstrate the correct technique of punch biopsy of uterus in a simulated/ supervised environment	S	SH	Y	Bedside clinics	Clinical assessment/ Viva voce			
Topic: Obstetrics & Gynecological skills - III Number of competencies: (07) Number of procedures that require certification : (NIL)									
OG37.1	Observe and assist in the performance of a Caesarean section	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Log book			
OG37.2	Observe and assist in the performance of Laparotomy	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
OG37.3	Observe and assist in the performance of Hysterectomy – abdominal/vaginal	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OG37.4	Observe and assist in the performance of Dilatation & Curettage (D&C)	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
OG37.5	Observe and assist in the performance of Endometrial aspiration - endocervical curettage (EA-ECC)	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Viva voce			
OG37.6	Observe and assist in the performance of outlet forceps application of vacuum and breech delivery	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Log book			
OG37.7	Observe and assist in the performance of MTP in the first trimester and evacuation in incomplete abortion	K/S/A/C	SH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
Topic: Should observe Number of competencies: (04) Number of procedures that require certification : (NIL)									
OG38.1	Laparoscopy	K/S/A/C	KH	Y	Bedside clinic, Small group discussion	Clinical assessment/ Viva voce			
OG38.2	Hysteroscopy	K/S/A/C	KH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
OG38.3	Lap sterilization	K/S/A/C	KH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
OG38.4	Assess the need for and issue proper medical certificates to patients for various purposes	K/S/A/C	KH	Y	Bedside clinics, Small group discussion	Clinical assessment/ Viva voce			
Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Integration									
Human Anatomy									
AN48.8	Mention the structures palpable during Vaginal & Rectal examination	K	KH	N	Lecture	Written		Obstetrics & Gynaecology, General Surgery	
AN49.1	Describe & demonstrate the Superficial & Deep perineal pouch (boundaries and contents)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN49.2	Describe & identify Perineal body	K/S	SH	Y	Lecture, Small group discussion, DOAP session	Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN49.5	Explain the anatomical basis of Perineal tear, Episiotomy, Perianal abscess and Anal fissure	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN52.8	Describe the development of male & female reproductive system	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
AN53.1	Identify & hold the bone in the anatomical position, Describe the salient features, articulations & demonstrate the attachments of muscle groups	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		General Surgery, Obstetrics & Gynaecology	
AN53.2	Demonstrate anatomical position of bony pelvis & show boundaries of pelvic inlet, pelvic cavity, pelvic outlet	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN53.3	Define true pelvis and false pelvis and demonstrate sex determination in male & female bony pelvis	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment		Obstetrics & Gynaecology	
AN64.3	Describe various types of open neural tube defects with its embryological basis	K	KH	N	Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN75.5	Describe the principles of genetic counselling	K	KH	Y	Lecture	Written		Pediatrics, Obstetrics & Gynaecology	
AN77.1	Describe the uterine changes occurring during the menstrual cycle	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.2	Describe the synchrony between the ovarian and menstrual cycles	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.3	Describe spermatogenesis and oogenesis along with diagrams	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.4	Describe stages and consequences of fertilisation	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.5	Enumerate and describe the anatomical principles underlying contraception	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN77.6	Describe teratogenic influences; fertility and sterility, surrogate motherhood, social significance of "sex-ratio".	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN78.3	Describe the process of implantation & common abnormal sites of implantation	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN78.5	Describe in brief abortion: decidual reaction, pregnancy test	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN79.4	Describe the development of somites and intra-embryonic coelom	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN79.5	Explain embryological basis of congenital malformations, nucleus pulposus, sacrococcygeal teratomas, neural tube defects	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN79.6	Describe the diagnosis of pregnancy in first trimester and role of teratogens, alpha-fetoprotein	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN80.3	Describe formation of placenta, its physiological functions, foetomaternal circulation & placental barrier	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.4	Describe embryological basis of twinning in monozygotic & dizygotic twins	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.5	Describe role of placental hormones in uterine growth & parturition	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN80.6	Explain embryological basis of estimation of fetal age.	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN80.7	Describe various types of umbilical cord attachments	K	KH	N	Lecture	Written		Obstetrics & Gynaecology	
AN81.1	Describe various methods of prenatal diagnosis	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN81.2	Describe indications, process and disadvantages of amniocentesis	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
AN81.3	Describe indications, process and disadvantages of chorion villus biopsy	K	KH	Y	Lecture	Written		Obstetrics & Gynaecology	
Physiology									
PY9.6	Enumerate the contraceptive methods for male and female. Discuss their advantages & disadvantages	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Community Medicine	
PY9.8	Describe and discuss the physiology of pregnancy, parturition & lactation and outline the psychology and psychiatry-disorders associated with it.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PY9.10	Discuss the physiological basis of various pregnancy tests	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PY9.11	Discuss the hormonal changes and their effects during perimenopause and menopause	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PY9.12	Discuss the common causes of infertility in a couple and role of IVF in managing a case of infertility.	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
Biochemistry									
BI10.1	Describe cancer initiation, promotion, oncogenes & oncogene activation.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.2	Describe various biochemical tumor markers and the biochemical basis of cancer therapy.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
BI10.3	Describe the cellular and humoral components of the immune system & describe the types and structure of antibody	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Surgery, Pathology	
Pathology									
PA22.2	Enumerate the indications describe the principles enumerate and demonstrate the steps of compatibility testing	S	SH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.1	Describe the epidemiology, pathogenesis, etiology, pathology, screening, diagnosis and progression of carcinoma of the cervix	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA30.2	Describe the pathogenesis, etiology, pathology, diagnosis and progression and spread of carcinoma of the endometrium	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.3	Describe the pathogenesis, etiology, pathology, diagnosis and progression and spread of carcinoma of the leiomyomas and leiomyosarcomas	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.4	Classify and describe the etiology, pathogenesis, pathology, morphology, clinical course, spread and complications of ovarian tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.5	Describe the etiology, pathogenesis, pathology, morphology, clinical course, spread and complications of gestational trophoblastic neoplasms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.6	Describe the etiology and morphologic features of cervicitis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.7	Describe the etiology, hormonal dependence, features and morphology of endometriosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.8	Describe the etiology and morphologic features of adenomyosis	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
PA30.9	Describe the etiology, hormonal dependence and morphology of endometrial hyperplasia	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
Pharmacology									
PH1.39	Describe mechanism of action, types, doses, side effects, indications and contraindications of the drugs used for contraception	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
PH1.40	Describe mechanism of action, types, doses, side effects, indications and contraindications of 1. Drugs used in the treatment of infertility, and 2. Drugs used in erectile dysfunction	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PH1.41	Describe the mechanisms of action, types, doses, side effects, indications and contraindications of uterine relaxants and stimulants	K	KH	Y	Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
Community Medicine									
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates	S	SH	Y	Lecture, Small group discussion, DOAP sessions	Skill assessment		Obstetrics & Gynaecology, Pediatrics	
CM9.5	Describe the methods of population control	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology	
CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.2	Enumerate and describe the methods of screening high risk groups and common health problems	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices	K	KH	Y	Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.4	Describe the reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology, Pediatrics	
Forensic Medicine & Toxicology									
FM3.13	Describe different types of sexual offences. Describe various sections of IPC regarding rape including definition of rape (Section 375 IPC), Punishment for Rape (Section 376 IPC) and recent amendments notified till date.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.14	SEXUAL OFFENCES Describe and discuss the examination of the victim of an alleged case of rape, and the preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases.	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Obstetrics & Gynaecology, Psychiatry	
FM3.15	SEXUAL OFFENCES Describe and discuss examination of accused and victim of sodomy, preparation of report, framing of opinion, preservation and despatch of trace evidences in such cases	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic, DOAP session	Written/ Viva voce/ OSCE		Obstetrics & Gynaecology, Psychiatry	
FM3.16	SEXUAL OFFENCES Describe and discuss adultery and unnatural sexual offences - sodomy, incest, lesbianism, buccal coitus, bestiality, indecent assault and preparation of report, framing the opinion and preservation and despatch of trace evidences in such cases.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.17	Describe and discuss the sexual perversions fetishism, transvestism, voyeurism, sadism, necrophagia, masochism, exhibitionism, frotteurism, Necrophilia.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, Psychiatry	
FM3.18	Describe anatomy of male and female genitalia, hymen and its types. Discuss the medico-legal importance of hymen. Define virginity, defloration, legitimacy and its medicolegal importance.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.19	Discuss the medicolegal aspects of pregnancy and delivery, signs of pregnancy, precipitate labour superfoetation, superfecundation and signs of recent and remote delivery in living and dead	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.20	Discuss disputed paternity and maternity	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.21	Discuss Pre-conception and Pre Natal Diagnostic Techniques (PCPNDT)- Prohibition of Sex Selection Act 2003 and Domestic Violence Act 2005	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, AETCOM	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.22	Define and discuss impotence, sterility, frigidity, sexual dysfunction, premature ejaculation. Discuss the causes of impotence and sterility in male and female	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology, General Medicine	
FM3.23	Discuss Sterilization of male and female, artificial insemination, Test Tube Baby, surrogate mother, hormonal replacement therapy with respect to appropriate national and state laws	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
FM3.24	Discuss the relative importance of surgical methods of contraception (vasectomy and tubectomy) as methods of contraception in the national family Planning Programme	K	K/KH	N	Lecture, Small group discussion	Written		Obstetrics & Gynaecology	
FM3.25	Discuss the major results of the National Family Health Survey	K	K/KH	N	Lecture	Written		Obstetrics & Gynaecology	
FM3.26	Discuss the National Guidelines for accreditation, supervision & regulation of ART Clinics in India	K	K/KH	Y	Lecture, Small group discussion	Written		Obstetrics & Gynaecology	
FM3.27	Define, classify and discuss abortion, methods of procuring MTP and criminal abortion and complication of abortion: MTP Act 1971	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology, AETCOM	
FM3.28	Describe evidences of abortion - living and dead, duties of doctor in cases of abortion, investigations of death due to criminal abortion	K	K/KH	Y	Lecture, Small group discussion	Written/Viva voce		Obstetrics & Gynaecology, AETCOM	
Dermatology & Venereology									
DR10.11	Describe the etiology, diagnostic and clinical features and management of vaginal discharge	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Obstetrics & Gynaecology	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
General Medicine									
IM26.43	Identify, discuss and defend medicolegal, sociocultural, economic and ethical issues as they pertain to in vitro fertilisation donor insemination and surrogate motherhood	K	KH	N	Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology	
Radiodiagnosis									
RD1.13	Describe the components of the PC & PNDT Act and its medicolegal implications	K	KH	Y	Lecture, Small group discussion			Obstetrics & Gynaecology, Forensic Medicine	
Pediatrics									
PE7.1	Awareness on the cultural beliefs and practices of breast feeding	K	K	N	Lecture, Small group discussion	Viva voce			Obstetrics & Gynaecology
PE7.7	Perform breast examination and identify common problems during lactation such as retracted nipples, cracked nipples, breast engorgement, breast abscess	S	SH	Y	Bed side clinics Skill Lab	Skill Assessment			Obstetrics & Gynaecology
PE7.8	Educate mothers on ante natal breast care and prepare mothers for lactation	A/C	SH	Y	DOAP session	Document in Log Book			Obstetrics & Gynaecology, AETCOM
PE7.9	Educate and counsel mothers for best practices in breast feeding	A/C	SH	Y	DOAP session	Document in Log Book			Obstetrics & Gynaecology, AETCOM
PE18.1	List and explain the components, plans , outcomes of Reproductive Child Health (RCH) program and appraise the monitoring and evaluation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	Obstetrics & Gynaecology
PE18.2	Explain preventive interventions for Child survival and safe motherhood	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	Obstetrics & Gynaecology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE18.3	Conduct Antenatal examination of women independently and apply at-risk approach in antenatal care	S	SH	Y	Bed side clinics	Skill station		Community Medicine	Obstetrics & Gynaecology
PE18.4	Provide intra-natal care and conduct a normal Delivery in a simulated environment	S	SH	Y	DOAP session, Skills lab	Document in Log Book		Community Medicine	Obstetrics & Gynaecology
PE18.5	Provide intra-natal care and observe the conduct of a normal delivery	S	SH	Y	DOAP session	Document in Log Book			Obstetrics & Gynaecology
PE18.6	Perform Postnatal assessment of newborn and mother, provide advice on breast feeding, weaning and on family planning	S	SH	Y	Bed side clinics, Skill Lab	Skill Assessment		Community Medicine	Obstetrics & Gynaecology
PE18.8	Observe the implementation of the program by visiting the Rural Health Centre	S	KH	Y	Bed side clinics, Skill Lab	Document in log book		Community Medicine	Obstetrics & Gynaecology
PE20.6	Explain the follow up care for neonates including Breast feeding, temperature maintenance, immunization, importance of growth monitoring and red flags	S	SH	Y	DOAP session	Log book entry			Obstetrics & Gynaecology
PE32.6	Discuss the genetic basis, risk factors, clinical features, complications, prenatal diagnosis, management and genetic counselling in Turner's Syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Obstetrics & Gynaecology
PE32.8	Interpret normal Karyotype and recognize the Turner Karyotype	S	SH	N	Bed Side clinics, Skill lab	Log book			General Medicine, Obstetrics & Gynaecology
PE32.9	Discuss the referral criteria and multidisciplinary approach to management of Turner Syndrome	K	KH	N	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Obstetrics & Gynaecology

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Radiotherapy									
RT4.5	Describe and discuss role of radiation in management of common malignancies in India (region specific)	K	KH	Y	Lecture, Bed side clinic	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.6	Describe and discuss radiotherapy for benign disease	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.7	Counsel patients regarding acute and late effects of radiation and supportive care	K/A/S	KH	Y	Bed side clinic, group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.8	Describe oncological emergencies and palliative care	K/A/S	K/KH	Y	Lecture and group discussion	Written/ Viva voce			General Surgery, Obstetrics & Gynaecology
RT5.1	Describe and discuss cancer prevention, screening, vaccination, cancer registry	K	K	Y	Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology

ORTHOPÆDICS (CODE: OR)

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
ORTHOPEDICS									
Topic: Skeletal Trauma, Poly trauma		Number of competencies : (06)			Number of procedures that require certification: (NIL)				
OR1.1	Describe and discuss the Principles of pre-hospital care and Casualty management of a trauma victim including principles of triage	K/S/A/C	K/KH	Y	Lecture with video, Small group discussion	Written/ Viva voce/ OSCE/ Simulation			General Surgery, Anaesthesiology
OR1.2	Describe and discuss the aetiopathogenesis, clinical features, investigations, and principles of management of shock	K/S	K/KH	Y	Lecture	Written/ Viva voce/ OSCE/ Simulation			General Surgery
OR1.3	Describe and discuss the aetiopathogenesis, clinical features, investigations, and principles of management of soft tissue injuries	K	KH/SH	Y	Lecture, Small group discussion	Written/ OSCE			General Surgery
OR1.4	Describe and discuss the Principles of management of soft tissue injuries	K	K/KH	Y	Lecture, Small group discussion	Written/ Assesment/ Viva voce			General Surgery
OR1.5	Describe and discuss the aetiopathogenesis, clinical features, investigations, and principles of management of dislocation of major joints, shoulder, knee, hip	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic	Written/ Viva voce/ OSCE/ Simulation			
OR1.6	Participate as a member in the team for closed reduction of shoulder dislocation / hip dislocation / knee dislocation	K/S/A/C	SH	Y	Simulation, DOAP session	OSCE/ Simulation			
Topic: Fractures		Number of competencies : (16)			Number of procedures that require certification: (NIL)				
OR2.1	Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of clavicle	K/S	KH/SH	Y	Lecture, Small group discussion, Bed side clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR2.2	Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal humerus	K	K/KH/ SH	Y	Lecture, Small group discussion, Bed side clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.3	Select, prescribe and communicate appropriate medications for relief of joint pain	K	KH/SH	Y	Lecture, Small group discussion, Bed side clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.4	Describe and discuss the mechanism of injury, clinical features, investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neurovascular deficit	K/S	K/KH	Y	Lecture, Small group discussion, Bed side clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.5	Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injury	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.6	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radius	K	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.7	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instability	K	K/KH/ SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.8	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patient	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.9	Describe and discuss the mechanism of injury, Clinical features, investigations and principle of management of acetabular fracture	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR2.10	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femur	K/S/A/C	KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.11	Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of (a) Fracture patella (b) Fracture distal femur (c) Fracture proximal tibia with special focus on neurovascular injury and compartment syndrome	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.12	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of Fracture shaft of femur in all age groups and the recognition and management of fat embolism as a complication	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.13	Describe and discuss the aetiopathogenesis, clinical features, Investigation and principles of management of: (a) Fracture both bones leg (b) Calcaneus (c) Small bones of foot	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.14	Describe and discuss the aetiopathogenesis, clinical features, Investigation and principles of management of ankle fractures	K/S/C	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.15	Plan and interpret the investigations to diagnose complications of fractures like malunion, non-union, infection, compartmental syndrome	K/S	SH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	
OR2.16	Describe and discuss the mechanism of injury, clinical features, investigations and principles of management of open fractures with focus on secondary infection prevention and management	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE		Human Anatomy	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Musculoskeletal Infection Number of competencies : (03) Number of Procedures that require certification: (NIL)									
OR3.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of Bone and Joint infections a) Acute Osteomyelitis b) Subacute osteomyelitis c) Acute Suppurative arthritis d) Septic arthritis & HIV infection e) Spirochaetal infection f) Skeletal Tuberculosis	K/S	K/KH/ SH	Y	Lecture, Small group discussion, Video assisted lecture	Written/ Viva voce/ OSCE		Pathology, Microbiology	General surgery
OR3.2	Participate as a member in team for aspiration of joints under supervision	K/S/A/C	SH	Y	Small group Discussion. DOAP session	Viva voce/ OSCE/ Skills assessment		—	
OR3.3	Participate as a member in team for procedures like drainage of abscess, sequestrectomy/ saucerisation and arthrotomy	K/S/A/C	SH	Y	DOAP session, Video demonstration	Viva voce/ OSCE/ Skills assessment			General Surgery
Topic: Skeletal Tuberculosis Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR4.1	Describe and discuss the clinical features, Investigation and principles of management of Tuberculosis affecting major joints (Hip, Knee) including cold abscess and caries spine	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE		Pathology	General surgery
Topic: Rheumatoid Arthritis and associated inflammatory disorders Number of competencies : (01) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR5.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of various inflammatory disorder of joints	K	K/KH	Y	Lecture, Small group discussion, Bedside clinic	Written/ Viva voce/ OSCE			General Medicine
Topic: Degenerative disorders Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR6.1	Describe and discuss the clinical features, investigations and principles of management of degenerative condition of spine (Cervical Spondylosis, Lumbar Spondylosis, PID)	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE			
Topic: Metabolic bone disorders Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR7.1	Describe and discuss the aetiopathogenesis, clinical features, investigation and principles of management of metabolic bone disorders in particular osteoporosis, osteomalacia, rickets, Paget's disease	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE			
Topic: Poliomyelitis Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR8.1	Describe and discuss the aetiopathogenesis, clinical features, assessment and principles of management a patient with Post Polio Residual Paralysis	K	K/KH	Y	Lecture, Small group discussion, Case discussion	Written/ Viva voce/ OSCE			
Topic: Cerebral Palsy Number of competencies : (01) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR9.1	Describe and discuss the aetiopathogenesis, clinical features, assessment and principles of management of Cerebral palsy patient	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce/ OSCE			
Topic: Bone Tumors Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR10.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of benign and malignant bone tumours and pathological fractures	K	K/KH	Y	Lecture, Small group discussion, Video assisted interactive lecture	Written/ Viva voce/ OSCE		Pathology	General surgery, Radiotherapy
Topic: Peripheral nerve injuries Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR11.1	Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves	K	K/H	Y	Lecture, Small group discussion, case discussion	Written/ Viva voce/ OSCE		Human Anatomy	General Medicine, General surgery
Topic: Congenital lesions Number of competencies : (01) Number of procedures that require certification: (NIL)									
OR12.1	Describe and discuss the clinical features, investigations and principles of management of Congenital and acquired malformations and deformities of: a. limbs and spine - Scoliosis and spinal bifida b. Congenital dislocation of Hip, Torticollis, c. congenital talipes equino varus	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce/ OSCE		Human Anatomy	
Topic: Procedural Skills Number of competencies : (02) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR13.1	Participate in a team for procedures in patients and demonstrating the ability to perform on mannequins / simulated patients in the following: i. Above elbow plaster ii. Below knee plaster iii. Above knee plaster iv. Thomas splint v. splinting for long bone fractures vi. Strapping for shoulder and clavicle trauma	S/A	KH / SH	Y	Case discussion, Video assisted Lecture, Small group discussion, Teaching, Skill lab sessions	OSCE with Simulation based assessment			
OR13.2	Participate as a member in team for Resuscitation of Polytrauma victim by doing all of the following : (a) I.V. access central - peripheral (b) Bladder catheterization (c) Endotracheal intubation (d) Splintage	S/A	KH / SH	Y	Case discussion, Video assisted Lecture, Small group discussion, Teaching, Skill lab sessions	OSCE with Simulation based assessment			Anaesthesiology
Topic: Counselling Skills Number of competencies : (03) Number of procedures that require certification: (NIL)									
OR14.1	Demonstrate the ability to counsel patients regarding prognosis in patients with various orthopedic illnesses like a. fractures with disabilities b. fractures that require prolonged bed stay c. bone tumours d. congenital disabilities	K/S/A/C	KH / SH	Y	Case discussion, Video assisted lecture, Small group discussion, Teaching, Skills lab sessions	OSCE with Simulation based assessment			AETCOM
OR14.2	Demonstrate the ability to counsel patients to obtain consent for various orthopedic procedures like limp amputation, permanent fixations etc..	K/S/A/C	KH / SH	Y	Case discussion, Video assisted Lecture, Small group discussion, Teaching, Skills lab sessions	OSCE with Simulation based assessment			AETCOM

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
OR14.3	Demonstrate the ability to convince the patient for referral to a higher centre in various orthopedic illnesses, based on the detection of warning signals and need for sophisticated management	K/S/A/C	KH / SH	Y	Case discussion, Video assisted Lecture, Small group discussion, Teaching, Skills lab sessions	OSCE with Simulation based assessment			AETCOM
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Human Anatomy									
AN2.4	Describe various types of cartilage with its structure & distribution in body	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
AN2.5	Describe various joints with subtypes and examples	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
AN8.4	Demonstrate important muscle attachment on the given bone	K/S	SH	Y	Practical, DOAP session, Small group teaching	Viva voce/ Practicals		Orthopedics	
AN8.6	Describe scaphoid fracture and explain the anatomical basis of avascular necrosis	K	KH	N	DOAP session	Viva voce		Orthopedics	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN10.12	Describe and demonstrate Shoulder joint for– type, articular surfaces, capsule, synovial membrane, ligaments, relations, movements, muscles involved, blood supply, nerve supply and applied anatomy	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skills assessment		Orthopedics	
AN11.4	Describe the anatomical basis of Saturday night paralysis	K	KH	Y	Practical, Lecture	Written/ Viva voce		Orthopedics	
AN17.2	Describe anatomical basis of complications of fracture neck of femur.	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN17.3	Describe dislocation of hip joint and surgical hip replacement	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN18.6	Describe knee joint injuries with its applied anatomy	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN18.7	Explain anatomical basis of Osteoarthritis	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN19.4	Explain the anatomical basis of rupture of calcaneal tendon	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN19.6	Explain the anatomical basis of Flat foot & Club foot	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN19.7	Explain the anatomical basis of Metatarsalgia & Plantar fasciitis	K	KH	N	Lecture	Written/ Viva voce		Orthopedics	
AN50.4	Explain the anatomical basis of Scoliosis, Lordosis, Prolapsed disc, Spondylolisthesis & Spina bifida	K	KH	N	Lecture	Written		Orthopedics	
Pathology									

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PA33.1	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of osteomyelitis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Orthopedics	Microbiology
PA33.2	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications and metastases of bone tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Orthopedics	
PA33.3	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications and metastases of soft tissue tumors	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Orthopedics	
PA33.4	Classify and describe the etiology, pathogenesis, manifestations, radiologic and morphologic features and complications of Paget's disease of the bone	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Orthopedics	
Microbiology									
MI4.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of bone & joint infections.	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
Forensic Medicine & Toxicology									
FM3.7	Describe factors influencing infliction of injuries and healing, examination and certification of wounds and wound as a cause of death: Primary and Secondary.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		Forensic medicine, Orthopaedics	
FM3.8	Mechanical injuries and wounds: Describe and discuss different types of weapons including dangerous weapons and their examination.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
FM3.9	Firearm injuries: Describe different types of firearms including structure and components. Along with description of ammunition propellant charge and mechanism of fire-arms, different types of cartridges and bullets and various terminology in relation of firearm – caliber, range, choking.	K	K/KH	Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery, Orthopaedics	
FM3.10	Firearm injuries: Describe and discuss wound ballistics-different types of firearm injuries, blast injuries and their interpretation, preservation and dispatch of trace evidences in cases of firearm and blast injuries, various tests related to confirmation of use of firearms	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic DOAP session	Written/ Viva voce / OSCE		General Surgery, Orthopaedics	
FM3.11	Regional Injuries: Describe and discuss regional injuries to head (Scalp wounds, fracture skull, intracranial haemorrhages, coup and contrecoup injuries), neck, chest, abdomen, limbs, genital organs, spinal cord and skeleton	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic or autopsy, DOAP session	Written/ Viva voce / OSCE/ OSPE		General Surgery, Orthopaedics	
FM3.12	Regional Injuries Describe and discuss injuries related to fall from height and vehicular injuries – Primary and Secondary impact, Secondary injuries, crush syndrome, railway spine.	K	K/KH	Y	Lecture, Small group discussion, Bed side clinic or autopsy, DOAP session	Written/ Viva voce / OSCE/ OSPE		General Surgery, Orthopaedics	
General Medicine									
IM7.5	Develop a systematic clinical approach to joint pain based on the pathophysiology	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.6	Describe and discriminate acute, subacute and chronic causes of joint pain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.7	Discriminate, describe and discuss arthralgia from arthritis and mechanical from inflammatory causes of joint pain	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM7.8	Discriminate, describe and discuss distinguishing articular from periarticular complaints	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.9	Determine the potential causes of join pain based on the presenting features of joint involvement	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.10	Describe the common signs and symptoms of articular and periarticular diseases	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM7.13	Perform a systematic examination of all joints, muscle and skin that will establish the diagnosis and severity of disease	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			Orthopedics
IM7.17	Enumerate the indications for arthrocentesis	K	K	Y	small group discussion, Lecture	Written/ Viva voce			Orthopedics
IM7.18	Enumerate the indications and interpret plain radiographs of joints	K	SH	Y	Bed side clinic, small group discussion	Skill assessment/ Written		Radiodiagnosis	Orthopedics
IM7.21	Select, prescribe and communicate appropriate medications for relief of joint pain	K/C	SH	Y	DOAP session	Skill assessment/ Written		Pharmacology	Orthopedics
IM24.12	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of degenerative joint disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
IM24.13	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of falls in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation
IM24.14	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of common fractures in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM24.16	Describe and discuss the principles of physical and social rehabilitation, functional assessment, role of physiotherapy and occupational therapy in the management of disability in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics, Physical Medicine & Rehabilitation
Physical Medicine & Rehabilitation									
PM1.2	Define and describe disability, its cause, and magnitude, identification and prevention of disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM1.3	Define and describe the methods to identify and prevent disability	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM1.4	Enumerate the rights and entitlements of differently abled persons	K	K	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM4.1	Describe the common patterns, clinical features, investigations, diagnosis and treatment of common causes of arthritis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine Orthopedics
PM4.3	Observe in a mannequin or equivalent the administration of an intra-articular injection	S	KH	N	DOAP session	Skill assessment			Orthopedics
PM4.5	Demonstrate correct assessment of muscle strength and range of movements	S	SH	Y	DOAP session, Bedside clinic	Skill assessment			General Medicine Orthopedics
PM5.1	Enumerate the indications and describe the principles of amputation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics General Surgery
PM5.2	Describe the principles of early mobilization, evaluation of the residual limb, contralateral limb and the influence of co-morbidities	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM5.3	Demonstrate the correct use of crutches in ambulation and postures to correct contractures and deformities	S	SH	Y	DOAP session, Bedside clinic discussion	Skill assessment			Orthopedics
PM5.4	Identify the correct prosthesis for common amputations	S	SH	Y	DOAP session	Skill assessment / written			Orthopedics
PM6.3	Describe the principles of skin traction, serial casts and surgical treatment including contracture release, tendon transfer, osteotomies and arthrodesis.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM6.4	Describe the principles of orthosis for ambulation in PPRP	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM7.1	Describe and discuss the clinical features, diagnostic work up, work up diagnosis and management of spinal cord injury	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Orthopedics
PM7.2	Describe and demonstrate process of transfer, applications of collar restraints while maintaining airway and prevention of secondary injury in a mannequin/model	S	SH	Y	DOAP session, Small group discussion	Skill assessment			Orthopedics
PM7.3	Perform and demonstrate a correct neurological examination in a patient with spinal injury and determine the neurologic level of injury	S	SH	Y	Bed side clinic	Skill assessment			Orthopedics
PM7.4	Assess bowel and bladder function and identify common patterns of bladder dysfunction	S	KH	Y	Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM7.5	Enumerate the indications and identify the common mobility aids and appliances, wheel chairs	S	S	Y	DOAP session	Skill assessment/ Viva voce			Orthopedics

Number	COMPETENCY The student should be able to:	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PM7.7	Enumerate and describe common life threatening complications following SCI like Deep vein Thrombosis, Aspiration Pneumonia, Autonomic dysreflexia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Medicine, Orthopedics
PM8.1	Describe the clinical features, evaluation, diagnosis and management of disability following traumatic brain injury	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			General Medicine, Orthopedics, General Surgery

ANAESTHESIOLOGY (CODE: AS)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
ANAESTHESIOLOGY									
Topic: Anaesthesiology as a specialty Number of competencies: (04) Number of procedures that require certification: (NIL)									
AS1.1	Describe the evolution of Anaesthesiology as a modern specialty	K	K	N	Lecture	Written/ Viva voce			
AS1.2	Describe the roles of Anaesthesiologist in the medical profession (including as a peri-operative physician, in the intensive care and high dependency units, in the management of acute and chronic pain, including labour analgesia, in the resuscitation of acutely ill)	K	K	N	Lecture	Written/ Viva voce			
AS1.3	Enumerate and describe the principle of ethics as it relates to Anaesthesiology	K	K	N	Lecture	Written/ Viva voce		AETCOM	
AS1.4	Describe the prospects of Anaesthesiology as a career	K	K	N	Lecture	Written/ Viva voce			
Topic: Cardiopulmonary resuscitation Number of competencies: (02) Number of procedures that require certification : (NIL)									
AS2.1	Enumerate the indications, describe the steps and demonstrate in a simulated environment, Basic Life Support in adults, children and neonates	K/S	SH	N	DOAP session	Skill assessment		General Medicine, Pediatrics	
AS2.2	Enumerate the indications, describe the steps and demonstrate in a simulated environment, Advanced Life Support in adults and children	S	SH	N	DOAP session	Skill assessment		General Medicine	
Topic: Preoperative evaluation and medication Number of competencies: (06) Number of procedures that require certification : (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
AS3.1	Describe the principles of preoperative evaluation	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			General Surgery, General Medicine
AS3.2	Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.3	Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.4	Choose and interpret appropriate testing for patients undergoing Surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.5	Determine the readiness for General Surgery in a patient based on the preoperative evaluation	S	SH	Y	DOAP session, Bedside clinic	Skill station			General Surgery, General Medicine
AS3.6	Choose and write a prescription for appropriate premedications for patients undergoing surgery	S	SH	Y	DOAP session, Bedside clinic	Skill station		Pharmacology	
Topic: General Anaesthesia Number of competencies: (07) Number of procedures that require certification : (NIL)									
AS4.1	Describe and discuss the pharmacology of drugs used in induction and maintenance of general anaesthesia (including intravenous and inhalation induction agents, opiate and non-opiate analgesics, depolarising and non depolarising muscle relaxants, anticholinesterases)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
AS4.2	Describe the anatomy of the airway and its implications for general anaesthesia	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
AS4.3	Observe and describe the principles and the practical aspects of induction and maintenance of anesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
AS4.4	Observe and describe the principles and the steps/ techniques in maintenance of vital organ functions in patients undergoing surgical procedures	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS4.5	Observe and describe the principles and the steps/ techniques in monitoring patients during anaesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS4.6	Observe and describe the principles and the steps/ techniques involved in day care anesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS4.7	Observe and describe the principles and the steps/ techniques involved in anaesthesia outside the operating room	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
Topic: Regional anaesthesia Number of competencies: (06) Number of procedures that require certification: (NIL)									
AS5.1	Enumerate the indications for and describe the principles of regional anaesthesia (including spinal, epidural and combined)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
AS5.2	Describe the correlative anatomy of the brachial plexus, subarachnoid and epidural spaces	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy	
AS5.3	Observe and describe the principles and steps/ techniques involved in peripheral nerve blocks	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Human Anatomy	
AS5.4	Observe and describe the pharmacology and correct use of commonly used drugs and adjuvant agents in regional anesthesia	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
AS5.5	Observe and describe the principles and steps/ techniques involved in caudal epidural in adults and children	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS5.6	Observe and describe the principles and steps/ techniques involved in common blocks used in surgery (including brachial plexus blocks)	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
Topic: Post-anaesthesia recovery Number of competencies: (03) Number of procedures that require certification: (NIL)									
AS6.1	Describe the principles of monitoring and resuscitation in the recovery room	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS6.2	Observe and enumerate the contents of the crash cart and describe the equipment used in the recovery room	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS6.3	Describe the common complications encountered by patients in the recovery room, their recognition and principles of management	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
Topic: Intensive Care Management Number of competencies: (05) Number of procedures that require certification: (NIL)									
AS7.1	Visit, enumerate and describe the functions of an Intensive Care Unit	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS7.2	Enumerate and describe the criteria for admission and discharge of a patient to an ICU	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Medicine
AS7.3	Observe and describe the management of an unconscious patient	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
AS7.4	Observe and describe the basic setup process of a ventilator	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	General Medicine
AS7.5	Observe and describe the principles of monitoring in an ICU	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Medicine
Topic: Pain and its management Number of competencies: (05) Number of procedures that require certification: (NIL)									
AS8.1	Describe the anatomical correlates and physiologic principles of pain	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Human Anatomy, Physiology	
AS8.2	Elicit and determine the level, quality and quantity of pain and its tolerance in patient or surrogate	S	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Physiology	
AS8.3	Describe the pharmacology and use of drugs in the management of pain	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	
AS8.4	Describe the principles of pain management in palliative care	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine
AS8.5	Describe the principles of pain management in the terminally ill	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine
Topic: Fluids Number of competencies: (04) Number of procedures that require certification: (NIL)									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
AS9.1	Establish intravenous access in a simulated environment	S	KH	Y	Small group discussion, DOAP session	Skill assessment			
AS9.2	Establish central venous access in a simulated environment	S	KH	Y	Small group discussion, DOAP session	Skill assessment			
AS9.3	Describe the principles of fluid therapy in the preoperative period	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			General Surgery
AS9.4	Enumerate blood products and describe the use of blood products in the preoperative period	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pathology	General Surgery
Topic: Patient safety Number of competencies: (04) Number of procedures that require certification: (NIL)									
AS10.1	Enumerate the hazards of incorrect patient positioning	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS10.2	Enumerate the hazards encountered in the perioperative period and steps/techniques taken to prevent them	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce			
AS10.3	Describe the role of communication in patient safety	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		AETCOM	General Surgery
AS10.4	Define and describe common medical and medication errors in anaesthesia	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pharmacology	General Medicine

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Physiology									
PY3.4	Describe the structure of neuro-muscular junction and transmission of impulses	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Anaesthesiology	
PY3.5	Discuss the action of neuro-muscular blocking agents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Anaesthesiology Pharmacology	
PY11.14	Demonstrate Basic Life Support in a simulated environment	S	SH	Y	DOAP sessions	OSCE		General Medicine Anaesthesiology	
Pharmacology									
PH1.15	Describe mechanism/s of action, types, doses, side effects, indications and contraindications of skeletal muscle relaxants	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology, Physiology	
PH1.17	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of local anaesthetics	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology	
PH1.18	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of general anaesthetics, and pre-anaesthetic medications	K	KH	Y	Lecture	Written/ Viva voce		Anesthesiology	
Forensic Medicine & Toxicology									

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
FM2.19	Investigation of anaesthetic, operative deaths: Describe and discuss special protocols for conduction of autopsy and for collection, preservation and dispatch of related material evidences	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Anesthesiology, General Surgery	
General Medicine									
IM13.17	Describe and enumerate the indications, use, side effects of narcotics in pain alleviation in patients with cancer	K	KB	Y	Bedside clinic, small group discussion	short note/ Viva voce		Pharmacology	Anesthesiology
IM24.11	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of the elderly undergoing surgery	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology General Surgery
General Surgery									
SU11.1	Describe principles of Preoperative assessment.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology
SU11.2	Enumerate the principles of general, regional, and local Anaesthesia.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology
SU11.3	Demonstrate maintenance of an airway in a mannequin or equivalent	S	SH	Y	DOAP session	Skill Assessment			Anesthesiology
SU11.5	Describe principles of providing post-operative pain relief and management of chronic pain.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Anesthesiology
SU17.2	Demonstrate the steps in Basic Life Support. Transport of injured patient in a simulated environment	S	SH	Y	DOAP session	Skill assessment			Anesthesiology

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical integration	Horizontal integration
SU17.10	Demonstrate Airway maintenance and recognize and management of tension pneumothorax, hemothorax and flail chest in simulated environment	S	SH	Y	DOAP session	Skill Assessment/ Log book			Anesthesiology
Orthopaedics									
OR1.1	Describe and discuss the Principles of Pre hospital care and Casualty management of a trauma victim including principles of triage,	K/S/A/C	K, KH	Y	Lecture with video, Small group Discussion	Written/ Viva voce/ OSCE/ Simulation			General Surgery Anaesthesiology
OR13.2	Participate as a member in team for Resuscitation of Polytrauma victim by doing all of the following : (a) IV. access central - peripheral (b) Bladder catheterization (c) Endotracheal intubation (d) Splintage	S/A	KH / SH	Y	Case discussion, Video assisted Lecture, Small group discussion, Teaching, Skill lab sessions	OSCE with Simulation based assessment			Anaesthesiology

RADIODIAGNOSIS (CODE: RD)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
RADIODIAGNOSIS									
Topic: Radiological investigations and Radiation safety		Number of competencies: (13)			Number of procedures that require certification: (NIL)				
RD1.1	Define radiation and the interaction of radiation and importance of radiation protection	K	KH	Y	Lecture, Demonstration				
RD1.2	Describe the evolution of Radiodiagnosis. Identify various radiological equipments In the current era	S	SH	Y	Lecture, Demonstration				
RD1.3	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to disorder of ENT	K/S	SH	Y	Lecture, Demonstration				
RD1.4	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to disorder in Ob & Gy	K/S	SH	Y	Lecture, Demonstration				
RD1.5	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to disorder in internal medicine	K/S	SH	Y	Lecture, Demonstration				
RD1.6	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to disorders in surgery	K/S	SH	Y	Lecture, Demonstration				
RD1.7	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to disorder in Pediatrics	K/S	SH	Y	Lecture, Demonstration				

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
RD1.8	Enumerate indications for various common radiological investigations, choose the most appropriate and cost effective method and interpret findings in common conditions pertaining to common malignancies	K/S	SH	Y	Lecture, Demonstration				
RD1.9	Describe the role of Interventional Radiology in common clinical conditions	K	KH	Y	Lecture, Demonstration				
RD1.10	Describe the role of Emergency Radiology, miscellaneous & applied aspects, interaction with clinical departments	K	KH	Y	Lecture, Demonstration				
RD1.11	Describe preparation of patient for common imaging procedures	K	KH	Y	Lecture, Demonstration				
RD1.12	Describe the effects of radiation in pregnancy and the methods of prevention/ minimization of radiation exposure	K	KH	Y	Lecture, Demonstration				
RD1.13	Describe the components of the PC & PNDT Act and its medicolegal implications	K	KH	Y	Lecture, Small group discussion			Obstetrics & Gynaecology, Forensic Medicine & Toxicology	
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform. Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation								
Integration									
Human Anatomy									
AN13.4	Identify the bones and joints of upper limb seen in anteroposterior and lateral view radiographs of shoulder region, arm, elbow, forearm and hand	K/S	SH	Y	Practical, Small group discussion, DOAP session	Viva voce/ Skill assessment		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN20.6	Identify the bones and joints of lower limb seen in anteroposterior and lateral view radiographs of various regions of lower limb	K/S	SH	Y	Lecture, Small group discussion, DOAP session	Viva voce/ Skill assessment		Radiodiagnosis	
AN25.7	Identify structures seen on a plain x-ray chest (PA view)	K/S	SH	Y	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN25.8	Identify and describe in brief a barium swallow	K/S	SH	N	Practical, DOAP session	Written/ Viva voce		Radiodiagnosis, General Medicine	
AN43.7	Identify the anatomical structures in 1) Plain x ray skull, 2) AP view and lateral view 3) Plain x ray cervical spine - AP and lateral view 4) Plain x ray of paranasal sinuses	K/S	SH	Y	Practical	Viva voce/ Skill assessment		Radiodiagnosis	
AN43.8	Describe the anatomical route used for carotid angiogram and vertebral angiogram	K/S	SH	N	Practical	Viva voce/ Skill assessment		Radiodiagnosis	
AN43.9	Identify anatomical structures in carotid angiogram and vertebral angiogram	K/S	SH	N	Practical	Viva voce/ Skill assessment		Radiodiagnosis	
AN51.1	Describe & identify the cross-section at the level of T8, T10 and L1 (transpyloric plane)	K/S	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Radiodiagnosis	
AN51.2	Describe & identify the midsagittal section of male and female pelvis	K	SH	Y	Practical, Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Radiodiagnosis	
AN54.1.	Describe & identify features of plain X ray abdomen	K/S	SH	Y	Lecture, DOAP session	Viva voce/ Skill assessment		Radiodiagnosis	
AN54.2	Describe & identify the special radiographs of abdominopelvic region (contrast X ray Barium swallow, Barium meal, Barium enema, Cholecystography, Intravenous pyelography &Hysterosalpingography)	K/S	SH	Y	Lecture, DOAP session	Viva voce/ Skill assessment		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
AN54.3	Describe role of ERCP, CT abdomen, MRI, Arteriography in radiodiagnosis of abdomen	K	KH	N	Lecture	Viva voce		Radiodiagnosis	
Forensic Medicine & Toxicology									
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially: – maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres. -- maintenance of medico-legal register like accident register. -- documents of issuance of wound certificate -- documents of issuance of drunkenness certificate. -- documents of issuance of sickness and fitness certificate. -- documents for issuance of death certificate. -- documents of Medical Certification of Cause of Death - Form Number4 and 4A -- documents for estimation of age by physical, dental and radiological examination and issuance of certificate	K	KH	Y	Lecture/ Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Pediatrics	
General Medicine									
IM1.19	Enumerate the indications for and describe the findings of heart failure with the following conditions including: 2D echocardiography, brain natriuretic peptide, exercise testing, nuclear medicine testing and coronary angiogram	S	KH	N	Lecture, Small group discussion, Bedside clinic	Skill assessment		Radiodiagnosis	
IM3.7	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum gram stain, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing and ABG	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	
IM3.11	Describe and enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialised testing	S	SH	Y	Bedside clinic, DOAP session	Skill assessment		Radiodiagnosis, Microbiology	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
IM5.13	Enumerate the indications for ultrasound and other imaging studies including MRCP and ERCP and describe the findings in liver disease	K	K	Y	Bedside clinic, Small group discussion	Viva voce/ Written		Radiodiagnosis	General Surgery
IM6.12	Enumerate the indications and describe the findings for CT of the chest and brain and MRI	K	K	N	Small group discussion, Lecture, Bedside clinic	Written/ Viva voce		Radiodiagnosis	
IM7.18	Enumerate the indications and interpret plain radiographs of joints	K	SH	Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Radiodiagnosis	Orthopedics
IM10.19	Enumerate the indications and describe the findings in renal ultrasound	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis	
IM13.12	Describe the indications and interpret the results of Chest X Ray, mammogram, skin and tissue biopsies and tumor markers used in common cancers	K	KH	Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Radiodiagnosis	
IM18.9	Choose and interpret the appropriate diagnostic and imaging test that will delineate the anatomy and underlying cause of the lesion	S	KH	Y	Bedside clinic, DOAP session, Small group discussion	Written/ Viva voce/ Skill assessment		Radiodiagnosis	
IM19.7	Choose and interpret diagnostic and imaging tests in the diagnosis of movement disorders	S	SH	Y	Bedside clinic, Small group discussion	Skill assessment/ Small group session/ Written/ Viva voce		Radiodiagnosis	
Obstetrics & Gynaecology									
OG9.4	Discuss the clinical features, laboratory investigations ultrasonography, differential diagnosis, principles of management and follow up of gestational trophoblastic neoplasms	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Radiodiagnosis
Pediatrics									
PE21.12	Interpret report of Plain radiograph of KUB	S	SH	Y	Bedside clinics, Skills lab	Log book		Radiodiagnosis	

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
PE21.13	Enumerate the indications for and Interpret the written report of Ultra sonogram of KUB	S	SH	Y	Bedside clinics, Skills lab	Log book		Radiodiagnosis	
PE23.13	Interpret a chest radiograph and recognize Cardiomegaly	S	SH	Y	Bedside clinics, Skills lab	Log book entry		Radiodiagnosis	
PE23.16	Use the ECHO reports in management of cases	S	SH	Y	Bedside clinics	Log book entry		Radiodiagnosis	
PE28.17	Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in Pediatric chest X-rays	S	P	Y	Bedside clinics, Small group discussion	Skills Assessment	3	ENT, Radiodiagnosis	
PE30.23	Interpret the reports of EEG, CT, MRI	S	SH	Y	Bedside clinics, Skill lab	Log book		Radiodiagnosis	
PE34.8	Interpret a Chest radiograph	S	SH	Y	Bedside clinics, Skill lab	Skill assessment		Radiodiagnosis	Respiratory Medicine
General Surgery									
SU25.3	Describe the etiopathogenesis, clinical features, Investigations and principles of treatment of benign and malignant tumours of breast.	K	KH	Y	Lecture, Small group discussion, Demonstration	Written/ Viva voce Skill assessment		Radiodiagnosis	

RADIODTHERAPY (CODE: RT)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested teaching learning method	Suggested assessment method	Number required to certify P	Vertical integration	Horizontal integration
RADIOTHERAPY									
Topic: Principles of Radiation Oncology (Radiotherapy) Number of competencies: (03) Number of procedures that require certification : (NIL)									
RT1.1	Describe and discuss definition of radiation, mechanism of action of radiation, types of radiation	K	KH	Y	Lecture	Written/ Viva voce			General Surgery, Anaesthesiology
RT1.2	Describe and discuss interaction of radiation with matter & measurement of radiation	K	KH	Y	Lecture	Written/ Viva voce			
RT1.3	Enumerate, describe and discuss classification and staging of cancer (AJCC, FIGO etc.)	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, General Medicine
Topic: Radiation Protection Number of competencies: (01) Number of procedures that require certification : (NIL)									
RT2.1	Describe and discuss radiation protection and personnel monitoring during radiation treatment	K	KH	Y	Lecture	Written/ Viva voce			
Topic: Radiobiology & Chemoradiation Number of competencies: (02) Number of procedures that require certification : (NIL)									
RT3.1	Describe and discuss cell cycle and cell survival curve, principles of radiobiology	K	KH	Y	Lecture	Written/ Viva voce			
RT3.2	Describe and discuss synergism of radiation and chemotherapy	K	KH	Y	Lecture	Written/ Viva voce			
Topic: Radiation Treatment Delivery & outcome Number of competencies: (09) Number of procedures that require certification : (NIL)									
RT4.1	Describe and discuss teletherapy machine (Co60/LINAC)	K	KH	Y	DOAP session	Written/ Viva voce			
RT4.2	Enumerate, describe and discuss types of treatment plan, basic workflow of 2D/3DCRT/IMRT/IGRT	K	KH	Y	DOAP session	Written/ Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested teaching learning method	Suggested assessment method	Number required to certify P	Vertical integration	Horizontal integration
RT4.3	Describe and discuss Brachytherapy machine (remote after loading)	K	KH	Y	DOAP session	Written/ Viva voce			
RT4.4	Describe and discuss different radioactive isotopes and their use in cancer patients	K	KH	Y	Lecture	Written/ Viva voce			
RT4.5	Describe and discuss role of radiation in management of common malignancies in India (region specific)	K	KH	Y	Lecture and Bed side clinics	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.6	Describe and discuss radiotherapy for benign disease	K	KH	Y	Lecture	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.7	Counsel patients regarding acute and late effects of radiation and supportive care	K/A/S	KH	Y	Bed side clinic, group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology
RT4.8	Describe oncological emergencies and palliative care	K/A/S	K/KH	Y	Lecture, group discussion	Written/ Viva voce			General Surgery, Obstetrics & Gynaecology
RT4.9	Display empathy in the care of patients with cancer	A	SH	N				AETCOM	
Topic: Cancer Prevention & Registries Number of competencies: (01) Number of procedures that require certification : (NIL)									
RT5.1	Describe and discuss cancer prevention, screening, vaccination, cancer registry	K	K	Y	Group discussion	Written/ Viva voce		Pathology	General Surgery, Obstetrics & Gynaecology

Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.

Column D: K – Knows, KH - Knows How, SH- Shows how, P- performs independently,

Column F: DOAP session – Demonstrate, Observe, Assess, Perform.

Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core Y/N	Suggested teaching learning method	Suggested assessment method	Number required to certify P	Vertical integration	Horizontal integration
Orthopaedics									
OR10.1	Describe and discuss the aetiopathogenesis, Clinical features, Investigations and principles of management of benign and malignant bone tumours and pathological fractures	K	K/KH	Y	Lecture, Small group discussion, Video assisted interactive lecture	Written/ Viva voce/ OSCE		Pathology	General Surgery, Radiotherapy

DENTISTRY (CODE: DE)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DENTISTRY									
Topic: Dental Caries		Number of competencies: (05)			Number of procedures that require certification (NIL)				
DE1.1	Enumerate the parts of the tooth	K	K	N	Lecture, Small group discussion	Viva voce		Human Anatomy	
DE1.2	Discuss the role of causative microorganisms in the aetio-pathogenesis of dental caries	K	KH	Y	Lecture, Small group discussion	Viva voce		Microbiology	
DE1.3	Identify Dental caries	S	SH	N	Observation, Bed side clinics	Skill assessment			
DE1.4	Discuss the role of dental caries as a focus of sepsis	K	KH	Y	Lecture, Small group discussion	Viva voce		Microbiology, General Medicine	
DE1.5	Counsel patients with respect to oral hygiene, diet and the direct bearing on systemic health	A/C	SH	Y	DOAP session	Document in Log book			
Topic: Edentulous state		Number of competencies: (05)			Number of procedures that require certification (NIL)				
DE2.1	Discuss the various causes for partial /complete loss of teeth and associated structures	K	K	N	Lecture, Small group discussion	Viva voce			
DE2.2	Discuss the local and systemic sequelae of the above	K	KH	Y	Lecture, Small group discussion	Viva voce			
DE2.3	Identify complete complement of teeth and identify missing teeth	S	SH	N	Observation, Bed side clinics	Skill assessment			
DE2.4	Enumerate common ways of restoring the edentulous state	K	KH	Y	Lecture, Small group discussion	Viva voce			
DE2.5	Counsel patients on the importance of restoring missing teeth/tissues with respect to the benefits on oral and systemic health.	A/C	SH	Y	DOAP session	Document in Log book			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
Topic: Malocclusion		Number of competencies: (04)			Number of procedures that require certification: (NIL)				
DE3.1	Aware of malocclusion and the tissues that cause it	K	K	N	Lecture, Small group discussion	Viva voce			
DE3.2	Enumerate the impact of malocclusion on aesthetics, health	K	KH	Y	Lecture, Small group discussion	Viva voce			
DE3.3	Identify malocclusion	S	SH	N	Observation, Bedside clinics	Skill assessment			
DE3.4	Counsel patients with respect to correction of malocclusion and the role it might have on oral health specifically on the TMJ	A/C	SH	Y	DOAP session	Document in Log book			
Topic: Oral cancer		Number of competencies: (04)			Number of procedures that require certification: (NIL)				
DE4.1	Discuss the prevalence of oral cancer and enumerate the common types of cancer that can affect tissues of the oral cavity	K	K	N	Lecture, Small group discussion	Viva voce		Pathology	ENT
DE4.2	Discuss the role of etiological factors in the formation of precancerous /cancerous lesions	K	KH	Y	Lecture, Small group discussion	Viva voce		Pathology	ENT
DE4.3	Identify potential pre-cancerous /cancerous lesions	S	SH	N	Observation, Bed side clinics	Skill assessment		Pathology	ENT
DE4.4	Counsel patients to risks of oral cancer with respect to tobacco, smoking, alcohol and other causative factors.	A/C	SH	Y	DOAP session	Document in Log book		Pathology	ENT
Topic: Periodontal disease		Number of competencies: (05)			Number of procedures that require certification: (NIL)				
DE5.1	Enumerate the parts of the tooth and supporting structures	K	K	N	Lecture, Small group discussion	Viva voce		Human Anatomy	
DE5.2	Enumerate the common diseases that affect the periodontium and identify local and systemic causative factors	K	KH	Y	Lecture, Small group discussion	Viva voce			

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
DE5.3	Identify Periodontal disease	S	SH	N	Observation, Bedside clinics	Skill assessment			
DE5.4	Discuss the role of Periodontal disease as a focus of sepsis	K	KH	Y	Lecture, Small group discussion	Viva voce			
DE5.5	Counsel patients with respect to oral hygiene, diet and the direct bearing on systemic health and vice versa	A/C	SH	Y	DOAP session	Document in Log book			

Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.

Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,

Column F: DOAP session – Demonstrate, Observe, Assess, Perform.

Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation

Integration									
Pathology									
PA24.1	Describe the etiology, pathogenesis, pathology and clinical features of oral cancers	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Dentistry	

List of contributing subject Experts

1. Human Anatomy

- Dr. Praveen R Singh, Professor & Head, Department of Anatomy, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Nachiket Shankar, Associate Professor, Department of Anatomy, St. John's Medical College & Hospital, Bangalore

2. Physiology

- Dr. Mario Vaz, Professor, Department of Physiology, St. John's Medical College & Hospital, Bangalore
- Dr. Jayashree Sengupta, Former Professor & Head, Department of Physiology, All India Institute of Medical Sciences, New Delhi.
- Dr Hasmukh D Shah, Professor & Head, Department of Physiology, Pramukhswami Medical College, Karamsad, Gujarat

3. Biochemistry

- Dr. Nibhriti Das, Professor, Department of Biochemistry, All India Institute of Medical Sciences, New Delhi
- Dr. S. P. Singh, Professor, Department of Biochemistry, Maharani Laxmi Bai Medical College, Jhansi, Uttar Pradesh
- Dr. Hitesh N Shah, Professor & Head, Department of Biochemistry, Pramukhswami Medical College, Karamsad, Gujarat

4. Pharmacology

- Dr. S. K. Maulik, Professor, Department of Pharmacology, All India Institute of Medical Sciences, New Delhi
- Dr. Vandana Roy, Professor, Department of Pharmacology, Maulana Azad Medical College, New Delhi

5. Pathology

- Dr. S. Datta Gupta, Professor, Department of Pathology, All India Institute of Medical Sciences, New Delhi
- Dr. Uma Chaturvedi, Professor, C-1303, Freedom Park Life, Sector- 57, Gurugram

6. Microbiology

- Dr. S. Geetalakshmi, Dean, Professor, Department of Microbiology, Stanley Medical College, Chennai, Tamil Nadu.
- Dr. Padma Srikanth, Professor, Department of Microbiology, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suman Singh, Professor, Department of Microbiology, Pramukhswami Medical College, Karamsad, Gujarat

7. Forensic Medicine & Toxicology

- Dr. Sanjeev Lalwani, Professor & Registrar (Academics), Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. T. D. Dogra, Former Director & Former Head, Department of Forensic Medicine, All India Institute of Medical Sciences, New Delhi; currently, Vice Chancellor, SGT University, Gurugram
- Col. Ravi Rautji, Professor & Head, Department of Forensic Medicine, Commanding Officer, Directorate General of Medical Services (Army), New Delhi
- Dr. S.D. Nanandkar, Professor & Head, Department of Forensic Medicine, Grant Government Medical College & Sir J.J. Group of Hospitals, Mumbai
- Dr. Indrajit L. Khandekar, In-charge CFMU and Associate Professor, Department of Forensic Medicine & Toxicology, MGIMS and Kasturba Hospital, Sewagram, Wardha.
- Dr. S. B. Punpale, Professor & Head, Department of Forensic Medicine, B. J. Medical College, Pune, Maharashtra

8. Community Medicine

- Dr. B. S. Garg, Professor & Head, Department of Community Medicine, Mahatama Gandhi Institute of Medical Sciences, Wardha, Sewagram, Maharashtra
- Dr. Umesh Kapil, Professor, Department of Community Medicine, All India Institute of Medical Sciences, New Delhi
- Dr. Sanjay Zodpey, Director, Public Health Foundation of India, Isid Campus, 4 Institutional Area, Vasant Kunj, New Delhi
- Dr. Saudan Singh, Professor, Department of Community Medicine, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. Dinesh Kumar, Professor, Department of Community Medicine, Pramukhswami Medical College, Karamsad, Gujarat
- Dr. Pankaj B. Shah, Professor, Department of Community Medicine, Sri Ramachandra Medical College & Research Institute, Chennai.

9. General Medicine & Respiratory Medicine

- Dr. Krishna G. Seshadri, Visiting Professor, Endocrinology & Metabolism, Balaji Vidyapeeth, Puducherry
- Dr. M. K. Bhatnagar, Director Professor, Department of General Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Aparna Agarwal, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi
- Dr. Anil Gurtoo, Director Professor of Medicine, Lady Hardinge Medical College, New Delhi

10. Pediatrics

- Dr. Harish Chellani, Professor of Pediatrics, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
- Dr. A. K. Dutta, Former Head, Kalawati Saran Children's Hospital, New Delhi

- Dr. S. Aneja, Director Professor & Head, Department of Pediatrics, Kalawati Saran Children's Hospital, New Delhi
- Dr. Latha Ravichandran, Professor, Deartment of Paediatrics, Sri Ramachandra Medical College & Research Institute, Chennai.

11. Psychiatry

- Dr. Rakesh Kumar Chadda, Department of Psychiatry, All India Institute of Medical Sciences, New Delhi
- Dr. N. M. Patil, Professor, Department of Psychiatry, Jawaharlal Nehru Medical College, Belagavi
- Dr. Rajesh Rastogi, Consultant & Head Department of Psychiatry, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi.
- Dr. Jagdish R Varma, Associate Professor, Department of Psychiatry, Pramukhswami Medical College, Karamsad, Gujarat

12. Dermatology, Venereology & Leprosy

- Dr. R. K. Gautam, Professor, Department of Dermatology, Venereology & Leprosy, Dr. Ram Manohar Lohia Hospital, New Delhi.
- Dr. Sujay Khandpur, Professor, Department of Dermatology, Venereology & Leprosy, All India Institute of Medical Sciences, New Delhi
- Dr. S. Murugan, Associate Professor of Dermatology, Sri Ramachandra Medical College & Research Institute, Chennai

13. Physical Medicine and Rehabilitation

- Dr. Sanjay Wadhwa, Professor, Department of Physical Medicine & Rehabilitation, All India Institute of Medical Sciences, New Delhi
- Dr. George Tharion, Head, Department of Physical Medicine & Rehabilitation, Christian Medical College, Vellore, Tamil Nadu

- Dr. Jagdish Menon, Professor & Head, Department of Orthopaedics and Dept. of Physical & Rehabilitative Medicine, Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry

14. General Surgery

- Dr. N Ananthakrishnan, 2A Vairam Enclave, Siddhananda Nagar, Pondicherry -605005.
- Dr. P. V. Chalam, Former Professor, Department of Surgery, Gandhi Medical College, Secunderabad, Telengana.
- Dr. Dinesh Bhatnagar, Professor, Department of General Surgery, North Delhi Municipal Corporation Medical College, Hindu Rao Hospital, Malka Ganj, Delhi

15. Ophthalmology

- Dr. Smita Singh, Professor, Department of Ophthalmology, Mahatma Gandhi Institute of Medical Sciences, Wardha

16. Oto-rhino-laryngology

- Dr. Achal Gulati, Director Professor, Department of ENT, Maulana Azad Medical College, New Delhi
- Dr. Ravi Kumar, Professor & Head, Department of ENT, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Suma Mathew, Professor, Department of ENT, Christian Medical College, Vellore, Tamil Nadu

17. Obstetrics and Gynaecology

- Dr. Neerja Bhatla, Professor, Department of Obstetrics & Gynecology, All India Institute of Medical Sciences, New Delhi
- Dr. Annie Regi, Professor & Head, Department of Obstetrics & Gynecology, Christian Medical College, Vellore, Tamil Nadu
- Dr. Usha Vishwanath, Professor, Department of Obstetrics & Gynecology, Sri Ramachandra Medical College & Research Institute, Chennai

18. Orthopaedics

- Dr. P.V. Vijayaraghavan, Vice Chancellor & Professor of Orthopedics, Sri Ramachandra Medical College & Research Institute, Chennai
- Dr. Raj Bahadur, Professor & Head, Department of Orthopaedics, Postgraduate Institute of Medical Sciences, Chandigarh
- Dr. SC. Goel, Professor, Department of Orthopaedics, Institute of Medical Sciences, BHU, Varanasi, Uttar Pradesh

19. Anaesthesiology

- Dr. Baljit Singh, Director Professor of Anaesthesia, G. B. Pant Hospital, Delhi
- Dr. Ramesh Keshav, Department of Anaesthesia, Dr. Ram Manohar Lohia Hospital, New Delhi
- Dr. Mridula Pawar, Consultant & Head, Department of Anaesthesia, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi

20. Radio- Diagnosis

- Dr. Kishor Taori (late), Professor & Head, Department of Radiodiagnosis, Government Medical College, Nagpur

21. Radiotherapy

- Dr. P. K. Jhulka, Dean & Professor of Radiotherapy, All India Institute of Medical Sciences, New Delhi.
- Dr. Shyam Shrivastava, Head, Department of Radiation, Tata Memorial Hospital, Mumbai

22. Dentistry

- Dr. Sridevi Padmanabhan, Professor, Department of Orthodontics, Faculty of Dental Sciences, Sri Ramchandra Medical College & Research Institute, Chennai