

# Hand Book for Students

## MBBS COURSE REGULATIONS

(subject to modification from time to time)



**Dr. NTR UNIVERSITY OF HEALTH SCIENCES  
VIJAYAWADA – 520 008**

## **REGULATIONS FOR MBBS DEGREE COURSE**

These regulations shall be called “The revised regulations for the MBBS course of the Dr. NTR University of Health Sciences, Vijayawada”. These regulations are applicable to the students who are admitted to the course.

### **I. 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 to provide 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 to engage in professional activities the graduate shall endeavor, 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. This aspect of education and training of graduates should be adequately recognized in the prescribed curriculum. Adequate exposure, to such experiences should be available 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 training should emphasize health and community orientation instead of concentrating only on disease and hospital orientation or being concentrated on curative aspects. As such all the basic concepts of modern scientific medical education are to be adequately dealt with.
6. Enough opportunity 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 should be capable of functioning independently in both urban and rural environment. He/she shall endeavor 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 problems of health and disease should receive proper emphasis 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 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 analyze 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 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 and first hand experience. Students shall be encouraged to learn in small groups through sheer 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 or 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 outpatient and emergency departments and within the community including peripheral health care institutions. The outpatient 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 to encourage integrated teaching amidst traditional subject areas using a problem based learning approach starting with clinical or community cases and exploring the relevance of various pre-clinical 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. In the integrated teaching programme, an ETHICAL class, personality development teaching has to be conducted to improve the students discipline and capabilities.
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 for providing learning resource material to teachers.

18. To implement this revised curriculum the vacation period of students in one calendar year should not exceed one month during the 4½ years Bachelor of Medicine and Bachelor of Surgery (MBBS) course.

## II. Eligibility

1. No candidate shall be admitted to the Bachelor of Medicine and Bachelor of Surgery (MBBS) course until he/she has completed the age of 17 years on or before 31<sup>st</sup> December of the academic year in which the candidate is seeking admission.
2. No candidate shall be admitted to the first Bachelor of Medicine and Bachelor of Surgery (MBBS) course until he/she has passed a qualifying examination as under.
  - a) Two years intermediate examination of Board of Intermediate Education, Andhra Pradesh under 10+2 pattern with Physics, Chemistry, Botany, Zoology or Biology as optional which shall include a practical test in each subject. (OR)
  - b) Any other examination (of 10+2 pattern) recognised by the University in Andhra Pradesh or Board of Intermediate Education, Andhra Pradesh, with Physics, Chemistry and Biology as optional subjects which shall include a practical test in each of these subjects. (OR)
  - c) The pre-professional / premedical examination with Physics, Chemistry and Biology, after passing either the higher secondary school examination or the Pre-University or an equivalent examination. The pre-professional/pre-medical examination shall include a practical test in Physics, Chemistry & Biology and also English as a compulsory subject. (OR)
  - d) The first year of the three years degree course of a recognized University, with Physics, Chemistry and Biology including practical test in these subjects provided the examination is a University Examination and candidate has passed 10+2 with English at a level not less than a core course. (OR)
  - e) B.Sc Examination of an Indian University, provided that he/she has passed the B.Sc examination with not less than two of the following subjects - Physics, Chemistry, Biology (Botany, Zoology) and further that he/she has passed the earlier qualifying examination with the following subjects - Physics, Chemistry, Biology and English. (OR)
  - f) Any other examination whose scope and standard is found to be equivalent to the intermediate science examination of an Indian University/Board, taking Physics, Chemistry and Biology including a practical test in each of these subjects and English.

- Note: i) The pre-medical course may be conducted either in a Medical College or Science College.
- ii) The marks obtained in Mathematics are not to be considered for admission to MBBS course.
- iii) Candidates possessing qualification of the University / Board of an institution outside the State should produce a Certificate of Equivalence from the Registrar, Dr. NTR University of Health Sciences, Vijayawada

### **III. SELECTION OF STUDENTS :**

The selection of students to medical colleges is based on the merit of the candidates in the EAMCET examination conducted by the Government of Andhra Pradesh.

- a) To be eligible for competitive entrance examination, the candidate must have passed any of the qualifying examinations as enumerated above at II.
- b) A candidate for admission to medical course must have passed Physics, Chemistry, Biology and English individually and must have obtained 50% marks in Physics, Chemistry and Biology taken together, both at qualifying examination.
- c) However, in respect of candidates belonging to scheduled castes / Scheduled Tribes and other Backward Classes (OBC) the qualifying marks should be 40% instead of 50%.

### **IV. REGISTRATION:**

A candidate admitted to the course in any of the affiliated colleges shall apply for registration with this University in the prescribed form within one month from the date of joining the college. The application for registration in the prescribed form along with the fee prescribed should be submitted to this University through the Head of the College. The University in turn will allot an identification number that will be valid till the student completes this course. Without this identification number, the student will not be considered as a bonafide student of the university and his application for the university exam will not be accepted.

### **V. DURATION OF THE COURSE:**

The duration of the certified study of the Bachelor of Medicine and Bachelor of Surgery course shall be 4½ Academic Years followed by one year compulsory rotating Internship. Normally the MBBS course shall commence on the 1<sup>st</sup> August of an academic year.

The period of 4½ years is divided into (9 semesters each semester of 6 months) three phases.

1 <sup>st</sup> MBBS Examination during 2 <sup>nd</sup> (second) Semester	2 <sup>nd</sup> MBBS Examination during 5 <sup>th</sup> (fifth) Semester	3 <sup>rd</sup> MBBS Part -I Examination during 7 <sup>th</sup> (seventh) Semester	3 <sup>rd</sup> MBBS Part -II (final) Examination during 9 <sup>th</sup> (ninth) Semester	<b>Internship</b>						
<b>Phase -1</b>		<b>Phase 2</b>			<b>Phase 3</b>					
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>
<b>Each Semester is of 6 months duration</b>										

- a Phase-I (1<sup>st</sup> MBBS) (1 year two semesters) consists 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. The time shared between the letter two will be in the ratio of 2:1
- b Phase-II (2<sup>nd</sup> MBBS) (1½ years-three semesters) consists of **para clinical & clinical** subjects. The para-clinical subjects shall consist of Pathology, Pharmacology, Microbiology, Forensic Medicine including Toxicology and part of community Medicine. During this phase teaching of para-clinical and clinical subjects shall be done concurrently. The clinical subjects shall consist of all those detailed below in Phase-III of the time for para-clinical teaching approximately equal time shall be allotted to Pathology, Pharmacology, Microbiology and Forensic Medicine & Community Medicine combined (1/3 Forensic Medicine and 2/3 community Medicine).
- c Phase-III (3<sup>rd</sup> MBBS) (Two year's-four semesters) 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 specialties, Paediatrics, Surgery and its allied specialties including Orthopaedics, Obstetrics and Gynaecology, Community Medicine and Emergence Medicine.
- i. The training in Medicine and its allied specialties will include General Medicine, Paediatrics, Tuberculosis and Chest diseases, Skin and Sexually Transmitted diseases, Psychiatry, Radio-diagnosis, Infectious diseases etc.
  - ii. The training in Surgery and its allied specialties will include General Surgery, Orthopaedics including Physiotherapy and Rehabilitation, Ophthalmology, Oto-Rhinolaryngology, Anaesthesia, Dentistry, Radio-therapy etc.
  - iii. The Obstetrics & Gynaecology training will include family medicine, family welfare, planning etc.,
  - iv. Emergency Medicine: This must be a general department. Till such time a full fledged department is created this may be under the control of the department of anaesthesia.

Besides clinical postings the rest of the teaching hours should be divided between didactic lectures, demonstrations, seminars, group discussions etc., in various subjects.

The clinical posting in Community Medicine for one month each in the semesters of IV, VI & VII instead of the present of postings in the III, IV & VI semesters. The postings in VII semester will be more useful as the students will be appearing for University examination at the end of 7<sup>th</sup> semester.

**VI. PROMOTION**

- a) Passing in 1<sup>st</sup> professional is compulsory before proceeding to phase II training.
- b) A student who fails in the II professional examination, shall not be allowed to appear in III professional Part-1 examination unless he passes all subjects of II professional examination.
- c) Passing in III Professional (Part 1) examination is not compulsory before entering for 8<sup>th</sup> and 9<sup>th</sup> semester training, however passing of III professional(Part-I) is compulsory for being eligible for III professional (Part-II) examination.

**VIII. MEDIUM OF INSTRUCTION**

English shall be the medium of instruction for study and examinations of the Bachelor of Medicine & Bachelor of surgery course.

**IX. ATTENDANCE:**

75% of attendance in a subject is compulsory inclusive of attendance in non-lecture teaching i.e. seminars, group discussion, tutorials, demonstrations, practicals, hospital postings, bedside clinics, failing which the student will not be permitted to appear for the University exam with his batch of students. Attendance shall be calculated from the total number of hours prescribed by UHS / MCI and not the number of classes conducted.

Referred students should also have 75% of attendance in both theory and practical.

**X. INTERNAL ASSESSMENT :**

- a) General consideration applicable to all subjects of MBBS:
  1. Internal assessment marks including 50% theory and 50% practicals / clinicals in all subjects.
  2. A student must secure at least 35% marks of the maximum marks fixed for internal assessment in a particular subject to be eligible to appear for the final university exam of that subject.
  3. Regular, Periodical notified examinations with, notified syllabus shall be conducted.
  4. Last exam conducted is pre final it is mandatory and should be conducted university exam pattern i.e. theory, practical /clinical.
  5. 5 marks are earmarked for record to be included in practical internal assessment examinations for all subjects.
  6. If only one practical examination is conducted, those marks are mandatory for considering the internal assessment marks. If the candidate is absent for any of the exams, the marks in that exam shall be taken as zero.
  7. The internal assessment marks shall be displayed in the notice board and shall be dispatched to the university soon after each internal assessment examination. As per the existing rules internal assessment marks should be sent so as to reach the University atleast two weeks before the University theory examination.

8. While forwarding the examination application forms of the students, the Principals should check the attendance, internal assessment marks and name as in intermediate / equivalent certificate.
9. Fresh internal assessment examination is mandatory to the referred and detained students. The previous internal assessment marks will not be considered. (vide 183<sup>rd</sup> resolution of Executive Council of Dr. NTR UHS dt,06-06-2009).

**b) 1<sup>st</sup> MBBS :**

Minimum number of internal assessment exams shall be 4 in each subject out of which atleast one will be in Practical / Clinicals. Internal assessment examinations shall be conducted uniformly in all colleges in a particular period as notified by the University. The last internal assessment examination should be completed 20 days before the commencement of final examination with preparation holidays of 10 days. After ignoring the marks of the examination in which the candidate got the least marks, the average marks of the remaining examinations will be counted. The theory and practical marks should be considered separately and computed as below. MCQs can be introduced in the internal assessment examinations.

If marks obtained by a candidate are 12, 16 and 10 out of 20 in the I, II and III internal theory exams i.e. pre final exam then best of the first two exams=16; III exam=10.

Average of the two = 13.

Theory =  $\frac{13}{20}$ ; Practical =  $\frac{17}{20}$ ; Total =  $\frac{30}{40}$

Record marks shall be included in practical internal assessment examinations.

**c) II MBBS :**

Pathology, Microbiology and Pharmacology subjects are allotted 30 marks each while Forensic Medicine subject is allotted 20 marks for Internal assessment.

Two Theory Internal Assessment examinations should be conducted at the end of 3rd and 4th semesters and one theory and one practical internal assessment examinations will be conducted at the end of 5th semester.

**d) Final MBBS Part-I : & Final MBBS Part-II:**

A minimum of Two Theory Internal Assessment examinations and one clinical internal assessment examination will be conducted for all the subjects of Final MBBS. The aggregate of all these three internal assessment examinations will be taken as internal assessment marks and should be reduced to the level of internal assessment marks. ENT, Ophthalmology and Paediatrics have each 20 marks, Obst. + Gynace. 30, Community Medicine 40 and General Medicine and Surgery each has 60 internal assessment marks.



**XI. RE-ADMISSION AFTER DISCONTINUATION BREAK OF STUDY:**

Every student shall attend his/her classes (Theory, Practical and Clinical) on all working days unless the Principals grants him / her leave of absence. If a student absents continuously for a period of 91 days or more and seeks permission to attend the course before one year after discontinuation, his/her application shall be forwarded to Registrar while permitting the student to join. The Vice-chancellor may grant leave of absence attaching such conditions as he may deem necessary. Candidates who are absent for continuous period of one year or more without permission shall be deemed to have forfeited the admission into the course and his/her studentship shall stand cancelled with out any further notice.

**XII. MIGRATION / TRANSFER OF CANDIDATES :**

1. 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 and 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 to another is permissible only if both the 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 respect of the receiving 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.
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 alongwith 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 is 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.

5. A student who has joined another college on migration shall be eligible to appear in the IInd 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 MCI Regulation at clause 12 (1) i.e. about attendance given at rule IX in page No.6 of this book.

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 shall 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 of 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 Colleges at any point of time”.

XIII. **VACATION:**

The vacation for the students is 30 days per academic year. The vacation may be declared by the Principal in phased manner at the discretion of the Principal taking into consideration two weeks of summer vacation and the remaining period for religious festivals.

XIV. **COMPULSORY INTERNSHIP:**

1) General:

Internship is a phase of training wherein a graduate is expected to learn methods / modalities for actual practice of medical and health care and acquire skills under supervision so that he/she may become capable of functioning independently.

2) Foundation course stage III:

The purpose, at this stage, is to facilitate intern to put into day to day practice all the knowledge, skills and attitude learnt during the earlier years. The course should be designed so as to relate the same with the national health policies and programmes. The contents to be included are:

1. Professional behaviour and Ethics.
2. Writing clinical notes in outpatient as well as inpatient record along with daily progress. notes, discharge slips and case summaries.
3. Rational therapeutics.
4. Appropriate use of laboratory, radiological and other diagnostic tools.
5. Medicolegal documentations (under supervision/guidance).
6. Proper collection, labeling, storage and dispatch of specimens.

7. Getting informed consent.
8. Introduction to International Classification of Disease.
9. Knowledge about various regulations and code of conduct.
10. Sensitization to the behavioral and sociocultural aspect of the community where he/she is likely to be placed.
11. Obtain dying declaration.
12. BTLS and trauma support.
13. Managerial skills including leadership and team work.
14. Health economics.
15. Management of biomedical waste.
16. Concept of Evidence Based Medicine.
17. Decision making.

**Teaching Learning Methods:**

1. Interactive sessions.
2. Case studies.
3. Triggers.
4. Role plays.

**Assessment:**

Programme evaluation and feedback from participants.

The skills developed should be assessed at the end of each posting, as applicable to the corresponding disciplines.

3) Specific Objectives:

At the end of the internship training, the students shall be able to:

- (i) diagnose clinically common disease conditions encountered in practice and make timely decision for referral to higher level;
  - (ii) use discreetly the essential drugs, infusions, blood or its substitutes and laboratory services;
  - (iii) manage all type of emergencies-medical, surgical obstetric, neonatal and paediatric, by rendering first 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 chronically sick and disabled (both physical and mental) and to communicate effectively with patient and the community.
- 4) 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.

Re-sponsible authorities from the medical college shall adjust the intern experience to maximize intern's opportunities to practice skills in patient care in rough approximation of the time allocation suggested.

5) Duration:

- a. Every candidate will be required after passing the Final MBBS examination to undergo 12 months compulsory rotational Internship to the satisfaction of the college authorities and Dr. NTR University of Health Sciences so as to be eligible for the award of degree of Bachelor of Medicine and Bachelor of Surgery (MBBS) and full registration.

COMPULSORY	
Community Medicine	2 months
Medicine including 15 days of Psychiatry	2 months
Surgery including 15 days Anaesthesia	2 months
Obst. & Gynaec, including Family Welfare Planning	2 months
Paediatrics	1 month
Orthopaedics including PMR	1 month
ENT	15 days
Ophthalmology	15 days
Casualty	15 days
Elective posting (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”.

b) Time Distribution:

12 months compulsory rotational Internship		
i. <u>Compulsory subjects: 11 Months</u>		ii. <u>Elective postings: 1 Month</u> (Elective posting will include two of the following for 15 days in each subject).
COMPULSORY		<ul style="list-style-type: none"> <li>- Dermatology and Sexually Transmitted Diseases.</li> <li>- Psychiatry</li> <li>- Tuberculosis and Respiratory Diseases</li> <li>- Anaesthesia</li> <li>- Radio-diagnosis</li> <li>- Physical Medicine and Rehabilitation</li> <li>- Forensic Medicine and Toxicology</li> <li>- Blood Bank and Transfusion Department</li> </ul>
Community Medicine	2 months	
Medicine including 15 days of Psychiatry	2 months	
Surgery including 15 days Anaesthesia	2 months	
Obst. & Gynaec, including Family Welfare Planning	2 months	
Paediatrics	1 month	
Orthopaedics including PMR	1 month	
ENT	15 days	
Ophthalmology	15 days	
Casualty	15 days	
Elective posting (1 X 15 days)	15 days	

c) House surgeons should maintain Logbooks.

d) At the time of causality posting students should be taught about medico legal documentation & should observe various types of medicolegal cases.

During 2 months period allotted to Community Medicine Department, the Internee shall be trained to acquire filed / practical knowledge, one month at District/ Taluk Hospital (or) U.F.W.C.Centre, one month at P.H.C and one month at R.H.C and during the above 2 months time he shall participate in Government of India / Ministry of Health and Family Welfare Department approved/ sponsored training programmes also . Where the internee shall be posted as per the decision of institution's competent authority.

All parts of the Internship shall be done as far as possible in the teaching hospitals attached to the Institution, where the candidate studied MBBS degree course. He/she has to do the Internship in the Hospitals specified by the University. In case of any difficulties the matter will be referred to Medical Council of India on individual merit.

The University shall issue a provisional MBBS pass certificate on passing the final examination. The State Medical Council will grant provisional registration to the candidate on production of the provisional MBBS pass certificate. The provisional registration will be for a period of one year. In the event of shortage or unsatisfactory work, the appropriate authorities may suitably extend the period of provisional registration and the compulsory rotating internship.

The internee shall be entrusted with clinical responsibilities under direct supervision of senior medical officer. They shall not be working independently. Interns will not issue a medical certificate or a death certificate or a medicolegal document under their signature.

In recognition of the importance of hands-on experience, full responsibility for patient care and skill acquisition, Internship should be increasingly scheduled to utilize clinical facilities available in District Hospital, Taluka Hospital, Community Health Centre and Primary Health Centre, in addition to Teaching Hospital. A critical element of internship will be the acquisition of specific experiences and skills. More emphasis should be given for hands as experience.

Provided that whereas internee is posted to District/Sub-divisional Hospital for training there shall be a committee consisting of representatives of college/university, the State Government and the District administration, who shall regulate the training of such trainee. Further, such trainee shall obtain a certificate of satisfactory completion of training from the relevant administrative authorities and countersigned by the Principal/Dean of college. Adjustment to enable a candidate to obtain training in elective clinical subjects may be made.

Each medical college shall establish links with one entire district extending out-reach activities. Similarly, Reorientation 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/Principal of the medical college.

Out of one year, 6 months shall be devoted learning tertiary care being rendered in teaching hospital/district hospital suitably staffed with well qualified staff, 1 (one) month of secondary care in small district or Taluk Hospital / community health centre and 1 (one) month in primary Health care full attention to the implementation of National Health Programme at the community level. One month of Primary care training may be under the preceptorship of a practicing family physician of voluntary agency or other primary health care provider.

One year's approved service in the Armed Forces Medical Services after passing the Final MBBS examination shall be considered as equivalent to the pre-registration training detailed above. Such training as far as possible, be at the Base/General Hospital.

e. Issue of Internship completion Certificate:

The heads of institutions shall issue a certificate of successful completion of internship to each candidate after satisfying that the candidate has completed the training programme and has acquire the skills to function independently.

XV. **AWARD OF DEGREE :**

The University on satisfactory completion of the compulsory internship shall be award the degree.

XVI. **CLASSIFICATION OF RESULTS:**

1. A candidate is declared as passed in second class if he/she secures 50% marks in aggregate in all subjects of the phase with a minimum of 50% in theory plus orals and 50% in practicals in that subject. A candidate securing less marks is failed.

2. First class in a particular phase may be awarded to a candidate who secures 65% or more of aggregate marks in all the subjects of the phase and passes all the subjects in the first regular appearance.
3. First class with distinction in a phase may be awarded to a candidate who secures 75% of aggregate marks and above in all the subjects and passes all the subjects in the first appearance.

**XVII. SCHEME OF UNIVERSITY EXAMINATION:**

There shall be one main and one supplementary examination in a year and should be a gap of 6 months between the main examination and the supplementary examination.

Marks distribution in University examinations								
Examination	Subject	Theory			Viva	Internal Assessment 50% th. + 50% Pra/clin	Practical	Total
		Paper 1	Paper 2	Total				
<b>I MBBS</b> (At the end of 2 <sup>nd</sup> Semester)	Anatomy	50	50	100	20	20+20=40	40	200
	Physiology	50	50	100	20	20+20=40	40	200
	Biochemistry	50	50	100	20	20+20=40	40	200
<b>II MBBS</b> (At the end of 5 <sup>th</sup> Semester)	Pharmacology	40	40	80	15	15+15=30	25	150
	Microbiology	40	40	80	15	15+15=30	25	150
	Pathology	40	40	80	15	15+15=30	25	150
	Forensic Medicine	40	-	40	10	15+15=30	20	100
<b>III MBBS Part -I</b> (At the end of 7 <sup>th</sup> Semester)	ENT	40	-	40	10	10+10=20	30	100
	Ophthalmology	40	-	40	10	10+10=20	30	100
	SPM	60	60	120	10	20+20=40	30	200
<b>III MBBS Part -II</b> (At the end of 9 <sup>th</sup> Semester)	Medicine	60	60	120	20	30+30=60	100	300
	Surgery	60	60	120	20	30+30=60	100	300
	Obstetrics & Gynecology	40	40	80	30	20+20=40	50	200
	Pediatrics	40	-	40	10	10+10=20	30	100
Criteria for Pass 1. Theory & Orals (Viva) together – 50% 2. Practical –50% 3. Internal – 35% for eligibility Aggregate – 50%.								

If any candidate is absent in any component of examinations i.e. either in theory in part, practical or viva voce, he / she deemed to be absent and declared fail in that subject. (recommendations of the academic senate 2009 approved by 183<sup>rd</sup> E.C.)

<b>Scheme of First professional examination:</b> ( Pre-clinical Subjects-Biochemistry, Anatomy, Physiology) conducted at the end 2 <sup>nd</sup> of semester.		
Biochemistry	Anatomy	Physiology
Scheme of practical: a) Qualitative - 15 marks b) Quantitative- 15 marks c) Interpretation of Lab. Data - 5 marks d) Spotters & Charts - 5 marks Total 40	Scheme of practical: <u>Practical – 1</u> Gross Anatomy a) Major exercise – Dissected parts from Head and Neck, Abdomen, Pelvis and Thorax -10marks b) Minor exercises – Dissected parts from Extremities - 5 M c) Surface marking/ clinically Oriented question 5 marks Practical – 1 Total- 20 <u>Practical –2</u> Histology including genetics a) Spotters - 5marks b) Stained Slides for discussion(2slides)- 10marks c) Genetic Exercise- 5marks Practical – 2 Total- 20	Scheme of practical: <u>Practical – 1</u> a) Hematology Long Experiment (RBC, WBC, Hb etc) -10marks b) Identification of graphs Problems & Calculation - 5marks c) Short experiment (Grouping, BT, CT, Reflexes Cranial Nerves) - 5marks Practical – 1 Total- 20 <u>Practical – 2</u> a) Long Experiment Clinical examination of a specific system - 10marks b) Amphibian graph Muscle/Nerve/Heart - 5marks c) Spotters Clinical cases and charts - 5marks Practical – 2 Total- 20
Orals 20marks	Orals 20marks a) Soft parts - 5 marks b) Osteology - 5 marks c) Radiology - 5 marks d) Embryology - 5 marks	Orals 20marks
Internal assessment- 40marks	Internal assessment- 40marks	Internal assessment- 40marks
Theory: 2 ½ hrs duration Biochemistry-1 50marks Biochemistry-2 50marks	Theory: 2 ½ hrs duration Anatomy-1 50marks Anatomy -2 50marks	Theory: 2 ½ hrs duration Physiology-1 50marks Physiology-2 50marks
Scheme of Theory examinations each held on 2 consecutive days 1. One Structured question 10 marks 2. One applied question (structured) 10 marks 3. 5 short answer type questions 5 x 4 = 20 marks 4. 5.brief answer type questions 5 x 2 = 10 marks Total 50 marks		



<b>Scheme of second professional examination:</b> (Para-clinical subjects: Pathology, Microbiology, Pharmacology and Forensic Medicine) conducted at the end 5 <sup>th</sup> of semester.			
Pathology	Microbiology	Pharmacology	Forensic Medicine
Theory: 2 papers of 40 marks each held on 2 consecutive days.- 2 hrs duration	Theory: 2 papers of 40 marks each held on 2 consecutive days.- 2 hrs duration	Theory: 2 papers of 40 marks each held on 2 consecutive days.- 2 hrs duration	Theory: 1 paper of 40 marks.- 2 hrs duration
Scheme of practical: i) Spotters Slides - 4 marks Instrument - 1 mark ii) Two Gross specimens (Morbid anatomy) - 4 marks iii) Short blood exercises HB / blood group - 4 marks iv) Abnormal peripheral Smear - 6 marks v) Urine examination - 6 marks Total - 25 marks	Scheme of practical i) Spotters - 5 marks ii) Grams staining - 5 marks iii) Special staining -5 marks iv) Parasitology examination - 5 marks v) Applied Microbiology exercises - 5 marks Total- 25 marks	Scheme of practical i) Experimental Pharmacology - 8 marks ii) Clinical Pharmacology exercise - 5 marks iii) Prescription writing - 4 marks iv) Criticism - 4 marks v) Spotters - 4 marks Total - 25 marks	Scheme of practical I. Autopsy - 5 marks II. Spotters- 5 marks III. clinical case - 5 marks V. Age estimation - 5 marks Total - 20 marks
Orals 15 marks	Orals 15 marks	Orals 15 marks	Orals 10 marks
Internal assessment -30marks	Internal assessment -30marks	Internal assessment - 30marks	Internal assessment - 30marks
Theory: 2hrs duration Pathology-1 40marks Pathology-2 40marks	Theory: 2 hrs duration Microbiology -1 40marks Microbiology -2 40marks	Theory: 2 hrs duration Pharmacology -1 40marks Pharmacology -2 40marks	Theory: 2 hrs duration Forensic medicine One paper -40marks
Scheme of Theory examinations each paper carries 40 marks and consists of time 2 hours each held on 2 consecutive days			
1. One Structured question = 10 marks			
2. 5 short answer type questions 5 x 4 = 20 marks			
3. 5 brief answer type questions 5 x 2 = 10 marks			
Total = 40 marks			

<b>Scheme of Third professional Part – I examination</b> (Clinical Subjects- ENT, Ophthalmology and Community Medicine) Conducted at the end 7 <sup>th</sup> of semester.		
<b>Ophthalmology</b>	<b>Oto-Rhino- Laryngiology (E.N.T):</b>	<b>Community Medicine (S.P.M.) Including Humanities.</b>
Scheme of practical: Each candidate examines 4 cases. 30 marks A candidate should record the diagnosis & management of the case. A set of examiners (comprising one internal and one external), examines the candidate for two cases.	Scheme of practical: i) Two cases 2X15marks. Duration of the clinical examination will be 20 minutes for each of the 2 cases. ii) A candidate has to secure a minimum of 15 marks out of 30 marks for passing the clinical examination.	Scheme of practical: i) Clinical social case study : 10 marks ii) Problem solving epidemiological exercises: 10 marks iii) Statistical exercises 10 marks
Orals 10 marks	Orals 10 marks	Orals 10 marks Oral examinations shall be conducted by two sets of examiners (internal and External) and each set will carry 5 marks.
Internal assessment-20marks	Internal assessment- 20marks	Internal assessment- 40marks
Theory: 2 hrs duration Ophthalmology One paper -40marks (Should contain one question on pre-clinical and para-clinical aspects, of 10 marks)	Theory: 2 hrs duration E.N.T. One paper -40marks (Should contain one question on pre-clinical and para-clinical aspects, of 10 marks)	Theory: 3 hrs duration SPM-1 60marks SPM-2 60marks ( 20 marks includes problem solving, applied aspects of management at primary level including essential drugs, occupational[agro based] diseases, rehabilitation and social aspects of community.)
<b>ENT&amp; Ophthalmology</b> 1. One structured question: 10 marks 2. 5 short answer type questions 5 x4 = 20 marks 3. 5 brief answer type questions 5 x 2 = 10 marks Total = 40 marks <b>Community medicine(S.P.M.) have 2 papers of 60 marks each</b> <b>Each paper has 2 sections &amp; each section consists of</b> 1. One structured question 10 marks 2. Five short answer questions 5 x 4 20 marks Total 30 marks		

<b>Scheme of Third professional Part – II examination</b> (Clinical subjects: Medicine, Surgery, Obstetrics & Gynecology and Pediatrics) Conducted at the end 9 <sup>th</sup> of semester.			
Medicine	Surgery	Obstetrics & Gynecology	Pediatrics
Scheme of practical: i) Long case: 50 marks ii) Short case: 30 marks iii) Spotters : 20 marks The candidate should write detailed case sheet for the long case The candidate should write the points in favour for short case Total 100marks	Scheme of practical: i. One long case of 30 minutes- 50marks ii. Short case1- 25 marks Short case2 } iii. Short ortho. case 3 – 25marks 10 minutes each & The short cases should contain brief notes. Total -100marks Note : 25% of the marks are allotted for Orthopedic cases.	Scheme of practical: i.Obstetrics-1 case - 25 marks ii. Gynaecology-1 case - 25 marks Total - 50 marks (A detailed case sheet to be written. The marks distribution of case History taking – 5 Examination - 10 Discussion – 10 )	Scheme of practical: i. Long case-15marks ii. Short case-10marks iii. Spotters- 5 marks <u>Note</u> : In the long case student should write the case sheet in detail. For short case only diagnosis and salient features are to be written. For spotters only diagnosis to be written.
Orals 20 marks i) Discussion-10 marks ii) Instruments, ECG, X-Ray etc.-10 marks	Orals 20 marks	Orals 30 marks i. Record (of at least 10 delivery cases) -10 marks ii. Gynaec & Family Planning -10 marks iii. Obstetrics-10marks (Note:- In obstetrics pelvis and Foetal skull – 5 marks Specimens & instruments – 5 marks)	Orals 10 marks
Internal assessment -60marks	Internal assessment -60marks	Internal assessment - 40marks	Internal assessment - 20marks
Theory: 3hrs duration Medicine-1 60marks Medicine-2 40marks	Theory: 3hrs duration Surgery-1 60marks Surgery-2 60marks	Theory: 2hrs duration Gyn & Obst -1 40marks Gyn & Obst -2 40marks	Theory: 2 hrs duration Pediatrics One paper -40marks
Medicine & Surgery each have 2 papers of 60 marks each with 2 sections Time 3 hours. each section consists of 1. One structured question 10 marks 2. three short answer questions 3 x 4 = 12 marks 3. Four brief answer type questions 4 x 2 = 8 marks Total 30 marks Gynecology & Obstetrics has 2 papers of 40 marks each Time 2 hours. 1. One structured question: 10 marks 2. Five short answer type questions 5 x 4 = 20 marks 3. Five brief answer type questions 5 x 2 = 10 marks Total = 40 marks Pediatrics has one Paper of 40 marks and consists of: Time 2 hours. 1. One structured question : 10 marks 2. Five short answer type questions 5 x 4 = 20 marks 3. Five brief answer type questions 5 x 2 = 10 marks Total = 40 marks			

**XVIII MODEL QUESTION PAPERS:**

1<sup>ST</sup> MBBS DEGREE EXAMINATIONS

**BIOCHEMISTRY PAPER-I**

Time: 2½ hours

Max.Marks:50

ANSWER ALL QUESTIONS

1. Write are ketone bodies? How are they synthesized? Name the conditions characterized by excessive production of ketone bodies. Explain the metabolic derangements and consequences of ketosis.  
(1+3+1+5=10)
2. What are the metabolic fates of glucose –6- phosphate? Explain HMP shunt path way and mention its significance.

(2+6+2=10)

WRITE SHORT NOTES ON:

(5 X 4 = 20)

3. what is competitive inhibition ? Write its clinical applications.
4. High energy compounds.
5. Porphyrins.
6. Biochemical functions and deficiency manifestations of Folic acid
7. Calorific value.

WRITE BROEF NOTES ON:

(5 X 2 = 10)

8. Essential fatty acids
9. Redox potential
10. Sources and deficiency manifestation of Vitamin 'A'
11. Detoxification by Hydrolysis (two examples)
12. Composition and importance of Insulin

1<sup>ST</sup> MBBS DEGREE EXAMINATIONS  
**BIOCHEMISTRY PAPER-II**

Time: 2½ hours

Max.Marks:50

**ANSWER ALL QUESTIONS**

1. Name aromatic amino acids. Give an account on the metabolism of tyrosine. What are the biologically important compounds derived from tyrosine? Which are the inborn errors associated with this amino acid?

(1+6+1+2=10)

2. Give an account of the sources, absorption, requirement, functions and regulation of calcium.

(1+2+1+3+3 = 10)

**WRITE SHORT NOTES ON:**

(5 X 4 = 20)

3. induction and repression
4. Structure and function of TRNA
5. Respiratory and metabolic acidosis
6. Gout
7. Name four different types of nucleotides and mention their biological importance.

**WRITE BROEF NOTES ON:**

(5 X 2 = 10)

8. Tumor Markers
9. Structural features of cell membrane
10. Urea clearance
11. Define mutagens and give two examples
12. Hybridoma

1<sup>ST</sup> MBBS DEGREE EXAMINATIONS

**PHYSIOLOGY PAPER-I**

Time: 2½ hours

Max.Marks:50

ANSWER ALL QUESTIONS

1. Describe the blood groups and their significance; What is the importance of Rh factor?

(8+2=10)

2. Draw a diagram to show the structure of the respiratory membrane and enumerate the haemodynamic factors influencing the exchange of gases across the membrane.

(5+5 = 10)

WRITE SHORT NOTES ON:

(5 X 4 = 20)

3. Factors influencing coronary blood flow
4. Eccrine type of sweat gland
5. Name the different movements of the small intestines and mention their significance.
6. Juxta medullary nephron
7. P-R interval significance

WRITE SHORT NOTES ON:

(5 X 2 = 20)

8. Describe the thermal changes during muscle contraction.
9. Describe the functions of Bile
10. What is the Physiological importance of normal oncotic pressure of Plasma?
11. Artificial Respiration
12. Fick's principle.

1<sup>ST</sup> MBBS DEGREE EXAMINATIONS

**PHYSIOLOGY PAPER-II**

Time: 2½ hours

Max.Marks:50

ANSWER ALL QUESTIONS

1. Discuss the function of reticular formation. (10)
  2. What is tetany? Describe one hormone which is the causative factor, in detail. (1+1+8=10)
- (5+2+3 = 10)

WRITE SHORT NOTES ON:

3. Factors influencing spermatogenesis
4. Role of ADH in fluid balance of the body
5. Otolith organs
6. Functions of C.S.F.
7. Taste pathway

(5 X 4 = 20)

WRITE SHORT NOTES ON:

8. Myopia
9. Function of Glucagon
10. Saltatory conduction
11. Lower Motor Neurone Paralysis
12. Adrenal Medullary Hormones.

(5 X 2 = 20)

1<sup>ST</sup> MBBS DEGREE EXAMINATIONS

**ANATOMY PAPER-I**

Time: 2½ hours

Max.Marks:50

ANSWER ALL QUESTIONS

1. Describe the gross features, Blood and Nerve Supply, Lymphatic drainage and development of Parotid gland.  
(4+3+1+2 = 10)
2. Describe the course, relations, branches and applied anatomy of ulnar nerve.  
(2+3+3+2 = 10)

SHORT ANSWER TYPE QUESTIONS (3 TO 7)

(5 X 4 = 20)

3. Microscopic Anatomy of Pituitary gland.
4. Middle meningeal artery
5. Lateral wall of the nose.
6. Quada Equina.
7. Caudate Nucleus.

BRIEF ANSWER TYPE QUESTIONS (8 TO 12)

(5 X 2 = 10)

8. Surgical neck of the humerus.
9. Carotid sheath.
10. Insula.
11. Sensory decussation.
12. Cervical cyst.



1<sup>ST</sup> MBBS DEGREE EXAMINATIONS

**ANATOMY PAPER-II**

Time: 2½ hours

Max.Marks:50

ANSWER ALL QUESTIONS

1. Describe external, internal features, Blood supply and development of Right atrium.

(3+3+1+3 = 10)

2. Describe the gross anatomy, relations, interior, Blood and Nerve Supply and development of urinary bladder.

(2+2+2+2+2= 10)

SHORT ANSWER TYPE QUESTIONS (3 TO 7)

(5 X 4 = 20)

3. Gall bladder.
4. Portal vein
5. Hila of the lungs.
6. Microscopic anatomy of stomach fundus.
7. Adductor canal.

BRIEF ANSWER TYPE QUESTIONS (8 TO 12)

(5 X 2 = 10)

8. Dorsalis paedis artery
9. Saphenous opening
10. Sex chromosomes
11. Periosteum
12. Oblique Popliteal Ligament.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS

**PHARMACOLOGY PAPER-I**

Time: 2 hours

Max.Marks:40

1. Classify antihypertensive drugs. Write the pharmacological actions, uses and adverse effects of Ramipril.

(10)

WRITE SHORT NOTES ON:

(5x4 = 20)

2. Newer antiepileptic drugs
3. Drugs used in glaucoma
4. Pharmacokinetic drug interactions
5. Treatment of Morphine poisoning.
6. Use of  $\alpha$  - adrenergic blockers.

WRITE BRIEFLY ON :

(5x2 = 10)

7. What is drug synergism? Give two examples
8. Two drugs used sublingually and two advantages of sublingual route.
9. Two contraindications for the use of Atrophine. Explain the rationale.
10. Two uses and two adverse effects of Hydrochlorothiazide.
11. Write two drugs inducing parkinsonism and two drugs used in drug induced parkinsonism.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS

**PHARMACOLOGY PAPER-II**

Time: 2 hours

Max.Marks:40

1. Enlist Hypoglycemic agents. Write the mechanism of action, pharmacological actions and adverse effects of any one oral hypoglycemic agent. (10)

Write Short notes on:.

(5x4 = 20)

2. Adverse effects and therapeutic uses of Metronidazole.
3. Fluconazole
4. Anticancer antibiotics
5. Mechanism of action and uses of Heparin
6. Antitussives.

Write briefly on :

(5x2 = 10)

7. Two drugs useful in acid peptic disease. Give reasons for their use.
8. Mechanism of action and one use of Methyl ergometrine.
9. Two advantage of loratidine over Diphenhydramine
10. Rationale of combination of two drugs in Cotrimoxazole, write one use.
11. Deferiprone – Mechanism of action and one use.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS  
**MICROBIOLOGY PAPER-I**  
(Bacteriology and Immunology)

Time: 2 hours

Max.Marks:40

1. Classify hypersensitivity reactions with examples. (5+5=10)  
Describe type I hypersensitivity.

Write Short notes on: (5x4 = 20)

2. Complement
3. Lab diagnosis of Helicobacter infection.
4. Pathogenesis of autoimmune diseases
5. compare Exotoxins and Endotoxins
6. Types of bacteriological Media

Write Briefly on (5x2 = 10)

7. Adjuvants.
8. Rapid plasma Reagin (RPR) test
9. Acinetobacter
10. Prophylaxis of whooping cough
11. Plague.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS  
**MICROBIOLOGY PAPER-II**  
(Virology, Mycology & Parasitology)

Time: 2 hours

Max.Marks:40

1. List the intestinal amoebae. Describe the pathogenicity and life cycle of *E. histolytica*.

(2+3+5 = 10)

Write Short notes on:

(5x4 = 20)

2. Prophylaxis of Polio-myelitis
3. *Cryptosporidium*
4. Dimorphic fungi
5. General characters of viruses
6. Flaviviruses.

Write Brief notes on

(5x2 = 10)

7. Morphology of *Haemoflagellates*
8. Penicilliosis
9. Hydatid cyst
10. Cell cultures for growing viruses
11. Eggs of Nematodes.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS  
**PATHOLOGY PAPER-I**  
(General Pathology & Haematology)

Time: 2 hours

Max.Marks:40

1. A male child presented with recurrent painful haemarthrosis and haematomas. History of bleeding in male relatives on the maternal side of the family was available. (10)
- a) What is the probable diagnosis?
  - b) Describe the Inheritance of the disease?
  - c) Describe the lab.diagnosis of the disease?
  - d) Mention the complications following the therapy?

Write Short notes on:

(5x4 = 20)

- 2. Giant cells
- 3. Nature of amyloid.
- 4. Thrombo embolism
- 5. Tumour markers
- 6. Pathogenesis of Sickle cell disease.

Write Briefly on

(5x2 = 10)

- 7. Barr body
- 8. Shock lung
- 9. Lesions of Vit. A Deficiency
- 10. Juvenile chronic myeloid leukaemia
- 11. Rhinosporidiosis

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS

**PATHOLOGY PAPER-II**

(Systemic Pathology)

Time: 2 hours

Max.Marks:40

1. A 8 years old boy was admitted with malaise, fever, oliguria, cocoa-coloured Urine 2 weeks after recovery from sore throat. On examination, he was found to have perio orbital oedema and moderate hypertension. (10)
  - a) What is the probable diagnosis?
  - b) Describe the aetio pathogenesis of the conditions?
  - c) What is the morphology of the organ?

Write Short notes on:

(5X 4 = 20)

2. Bacterial endocarditis
3. Carcinoma cervix
4. Reed-Sternberg (R-S) cell
5. Malignant melanoma
6. Bronchiectasis

Write Briefly on

(5x2=10)

7. Phylloides tumour
8. Barrett oesophagus
9. Pigment gall stones
10. Brain abscess
11. Tuberculous osteomyelitis.

2<sup>nd</sup> MBBS DEGREE EXAMINATIONS

**FORENSIC MEDICINE**

Time: 2 hours

Max.Marks: 40

1. Classify mechanical wounds. Describe briefly the various types of abrasions and their medico legal significance.

(10 Marks)

Write short notes on:

5 X 4 = 20

2. Different types of strangulations.
3. Causes of impotency in males.
4. Chronic alcohol poisoning.
5. Suspended Animation.
6. Hallucinations.

Write briefly on:

5 X 2 = 10

7. Cardiac Tamponade.
8. Fat Embolism
9. Infamous conduct
10. Rule of nine
11. Post mortem lividity.



FINAL MBBS DEGREE EXAMINATIONS  
**OTORHINOLARYNGOLOGY (ENT)**  
(THEORY MODEL PAPER)

Time: 2 hours

Max. Marks: 40

- 1) How will you manage a 40 year old woman presenting with dysphagia (10)

Write Short notes on : (5x4 = 20)

- 2) Anatomy of nasal septum
- 3) Physiology of equilibrium
- 4) Symptoms of Meniere's disease
- 5) Signs of Atrophic Rhinitis
- 6) Management of Otosclerosis

Write Briefly on : (5x2=10)

- 7) Symptomatology of ear disease
- 8) Vocal nodule
- 9) Universal neonatal hearing screening
- 10) Ludwig's angina
- 11) Myringotomy.

FINAL MBBS DEGREE EXAMINATIONS PART-I

**OPHTHALMOLOGY QUESTIONS**

Time: 2 hours

Max.Marks: 40

Answer All Questions

- 1) Etiology, signs, symptoms, diagnosis and treatment of hypopyon ulcer cornea.

(10 marks)

Write Short notes on:

(5x4 = 20)

- 2) Traumatic Cataract
- 3) Contact lens
- 4) Pilocarpine
- 5) Primary Eye Care System
- 6) Ptosis.

Write Briefly on :

(5x2=10)

- 7) Blepharitis
- 8) Corynebacterium Diphtheria.
- 9) Papilloedema
- 10) Keratic Precipitates
- 11) Dacryocystectomy.

FINAL MBBS PART-I EXAMINATION  
**SOCIAL & PREVENTIVE MEDICINE – PAPER -I**  
**(Concepts, Social Sciences, Nutrition, Environmental Sanitation,  
Statistics and General Epidemiology)**

Time: 3 hours

Max.Marks: 60

PART – A

30 Marks

1. List the Ecological Factors related to 'Malnutrition'. Describe in detail the preventive and social measures against malnutrition at the community level.

10 Marks

Write Short Notes on

(5x4=20)

2. Periodic Fluctuations in Disease Occurrence.
3. Physical Quality of Life Index (PQLI).
4. Anti-Rodent Measures
5. Doctor – Patient Relationship
6. Normal Distribution Curve

PART – B (30 Marks)

7. Describe in detail with suitable examples the different modes of intervention available for disease prevention.

(10)

Write short notes on:

5 X 4= 20

8. Prevention and Control of 'Air Pollution'.
9. Ice berg Phenomenon of Disease
10. Primordial Prevention of Disease
11. Effects of Noise Exposure
12. Non-Randomized Trials

FINAL MBBS PART-I EXAMINATION  
**SOCIAL & PREVENTIVE MEDICINE – PAPER -II**  
**(Concepts, Social Sciences, Nutrition, Environmental Sanitation,  
Statistics and General Epidemiology)**

Time: 3 hours

Max.Marks: 60

PART – A

1. Discuss in detail extent of problem, causes, epidemiological factors and prevention of blindness in India 10 Marks

Write Short Notes on (5x4=20)

2. Immediate Care of Newborn
3. Parameters of Malaria Surveillance.
4. Hazards of Obesity and their Prevention and Control
5. Highlights of Reproductive and Child Health (RCH) Programme
6. Post – Operative Advice after Vasectomy.

PART – B (30 Marks)

7. Discuss in detail the extent of problem, epidemiology, prevention and containment of Hepatitis 'B' Infection.

Write short notes on:

5 x 4 = 20

8. Domiciliary Midwifery Service
9. Group Approach in Health Communication.
10. Job Description of Health Worker (Female)
11. Functions of Voluntary Health Agencies
12. Work of World Health Organization (W.H.O.)

**FINAL MBBS PART – II EXAMINATION  
GENERAL MEDICINE PAPER-I**

**PAPER – A (30 Marks)**

Time: 3 hours

Max. Marks: 60

1. Discuss the clinical features, laboratory investigations and management of megaloblastic anaemia. (3+3+4=10)

Write short notes on:

3 X 4 = 12 marks

2. General principles in management of poisoning.
3. Systemic Lupus Erythematosus
4. Management of Acute Severe Asthma.

Write briefly on:

4 X 2 = 8 marks

5. Etiology of community acquired pneumonia
6. Rheumatoid Arthritis
7. Medical management of gout
8. Disseminated intravascular coagulation.

**PART – B (30 marks)**

9. Discuss the clinical features, laboratory investigations and management of Thyrotoxicosis. (3+3+4=10)

Write short notes on:

3 X 4 = 12 marks

10. Liver function tests.
11. Indications of dialysis
12. Newer Insulin delivery devices

Write briefly on:

4 X 2 = 8 marks

13. Management of acute variceal bleeding
14. Metformin
15. Scabies
16. Prokinetic drugs

**FINAL MBBS PART – II EXAMINATION  
GENERAL MEDICINE PAPER-II**

**PAPER – A (30 Marks)**

Time: 3 hours

Max. Marks: 60

1. Describe diagnostic criteria, clinical features, laboratory investigations and management of Acute Rheumatic fever. (2+2+2+4=10)

Write short notes on:

3 X 4 = 12 marks

2. Serum markers in acute myocardial infarction.
3. Complications of falciparum malaria
4. Target organ damage in hypertension

Write briefly on:

4 X 2 = 8 marks

5. Digitalis
6. Etiology and clinical presentation in leptospirosis
7. Fallots tetralogy
8. Cor pulmonale.

**PART – B (30 marks)**

9. Discuss the clinical features, laboratory investigations and management of Pyogenic meningitis. (3+3+4=10)

Write short notes on:

3 X 4 = 12 marks

10. Duchenne muscular dystrophy.
11. Treatment of multibacillary leprosy
12. Management of Status epilepticus

Write briefly on:

4 X 2 = 8 marks

13. Trigeminal neuralgia
14. Paranoid schizophrenia
15. Tropical pulmonary eosinophilia
16. Thiamine deficiency

## FINAL MBBS PART – II EXAMINATION

### PAEDIATRICS

Time: 2 hours

Max.Marks: 40

1. Describe five important nutritional causes of growth retardation. Describe the treatment of nutritional rickets. 10Marks

Write short notes on:

( 5 X 4 = 20 )

2. Life threatening complications of Acute Post Streptococcal glomerulonephritis.
3. Secondary Rheumatic Prophylaxis.
4. Classification of congenital cyanotic heart diseases.
5. Genetic basis of Down's Syndrome
6. Investigations for suspected neonatal hypothyroidism.

Write Brief answers on:

(5 X 2 = 10)

7. Four causes of delayed closure of fontanelle
8. Peripheral blood smear picture of Nutritional Anemias.
9. Treatment of scabies.
10. Side effects of steroid therapy.
11. Drug treatment of Hypertensive Emergencies.

**FINAL MBBS PART – II EXAMINATION**

**SURGERY – PAPER - I**

Time: 2 hours

Max.Marks: 40

**PART – A (30 marks)**

- 1.Enumerate the various blood products. Discuss the indications, complications and their treatment following blood transfusion. 10 marks

Write Short Notes on (3x4=12)

2. Hidradenitis Suppurativa
3. Thiersch Graft
4. Ludwig's Angina

Write Brief answers on (4x2=8)

5. Preauricular sinus
6. Epidermoid cyst
7. Cold abscess
8. Breslow's staging

**PART – B (Orthopaedics –30 marks)**

9. Classify fracture neck of femur. Write down the management of fracture neck of femur in an adult and its possible complication. 10 marks

Write short notes on: 3 X 4 =12

10. Volkman Ischaemic contracture
11. Brodies' abscess
12. Autonomic bladder

Write briefly on: 4 x 2=8

13. Achondroplasia
14. Mallet finger
15. Foot drop
16. Unicameral bone cyst



**FINAL MBBS PART – II EXAMINATION**

**SURGERY – PAPER - II**

Time: 2 hours

Max.Marks: 40

**PART – A (30 marks)**

1. Define goiter. How would you classify goiter. Describe the symptoms, signs, investigations and treatment of multinodular goiter. 10 marks

Write Short Notes on (3x4=12)

2. Hypertrophic pyloric stenosis
3. Fine Needle Aspiration Cytology
4. Pseudocyst of pancreas

Write Brief answers on (4x2=8)

5. Lymphatic drainage of stomach
6. Desmoid tumour
7. Buschke – Lowenstein tumour
8. Pantaloon hernia

**PART – B (Orthopaedics –30 marks)**

9. Discuss the classification, clinical features, staging and management of testicular tumours. 10 marks

Write short notes on: 3 X 4 =12

10. Barrett's esophagus
11. Mesenteric cyst
12. Solitary nodule thyroid.

Write briefly on: 4 x 2=8

13. Hesselbach's triangle
14. Extradural haemorrhage
15. Varicocoele
16. Porto-systemic anastomosis

FINAL MBBS PART – II EXAMINATIONS.  
**OBSTETRICS INCLUDING SOCIAL OBSTETRICS**

Time: 2 hours

Max.Marks: 40

PAPER-I

Answer all questions:

1. What are the symptoms, signs and how do you manage a case of Ruptured  
Ectopic Pregnancy? (2+3+5= 10)

Write Short Answers:

5 x 4=20

2. Missed abortion
3. Hydramnios
4. Gestational Diabetes.
5. Management of postpartum Haemorrhage
6. Outlet forceps.

Write Brief answers on

5x 2=10

7. Convelaire uterus
8. Macafae's Regime in placenta praevia.
9. Complications drugs caesarean section
10. Pritchard's Regime in eclampsia
11. Complications of twin pregnancy.

FINAL MBBS PART- II EXAMINATIONS.

**GYNAECOLOGY FAMILY WELFARE AND DEMOGRAPHY**

Time: 2 hours

Max.Marks: 40

PAPER-II

Answer all questions:

1. What are the causes of leucorrhoea? Describe the clinical features, diagnosis and management of Trichomonal Vaginitis. (1+3+3+4=10)

Write Short Answers:

5x4=20

2. Usages of progestogens in gynaecology
3. Menorrhagia
4. Chocolate Cyst of the Ovary
5. Dilatation and Curettage
6. Methods of medical termination of pregnancy in second trimester.

Write Short Answers:

5x4=20

7. Rectovaginal – Fistula
8. Dysmenorrhoea
9. Staging of Cancer Cervix
10. Cervical Biopsy
11. Cryptomenorrhoea

## BACHELOR OF MEDICINE & BACHELOR OF SURGERY (M.B.B.S.)

### SYLLABUS

A. 1 <sup>st</sup> PROFESSIONAL	Hours
1. Foundation course – Stage– I	
2. Community Medicine	60
3. Anatomy	650
4. Biochemistry	240
5. Physiology	480
<b>B. 2<sup>nd</sup> PROFESSIONAL</b>	
1. Foundation course – Stage– II	
2. Pathology	300
3. Microbiology	250
4. Pharmacology	300
5. Forensic Medicine	100
6. Community Medicine	200
<b>C. 3<sup>rd</sup> PROFESSIONAL PART-I</b>	
1. Otorhinolaryngology	70
2. Ophthalmology	100
3. Community Medicine	50
<b>D. 3<sup>rd</sup> PROFESSIONAL PART-II</b>	
1. General Medicine and allied subjects	400
(General Medicine 300Hrs. Pulmonary Medicine 20 Hrs., Psychiatry 20 Hrs. , Skin and STD 30 Hrs., Radiology 20 Hrs. & Dentistry 10 Hrs. )	
2. Pediatrics	100
3. General Surgery & Orthopedics and allied subjects	420
(General Surgery 300Hrs. Orthopeadics 100 Hrs., Anaesthesia Including emergency medicine 20 Hrs. )	
4. Obstetrics & Gynecology	300

**BACHELOR OF MEDICINE & BACHELOR OF SURGERY (M.B.B.S.)**

**SYLLABUS FOR 1<sup>st</sup> PROFESSIONAL**

- 1) FOUNDATION COURSE – STAGE– I**
- 2) COMMUNITY MEDICINE**
- 3) ANATOMY**
- 4) BIOCHEMISTRY**
- 5) PHYSIOLOGY**

## 1<sup>st</sup> PROFESSIONAL- SYLLABUS

### 1) FOUNDATION COURSE – STAGE– I

The main purpose of foundation course at this stage is to help the learners in adjusting to the new environment in a medical college and develop skills for learning, so as to cope up with a vast curriculum. Many students who pursued rote learning in secondary/higher secondary education find it difficult to cope up with new subjects. Besides students coming from diverse backgrounds in terms of culture and language barriers, should be helped to settle down properly. It is also necessary to sensitize students with interpersonal and communication skills, besides the role of information and communication technology (ICT)

The topics suggested for foundation course at this stage are:

1. Study Skills, learning Techniques, use of Computers and information retrieval including use of internet.
2. Management of time.
3. Behavioral skills, group dynamics.
4. Stress management and coping skills.
5. Introduction to ethics, professional etiquettes.
6. Psychosocial issues and introduction to health economics.

#### Teaching Learning Methods

The foundation course, at this stage, may be organized for a week involving faculty from anatomy, Physiology, Biochemistry, Community Medicine, Behavioral and Social Scientists and expert in library science and informatics.

#### The methods may include:

1. Structured interactive sessions
2. Case studies and simulated cases and triggers
3. Role play/Role Models
4. Video Clippings

#### Assessment

Assessment may be conducted in the form of programme evaluation and feedback from the participants at the end of the programme. It is strongly recommended that the concepts learned during the foundation course should be reinforced throughout the course and assessed in the final examination, in the respective discipline

## **1<sup>st</sup> PROFESSIONAL- SYLLABUS**

### **2) COMMUNITY MEDICINE**

Total hours for teaching and training in community Medicine are 60.

#### **I. Lectures / Demonstrations / Seminars / Group Discussions :(30 hours)**

The following topics to be covered:

- 1) Concept of community Medicine
- 2) National Health Policy and health for all as National Goal
- 3) Demography
- 4) Health Economics
- 5) Medical Sociology
- 6) Hospital Management
- 7) Behavior Science
- 8) Psychology

#### **II. Practical /Field visits :(30 hours)**

- 1) Visit to PHC for 1 day
- 2) Visit to Sub-center and Village – 1 day
- 3) Visit to U.H.C. and other Health Care Providers (ICDS) – 1 day
- 4) Visit to Hospitals - 1 day

#### **NOTE :**

- 1) The teaching and training in community medicine shall be arranged by the department of community medicine in consultation with pre- clinical departments at institutional level.
- 2) The attendance of the students in the community medicine shall be added to the attendance in subject of Anatomy, for sending the students for the examination.

### 3) HUMAN ANATOMY

#### (i) Goal :

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

#### (ii) Objectives:

##### A. Knowledge:

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

- a) Comprehend the normal disposition, clinically relevant interrelationships, functional and cross sectional anatomy of the various structures in the body;
- b) Identify 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) Comprehend the basic structure and connections of the central nervous system to analyse the integrative and regulative functions of the organs and systems. Locate the site of gross lesions according to the defects encountered;
- d) Demonstrate knowledge of the basic principles and sequential development of the organs and systems, recognise the critical stages of the development and the effects of common teratogens, genetic mutations and environmental hazards. Understand the developmental basis of the major variations and abnormalities.

##### B. Skills :

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

- a) Identify and locate all the structures of the body and mark the topography of the living anatomy;
- b) Identify the organs and tissues under the microscope;
- c) Understand the principles of karyotyping and identify the gross congenital anomalies;
- d) Understand principles of newer imaging techniques and interpretation of Computerised Tomography (CT) Scan, sonogram etc.
- e) Understand clinical basis of some common clinical procedures i.e. intramuscular and intravenous injection, lumbar puncture kidney biopsy etc



### **C. Integration:**

Integrated teaching of basis sciences with reference to clinical medicine.

An integrated teaching programs on Ethics and personality development has to be included to improve students discipline & Capabilities.

#### **Topics for integrated teaching :**

- a) Femoral Sheath – femoral Hernia
- b) Lymphatic drainage of Lower Limb
- c) Inguinal Hernia
- d) Ischio-rectal fossa
- e) Extra Hepatic biliary apparatus
- f) Porto-systemic Anastomoses
- g) Diameters of the pelvis and its applied Anatomy
- h) Supports of Uterus
- i) Thyroid Gland
- j) Mammary Gland
- k) Fascial Spaces of Hand
- l) Coronary Arteries
- m) Stomach: Histological structure & functions of Gastric glands, Mechanism of secretion, gastric function tests – Hyperchlorhydia, Achorhydia.
- n) Kidney: Structure of Nephron, functions of Nephron and Renal function tests.
- o) Liver: Structure of Liver, formation and functions of Bile and Liver function tests.
- p) Thyroid Gland – Structure; Synthesis and Metabolism of Thyroid Hormones and Thyroid function tests.
- q) Adrenal gland: related disorders, structure, synthesis of Adrenal, Medullary hormones and their functions.

#### **Note :-**

1. A minimum of Five topics each, covering 2 hours are to be taught in a year. The Vice- principal(Academic ) of the institution will be the co-ordenator for the integrated teaching programme.
2. Common topics suggested by Academic Senate (13 to 17), 2001 for integrated teaching in Biochemistry, Anatomy and Physiology:

**Total (650) 1/3 didactic lecturer**

**(iii) Syllabus of Anatomy**

Distribution of theory hours

No	Topics	Hours
1	Introduction	1
2	Descriptive Anatomy	1
3	General Anatomy	5
4	Embryology	42
	a) General Embryology (12)	
	b) Systemic Embryology (30)	
	I. Muscle, bone, skin, appendages and development of mammary gland	- 2
	II. Cardio-Vascular system including heart	- 6
	III. Lymphatic system	- 1
	IV. Brachial Arches and Pouches	- 5
	V. Gastro intestinal system and associated glands	- 6
	VI. Development of face, palate & teeth	- 3
	VII. Respiratory System	- 1
	VIII. Genito Urinary system	- 6
5	Histology	30
	c) General Histology (10)	
	d) Systemic Histology (20)	
6	Neuro Anatomy	20
7	Human Genetics	10
	a) Introduction.	
	b) Mitosis and Meiosis	
	c) Normal Chromosomal pattern	
	d) Mutation	
	e) Culture of Chromosomes (Karyotyping)	
	f) Abnormalities of Chromosomes (Numerical & structure)	
	g) Linkage	
	h) Blood groups	
		Total 109

**LECTURE DEMONSTRATIONS / GROUP DISCUSSIONS / TUTORIALS / SEMINARS**

	Osteology	Soft parts	Hours
1	Upper Extremity	10	20
2	Lower Extremity	10	20
3	Head & Neck	25	40
4	Abdomen & Pelvis	4	25
5	Thorax	5	15
6	A maximum of two seminars of two hours duration for each semester.		8
		Total	128

**IV) Practical should aim at familiarising student with Introduction:**

Gross Anatomy of the whole body with more stress on location, position, surface anatomy and important relations of the various organs and other structures. Each student has to dissect whole human body ignoring minor details, which are not important clinically, and stressing more on applied aspect.

**Distribution of Anatomy Practicals**

Dissection (Each practical class is of 2 hours duration 182X 2=364 )		
	No. of practical	Hours
1 Upper Extremity	25	50
2 Lower Extremity	25	50
3 Thorax	18	36
4 Head & Neck	45	90
5 Abdomen & Pelvis	44	88
6 Brain and spinal cord	25	50
Histology (Each practical class is of 2 hours duration 35 X 2 = 70)		
General Histology	12	24
Systemic Histology	23	46
Genetics		
Practicals in Genetics	3	6

**List of Histology Slides- General**

1 Squamous Epithelium	15	Bone -LS
2 Cuboidal Epithelium	16	Plain Muscles
3 Columnar Epithelium	17	Skeletal Muscles
4 Pseudo stratified Epithelium	18	Cardiac Muscles
5 Ciliated Columnar Epithelium	19	Lymph gland
6 Ureter (Compound Epithelium)	20	Thymus
7 Oesophagus (Compound Epithelium)	21	Tonsil
8 Skin (Compound Epithelium)	22	Spleen
9 areolar connective tissue	23	Artery-Medium size
10 Adipose tissue	24	Aorta
11 Hyaline Cartilage	25	Vein-inferior vena cava
12 White fibro cartilage	26	Neuron - Multipolar
13 Elastic Cartilage	27	Peripheral nerve
14 Bone -TS		

**List of Histology Slides - Systemic**

1 Trachea	13	Ileum
2 Lung	14	Colon- Large Intestine
3 Serous Salivary Gland	15	Vermiform Appendix
4 Mucous Salivary Gland	16	Liver
5 Mixed Salivary Gland	17	Pancreas
6 Tongue	18	Gall bladder
7 Tooth	19	Kidney
8 Esophagus	20	Ureter
9 Stomach - Fundus	21	Urinary bladder
10 Stomach - Pylorus	22	Ovary
11 Duodenum	23	Fallopian tube
12 Jejunum	24	Uterus

25	Placenta	33	Supra-renal Gland
26	Mammary gland	34	Cerebrum
27	Testis	35	Cerebellum
28	Epididymis	36	Spinal cord
29	Vas deference	37	Cornea
30	Prostate	38	Retina
31	Thyroid	39	Skin
32	Hypophysis cerebri		

#### Practicals in Genetics

(Karyotyping of normal male & female and some genetic disorders and photographs)

1	Male Karyo typing	5	Klinefelter's Syndrome 47 – XXY
2	Female Karyo typing	6	Super Female 47 – XXX
3	Down's Syndrome – 21 Trisomy	7	Sex-Chromatin (Barr Body)
4	Turner's Syndrome 45 – XO		

Demarcation of Syllabus for University Exam between Paper I & Paper II

#### **PAPER-I Portions :**

Upper Extremity  
 Head and Neck  
 Brain and Spinal cord  
 General Histology  
 General Embryology  
 Systemic Embryology,  
 concerned with Head & Neck and Brain.

#### **PAPER-II Portions :**

Lower Extremity  
 Thorax , Abdomen, Pelvis  
 Systemic Histology and Embryology  
 Concerned with Thorax,  
 Abdomen & Pelvis  
 Genetics  
 General Anatomy.

#### **Books Recommended:**

1. Text book of Anatomy by T.S. Ranganathan
2. Embryology  
 Langmann's Embryology  
 IB Sing Embryology  
 Reference Book – Embryology by A.K.Datta.
3. Histology  
 Difiories atlas of Histology,  
 Asian Edition - BY Victor P. Eresanchko.
4. Dissection Manuals  
 Cunningham's Dissection manuals I, II & III
5. Gross Anatomy text book by A.K. Datta (3 vols) and text book by inderbir singh (3 vols)
6. Neuro Anatomy  
 Clinical Neuro Anatomy  
 by Vishnam Singh,  
 I.B.Singh  
 Reference Book – A.K.Datta's Neuro Anatomy  
 Text book

#### **Reference books:**

1. Gray's Anatomy.
2. Embryology by Hamilton & Mossman.

# 1<sup>st</sup> PROFESSIONAL- SYLLABUS

## 4) BIOCHEMISTRY

Syllabus of Biochemistry including Molecular Biology

### (i) Goal :

The broad goal of the teaching of Biochemistry to undergraduate students 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 acquired, in solving clinical problems.

### (ii) Objectives:

#### A. Knowledge:

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

- a) describe the molecular and functional organization of a cell and list its subcellular components;
- b) delineate structure, function and inter-relationship of biomolecules and consequences of deviation from normal;
- c) summarize the fundamental aspects of enzymology and clinical application wherein regulation of enzymatic activity is altered;
- d) describe digestion and assimilation of nutrients and consequences of malnutrition;
- e) integrate the various aspects of metabolism and their regulatory pathways;
- f) explain the biochemical basis of inherited disorders with their associate sequelae;
- g) describe mechanisms involved in maintenance of body fluid and pH homeostasis;
- h) outline the molecular mechanisms of gene expression and regulation, the principles of genetic engineering and their application of medicine;
- i) summarize molecular concept of body defences and their application in medicine;
- j) outline the biochemical basis of environmental health hazards, biochemical basis of cancer and carcinogenesis;
- k) familiarize with the principles of various conventional and specialized laboratory investigations and instrumentation; analysis and interpretation of a given data;
- l) suggest experiments to support theoretical concepts and clinical diagnosis;

#### B. SKILLS:

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

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

#### C. INTEGRATION:

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

**(iii) Syllabus Of Biochemistry****Total hours 240****Theory:**

Sl. No.	Name of the Unit	No. of Hours
1.	Introduction to biochemistry	1
2.	Cell- Molecular & functional organisation	2
3.	Chemistry of Carbohydrates: a)Classification of Carbohydrates: b)Structural and functional aspects of Mono-saccharides, Disaccharides, Homo and Hetero Polysaccharides	5
4.	Chemistry of Lipids: a)Classification b) Structural and functional aspects of simple, compound and Derived lipids including saturated, unsaturated and Essential Fatty acids.	4
5.	Chemistry of Proteins: a)Classification & functional aspects. b)Electrophoretic separation of proteins c)Classification and Properties of amino acids d)Separation of Amino acids by Chromatography e)Outlines of elucidation of Protein Structure. f) Biologically active Peptides	8
6.	Nucleic Acids: a)Bases, nucleotides, Nucleic acids,(structural and functional aspects) b) synthetic nucleotides	4
7.	Enzymes: a)Classification b)Mechanism of Enzyme action c)Enzyme kinetics d)Factors affecting enzyme activity e)Isoenzymes f) Coenzymes g)Enzyme Inhibition h)Cellular & Plasma enzymes i) Diagnostic importance of Enzymes j) Regulation of Enzyme activity	6
8.	Biological Oxidation: a)Bioenergetics b)Exergonic & Endergonic reaction c)Oxidases d)Electron Transport Chain e)Oxidative Phosphorylation f) High energy Compounds g) Low Energy Compounds	4
9.	Vitamins: a)Classification b)Structure, Sources, Daily requirement, Physiological role and deficiency disorders of Fat soluble vitamins – A,D,E,& K and water soluble vitamins-B. complex group and Vit. C.	10

10. Carbohydrate Metabolism:	10
a) Digestion	
b) Absorption	
c) Metabolism of Glucose	
i) Entry of Glucose into Cells	
ii) Glycolysis	
iii) Rapaport – Leubering Cycle	
iv) Pyruvate Dehydrogenase Complex	
v) Citric Acid Cycle	
vi) Gluconeogenesis	
vii) Glycogenesis	
viii) Glycogenolysis	
ix) Glycogen Storage Diseases	
x) Hexose Mono Phosphate Shunt Pathway	
xi) Uronic Acid Pathway	
xii) Metabolism of Galactose & Fructose	
xiii) Blood Glucose Homeostasis, Glucose Tolerance Test, Diabetes Mellitus and Hypoglycemia	
11. Metabolism of Proteins:	10
a) Protein Digestion & Absorption	
b) General Pathways of metabolism including	
c) Transamination & Deamination and Ammonia transport	
d) Urea Cycle	
e) Metabolism of individual amino acids & Molecular disorders.	
f) Creatine & Creatinine	
12. Metabolism of Nucleic Acids:	9
a) Outlines of Metabolism of Purines & Pyrimidines & Metabolic disorders	
b) DNA replication and transcription	
c) Protein Biosynthesis (Translation)	
d) Regulation of Gene Expression	
e) Outlines of Genetic Engineering	
13. Lipid Metabolism :	9
a) Digestion & Absorption	
b) Plasma Lipids	
c) Mobilisation of Fats from adipose tissue	
d) Oxidation of Fatty acids	
e) Biosynthesis of Fatty acids	
f) Metabolism of Phospholipids and triacylglycerols	
g) Metabolism of Ketone bodies	
h) Metabolism of Cholesterol	
i) Lipo Proteins – Metabolism and Disorders	
j) Lipotropic factors	
k) Chemistry and metabolism of Prostaglandins.	
14 Hemoglobin structure, Functions and Metabolism, Porphyrins and Hemoglobinopathies <b>Catabolism of heme</b>	4
15 Integration of Metabolism	2
Metabolic integration; liver, adipose tissue, Skeletal Muscle and Brain	

16. Mineral Metabolism	4
Sodium, Potassium, Calcium, Phosphorus, Magnesium, Manganese, Sulphur, Iron, Copper, Zinc, Iodine, Cobalt, Fluorine, Selenium and chromium.	
17. Nutrition :	4
a) Calorific Value	
b) Specific Dynamic Action	
c) Energy Requirements	
d) Balance Diet, Nitrogen balance, Dietary fiber	
e) Foodfads	
f) Nutritional disorders kwashiorkor and marasmus	
18. Detoxification:	2
19. Hormones :	5
i) General Principles of Hormonal action	
ii) Outline of Hormone Structure	
iii) Mechanism of Action and metabolic roles of	
a) Pituitary	
b) Pancreas	
c) Adrenal	
d) Gonadal	
e) Thyroid	
20. Functional Tests :	4
a) Renal	
b) Hepatic	
c) Pancreatic	
d) Gastric	
21. Fluid- Electrolyte and Acid - Base Balance	5
22. Plasma Proteins & Immunoglobulins	3
23. Biological Membrane	2
24. Carcinogenesis Malignancy and cell cycle	2

Division of syllabus for university exam

**PAPER-I**

1. Enzymes
2. Biological Oxidation
3. Digestion and absorption
4. Detoxification
5. Carbohydrate Chemistry and Metabolism
6. Vitamins
7. Nutrition
8. Lipid Chemistry and Metabolism
9. Hemoglobin Structure, functions & metabolism, Porphyrias and Hemoglobinopathies

**PAPER-II**

1. Protein Chemistry and Metabolism
2. Mineral metabolism
3. Nucleic acid chemistry and metabolism
4. Genetics
5. Hormones
6. Functional tests
7. Plasma Proteins and Immunoglobulins
8. Biological membranes
9. Carcinogens
10. Acid-base balance and water – Electrolyte balance



**PRACTICALS IN BIOCHEMISTRY:****40 Hrs.**

## A. Qualitative :

	No.of Practicals
1.Reactions of Carbohydrates	
a) Glucose & Fructose	1
b) lactose, Maltose and sucrose	1
c) Identification of Carbohydrates	1
2.Reactions of Proteins :	
a) Precipitation reactions	1
b) General colour reactions of Proteins and	
c) Albumin and above a&b	1
d) Casein	1
e) Gelatin and peptone	1
f) Identification	2
3.Normal Constituents of Urine	2
4.Abnormal Constituents of Urine	2
Identification of Abnormal Constituents of urine	2

## B. Quantitative :

1. Blood glucose	1
2. Blood Urea	1
3. S. Proteins	1
4. Urinary Creatinine	1
5. CSF Analysis	1
a) Proteins (I) Sulphosalicylic acid test (ii) Pandy's test	
b) Glucose	
c) Chlorides	

**10 Hrs.**

## C. Demonstrations :

1. Chromatography
2. Electrophoresis
3. GTT
4. S. Uric acid estimation
5. S. Bilirubin estimation

**Revision and conduct of Tests = 5 Practicals      20 Hrs.**  
**Tutorials and group discussions = 10 Practicals      50 Hrs.**

NOTE: Each Practical Carries two hours.

#### RECOMMENDED BOOKS :

1. Review of Biochemistry \_ Harper
2. Biochemistry by Debajyoti das
3. Text book of Biochemistry for Medical Students by D.M. Vasudevan & Sreekumari
4. Text book of Medical Biochemistry by M.N.Chatterjea and Rana shinde
5. **Medical Biochemistry by Dinesh Puri**

#### REFERENCE BOOKS

- |                                       |           |
|---------------------------------------|-----------|
| 1. Biochemistry                       | Lehninger |
| 2. Biochemistry                       | Stryer    |
| 3. Text Book of Clinical Biochemistry | Tietz     |
| 4. Clinical Biochemistry              | Varley    |

## 1<sup>st</sup> PROFESSIONAL- SYLLABUS

### (5) HUMAN PHYSIOLOGY INCLUDING BIO-PHYSICS

#### (i) Goal :

The broad goal of teaching Physiology to undergraduate students aims at providing the student a comprehensive knowledge of the normal functions of the organ systems of the body to facilitate an understanding of the Physiological basis of health and disease.

#### (ii) Objectives:

##### (a) KNOWLEDGE:

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

1. Explain the normal functioning of all the organ systems and their interactions for well coordinated total body function.
2. Assess the relative contribution of each organ system to the maintenance of the milieu interior
3. Elucidate the Physiological aspects of normal growth and development
4. Describe the Physiological reasons and adaptations to environmental stresses.
5. List the Physiological principles underlying pathogenesis and treatment of disease.

##### (b) SKILLS:

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

1. Conduct experiments designed for study of Physiological phenomena;
2. Interpret experimental / investigative data
3. Distinguish between normal and abnormal data derived as a result of tests which he/she has performed and observed in the laboratory.

##### (c) INTEGRATION:

At the end of the integrated teaching the student shall acquire an integrated knowledge of organ structure and function and its regulatory mechanisms.

- 1) Source and functions of Reticulo-endothelial system;
- 2) Structure and sequence of events at Neuro-muscular junctions, Neuro-muscular blocking drugs and clinical disorders pertaining to Neuro-muscular junctions;
- 3) Structure of Gastric glands, composition and functions of gastric juice. Regulation of gastric secretion, Cytoprotection and peptic ulcer;
- 4) Gastro-intestinal hormones – Source of production, structure and functions;
- 5) Blood pressure – Structure of Blood Vessels – Neural regulation, Hormonal regulation;
- 6) Anatomical location of Respiratory centers – Neural & chemical regulation of respiration;

- 7) Microcirculation-Structure – Mechanism of filtration and regulation of Microcirculation;
- 8) Counter-current Multiplier and exchange system – functions – clinical importance;
- 9) Thyroid gland – structure, synthesis – Metabolism of Thyroid hormones – Actions of Thyroid hormones – Disorders of Thyroid glands;
- 10) Pituitary gland – histological structure – Hormones of Anterior pituitary;
- 11) Ovary – Structure, endocrinal regulation – Structure and mechanism of female sex hormones and contraception;
- 12) Histology of cerebral cortex, Neural circuits and their importance;
- 13) Histology of Retina – Synthesis of Photopigments – Light and dark adaptation – Central pathway and its lessons.

### BIOPHYSICS

#### (i) GOAL AND OBJECTIVES:

The broad goal of teaching Bio physics to undergraduate students is that they should understand basic physical principles involved in the functioning of body organs in normal and diseased conditions.

Total time for teaching Biophysics	- 5 hours
Out of which :	
a. Didactic lectures	- 3 hours
b. Tutorial/group discussion	- 1 hour
c. Practical	- 1 hour

#### (ii) Topic distribution :

- a. Didactic lectures:
  - (i) Physical principles of transport across cell membranes and across capillary wall.
  - (ii) Biopotentials
  - (iii) Physical principles governing flow of blood in heart and blood vessels.  
Also physical principles governing flow of air in air passages.
- b. Tutorial/group discussion: On the topics covered in didactic lectures.
- c. Practicals:
 

Demonstration of:

  - (i) Bio potential on oscilloscope
  - (ii) Electro Encephalogram (E.E.G)
  - (iii) Electro Myelogram (E.M.G)
  - (iv) Electro Cardiogram (E.C.G)

#### iii) Theory Syllabus ( Physiology) :

Sl.No.	Name of the Unit	No.of Hours
1.	General Physiology	6
2.	Cell Physiology Muscle & Nerves	12
3.	Blood, Body fluids & RES	18
4.	Cardiovascular System	30
5.	Respiratory & Environmental Physiology	18
		<b>Total 480 Hrs.</b>

6.	Digestive System	18
7.	Excretion & Skin	18
8.	Endocrines & Reproductive System	30
9.	Central Nervous System	30
10.	Autonomic Nervous System	3
11.	Special Senses	18
12.	Bio Physics	4
Total No. of Hours including Biophysics		<b>210</b>

**Division of syllabus paperwise:**

**PAPER I**

Cell, Blood, Biophysics, CVS, Respiration, Digestion, Excretion, Regulation of body temperature, Body fluids and RES.

**PAPER II**

Endocrines, reproduction, Muscle and Nerve, CNS, ANS and Special senses.

iv) Practicals in Physiology:

Sl.No.	Name of the Unit	No. of practicals
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**a. Human Practicals:**

1.	Introduction – Use of Microscope and Laboratory Protocol	1
2.	R.B.C.Count	1
3.	Total Leucocyte Count	1
4.	Bleeding Time & Clotting Time	1
5.	Blood Groups	1
6.	E.S.R.	1
7.	Estimation of Hemoglobin	1
8.	Hematological Indices	1
9.	Recording of Pulse & Blood Pressure	1
10.	Effect of Posture & Exercise on Blood Pressure	1
11.	Lung Function Tests – Spirometry & PEF	1
12.	Clinical Examination of Cardiovascular System	1
13.	Clinical Examination of Respiratory System	1
14.	Clinical Examination of Sensory Nervous System	1
15.	Clinical Examination of Motor Nervous System	1
16.	Clinical Examination of Cranial Nerve Functions	1
17.	Reflexes	1
18.	Tests for Hearing-Rinne's & Weber's Tests	1
19.	Acuity of vision & Tests for colour vision	1
20.	Platelet Count	1
21.	Reticulocyte Count	1

**b. Amphibian practical demonstrations & Interpretation of Graphs & Charts**

1.	Recording of simple Muscle Twitch	1
2.	Effect of Two successive stimuli of Muscle contraction	1
3.	Effect of Fatigue on Muscle-Nerve preparation	1
4.	Effect of Increasing strength of stimuli on Muscle contraction	1

5.	Genesis of Tetanus	1
6.	Effect of Temperature variation of Muscle contraction	1
7.	Effect of After load and Free load on Muscle twitch	1
8.	Determination of velocity of Nerve conduction	1
9.	Recording of normal Cardiogram	1
10.	Effect of Temperature variation on Heart beat	1
11.	Refraction period on beating Heart	1
12.	Properties of Cardiac Muscle-Stannius Legature, Summation, All-or-None Law, Treppe	1
13.	Effect of Vagosympathetic Stimulation on Frog's Heart	1
14.	Effect of Ions & Drugs on perfused frog's heart	1

**c. General Demonstrations**

1.	E.C.G.	1
2.	Pregnancy test	1
3.	E.M.G.	1
4.	Perimetry	1
5.	Ophthalmoscope	1
6.	E.E.G.	1
7.	Mosso's ergography	1
8.	Bicycle ergography	1
9.	Treadmill	1
10.	Pulmonary function tests	1
11.	Applied Physiology 30 x 2 = 60	30
12.	Tutorial and group discussions 60 x 2 = 120	60

Total no. of hours for practicals : 135 x 2 = **270**

**Recommended Text Books.**

- |    |                                   |  |
|----|-----------------------------------|--|
| 1. | Text book of Physiology           | – Dr.A.K.Jain II Vol.III Edn. Avichal Pub. |
| 2. | Concise Med. Physiology           | – Chaudhari                                |
| 3. | Human Physiology                  | – Sharada III Edn. Subramanyam, H.D.singh  |
| 4. | Understanding physiology III Edn. | – Bijilani                                 |

**Practical Books:**

- |    |                                   |                  |
|----|-----------------------------------|------------------|
| 1. | Practical Physiology              | – C.L.Ghai       |
| 2. | Text book of practical physiology | – Dr.A.K.Jain.   |
| 3. | A manual of practical Physiology  | – Pravathi Paul. |

**Reference books:**

- |    |                                       |   |
|----|---------------------------------------|---|
| 1. | Medical Physiology                    | – Guyton + Hall 10 <sup>th</sup> edn.   |
| 2. | Review of Medical Physiology          | – A.F.Ganong – 21 <sup>st</sup> Edn.    |
| 3. | Anatomy & Physiology                  | – Tora – Tora                           |
| 4. | Physiologic Basis of Medical Practice | – Best & Taylor – 10 <sup>th</sup> Edn. |

**BACHELOR OF MEDICINE & BACHELOR OF SURGERY (M.B.B.S.)**

**SYLLABUS FOR 2<sup>nd</sup> PROFESSIONAL**

- 1) FOUNDATION COURSE STAGE – II**
- 2) PATHOLOGY**
- 3) MICROBIOLOGY**
- 4) PHARMACOLOGY**
- 5) FORENSIC MEDICINE**

## SYLLABUS FOR 2<sup>nd</sup> PROFESSIONAL

### 1) FOUNDATION COURSE STAGE – II

At this stage, the learners come into clinical contact for the first time. At the same time they need to pursue studies in the para clinical and clinical disciplines. The purpose of the foundation course, at this stage, should be to sensitize the learners to the basic principles of the following in an ethical manner.

The topics suggested are:

1. Art and science of history taking
2. Art and science of general physical examination.
3. Communication and behavioral skills.
4. Professional etiquettes and ethics.
5. Professionalism and ethical issues to be reinforced.
6. Prescription writing.
7. Sensitization to rational use of drugs, laboratory practice.

**The teaching learning methods are:**

1. Interactive lectures
2. Demonstration, Triggers
3. Case vignettes
4. Role play and role modeling

The course, at this stage, should involve Medicine as a lead department with support from other departments. A behavioral scientist, faculty from Community Medicine and representatives from other departments should be associated.

### **Assessment**

Assessment should be conducted in the form of programme evaluation and feedback at the end of course. As indicated earlier, all aspects covered in this foundation course, should be duly assessed. Due weightage should be given for assessing all knowledge and skills in the final assessment in their respective discipline.



## **2) PATHOLOGY:**

### **(i) GOAL:**

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

### **(ii) OBJECTIVES:**

#### **(a) KNOWLEDGE:**

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

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

#### **(b) SKILLS:**

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

- (1) Describe the rationale and principles of technical procedures of the diagnostic laboratory tests and interpretation of the results.
- (2) Perform the simple bed-side tests on blood, urine and other biological fluid sample.
- (3) Draw a rational scheme of investigations aimed at diagnosing and managing the cases of common disorders;
- (4) Understand biochemical/physiological disturbances that occur as a result of disease in collaboration with pre-clinical department.

#### **(c) INTEGRATION:**

At the end of training he/she shall be able to integrate the causes of disease and relationship of different ethological factors (social, economic and environmental) that contribute to the natural history of diseases most prevalent in India.

## PATHOLOGY SYLLABUS

### i) Theory

Sl. No.	Name of the Unit	No. of Hours
GENERAL PATHOLOGY:		
1.	Cellular injury & Cellular death	3
2.	Cellular growth & differentiation normal regulation and adaptation	3
3.	Inflammation & Repair	5
4.	Haemodynamic disorders, Thrombosis & shock	5
5.	Genetic Disorders: Sex Chromatin, Turner's, Klinefelter's, Down's	3
6.	Diseases of Immunity including: a) S. L. E. b) Amyloidosis	4
7.	Neoplasia	6
8.	Infectious diseases a) Tuberculosis b) Leprosy – Integrated teaching c) Syphilis d) Typhoid e) Amoebiasis f) Rhino Sporidiosis g) Madura Micosis h) Aids – Integrated teaching	5
9.	Vitamins and Nutritional Disorders	
HAEMOTOLOGY:		
1.	Anemias	3
2.	Bleeding disorders	2
3.	Leukemias	2
4.	Plasma cell disorders	1
5.	Lymhnodes and spleen	3
SYSTEMIC PATHOLOGY:		
DISORDERS OF THE BLOOD VESSELS		4
a) Atherosclerosis b) Aneurysms C) Tumors d) Hypertension – Integrated teaching		
CVS		4
1. Pericardial diseases		
2. Ischaemic heart diseases		
3. Rheumatic heart disease – Integrated teaching		
4. Infective endocarditi		
5. Myocardial diseases		
6. Congenital heart diseases		

RESPIRATORY DISEASES	7
1. COPD	
2. Pulmonary infections and Lung abscess	
3. Pneumoconiosis	
4. ARDS (Adult Respiratory Distress Syndrome)	
5. Tumors	
6. <u>Diseases</u> of the Pleura	
DISEASES OF THE G.I.T	11
1. Salivary Gland diseases	
a) Tumors b) Inflammatory conditions	
2. Disease of the oral cavity and Esophagus	
3. Stomach	
a) Gastritis b) Peptic Ulcers – Integrated teaching	
c) Tumors integrated teaching	
4. Intestines	
a) I.B.D b) Mal absorption syndromes c) Tumors	
DISEASES OF THE LIVER AND BILIARY TRACT	5
1. Cirrhosis	
2. Hepatitis – Integrated teaching	
3. Tumors of Liver	
4. Tumors of Gall bladder	
5. Inflammatory diseases of Gall bladder	
6. Gall stones	
DISEASES OF PANCREAS	3
1. Pancreatitis 2. Tumors	
3. Diabetes Mellitus – Integrated teaching	
KIDNEY & LOWER UNIVARY TRACT	7
1. Cystic conditions of Kidney	
2. Glomerular diseases	
3. Tubular diseases	
4. Nephrotic Syndrome – Integrated teaching	
5. Pyelonephritis	
6. Renal stones	
7. Tumors of the Kidney	
8. Inflammatory conditions and tumors of the bladder	
MALE GENITAL TRACT	3
Inflammatory conditions & Neoplastic lesions involving Penis, Testis & Prostate	
FEMALE GENITAL TRACT	5
1. Cervicitis	
2. Carcinoma cervix – Integrated teaching	
3. Dysfunctional uterine bleeding	
4. Ovarian tumors	
5. Trophoblastic tumors	

DISEASES OF THE BREAST	3
Inflammatory conditions & Neoplasms	
ENDOCRINE DISORDERS	6
1. Thyroid disorder	
a) Hyper Thyroid b) Thyroiditis c) Goiters d) Tumors	
2. Para-thyroid disorder	
3. Pituitary gland disorders	
4. Adrenal glands disorders	
a) Disorders of hypertension b) Tumors and infections	
DISORDERS OF THE SKIN	1
DISORDERS OF THE BONES, JOINTS & MUSCLES	4
DISORDERS OF THE CENTRAL & PERIPHERAL NERVOUS SYSTEM	
a) Inflammatory b) neoplastic lesions	5

**ii) TOPICS FOR INTEGRATED TEACHING:**

1. Hypertention
2. Myocardial infarction
3. Peptic Ulcer
4. Diabetic mellitus
5. Nephrotic syndrome
6. Carcinoma cervix
7. Carcinoma stomach
8. Leprosy
9. Hepatitis
10. AIDS

**iii) DIVISION OF SYLLABUS PAPERWISE:**

PAPER I : General Pathology including Haematology  
PAPER II : Systemic Pathology.

**BASIC GUIDELINES FOR PATHOLOGY PRACTICALS, GROUP DISCUSSIONS**  
**INTEGRATED TEACHING, INTERNAL ASSESSMENT etc.,**

Total Hours : 200

**HAEMATOLOGY**

Topics	No. of Hours
1. Estimation of HB:	
a) Demonstration	1
b) Conduction of Practicals with Basic standard questionnaire & model disease charts for interpretation	1
2. RBC & WBC counts:	
a) Demonstration	1
b) Conduction of Practicals with Basic standard questionnaire & model disease charts for interpretation	1
3. Hematocrit & ESR:	
a) Demonstration	1
b) Basic standard questionnaire & model disease charts for Interpretation	1
4. Peripheral smear:	
a) Techniques of smear making & staining with demonstration	1
b) Identification of cells - demonstration	1
c) Model disease charts for interpretation	1
d) Practicals:	
i) Smears of Microcytic Hypochromic & Macrocytic Anaemial & Haemolytic Anaemias	1
ii) Smears of CLL	1
Smears of CML	1
Smears of Acute Irukemia: AML or ALL	1
iii) Eosinophilia	1
All the above with basic standard Questionnaire	
5. Bleeding Time, Clotting Time & Platelet Demonstration	1
6. Reticulocyte count Demonstration with basic standard Questionnaire	1
7. Bone marrow Examination	
a) Methods of collection and demonstration	1
b) Study of normal marrow	1
c) Study of 2 abnormal bone marrows	1
8. Blood groups & related things	1

**EXAMINATION OF URINE**

1. Physical characters & different samples with pH & Sp gravity Demonstration	1
2. Chemistry of Urine with Albumin, Blood, Sugar, Ketone bodies, Bilesalts & pigments Demonstration with discussion about errors in interpretation	1
3. Practical Tests for students:	
a) Albumin + Blood Physical properties & Clinical correlation	1
b) Sugar + Ketone bodies Physical properties & Clinical correlation	1
a & b with case charts for interpretation	

- |  |   |
|--|---|
| 4. Microscopy:   |   |
| a) Casts, crystals, RBC, Puscells Demonstration  | 1 |
| b) Case charts for interpretation  | 1 |
| 5. Pregnancy Test: Demonstration, discussion of normal & Molar pregnancies & Choriocarcinoma | 1 |

**EXAMINATION OF BODY FLUIDS**

- |   |   |
|---|---|
| 1. Demonstration of CSF, Plueral fluid, Ascitic fluid & Sputum – Normal Inflammation and malignancy | 1 |
| 2. Exfoliative Cytology :   |   |
| a) Techniques   | 1 |
| b) Demonstration of PAP, H & E of Cervical smears and Bronchial Wash                                | 1 |
| c) 3 disease samples with discussion & Clinical correlation   | 1 |
| 3. FNAC   |   |
| a) Techniques Demonstration   | 1 |
| b) inflammatory & Neoplastic cases for discussion & Interpretation                                  | 1 |
| 4. Sex Chromatin demonstration- Buccal smear interpretation   |   |

**EXAMINATION OF AUTOPSY**

- |   |   |
|---|---|
| Techniques of Autopsy and Autopsy demonstration & recording of 4 diseases | 4 |
|---|---|

**INSTRUMENTS**

**3**

1. RBC & WBC pipettes & diluting fluids
2. Neubauer chamber & Others
3. PCV Tube
4. ESR Tube
5. Hb Meter
6. Urino meter
7. Esbach's albumino meter
8. L.P. Needle
9. Bone marrow aspiration needles (Salah and Klima)
10. Cuvette of an autoanalyser

**GROSSING OF SPECIMENS**

- |  |         |
|--|---------|
| 5 Practical demonstration classes for 5 groups ( min 30 specimens) | 5 hours |
|--|---------|

**INTEGRATE TEACHING**

- |  |          |
|--|----------|
| Topics as given by the University in the regulations of MBBS degree course | - 20 hrs |
|--|----------|

## HISTOPATHOLOGY

Total Hours : 44

- |  |          |
|--|----------|
| 1. Histopathology Lab – Practical demonstration of steps involved  | 1        |
| 2. Staining Techniques, H&E Special stains :<br>PAS, Vangieson, Sudan (Fat), Iron  | 2        |
| 3. Preparation of Requisition for Pathology Lab<br>Points to remember - fixatives<br>Clinical details Specific points regarding the lesion | 1        |
| 4. Slides : Any 44 of the following with at least 16 from General Pathology  | 40 hours |

### General Pathology slides

- |  |                                     |
|--|-------------------------------------|
| 1) Cloudy swelling                       | 11) Actinomycosis                   |
| 2) Fatty change                          | 12) Mycetoma                        |
| 3) Hyaline change                        | 13) Filarial Lymph node             |
| 4) Coagulation and caseous Necrosis      | 14) Leprosy                         |
| 5) Cells of Acute & Chronic inflammation | 15) Squamous papilloma, adenoma     |
| 6) Granulation tissue                    | 16) Lipoma, fibroma                 |
| 7) CVC Lung & Liver                      | 17) Capillary & Cavernous angioma   |
| 8) Thrombus                              | 18) Cellular features of malignancy |
| 9) Amyloidosis (Spleen)                  | 19) Squamous cell Ca. & adeno Ca.   |
| 10) Rhinosporidiosis                     | 20) Fibrosarcoma                    |

### Systemic Pathology slides

1. Blood Vessels & Heart :
  - a. Atherosclerosis
  - b. Monckeberg's arteriosclerosis
  - c. Hyaline arteriosclerosis
  - d. TAO
  - e. Aschoff's body
  - f. Myocardial infarction
2. Respiratory system :
  - a. Emphysema
  - b. Bronchiectasis
  - c. Lobar & Bronchopneumonias
  - d. Pulmonary tuberculosis
  - e. Carcinoma Lung
3. Kidney
  - a. Chronic Glomerulonephritis
  - b. Chronic Pyelonephritis
  - c. Benign Nephrosclerosis
  - d. Wilm's Tumor
  - e. Renal Cell carcinoma
4. Breast.
  - a. Fibroadenoma
  - b. Duct cell carcinoma
5. Thyroid
  - a. Hashimoto's Thyroiditis
  - b. Grave's disease
  - c. Follicular adenoma
  - d. Papillary Carcinoma
6. Lymphonodes
  - a. Hodgkin's lymphoma
  - b. Non-Hodgkin's Lymphoma
  - c. TB Lymph node
7. Salivary glands:  
Pleomorphic adenoma
8. Liver
  - a. Cirrhosis
  - b. Hepatoma
9. GIT
  - a. Chronic Gastric ulcer
  - b. Carcinoma stomach & colon
  - c. Carcinoid appendix
10. Testis & FGT
  - a. Seminoma
  - b. Endometrium Proliferative Secretory
  - c. Leiomyoma
  - d. Dermoid Cyst
  - e. Vesicular mole
11. Skin
  - a. Basal cell carcinoma
  - b. Melanoma
12. Musculo Skeletal
  - a. Osteomyelitis
  - b. Osteo sarcoma
  - c. Chondro sarcoma
  - d. Giant cell tumor
  - e. Ewing's sarcoma

### GROUP DISCUSSIONS PRACTICAL - ORIENTED & THEORY- ORIENTED

-78 Hours

Topics: (with standard basic questionnaire) (14+64) 7 x 2 : 14

- a) Collection of blood, methods & anticoagulants
- b) Anaemias
- c) Haemorrhagic disorders
- d) Leukemias & Lymphomas
- e) Blood groups & Transfusion reactions
- f) Urine changes \_ Physical & Chemical Characters with clinical correlation  
Discussion of Jaundice



- g) Body fluids sampling ( collection ) preservation Techniques , variability in disease
- h) Topics of certain common disorders in general and systemic pathology in the form of questionnaire and Group discussion - 32 topics excluding topics covered in integrated teaching. - 64 Hours
- i) HIV

Each topic not more than 2 Hours.

**INTERNAL ASSESSMENT** - 12 hours

- a. Three(3) Theory examinations of 2 hours each
- b. One (1) Practical examination in divided batches together 6 hours.

**NUMBER OF CLASSES (HOURS)**

1.	Theory	:	113
2.	Practicals (Haematology-20, Urine-7, Fluids-6,Histopathology-44)	:	77
3.	Instruments	:	3
4.	Grossing of specimens	:	5
5.	Group discussion (Practical & Theory Oriented topics)	:	78
6.	Autopsy	:	4
7.	Integrated Teaching	:	20
	TOTAL	:	<b><u>300 Hours</u></b>

**BOOKS RECOMMENDED :**

1. Robbins Text Book of Pathology. \*
2. Robbins Pathologic Basis of Disease by cotran, Kumar of Robbins— 6<sup>th</sup> / latest
3. Muiri's text book of Pathology edited by J.R. Anderson
4. Text book of Pathology edited by Nagalothinath, K.P. Deodher & V.H. Talib
5. Text book of Pathology by Harsh Mohan 3<sup>rd</sup> edition / latested.
6. A Text book of Pathology by N.c. Dey & T.K. Dey

**REFERENCE BOOKS :**

1. Boyd Text Book of Pathology – 2 vols. \*
2. Anderson's Pathology Vol I & II 10th ed
3. Oxford text book of Pathology Vol I Vol II a 7 lib

## SYLLABUS FOR 2<sup>nd</sup> PROFESSIONAL

### **(3) MICROBIOLOGY :**

#### **(i) Goal :**

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

#### **(ii) Objectives :**

##### **(a) KNOWLEDGE :**

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

- 1) State the infective micro-organisms of the human body and describe the host parasite relationship;
- 2) List pathogenic micro-organisms (bacteria, viruses, parasites, fungi) and describe the pathogenesis of the diseases produced by them;
- 3) State indicate the modes of transmission of pathogenic and opportunistic organisms and their sources including insect vectors responsible for transmission of infection;
- 4) Describe the mechanisms of immunity to infections;
- 5) Acquire knowledge on suitable antimicrobial agents for treatment of infections and scope of immunotherapy and different vaccines available for prevention of communicable diseases;
- 6) Apply methods of disinfections and sterilization to control and prevent hospital and community acquired infections.
- 7) Recommend laboratory investigations regarding bacteriological examination of food, water, milk and air.

##### **(b) SKILLS :**

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

- (1) plan and interpret laboratory investigation for the diagnosis of infectious diseases and to correlate the clinical manifestations with the etiological agent;
- (2) identify the common infectious agents with the help of laboratory procedures and use antimicrobial sensitivity tests to select suitable antimicrobial agents ;
- (3) perform commonly employed bed-side tests for detection of infectious agents such as blood film for malaria, filaria, Gram staining and Acid Fast Bacilli(AFB) staining and stool sample for ova cyst etc.,
- (4) use the correct method of collection, storage and transport of clinical material for microbiological investigations.

(C) INTEGRATION:

The student shall understand infectious diseases of national importance in relation to the clinical, therapeutic and preventive aspects.

2) **SYLLABUS OF MICROBIOLOGY** :

Sl. No.	Name of the unit (Lectures)	No.of.Hours
1.	General Bacteriology	8
2.	Immunology	20
3.	Parasitology	20
4.	Systemic Bacteriology	25
5.	General Virology AND Systemic Virology	15
6.	Mycology	6
	Total No. of Hours	<b><u>94</u></b>

**TEACHING HOURS CAN BE DIVIDED AS FOLLOWS :**

1.	Lectures	94
2.	Practicals	50
3.	Demonstrations	50
4.	Symposia & Seminars	40
5.	Internal assessment	16
	Grand Total	<b><u>250</u></b>

**NOTE : THE DETAILED SYLLABUS IS VIDE ANNEXURE (A)**

2) **Syllabus of Microbiology** :

i) BROAD AREAS OF STUDY

- a. General bacteriology : Those aspects of general bacteriology which help the student to understand the bacterial pathogenesis, diagnosis, treatment, prevention and control' should be 'must know' category.
  1. Introduction to microbes and methods of studying them.
  2. Source and spread of microbes and infection control and containment including principles and use of antimicrobial agents
  3. The pathogenic mechanisms of microbes and pathogenesis of infectious diseases.
  4. Principles and methods of diagnosis of infections and infectious diseases.
- b. Immunology : The basic principles of immunity and immunological phenomenon which help to understand the pathogenesis, laboratory diagnosis and control of infectious diseases and non-infectious diseases should be 'must know' category.
  - The immune system and host's response to infection.
- c. Systematic microbiology
- d. Prevention of infectious diseases
- e. Infections and diseases of various systems of the body.

ii) DETAILED SYLLABUS

**Chapter 1: Introduction to Microbes and Methods of studying them :**

**Theory :**

Objectives : At the end of the chapter, the student should be able to

- a. Describe the unique properties of unicellular organism prokaryote, and viruses in contrast with those of eukaryotes
- b. State the rationale of classifying microbes into bacteria, fungi, parasites and viruses.
- c. Recall the growth requirements of microbes
- d. Use microscopes, media, wire loops, staining procedures & similar equipment and processes
- e. The nature of bacteria: morphology
- f. Growth requirements of bacteria (includes the study of media); metabolism and genetics
- g. Nomenclature and classification of microorganisms
- h. Microscopy-types and their principles
- i. The biology of Protozoa
- j. The nature and properties of viruses, Bacteriophage
- k. The laboratory methods of cultivating viruses
- l. The nature of fungi: basic structure and classification
- m. Growth requirements of fungi

**Practical :**

Objectives : At the end of the chapter, the student shall be able to

- a. identify various morphological forms of bacteria, fungi, viruses and parasites that cause human infections.
- b. Perform simple, differential staining and other techniques to demonstrate micro-organisms and also to interpret their results.
- c. To identify common laboratory methods used for cultivation and identification of microbes.

**Practical exercises :**

- a. Introduction of media; smear making; simple and differential stains; other basic techniques to demonstrate micro – organism and microscopy
- b. The microscope; the morphology of micro-organisms. Bacteria :
- c. Cell cultures, cytopathic effect; haemagglutination by viruses; inclusion bodies; animal inoculation.

## **Chapter 2: The Source and Spread of Microbes**

### **Theory :**

Objectives: At the end of the chapter, the student will be able to

- a. define the terms: reservoir, source, exposure, colonization, infection, diseases, vector, fomite, epidemiology, endemicity, epidemic, pandemic, epizootic, incidence, prevalence, zoonosis, attack rate, asepsis, antisepsis, sterilization, disinfections
- b. list various routes of exposure to microbes
- c. Routes of spread of infections; endogenous vs. exogenous; source and reservoir of infections
- d. Sterilization, antisepsis, disinfection and asepsis
- e. Hospital acquired infections

### **Practical**

objective : At the end of the chapter, the student shall be able to

- a. observe the presence of microbes in our environments by studying settle plates
- b. observe the presence of normal flora in nose, throat, etc.
- c. interpret sterility tests done on various materials
- d. sample appropriate clinical materials for tracing the source and spread of both community and hospital acquired infections.
- e. Interpret the findings of various 'surveillance' procedures

### **Practical demonstrations :**

- a. Demonstration of the equipments and agents used in sterilization and disinfection.
- b. Study of microbes in our environment by settle plates; effect of hand washing method
- c. Study of normal flora of man by examining throat and nasal swabs and also by cough plate method
- d. Visit to the Microbiology Laboratory and Central Sterilization and Supplies Department (CSSD)

### **Chapter 3 : The pathogenic mechanisms of microbes and pathogenesis of infectious diseases**

#### **Theory :**

Objectives : At the end of the chapter, the student shall be able to

- a.enumerate the variety of interactions between microbes and humans, ranging from commensalism to pathogenesis
- b.define words: saprophyte, commensal, carrier state, latency, chronic infection, virulence, opportunism, toxin, invasion, viraemia, bacteriaemia and septicaemia
- c.Cite examples of different pathogenic mechanisms of bacterial, fungal, parasitic and viral illness
- d.state the principles of quantitation of microbial dose in animal inoculation , such as minimum infectious dose, lethal dose and of neutralization
- e.Host parasite interactions- mechanisms of microbial pathogenesis; infection; host response; virulence; toxigenicity
- f. Pathogenesis of bacterial infections
- g.Pathogenesis of parasitic infestations
- h.Pathogenesis of viral infections
- i. Pathogenesis of fungal infections

#### **Practical :**

Objective : At the end of the chapter, the student shall be able to demonstrate the virulence factors of microorganisms, using simple techniques

#### **Practical demonstrations :**

- a.demonstration of capsule; coagulase test
- b.demonstration of Elek's test; experimental tetanus
- c. case study : bacterial diseases viral diseases

## Chapter 4 : The immune system and host's response to infection

### Theory :

Objectives ::At the end of the chapter the student shall be able to

- a. describe the anatomy and physiology of primary and secondary lymphoid organs tissues and cells of immune system
- b. describe the terms: natural resistance, immunity, antigen, epitope, hapten, antibody, immunoglobulin, local immunity, systemic immunity, cell mediated immunity, hypersensitivity, autoimmunity, memory and also correlate them with normal physiology and pathology;
- c. describe with examples various types of antigen – antibody reactions in vitro and in vivo
- d. enumerate the immune deficiency states and their causes
- e. describe the tests used to measure the immune functions
- f. state the principles of histocompatibility
- g. anatomy of immune apparatus
- h. Antigens; antigen presentation and cell cooperation in immunity
- i. Immunoglobulins and their role in immunity
- j. Antigen – Antibody reactions – 1
- k. Antigen – Antibody reactions – 2
- l. Cell mediated immunity and their role in immunity
- m. Complement and its role in immunity
- n. Hypersensitivity
- o. Measuring immune functions
- p. Autoimmunity
- q. Immunodeficiency and tolerance
- r. Transplantation immunology
- s. Immunization
- t. Tumour immunology

### Practical :

Objectives : At the end of the session, the student shall be able to identify and interpret the results of the following tests:

- a. Slide and tube agglutination, latex agglutination and coagglutination; indirect and reverse passive haemagglutination tests
- b. Capillary and gel precipitation tests counter immunoelectrophoresis and radial immunodiffusion
- c. Complement fixation test
- d. ELISA test
- e. Various skin tests

### Practical:

- a. Phagocytosis; opsonization
- b. Immunoprecipitation tests
- c. Agglutination test
- d. Delayed hypersensitivity ; and tests for CMI
- e. Rheumatoid factor, antinuclear antibody

## **Chapter 5: The Principles and methods of diagnosis of infections and infectious diseases and their treatment :**

### **Theory:**

Objectives : At the end of the chapter, the student shall be able to

- a. List the diagnostic tests used for common and important infections and identify the specimens necessary for each
- b. State the principles of isolating/culturing bacteria, viruses & fungi
- c. Describe the principles of antigen detection methods
- d. List various serological tests and state their principles, applications in diagnosis
- e. Demonstrate various microbes / parasites / ova /cysts by direct microscopy
- f. collection and transport of clinical samples; culture of microbes
- g. Serological methods of diagnosis of bacterial infections
- h. Serodiagnosis of fungal infections
- i. Serodiagnosis of viral infections
- j. Serodiagnosis of parasitic infections
- k. Rapid diagnostic methods especially with reference to viruses

### **Practical :**

Objective: At the end of the session, the student shall be able to perform and interpret the following techniques

- a. Simple stains, Gram stain, Acid fast staining techniques; saline and iodine preparations for ova & cysts and also concentration methods; peripheral blood smear for parasites; lactophenol cotton blue & KOH preparations for fungi rapid diagnostic methods
- b. Be able to collect appropriate clinical material for laboratory diagnosis
- c. Be able to do preliminary processing of clinical materials

### **Practical demonstrations :**

- a. Demonstration of specimen container, collection of specimens, transport and media; preliminary processing in the laboratory
- b. Demonstration of common methods used for demonstration of pathogenic microorganisms
- c. Culture of bacteria, fungi, protozoa, viruses
- d. Rapid diagnostic tests for various microorganisms



## **Chapter 6: Principles and uses of antimicrobial agents**

### **Theory:**

Objectives : At the end of the chapter, the student shall be able to

- a. list antimicrobial agents and classify them as antibiotics and chemotherapeutic agents.
- b. Define the terms : susceptibility, resistance and describe the mechanisms of transferable and nontransferable drug resistance
- c. Describe the tests necessary to determine drug susceptibility, antibiotic concentration and serum bactericidal level
- d. Antimicrobial resistance
- e. Laboratory monitoring of antimicrobial therapy

### **Practical:**

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

- a. Disc diffusion tests
- b. MIC/MBC value, break – points, MIC 50, MIC 90, etc.
- c. Assays for antimicrobial levels in body fluids

### **Practical demonstration :**

- a. Demonstration of antimicrobial susceptibility tests both diffusion and dilution tests
- b. Demonstration of antimicrobial assay

## Chapter 7 : Systematic microbiology

### Theory:

Objectives: At the end of chapter, the student shall be able to

- a. State the basic taxonomy of common and important microorganisms
- b. Recall the basic principles of identifying microbes
- c. List the basic biological properties of common and important microbes
- d. Describe the role of physician in initiating microbiological investigations

### Bacteriology

- a. Staphylococci
- b. Streptococci
- c. Neisseria
- d. Corynebacteria
- e. Mycobacteria
- f. Bacillus
- g. Clostridium
- h. Actinomycetes
- i. Haemophilus and Bordetella
- j. Enterobacteriaceae
- k. Vibrios and Campylobacter
- l. Brucella, Francisella and Legionella
- m. Pseudomonas and other non-fermenters
- n. Spirochaetes – Treponema, Borrelia, Leptospira
- o. Rickettsia
- p. Chlamydia
- q. Nonsporing anaerobic bacteria
- r. Mycoplasma and L Forms
- s. Helicobacter, Listeria, Ratbite fever, Erysipelothrix, Kingella Miscellaneous bacteria – Ref. Ananthanarayana's text book of Microbiology.

### Mycology

- a. Agents of very superficial mycoses
- b. Agents of superficial mycoses; dermatophytoses
- c. Agents of subcutaneous mycoses
- d. Agents systemic mycoses
- e. Opportunistic fungi, Mycotoxicosis.

### Virology

#### RNA Viruses:-

- a. Picorna viruses
- b. Orthomyxo and Paramyxo
- c. Rhabdo viruses
- d. Arbo and Robo
- e. Slow viruses
- f. Retro viruses
- g. Oncogenic viruses
- h. Viruses causing gastroenteritis
- i. Hepatitis viruses

DNA Viruses:-

- a. Pox viruses
- b. Herpes viruses
- c. Adeno viruses
- d. Papova Viruses
- e. Parvo viruses
- f. Oncogenic viruses

Parasitology

- a. Entamoeba histolytica and free living amoeba
- b. Giardia, Trichomonas, Sarcocystis, and Toxoplasma, cryptosporidium, isospora
- c. Leishmania and Trypanosomes.
- d. Plasmodia and Babesia
- e. Medically important helminths belonging to Cestoda, Trematoda and Nematoda

Practical: Objectives:

- a. Bacteriology: The student shall be able to identify pathogenic bacteria by Gram stain, morphology, colony characters and key biochemical reactions
- b. Mycology: the student shall be able to identify pathogenic fungi by their appearance in Lactophenol cotton blue preparation, KOH, Indian Ink preparations, Gram and other staining as well as pertinent colony morphology
- c. Parasitology: the student shall be able to identify ova and cysts of common intestinal parasites, identify blood and tissue parasites

## Chapter 8 : Prevention of Infectious Diseases

### Theory:

Objectives: At the end of the chapter the student shall be able to define terms; passive and active immunity, live and killed vaccine; efficacy of vaccine; disease control and eradication

- a. Epidemiology of infectious diseases
- b. Hygiene and protection of food and water
- c. Immunization schedules in India; vaccine efficacy; universal immunization

### Practical:

Objectives: At the end of the session, the student shall be able to

- a. discuss a case study on an outbreak situation
- b. apply principles of asepsis, antisepsis and disinfection in day-to-day clinical practice
- c. interpret results of sterility tests done on various materials

### Practical demonstrations:

- a. Case study of an epidemic/outbreak of nosocomial infection
- b. Demonstration of vaccines & toxoids, antisera & infection specific immunoglobulins
- c. Bacteriological analysis of water; Pasterization of milk

## Chapter 9 : Systemic Microbiology

( Infections & Diseases of the various systems of the Body)

- a. List infectious diseases of each system and correlate them with probable aetiological agents
- b. Understand the aetiology, pathogenesis and methods of laboratory diagnosis and apply that knowledge in the treatment and prevention of common communicable diseases caused by all types of microorganisms
- c. Gastrointestinal infections caused by bacteria; Peptic ulcer disease; enteric fever, gastroenteriti; shigellosis; food poisoning
- d. Gastrointestinal infections caused by parasites:
- e. Gastrointestinal infections caused by viruses
- f. Hepatitis and other infections of liver and biliary tract
- g. Upper respiratory tract infections – viruses
- h. Acute infections of lower respiratory tract
- i. Chronic infections of lower respiratory tract; national TB control program
- j. Sexually transmitted diseases; national STD control program
- k. Urinary Tract infections
- l. Infections of Central Nervous System – bacterial
- m. Infections of Central Nervous System – non bacterial
- n. Wound infections
- o. Superficial fungal infections: dermatomycoses; national leprosy control program
- p. Deep mycoses
- q. Eye infections: national program for prevention of blindness
- r. Septicaemic conditions
- s. Bone, joint and related conditions
- t. Exanthematous conditions

- u. Opportunistic infections
- v. Blood and tissue parasites; national filariasis control program, national malaria control program

**Practical :**

Objectives : At the end of the session, the student shall be able to identify the agents causing infections of various systems of the body and the student shall be able to collect appropriate specimens at an appropriate time and send them to the laboratory.

**Practical exercises:**

- a. Viable counts on normal faeces
- b. Case study – dysentery; stool with ova and cysts
- c. Case study – cholera with demonstrations
- d. Case study – typhoid with demonstrations
- e. Case study – infective and serum hepatitis with demonstrations
- f. Case study – diphtheria with demonstrations
- g. Case discussion – diagnosis of tuberculosis
- h. Microscopic morphology of agents causing STD; Demonstrations of syphilis and HIV serology
- i. Case study – UTI with demonstrations
- j. Microbiology of CNS infections – demonstrations
- k. Carrier study of Staphylococcus on skin, throat and nose
- l. Diagnosis of dermatomycosis, mycetoma and chromomycosis
- m. Laboratory diagnosis of candidiasis and cryptococcosis
- n. Demonstration of fungi causing deep mycoses
- o. Demonstration of agents causing eye infections
- p. Case study – endocarditis, Gram negative septicaemia, brucellosis, enteric fever and parasitaemia
- q. Case study- acute infections of bone ,etc.

**Division of Syllabus paperwise :**

**PAPER I :** General bacteriology, immunology & systemic bacteriology

**PAPER II:** Parasitology, Virology and Mycology.

**Microbiology books recommended :**

1. Text book of Microbiology – Dr. R. Anantanarayan – C.J. Paniker
2. Medical Microbiology – Dr. C.P. Baveja
3. Microbiology – Dr. Arora
4. Microbiology – Chakrabarthy
5. Essential Microbiology – Rajesh Bhatia & R.L. Ichpujanti
6. Text book of Microbiology – David Greenwood

**Reference Books:**

1. Review of Microbiology – Jawetz
2. Essential Immunology – Ivon Roitt
3. Text Book of Parasitology – S.C. Parija (Reference)
4. Text book of Parasitology – C.J. Panicker

## SYLLABUS FOR 2<sup>nd</sup> PROFESSIONAL

### 4) PHARMACOLOGY & THERAPEUTICS

#### (i) Goal:

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

#### (ii) 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 the 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
  - (i) Individual needs;
  - (ii) Mass therapy under national health programmes
- (4) Describe the pharmacokinetic basis clinical presentation, diagnosis and management of common poisonings;
- (5) List the drugs of addition and recommend the management;
- (6) Classify environmental and occupational pollutants and state the management issues;
- (7) Indicate causations in prescription of drugs in special medical situations such as pregnancy, lactation, infancy and old age;
- (8) Integrate the concept of rational drug therapy in clinical pharmacology;
- (9) State the principles underlying the concept of Essential Drugs;
- (10) Evaluate the ethics and modalities involved in the development and introduction of new drugs;

##### (b) SKILLS:

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

- (1) Prescribe drugs for common ailments;
- (2) Recognise adverse reactions and interactions of commonly used drugs;
- (3) Observe experiments designed for study of effects of drugs, bioassay 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.

#### 4) SYLLABUS OF PHARMACOLOGY:

i) Theory		
Sl.No.	Name of the Unit	No. of Hours
1.	General pharmacology	10
2.	Autonomic nervous system	8
3.	Central nervous system	16
4.	Cardio vascular system	8
5.	Biogenic amines & Autocoids	3
6.	Respiratory system	2
7.	Blood and blood forming agents Anticoagulants, fibrinolytic drugs etc.,	4
8.	Kidney – diuretics	2
9.	Gastro intestinal system	3
10.	Drugs acting on the Uterus	1
11.	Chemotherapy	22
12.	Endocrinology	10
13.	Dermatological Pharmacology	1
14.	Geriatric pharmacology	1
15.	Paediatric Pharmacology/Neonatal Pharmacology	1
16.	Safety of drugs in Pregnancy	1
17.	Hazards of smoking, alcohol, narcotics, Environmental pollution	2
18.	Immuno Pharmacology	1
19.	Metallic poisoning	1
20.	Vitamins & Sex Hormones	1
21.	National programmes including Management of AIDS	2
<b>Total Hours</b>		<b>100</b>

#### DETAILED SYLLABUS OF PHARMACOLOGY

##### 1) General Pharmacology

- Sources of drugs
- Routes of drug administration
- Drug absorption
- Drug distribution
- Drug Bio transformation
- Drug excretion
- Methods of prolonging drug action
- Mechanisms of drug action
- Factors modifying drug action
- Bio-availability, Biological half-life, Bioequivalence
- Adverse drug reactions
- Drug dependence
- Drug Interactions
- Structural activity relationship
- Clinical evaluation of a New drug

##### 2) Autonomic Nervous System

- Introduction to Automic Nervous System
- Adrenergic transmission
- Adrenergic drugs
- Adrenergic blocking agents
- Cholinergic transmission
- Cholinergic drugs
- Cholinergic blocking agents
- Anticholinesterases
- Treatment of parkinsonism
- Treatment of Organophosphorous poisoning.

### 3) Central Nervous System

- Introduction of historical aspects, alcohols
- General Anaesthetics, basal anaesthesia of Premedication
- Depressants - Barbiturates, Opioids, Benzodiazepines, Antipyretics and analgesics, (NSAIDS)
- Stimulants – Central nervous system stimulants and spinal stimulants Epilepsy and anticonvulsants
- Drug addiction
- Skeletal Muscle relaxants
- Local Anaesthetics
- Psycho-pharmacology

### 5) Autocoids

- Histamine, Antihistamines
- Serotonin & its antagonists
- Prostaglandins, Brady Kinins
- Polypeptides, Rennin-Angiotensin mechanism

### 7) Chemotherapy

- Introduction and principles of Antimicrobial Therapy
- Sulfonamides, Cotrimoxazole and Fluoroquinolones
- Penicillins and Newer Penicillins
- Cephalosporins
- Macrolides and other Antibiotics
- Aminoglycosides Antibiotics
- Broad spectrum antibiotics
- Chemotherapy of UTI
- Antituberculosis drugs
- Anti leprotic drugs
- Anti fungal drugs
- Anti viral drugs & Chemotherapy of AIDS
- Anti Malarials
- Antiamoebic drugs
- Chemotherapy of other Anti protozoal infections
- Anthelmintics
- Antiseptics, Disinfectants and ectoparasites
- Chemotherapy of neoplastic diseases.

### 4) Cardio vascular system

- Cardiac glycosides
- Anti arrhythmic agents
- Anti hypertensives
- Anti anginal drugs
- Pharmacology of shock, Vasodilators and management of myocardial infarction, cardiogenic shock, left ventricular failure.
- Plasma lipid lowering agents
- Diuretics

### 6) Miscellaneous topics

- Heavy metal Poisoning
- Environmental Poisoning
- Hazards of smoking
- Drugs of addiction
- Geriatric Pharmacology
- Paediatric pharmacology
- Dermatological pharmacology
- General Principles of management of Poisoning
- Drugs during pregnancy, Lactation
- Drugs and preventive measures for AIDS, and National World Health Organisation programmes.

### 9) Blood

- Megaloblastic anaemias
- Microcytic (Iron deficiency) Anaemias
- Anti coagulants
- Fibrinolytic agents & Anti platelet agents

### 10) Drugs acting on uterus

- Uterine stimulants
- Uterine relaxants

### 11) Respiratory system

- Cough suppressants & Mucolytic agents
- Treatment of Bronchial Asthma



**8) Drugs acting on Uterus, Respiratory System and G.I.T. & Blood**

- Appetite stimulants & suppressants
- Emetics & Anti emetics (Prokinetic agents)
- Anti diarrhoeal agents Treatment of diarrhoea
- Treatment of peptic ulcer
- Purgatives

**12) Hormones (Endocrinology)**

- Posterior pituitary hormones & related factors, ADH.
- Anterior pituitary growth hormones
- Thyroid hormone & Antithyroid drugs
- Diabetes mellitus – Insulin, oral Antidiabetic drugs and newer antidiabetic drugs
- Adrenal cortical Steroids – Miners corticoids and synthetic steroids
- Parathyroid – Parathormone – Calcitonin – Calcium metabolism
- Sex hormones – Estrogens, Progestins and anti estrogens, antiprogestins
- Androgens – Antiandrogens

**Division of Pharmacology syllabus paper wise:**

**PAPER I** : General Pharmacology, ANS, CNS, CVS AND drugs actings on renal systems.

**PAPER II** : Chemotherapy, hormones, GIT, Blood, Drugs acting on uterus, Heavy metal poisons, Drugs for Resp. diseases.

ii **PRACTICAL SYLLABUS** (Pharmacology)

60 hours

This includes preparation of different dosage forms, formulations, prescription writing, clinical Pharmacy exercises, problem bases clinical study of cases, drug interactions, adverse drug reactions, demonstrations of the museum specimens attached to the department, visit to a pharmaceutical company, bedside teaching.

**EXPERIMENTAL PHARMACOLOGY DEMONSTRATION** 60 hours

- Effects of Cholinergic, adrenergic, histaminergic drugs and their antagonists on dogs.
- Skeletal muscle relaxant effect in rabbits.
- Opioid analgesic effect, straub's test in mice
- Convulsant and anticonvulsant effects of certain drugs in rats and mice by different methods.
- General anaesthetic effect of ether of certain drugs in rats and mice by different methods
- Analgesic and anti inflammatory effects of certain drugs in rats and mice by different methods.
- Prothromben time estimation
- Respiratory function tests and the effect of drugs in their alteration – Beta Blockers – Selective and non-selective.
- General principles of spectroscopy, Colorimetry, Fluorimetry HPLC etc., with live demonstration if possible
- Clinical Pharmaco Kinetics:

Study of half life of a drug, bio-availability etc., wherever facilities are available in the college or locally at any other institute.

iii) CLINICAL ORIENTED PROBLEMS: 60 hours

- Problem based learning (PBL)
- Continuing Medical Education (CME)
- Integrated teaching (ITC) classes
- Seminars
- Visit to Pharmaceutical firms

iv) Tutorials: 20 hours

The tutorial hours can be enhanced by reducing the same from either i), ii) or iii)

#### **SUGGESTED STANDARD TEXT BOOKS**

1. Pharmacology & Pharmacotherapeutics by Dr. Satoskar
2. Essentials of Medical Pharmacology by Dr. Tripathi.

#### **REFERENCE BOOKS:**

1. Applied & clinical Pharmacology by Rang Dale & Katzung.
2. Pharmacological basis of Therapeutics by Goodman & Gillman.
3. Clinical Pharmacology by Lurance.
4. Illustrated book in Pharmacology by Lippincott.

## SYLLABUS FOR 2<sup>nd</sup> PROFESSIONAL

### 5) FORENSIC MEDICINE INCLUDING TOXICOLOGY:

**(i) Goal :**

The broad goal of the teaching of undergraduate students in Forensic Medicine is to produce a physician who is well informed about medicolegal responsibilities in practice of medicine. He / She will also be capable of making observations and inferring conclusions by logical deductions to set enquiries on the right track in criminal matters and connected medicolegal problems. He / She acquires knowledge of law in relation to medical practice, medical negligence and respect for codes for medical ethics.

**(ii) Objectives:**

**(a) KNOWLEDGE:**

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

- (1) Identify the basic medicolegal aspects of hospital and general practice;
- (2) Define the medicolegal responsibilities of a general physician while rendering community service either in a rural primary health centre or an urban health centre;
- (3) Appreciate the physician's responsibilities in criminal matters and respect for the codes of medical ethics;
- (4) Diagnose, manage and identify also legal aspects of common acute and chronic poisonings;
- (5) Describe the medicolegal aspects and findings of postmortem examination in case of death due to common unnatural conditions and poisonings;
- (6) Detect occupational and environmental poisoning prevention and epidemiology of common poisoning and their legal aspects particularly pertaining to Workmen's Compensations Act;
- (7) Describe the general principles of analytical toxicology.

**(b) SKILLS:**

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

1. Make observations and logical inferences in order to initiate enquiries in criminal matters and medicolegal problems.
2. Diagnose and treat common emergencies in poisoning and manage chronic toxicity;
3. Make observations and interpret findings at postmortem examination;
4. Observe the principles of medical ethics in the practice of medical Profession.

**(c) INTEGRATION:**

Department shall provide an integrated approach towards allied disciplines like Pathology, Radiology, Forensic Sciences, Hospital Administration etc., to impart training regards medicolegal responsibilities of physicians at all levels of health care. Integration with relevant disciplines will provide scientific basis of clinical toxicology e.g. medicine, pharmacology etc.,

## 5) SYLLABUS OF FORENSIC MEDICINE:

Sl. No.	Name of the Unit	No. of Hours	
		Theory	Practical
1.	Introduction to legal procedure at an inquest, Criminal courts and their powers and procedures, examination of a medical witness in the court, Medical evidence, Types of witness. Conduct and duties of doctor in the witness box, procedures of examination of the body at the scene of crime, criminal trial.	4	-
2.	Medical law and Ethics-functions of medical councils, code of medical ethics, infamous conduct, rights and duties of medical practitioners, physician's responsibility in criminal matters, professional negligence, Vicarious liability, Medical records, Products liability, Medical indemnity, insurance, Euthanasia, consent in Medical practice, medical experimentation. Malingering. Consumer protection Act & Consumer courts.	4	-
3.	Identification of the living and the dead.	2	5
4.	Medicolegal Autopsy. Rules for autopsies, Autopsy of a dead body of decomposed and mutilated bodies; preservation of viscera for chemical analysis; skeletal remains; Exhumation.	2	2
5.	Death and Postmortem changes – Medicolegal aspects of death, modes of death, causes of death, Negative autopsy, sudden death, signs of death and changes following death with special reference to time since death.	2	4
6.	Mechanical wounds – Mechanism of wound production, Detailed study of wounds, Medicolegal aspects in relation to accident, suicide and Homicide, Traffic accidents, Regional injuries, Examination of wounded person.	5	6
7.	Death from starvation, cold, burns, electricity and lightning and dowry deaths.	2	-
8.	Death due to mechanical asphyxia- Hanging, strangulation, suffocation, drowning etc.	4	4
9.	Impotence, sterility, artificial insemination	2	-
10.	Medicolegal aspects of Virginity, Pregnancy and delivery & legitimacy.	3	-
11.	Sexual Offences – Rape, Unnatural offences, sexual perversions.	3	2
12.	Abortion and infanticide.	2	2

Sl. No.	Name of the Unit	No. of Hours	
		Theory	Practical
13.	Medicolegal importance of Examination of blood stains, seminal stains, hair, weapons, clothes etc.,	-	2
14.	Forensic Psychiatry	4	-
15.	Artefacts and their medicolegal Importance.	1	1
16.	Poisons-Medicolegal aspects, classification, Routes of administration, mode of action and Disposal in the body, diagnosis of poisoning in the living and dead, duties of doctor in poisoning cases in general	4	2
17.	Detailed study of poisons commonly used in India: Sulphuric acid, Oxalic acid, Carbolic acid, aspirin, pain killers, potassium permanganate, Organic irritant poisons, such as ricinus, croton, Abrus ergot, semicarpus, calotropis, cantharides, Snakes, scorpions, Bees & Wasp: opium, alcohol, Methyl alcohol, Barbiturates, Chloral hydrate, Kerosine, Anti-histaminics, Tranquilisers, Bromides, Datura, Cannabis, Cocaine, Strychnine, Cardiac poisons like Digitalis, Oleander, quinine, aconite, Hydrocyanic acid; Asphyxiants like, CO, CO <sub>2</sub> , H <sub>2</sub> S, Drug dependence and food poisoning, Metallic poisons, organo phosphorus compounds, weedicides, insecticides and rodenticides.	10	10
18.	Integrated teaching with clinical departments (Radiology, Casualty, Pharmacology, Pathology, Medicine)	6	-

#### RECOMONDED BOOKS

- |    |   |                       |
|----|---|-----------------------|
| 1. | Essentials of Forensic Medicine & Toxicology                | Dr.K.S.Narayana Reddy |
| 2. | Modi's Text Book of Medical Jurisprudence & Toxicology      | Dr.V.Subramanyam.     |
| 3. | M.K.R.Krishna's Hand Book of Forensic Medicine & Toxicology | Dr.V.V.Pillay.        |
| 4. | Principles of Forensic Medicine                             | DrApurba Nandy.       |
| 5. | Medical Jursiprudence & Toxicology                          | C.K.Parikh            |
| 6. | Forensic Medicine by  | P.V.Guharaj.          |

#### REFERENCE BOOKS:

- |    |   |                |
|----|---|----------------|
| 1. | Pathology of Homicide                           | Bernard Knight |
| 2. | Text Book of Medical Jurisprudence & Toxicology | Glaisster      |
| 3. | Essentials of Forensic Medicine                 | C.J.Posson.    |
| 4. | Modern Medical Toxicology                       | Dr.V.V.Pillay. |
| 5. | Mannual of Legal Medicine                       | G.Radnal.      |

**BACHELOR OF MEDICINE & BACHELOR OF SURGERY**

**III rd PROFESSIONAL - PART – I SYLLABUS**

- 1) ENT (OTO RHINOLARYNGOLOGY)**
- 2) OPHTHALMOLOGY**
- 3) COMMUNITY MEDICINE**

### III rd PROFESSIONAL - PART – I SYLLABUS

#### (1) OTO – RHINO – LARYNGOLOGY (ENT) :

**Goal :**

The broad goal of the teaching of under graduate students in Otorhinolaryngology is that the under graduate students have acquired adequate knowledge and skills for optimally dealing with common disorders and emergencies and principles of rehabilitation of the impaired hearing.

**Objectives:**

(a)KNOWLEDGE:

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

- (1) Describe the basic pathophysiology of common Ear Nose and Throat (ENT) diseases and emergencies;
- (2) Adopt the rational use of commonly used drugs, keeping in mind their adverse reactions;
- (3) Suggest common investigative procedures and their interpretation.

(b) SKILLS:

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

- (1) examine and diagnose common Ear, Nose and Throat (ENT) problems including the pre-malignant and malignant disorders of the head and neck;
- (2) Manage Ear, Nose and Throat (ENT) problems at the first level of care and be able to refer whenever necessary;
- (3) Assist / Carry out minor surgical procedures like ear syringing, ear dressings; nasal packing etc;
- (4) Assist in certain procedures such as tracheostomy, endoscopies and removal of foreign bodies.

(c) INTEGRATION:

The undergraduate training in Ear, Nose and Throat (ENT) will provide an integrated approach towards other disciplines especially Neuro sciences ophthalmology and general surgery.

## **Syllabus of Oto Rhino Laryngology (ENT):**

Theory – 70 hours  
No. of  
Hours

Sl. No.	Name of the Unit.	No. of Hours
<b>NOSE, PARANSASAL SINUSES AND NASOPHARYNX</b>		
1)	Surgical Anatomy and Physiology of the Nose, paranasal Sinuses and Nasopharynx	1
2)	Examination of Nasal Passages, Nasopharynx and Paranasal sinuses.	1
3)	Disease of the Nose: Congenital Malformations, Stenosis of Anterior nares, Posterior Choanal atresia, Dermoid Cyst, injuries, C.S.F. Rhinorrhoea, Oro-antral fistula, Nasal Furunculosis, Vestibulitis.	2
4)	Diseases of Nasal Septum: Haematoma, Abscess, Ulceration, Perforation, Deviation and Spurs.	1
5)	Diseases of the Nasal Cavity: Foreign bodies, Rhinoliths Acute Rhinitis: Nonspecific : common cold Specific: Diphtheria, Lupus, TB, Syphilitic, Leprosy, Rhinosporidiosis, Other diseases: Rhinoscleroma, Malignant Granuloma, Nasal Allergy, Nasal Polyposis	2
6)	Epistaxis.	1
7)	Sinusitis: General Consideration of Acute and Chronic Sinusitis, Diagnosis: & Treatment. Frontal Sinusitis, Ethmoiditis, Sphenoiditis. Acute and Chronic Maxillary Sinusitis.	2
8)	Complications of Suppurative Sinusitis-Frontal Osteomyelitis, Osteomyelitis of Maxilla, Orbital complication, Intracranial Complications, Secondary effects of Sinusitis.	2
9)	New Growths and Cysts of the Nose and Sinuses: Papilloma, Angioma, Carcinoma, Sarcoma and simple cysts.	1
10)	Diseases of the Nasopharynx:- congenital Dermoid, Nasopharyngitis-Acute and Chronic, Adenoids, New growths: Benign Juvenile Angiofibroma, Malignant-Carcinoma.	1
<b>PHARYNX</b>		
1)	Surgical Anatomy and Applied Physiology, (Pharynx- Oropharynx, Laryngopharynx, Parapharyngeal space).	1
2)	Examination of the Pharynx.	1
3)	Diseases of the Pharynx; Foreign bodies, Trauma, Inflammations, - Acute- Non-specific and specific. Vincent's angina. Acute Diphtheritic Pharyngitis. Moniliasis. Chronic non specific Pharyngitis. Specific – Tuberculosis, Syphilis, Leprosy, Rhinoscleroma.	1
4)	Acute Tonsillitis – Chronic Tonsillitis	1
5)	Abscesses of the Pharynx. Peritonsillar Abscess, Para Pharyngeal abscess, Acute and Chronic Retropharyngeal abscess, Ludwig's angina.	1
6)	New growths- Beneign and Malignant.	1



Sl. No.	Name of the Unit.	No.of Hours
<b>EAR SURGICAL ANATOMY AND APPLIED PHYSIOLOGY</b>		
1)	Examination of the Ear: Clinical Examination of the Ear. Functional Examinations – Tests for hearing. Tests for Verigo and Eustachian tube.	1
2)	Disease of External Ear: Congenital malformations, Affections of the auricles: Perichondritis, Haematoma auris, affections of the External auditory canal – Furuncle, Otitis Externa, Herpes, Myringitis Bullosa, Otomycosis, Wax, Foreign bodies, New growths, Injuries of External Ear and Tympanic Membrane.	2
3)	Acute Inflammations of Middle Ear Cleft. Eustachian Salpingitis-Acute and chronic Acute Catarrhal Otitis media, Acute Suppurative otitis media, Acute Mastoiditis.	2
4)	Chronic Suppurative Otitis media-safe and unsafe.	1
5)	Other types (Non suppurative)Chronic Catarrhal Otitis media, Secretory Otitis media, Otitis Barotrauma, Tuberculous Otitis media, Syphilitic Otitis media.	1
6)	Complications of Suppurative Otitis media; extracranial: Mastoiditis, Mastoid abscess, Petrositis, facial nerve paralysis, Labyrinthitis. Intracranial.	1
7)	Otosclerosis: Etiology, Pathology, Clinical features,management.	1
8)	Prevention of Otitis media and Prevention of complications of Otitis media.	1
9)	Diseases of Inner Ear : Congenital inner ear disorders, Traumatic disorders of the inner ear, ear, Otogenic labyrinthitis, Mumps, Herpes, zooster Oticus, Rubella, Meningitis, deafness.	2
10)	Noise trauma, Drug toxicity, Presbycusis, Meniere's disease, Auditory Nerve tumour.	2
11)	Newgrowths: Middle ear and mastoid: Carcinoma, Glomus Jugulare tumour.	1
12)	Rehabilitation of Deaf and Dumb.	1
<b>LARYNX, TRACHEA AND BRONCHI :</b>		
1)	Surgical Anatomy and applied physiology of Larynx, Trachea and bronchi.	1
2)	Examination of the Larynx and lower respiratory tract	
3)	Diseases of the Larynx-Congenital malformations of Larynx. Foreign bodies in the air passages.	1
4)	Inflammations:- Acute-Non specific simple Laryngitis. Laryngo-Tracheo-Bronchitis.Specific-Diphtheria. Chronic(Non- specific):- Simple Laryngitis, Leukoplakia, Pachydermia and vocal nodules. Specific:-Tuberculosis, Lupus, Syphilis, Scleroma, Leprosy.	1
5)	Functional aphonia.	
6)	STRIDOR	1
7)	New –growths of the Larynx: Beneign, Malignant	1
8)	Tracheostomy : Indications, Technique, after treatment, complications.	1
9)	Endoscopy in ENT – Method, indications of Laryngoscopy and Bronchoscopy.	

<b>OESOPHAGUS :</b>		
1)	Anatomy and Physiology of deglutition, Diseases of Oesophagus, P.V .Syndrome, Cardiospasm. Stricturs of Oesophogus- Beneign & Malignant, corrosive burns and carcinoma of Oesophagus.	1
2)	F.B. in food and air Passages Indications and contraindications of Oesophagoscopy. Technique & complications.	1
3)	Neck swellings – Differential diagnosis & Management.	

**TEACHING PROGRAMME DURING CLINICAL POSTINGS OF ENT:**

Total Time: 30 hours

Sl. No	Name of the Unit.	hours
a)	Surgical anatomy of the Ear, Lecture and Demonstration of dissected temporal bone.	1
b)	Applied physiology of Hearing. Auditory function tests. Demonstration of audiometry test.	2
c)	Applied physiology of Equilibrium Vestibular function tests. Lecture / Demonstration in Otoneurology Dept. using E.N.G.Machine.	2
d)	History taking in ear diseases and clinical examination of the ear. Demonstration.	1
e)	Audiometry – various types of hearing aids.Cochlear Implants. Lecture / Demonstration in speech & hearing Department.	2
f)	Congenital deafness. Causes, prevention and management.	1
g)	Common surgical procedures on the ear Lecture / Video demonstration. Instruments X-Ray.	2
h)	Anatomy and Physiology of Nose & PNS.	1
i)	History taking in the diseases of the Nose and PNS and Clinical Examination of Nose & PNS.	1
j)	Respiratory allergy. Pathology, clinical presentation. Diagnostic tests and specific desensitization. Lecture / Demo. Allergy Clinic, ENT.	1
k)	D.D. of nasal obstruction & Discharge. Disorders of olfaction.	1
l)	Head ache and Facial Pain. D.D.Clinical case demonstration.	1
m)	F.E.S.S. basic principles. Lecture Demo / Video presentation	1
n)	Common surgical procedures on Nose and P.N.S. Lecture / Video / Live operation. Surgical instruments and X-Rays and C.Ts. pertaining to Nose and P.N.S.	2
o)	Anatomy of Pharynx. Physiology of Deglutition.	1
p)	History taking and clinical exam of Pharyngeal diseases.	1
q)	Ulceromembraneous lesions of Pharynx.	1
r)	Cancer of oro and Hypopharynx. Recent trends in management.	1
s)	Anatomy of larynx. Physiology of Phonation.	1

Sl. No	Name of the Unit.	hours
t)	History taking and clinical exam. of laryngeal diseases.	1
u)	Hoarseness of Voice. Disorders of voice & speech.	1
v)	Stridor in infancy and childhood	1
w)	Cancer larynx. Aetiology and diagnosis. Recent trends in management / prevention.	1
x)	Per oral endoscopy	1
y)	Tracheostomy. Lecture / Video	1
z)	Common surgical procedures in the throat. Lecture / Video. Surgical instruments and X-Rays pertaining to throat.	2

**Books recommended**

1. Text book of ENT by Logan & Turner
2. Diseases of ENT by Dr. Ramanjaneyulu
3. Diseases of ENT by Dr. K.K. Ramalingam
4. Diseases of ENT by Maqbool
5. Diseases of ENT by Scott & Brown

**Reference books**

1. Shambaugh Ear Surgery
2. North American Clinics of ENT
3. Journal of Otolaryngology
4. Indian Journal of Otolaryngology.

### III rd PROFESSIONAL - PART – I SYLLABUS

#### **(2) OPHTHALMOLOGY:**

##### **(i) Goal :**

The broad goal of the teaching of under graduate students in ophthalmology is to provide such knowledge and skills to the student that shall enable him/her to practice as a clinical and as a primary eye care physician and also to function effectively as a community health leader to assist in the implementation of national Programme for the prevention of blindness and rehabilitation of the visually impaired.

##### **(ii) Objectives:**

###### **a) KNOWLEDGE :**

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

- 1) common problems affecting the eye;
- 2) principles of management of major ophthalmic emergencies;
- 3) main systemic diseases affecting the eye;
- 4) effects of local and systemic diseases on patient's vision and the necessary action required to minimise the sequelance of such diseases;
- 5) adverse drug reactions with special reference to ophthalmic manifestations;
- 6) magnitude of blindness in India and its main causes;
- 7) national programme for control of blindness and its implementation at various levels;
- 8) eye care education for prevention of eye problems;
- 9) role of primary health centre in organization of eye camps;
- 10) organization of primary health care and the functioning of the ophthalmic assistant;
- 11) integration of the national programme for control of blindness with the other national health programmes.
- 12) Eye bank organization;

###### **b) SKILLS:**

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

- 1) Elicit a history pertinent to general health and ocular states:
- 2) Assist in diagnostic procedures such as visual acuity testing, examination of eye, Schiotz tonometry, Staining for Corneal pathology confrontation perimetry, Subjective refraction including correction of presbyopia and aphakia direct ophthalmoscopy and conjunctival smear examination and Cover test:
- 3) Diagnose and treat common problems affecting the eye:
- 4) Interpret ophthalmic signs in relation to common systemic disorders.
- 5) Assist/observe therapeutic procedures such as subconjunctival injection, corneal/conjunctival foreign body removal, carbolic cautery for corneal ulcers, Nasolacrimal duct syringing and tarsorrhaphy:
- 6) Provide first aid in major ophthalmic emergencies:
- 7) Assist to organise primary eye care service through primary health centres:
- 8) assist to organise community surveys for visual check up:
- 9) Use effective means of communication with the public and individual to motivate for surgery in cataract and for eye donation:
- 10) Establish rapport with his senior colleagues and paramedical workers, so as to effectively function as a member of the eye care team:

**NOTE:** 40 Hrs. teaching for theory in VI & VII Semesters.

60 Hrs. for Practical based Learning, Seminars, Group discussions.

Theory - 25 Hrs VI Semester

Seminars - 30 Hrs VI Semester

Theory - 15 Hrs VII Semester

P.B. Learning & seminars - 30 Hrs VII semester

### Theory Syllabus in Ophthalmology

Sl. No.	Name of the Unit
1)	Introduction to Ophthalmology.
2)	Anatomy and Physiology, colour vision:- Visual acuity, Photo Chemistry of vision.
3)	Orbit, Ocular adnexa (Lids and Lacrimal apparatus) and optic nerve pathways.
4)	Conjunctiva, Cornea, Sclera, Contact Lenses and Eye Banking, Bacterial, Viral and Fungal Keratitis.
5)	Lens, Glaucoma.
6)	Iris, Choroid and Ocular Tumors.
7)	Ocular Manifestation of Systemic diseases.
	1) Hypertension 2) Leprosy 3) Thyroid 4) Tuberculosis and 5) Diabetes 6) AIDS
8)	Fundus and Ophthalmoscopy Examination : (Theory), RETINA AND OPTIC NERVE.
9)	Refraction and Optics, Drugs acting on Eye.
10)	Squint, Amblyopia and Neuro Ophthalmology.
11)	Primary Eye care: a) Progressive loss of vision b) Sudden loss of Vision.
12)	Ocular Trauma, FIRST AID
13)	Visual Standards, Certification, Ocular Hygiene
14)	National Programme for control of Blindness.
15)	Eye Bank Organisation and its procedures.

### TEXT BOOKS RECOMMENDED:

- 1) Parsons' Diseases of the Eye By Stephen J.H.Miller
- 2) Ophthalmology by Khurana
- 3) Text book of Ophthalmology by Sarma
- 4) Text book of Ophthalmology by neema

### REFERENCE BOOKS:

- 1) Ophthalmology by Yanoff
- 2) Ophthalmology by Duans
- 3) System of Ophthalmology by Sir Duke-Elder

### III rd PROFESSIONAL - PART – I SYLLABUS

#### **(3) COMMUNITY MEDICINE(S.P.M.):**

**(i) Goal :**

The broad goal of the teaching of under graduate students in the community medicine is to prepare them to function as community and first level physicians in accordance with the institutional goals.

**(ii) Objectives:**

(a) KNOWLEDGE:

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

- a. Describe the Health care delivery system including rehabilitation of the disabled in the country;
- b. Describe the National Health programs with particular emphasis on maternal and child health programs, family welfare and pollution control;
- c. List epidemiological methods and describe their applications to communicable and non-communicable diseases in the community or hospital situation;
- d. Apply biostatistical methods and techniques;
- e. Outline the demographic pattern of the country and appreciate the roles of the individual, family, community and socio-culture milles in health and disease;
- f. Describe the health information systems;
- g. Enunciate the principles and components of primary health care the national health policies to achieve the goal of 'HEALTH FOR ALL';
- h. Identify the environmental and occupational hazards and their control;
- i. Describe the importance of water and sanitation in human health;
- j. To under stand the principles of health economics and administration, health education in relation to community;

**Syllabus of Community Medicine (S.P.M.) :**

<u>Sl.No.</u>	<u>Name of the Unit</u>	<u>No. of Hours</u>	
		<u>Theory</u>	<u>Practical</u>
1.	History of Community Medicine	2	Visit to
2.	Definition, concept of Health & illness of diseases	2	hospital PHC.,
3.	Natural History of diseases, levels & prevention	2	Anganwadi Community
4.	Sociology, its relation to Health & disease, Social institution, role of Family in Health & disease. Role of Cultural section in Health, disease & Group dynamics.	6	<b>I SEMESTER</b>
5.	Psychological aspects in disease & Health, Role of individual, Family and Society.	6	

Syllabus of Community Medicine (S.P.M.) Continued...

Sl.No.	Name of the Unit	No. of Hours	
		Theory	Practical
6.	Demography & Population dynamics i) Population structures ii) Population growth iii) Population problem iv) Effect of over population on Scological degeneration	6	
<b>II SEMESTER</b>			
7.	Statistics i) Basic statistical method ii) Summarisation & presentation of data iii) Tests of significance	6	
8.	Environmental sanitation & Medical entomology i) Water ii) Waste disposal iii) Tests of significance	10	Seminars/ practicals: Lab work, Group discussion 10 hours
9.	Genetics i) Prevention of genetic diseases ii) Genetic counselling	1	Field visits 10 hours
10.	General Epdemiology i) Descriptive epidemiology a) Time b) Place c) Person ii) Analytical epidemiology a) Case control b) Cohort studies iii) Experimental Epidemiology randamised control trial iv) Investigation of an epidemic	10	5
11.	Systemic epidemiology i) Vector borne diseases ii) Water borne diseases iii) Air born diseases iv) Contact diseases v) Diseases of major public health importance along with national health programmes wherever applicable	30	Seminars/ Clinico social case review  45 hours Field trips  15 days;3hrs/day (45 hours)

**IV SEMESTER**

12.	Non-communicable diseases:	5	15
	i) Diabetes		
	ii) Hypertension		
	iii) Heart diseases		
	iv) Blindness		
	v) Accidents		
	vi) Geriatric problems		

13.	Occupational Health problems:		
	i) E.S.I.	5	10

14.	M.C.H. and family welfare programmes	10	10	<b>V SEMESTER</b>
15.	Health care delivery in the community	5	5	
16.	National Health Policy	2	4	

17.	Nation Health Programmes including Rehabilitation, Evaluation of Health Programmes, Health Planning Organisation Structure of Health care system in the Country including P.H.C. District level State Level and Central level.	30	5	<b>VI SEMESTER</b>
	ii) P.H.C. Organisation and Function	2	4	
	iii) Role of Non Governmental Organisations	1	2	

18.	Health Education			<b>VII SEMESTER</b>
	i) Principles of Health promotion	9	3	
	ii) Methods, approaches and media for I.E.C.(Information, Education & Communication)			

19.	Medical and Health / Information system	4	4
20.	Mental Health	1+1	2
21.	Nutrition	15	

**NOTE :** Hours of practicals and field visits are shown together. Depending upon the facilities available locally the arrangements of practicals and field visits can be flexible.

Demarcation of Syllabus for University exam between Paper I & II



Syllabus for Paper-I	Syllabus for Paper-II
1. Concepts 2. Social Sciences: a) Sociology b) Psycho Socisal Problem 3. Nutrition 4. Environmental sanitation 1. Statistics 2. General Epidemiology	1. Systemic epidemiology 2. Non communicable diseases 3. Occupational diseases 4. National Health progremmes 5. MCH & Family Welfare 6. Public Health Administration 3. N.G.O.S. and International Health 8. Health education

**Books Recommended:**

- 1) Parks text book of preventive & social medicine - K. Park
- 2) Kulkarnis text book of preventive & social medicine - Kulkarn
- 3) Nutritive value of Indian foods - C.Gopalan
- 4) Methods in biostatistics - BK. Mahajan

**Reference books**

- 1) Public health & preventive medicine -Maxcy-rosenau
- 2) Oxford text book of public health -Oxford medical publication
- 3) O.P. Ghai's text book of applied medicine -O.P.Ghai
- 4) An outline of sociology as applied to medicine- David armstrong
- 5) Uses of epidemiology - Morris
- 6) Short textbook of medical statistics - Hicc
- 7) Preveaive & community medicine - Clark
- 8) Human nutrition & Dietetics - Passmore
- 9) Epidemiology-principles & methods - Macmohan
- 10) Practical epidemiology - Barker
- 11) Theory & practice of public health - Hobson
- 12) An introduction to epidemiology - Michael Acderson
- 13) Food poisoning & Food hygiene - Hobbs

## **BACHELOR OF MEDICINE & BACHELOR OF SURGERY**

### **III rd PROFESSIONAL- PART – II SYLLABUS**

- 1) GENERAL MEDICINE**  
(General Medicine including Pulmonary Medicine  
Psychiatry, Skin and STD, Radiology & Dentistry)
- 2) PAEDIATRICS**
- 3) GENERAL SURGERY INCLUDING PAEDIATRIC  
SURGERY ORTHOPAEDICS & TRAUMATOLOGY**
- 4) OBSTERICS AND GYNAECLOLOGY**

### III rd PROFESSIONAL - PART – II SYLLABUS

(1) **GENERAL MEDICINE:**

**(i) Goal:**

The broad goal of the teaching of under graduate students in the medicine is to have the knowledge skills and behavioral attributes to function effectively as the first contact physician.

**(ii) Objectives:**

**KNOWLEDGE:**

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

- (1) Diagnose common clinical disorders with special reference to infectious diseases and nutritional disorders, tropical and environmental diseases;
- (2) Outline various modes of management including drug therapeutics especially dosage, side effects, toxicity, interactions, indications and contraindications;
- (3) Propose diagnostic and investigative procedures and ability to interpret them;
- (4) Provide first level management of acute emergencies promptly and efficiently and decide the timing and level of referral, if required.
- (5) Recognise geriatric disorders and their management;

**Theory Syllabus**

Sl. No.	Name of the Unit	No.of Hours	
		Theory	Practical
1.	<b>HAEMATOLOGY:</b> a) Introduction and Iron deficiency Anaemias b) Megaloblastic anaemias, B12 & Folic acid deficiency. c) Haemolytic anaemias d) Aplastic anaemia and bone marrow Transplantation e) Acute Leukaemias. f) Chronic myeloid and lymphatic Leukaemias. g) Polycythemia and agranulocytosis h) Multiple myeloma. i) Disorders of coagulation-haemophilia. j) Purpuras and consumption coagulopathy.	20	30
2.	<b>IMMUNOLOGY, BONES &amp; JOINTS, TOXICOLOGY:</b> <b>IMMUNOLOGY:</b> a) Introduction/Immunoglobulins Introduction, Immunoglobulins, Complement, cytokines, H.L.A. b) Hypersensitivity reaction c) Immune deficiency diseases, Immunosuppressive drugs.  <b>BONES &amp; JOINTS:</b> a) Rheumatoid arthritis b) Gout c) S.L.E. d) Osteomalacia and Osteoporosis e) Ankylosing spondylitis/Reitor's Disease/Osteo- arthritis	20	30

Sl. No.	Name of the Unit	No.of Hours	
		Theory	Practical
	<p><b>TOXICOLOGY :</b></p> <p>a) Introduction and general measures of management of poisoning</p> <p>b) Barbiturate poisoning.</p> <p>c) Organophosphorous poisoning</p> <p>d) Aluminum Phosphide poisoning</p> <p>e) Lead poisoning, Arsenic poisoning</p> <p>f) Carbon Monoxide poisoning, MIC Poisoning</p> <p>g) Copper sulphate and yellow oleander poisoning</p> <p>h) Chelating agents</p> <p>i) Drug overdosage.</p>		
3.	<p><b>PULMONARY DISEASES &amp; ENDOCRINOLOGY :</b></p> <p><b>PULMONARY DISEASES:</b></p> <p>a) Pneumonias</p> <p>b) Secondary Pneumonias/Lung abscess</p> <p>c) Bronchial asthma</p> <p>d) Chronic bronchitis, emphysema</p> <p>e) Bronchiectasis</p> <p>f) Pleural effusion, empyema</p> <p>g) Pneumothorax</p> <p>h) Pulmonary fibrosis-occupational lung disease</p> <p>i) Bronchogenic carcinoma</p> <p>j) Respiratory failure</p> <p>k) A.R.D.S</p> <p>l) Cystic fibrosis/pulmonary eosinophilia Loeffler's Syndrome</p> <p>m) Pulmonary function tests</p> <p>n) Pulmonary tuberculosis</p> <p>o) Occupational lung diseases</p> <p><b>ENDOCRINOLOGY:</b></p> <p>a) Thyrotoxicosis</p> <p>b) Myxoedema</p> <p>c) Anterior Pituitary gland</p> <p>d) Posterior Pituitary gland</p> <p>e) Addison's disease</p> <p>f) Cushing's syndrome</p> <p>g) Hyperaldosteronism, Pheochromocytoma</p> <p>h) Hyper- parathyroidism</p> <p>i) Hypoparathyroidism</p> <p>j) Hypogonadism</p> <p>k) Pineal gland</p> <p>l) Hypoglycaemia</p> <p>m) Diabetes Mellitus</p>	20	30

Sl. No.	Name of the Unit	No.of Hours	
		Theory	Practical
4.	KIDNEY, G.I.T.& LIVER : KIDNEY : a) Renal imaging b) Acute Nephritis c) Nephrotic syndrome d) Nephrotic syndrome-individual types e) Urinary tract infections including pyelonephritis f) Acute renal failure g) Chronic renal failure h) Renal Tubular acidosis i) Polycystic kidney/drug induced nephropathy  G.I.T & LIVER a) Dysphagia b) Acid peptic disease c) Malabsorption syndrome d) Inflammatory bowel disease e) Irritable bowel syndrome f) Tropical sprue & coeliac disease g) Liver function tests h) Acute Hepatitis i) Chronic hepatitis j) Cirrhosis of liver k) Hepatic encephalopathy l) Portal hypertension m) Acute Pancreatitis n) Chronic pancreatitis o) Hepatoma/Liver transplantation.	20	30

**PAPER-II**

Sl. No.	Name of the Unit	No.of Hours	
		Theory	Practical
5	PSYCHIATRY	7	13
6.	C.V.S., C.N.S. : C.V.S. a) Acute rheumatic fever b) Mitral stenosis c) Mitral regurgitation and tricuspid regurgitation d) Aortic stenosis and aortic regurgitation e) Congestive heart failure f) Infective endocarditis g) Hypertension h) Ischaemic heart disease- i) Pericardial effusion, constrictive pericarditis. j) Cardiomyopathy k) Arrhythmias including atrial fibrillation l) Cardio-pulmonary resuscitation m) Congenital heart disease	20	30

C.N.S.:

- a) Cranial nerves – trigeminal neuralgia, Bell's palsy
- b) Coma
- c) Pyogenic meningitis
- d) Tuberculous meningitis
- e) Encephalitis
- f) C.V.A – (Ischaemic)
- g) C.V.A. – (Haemorrhagic )
- h) Epilepsy
- i) Headache – Malignant
- j) Motor neurone disease
- k) Parkinsonism and Chorea
- l) Demyelinating diseases
- m) Myopathy and myasthenia
- n) Syphilis of nervous system
- o) Peripheral neuritis /syringomyelia
- p) Paraplegia / Raised I.C.T

7. INFECTIOUS DISEASES, TROPICAL DISEASES, VITAMINS, 20 30  
NUTRITION, ONCOLOGY, GERIATRIC MEDICINE, AIDS,  
GENETICS ETC.

INFECTIOUS DISEASES :

- a) Staphylococcal & Streptococcal infections
- b) Diphtheria, Pertussis
- c) Tetanus – Botulism
- d) Enteric fever, food poisoning
- e) Cholera, Shigella
- f) Pasteurella, Anthrax, Brucellosis
- g) Mumps / Measles /German Measles
- h) Chicken pox, small pox
- i) Herpes, Yellow fever
- j) Typhus fever
- k) Haemorrhagic viral fevers
- l) Influenza
- m) Leptospirosis
- n) Fungal infections-systemic
- o) Nosocomial infections

TROPICAL DISEASES :

- a) Malaria including cerebral Malaria
- b) Kala – azar
- c) Nematodes
- d) Cestodes
- e) Amoebiasis
- f) Filariasis
- g) Guinea worm
- h) Snake bite
- i) Heat & environmental diseases

- VITAMINS & NUTRITION :
- Vit. A and Vit.D
  - B-complex deficiency
  - C,K&E
  - Obesity
  - Anti- oxidants/ Trace elements
  - Total parenteral nutrition.

ONCOLOGY :  
 GERIATRIC MEDICINE :  
 GENETICS :  
 A.I.D.S.

8.	PSYCHIATRY	7	13
9.	DERMATOLOGY& VENEREOLOGY	10	20

**NOTE:** Out of 370 classes 1/3<sup>rd</sup> should be for Theory and the remaining 2/3<sup>rd</sup> classes shall be for Lecture Demonstration/ Integrated teaching.

**Text Books Recommended:**

- Davidson's Principles and practice of Medicine.
- Latest edition of Kumar & Clark's Clinical Medicine.
- Tropical Medicine from 14<sup>th</sup> edition of Davidson's Principles and Practice of Medicine. (as the chapter is deleted in the present edition.)
- Parasitology in relation to Clinical Medicine by KD Chatterjee.

**Clinical Methods Books recommended:**

- Hutchison's Clinical Method.
- Macleod's Clinical Examination
- Chamberlain's Clinical Methods.

**\* Reference Books:**

- Harrison's Principles of Medicine
- Cecil's Text book of Medicine
- Oxford text book of Medicine
- Brain's Neurology, Cardiology 'HURST' API Text Book of Medicine.

Paper – I	Paper - II
a. Haematology:	a. Psychiatry
b. Immunology, bones & joints, toxicology	b. C.V.S., C.N.S.
c. Pulmonary diseases & endocrinology	c. Infectious diseases, tropical diseases, vitamins, nutrition, oncology, geriatric medicine, aids, genetics etc.
d. Kidney, G.I.T.& liver :	d. Psychiatry
	e. Dermatology& Venereology

### III rd PROFESSIONAL - PART – II SYLLABUS

#### 2 PAEDIATRICS :

##### i) Goal:

The broad goal of the teaching of undergraduate students in Paediatrics is to acquire knowledge and appropriate skills for optimally dealing with major health problems of children and to ensure their optimal growth and development.

##### ii) Objectives:

###### a) Knowledge:

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

- 1) Describe the normal growth and development during foetal life, neonatal period, childhood and adolescence and outline deviations thereof;
- 2) Describe the common pediatric disorders and emergencies in terms of epidemiology, etiopathogenesis, clinical manifestations, diagnosis, rational therapy and rehabilitation;
- 3) State age related requirements of calories, nutrients, fluids, drugs etc., in health and disease;
- 4) Describe preventive strategies for common infectious disorders, malnutrition, genetic and metabolic disorders, poisoning, accidents and child abuse;
- 5) Outline national programmes relating to child health including immunization programmes;

###### b) Skills:

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

- 1) Take a detailed pediatric history, conduct an appropriate physical examination of children including neonates, make clinical diagnosis, conduct common bedside investigative procedures, interpret common laboratory investigations and plan and institute therapy;
- 2) Take anthropometric measurements, resuscitate newborn infants with bag and mask at birth, prepare oral rehydration solution, perform tuberculin test, administer vaccines available under current national programmes, start an intravenous line and provide nasogastric feeding, observe venesection and intraosseous infusion if possible.
- 3) Conduct diagnostic procedures such as lumbar puncture, bone marrow aspiration, pleural tap and ascitic tap and observe kidney biopsy.
- 4) Distinguish between normal newborn babies and those requiring special care and institute early care to all new born babies including care of preterm and low birth weight babies, provide correct guidance and counseling in breast feeding.
- 5) Provide ambulatory care to all sick children, identify indications for specialized / inpatient care and ensure timely referral of those who require hospitalization.

###### c) Integration:

The training in pediatrics should be done in an integrated manner with other disciplines, such as Anatomy, Physiology, Forensic Medicine, Community Medicine, Obstetrics and Physical medicine and Rehabilitation, to prepare the student to deliver preventive, promotive, curative and rehabilitative services for care of children both in the community and at hospital as part of a team.



**Training schedule:**

A model timetable that is suggested is given below:

Semester	Time	Teaching Schedule
4 <sup>th</sup> & 5 <sup>th</sup>	* 08-09 AM * 09-12 AM	Lecturers (8) Clinical Posting (2 wks)
6 <sup>th</sup> & 7 <sup>th</sup>	* 08-09 AM * 09-12 AM	Lecturers (20) Clinical Posting (4 wks)
8 <sup>th</sup> & 9 <sup>th</sup>	* 08-09 AM * 09-12 AM * 12-01 PM * 02-04 PM	Lecturers (40) Clinical Posting (4 wks) Demonstrations / training tutorial Practical demonstration.

\* Additional 08-16 hours of Integrated Seminars.

**A. Training During 4<sup>th</sup> and 5<sup>th</sup> Semester:**

Learning Objective:

**1) Normal Child & his assessment**

Cognitive domain- normal child, growth, development, feeding, immunization of normal new born.

**2) Skills**

- a) Take a detailed Pediatric History
- b) Understand normal growth and development.
- c) Conduct physical examination of children.
- d) Perform anthropometry and interpret growth of the child.
- e) Developmental assessment of a child.
- f) **Ethical conduct ? Medical Conduct** during patient examination

**3) Lectures**

- 1) Introduction to Pediatrics
- 2) Normal growth.
- 3) Normal development.
- 4) Immunization.
- 5) Introduction to newborn and normal newborn baby.
- 6) Temperature regulation in newborn.
- 7) Breast feeding and lactation management.
- 8) Infant and child feeding (include complimentary feeding).

**4) Clinical Training**

Clinical Posting shall be from 9.00 am – 12.00 noon

**i) Tutorials cum demonstration for first one week**

Subjects for demonstration:

- a. Scope of pediatrics, learning objectives and teaching schedule.
- b. History taking – I (Present, Past and family)
- c. History taking-II (Antenatal, Development, Immunization, Feeding)
- d. General Physical examination.
- e. Anthropometry.
- f. Normal Development.

ii) **Case discussion** in wards with emphasis on history, general physical and systemic examination and demonstration of anthropometric techniques, during next one week.

**5) Assessment (End of Posting)** (components related to Pediatrics): Examination skills especially recording of special features of Pediatric history and anthropometry.

## **B) Training During 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> Semesters**

### **i. Learning Objectives**

- a) 6<sup>th</sup> / 7<sup>th</sup> Semester: New born: normal & abnormal and common childhood diseases.
- b) 8<sup>th</sup> / 9<sup>th</sup> Semester: Diseases in Childhood – diagnosis and management.

### **ii. Lectures 6<sup>th</sup> / 7<sup>th</sup> / 8<sup>th</sup> / 9<sup>th</sup> Semester**

1. Birth Asphyxia.
2. Normal fluid and electrolyte balance in children.
3. Low birth weight babies.
4. Neonatal respiratory distress.
5. Jaundice in new born.
6. Neonatal infections.
7. Neonatal convulsions.
8. PEM and its management.
9. Vitamins deficiencies.
10. Nutritional anemia in infancy and childhood.
11. Acute diarrhea.
12. Hypothyroidism in children.
13. Congestive heart failure – diagnosis and management.
14. Congenital heart disease.
15. Rheumatic heart disease.
16. Hypertension in children, including hypertensive emergencies.
17. Acute respiratory infections.
18. Bronchial asthma including status asthmaticus.
19. Nephrotic syndrome.
20. Acute glomerulonephritis and hematuria.
21. Chronic liver disease,
22. Hemolytic anemia including thalassemia.
23. Leukemias.
24. Bleeding and coagulation disorders.
25. Seizure disorders including status epilepticus
26. Cerebral palsy.
27. Common exanthematous illnesses
28. Childhood tuberculosis.
29. Fluid and electrolyte balance – pathophysiology and principles of management and acid-base balance.
30. Shock and anaphylaxis.
31. Adolescent growth and normal puberty.
32. Other childhood malignancies (neuroblastoma, wilms tumour, lymphomas).
33. Coagulation disorders – Haemophilia.

34. Mental retardation.
35. Behaviour disorders.
36. Meningitis.
37. Diphtheria, Pertussis and Tetanus.
38. Enteric fever.
39. Immunization.
40. Common childhood poisonings.
41. Down's syndrome
42. Medical ethics.
43. Pediatric prescription & rational drug therapy.

**Note:**

1. Some of the subjects may require more than one lectures.
2. 8-16 hours of integrated seminars (i.e. 4-8 seminars of 2 hours each) should be incorporated in the syllabus with other departments (i.e., Medicine, Obstetrics and Community Medicine). Individual departments can choose depending on local requirements or faculty. Adjustments may be made in the lecture schedule accordingly to prevent overlap of topics. A list of suggested topics is provided in

**iii. Clinical Training in 6th and 7th Semesters:**

a) Specific Learning Objectives (Skills)

1. Take a detailed Pediatric History.
2. Conduct physical examination of children.
3. Perform anthropometry and interpret growth of the child.
4. Developmental assessment of a child.
5. Distinguish between normal newborn babies and those requiring special care (including low birth weight and preterms).
6. Care of new born at birth and lying in ward.
7. Counselling for breast feeding / infant feeding.

b) Clinical Posting (9.00 am to 12.00 noon)

1. Clinical demonstration.  
Subjects in Neonatology (for 1 week):
  - a. Neonatal History taking.
  - b. Newborn – Nomenclature and assessment of gestational age.
  - c. Care of normal newborn at birth.
  - d. Examination of Newborn.
  - e. Breast feeding.
  - f. Identification of sick new born (common danger signs).
  - g. Low birth weight including temperature regulation and aspects (one day of the posting for immunization related services).
2. Paediatrics - Case discussion – History taking and examination for 3 weeks in wards.
3. Assessment (End of Posting): Emphasis on detailed history, physical examination, interpretation and correlation of abnormal physical findings and normal new born.

**iv. Clinical Training in 8th and 9th Semesters:**

- a) Specific Learning Objectives (Skills)
1. Take detailed pediatric history, conduct an appropriate physical and developmental examination of children including neonates, make clinical diagnosis, conduct common bedside procedures (peripheral smear, Hb, Urine and stool examination, CSF examination by microscope), interpret common laboratory investigations and plan and institute therapy.
  2. Recognize emergencies including neonatal resuscitation and CPR and care to be instituted and relevant procedures performed.
  3. Prepare oral rehydration solution, perform tuberculin test and administer vaccines.
  4. Exposure to diagnostic and therapeutic procedures such as intravenous access, nasogastric feeding, venesection, pleural tap, ascitic tap, bone marrow aspiration, lumbar puncture, liver and kidney biopsy.
- b) Clinical Posting (9.00 am to 4.00 pm)
1. Bed side Demonstration (9.00 am to 12.00 noon) (atleast 1 week of the 4 week posting to be in new born wards) in wards and outpatient department from 9.00 am to 12.00 noon outpatients visits atleast once a week.  
\* Case discussion (20 hours) (Suggested list of Clinical cases to be discussed is provided in Annexure-III)
  2. Clinical tutorials (12-1 pm) (list of subjects in Annexure-III)  
\* Tutorials 20 Hours.
  3. Afternoon Postings (2-4 p.m.)
    - a) Immunization clinic posting.
    - b) Emergency Room Posting.
    - c) Diarrhea Treatment unit posting.
    - d) Nutrition tray & visit to kitchen  
(items c-g constitutes 20 hours).
  4. Assessment (End of Posting)
    - a) Case discussion -50%
    - b) Viva on instrcuments and X-ray/OSCE -25%
    - c) New Born -25%

**COURSE CONTENT IN PEADIATRICS:**

1) **Vital Statistics:**

**Must know:**

- Definition and overview of Paediatrics with special reference to age related disorders. Population structure, pattern of morbidity and mortality in children.
- Maternal, perinatal, neonatal, infant and preschool mortality rates. Definition, causes, present status and measures for attainment of goals.
- Current National programmes such as ICDS, RCH, Vitamin A prophylaxis, UIP, Pulse Polio, ARI, Diarrhea control programme, etc.

**Desirable to know:**

- Other National Programmes.

## 1) Growth and Development:

### Must know:

- Normal growth from conception to maturity.
- Anthropometry – measurement and interpretation of weight, length / height, head circumference, mid-arm circumference. Use of weighing machines, infantometer.
- Interpretation of Growth Charts: Road to Health Card and percentile growth curves.
- Abnormal growth patterns – failure to thrive, short stature.
- Growth pattern of different organ systems such as lymphoid, brain and sex organs.
- Normal pattern of teeth eruption.
- Principles of normal development.
- Important milestones in infancy and early childhood in the areas of Gross Motor, Fine motor, language and Personal-Social development. 3-4 milestones in each of the developmental fields, age of normal appearance and the upper age of normal.
- Preventable causes and assessment of developmental retardation
- Psychological and behavioural problems.

### Desirable to know:

- Age-independent anthropometric measurement-principles and application.
- Sexual Maturity rating.

## 2) Nutrition:

### Must know:

- Normal requirements of protein, carbohydrates, fats, minerals and vitamins for newborn, children and pregnant and lactating mother. Common food sources.
- Breast feeding, Physiology of lactation, composition of breast milk, Colostrum, Initiation and technique of feeding. Exclusive breast feeding – Definition and benefits. Characteristic and advantages of breast milk. Hazards and demerits of prelacteal feed, top milk and bottle feeding. Feeding of LBW babies.
- Infant feeding / weaning foods, method of weaning.
- Assessment of nutritional status of a child based on history and physical examination.
- Protein energy malnutrition – Definition, classification according to IAP / Welcome Trust, acute versus chronic malnutrition. Clinical features of marasmus and Kwashiorkor. Causes and management of PEM including that of complications, Planning a diet for PEM.
- Vitamins – Recognition of vitamin deficiencies (A, D, K, C, B-Complex). Etiopathogenesis, clinical features, biochemical and radiological findings, differential diagnosis and management of nutritional rickets & scurvy. Hypervitaminosis A and D.

### Desirable to know:

- Characteristics of transitional and mature milk (foremilk & hind milk). Prevention and management of lactational failure and feeding problems.
- Definition, causes and management of obesity.

### 1) Immunization:

#### Must know:

- National Immunization Programme.
- Principles of Immunization. Vaccine preservation and cold-chain.
- Types, contents, efficacy storage, dose, site, route, contra-indications and adverse reactions of vaccines – BCG, DPT, OPV, Measles, MMR, and Typhoid: Rationale and methodology of Pulse Polio Immunization.
- Investigation and reporting of vaccine preventable diseases. AFP (Acute Flaccid Paralysis) surveillance.

#### Desirable to know

- Special vaccines like Hepatitis B, H. influenza b, Pneumococcal, Hepatitis A, Chickenpox, Meningococcal, Rabies.

### 2) Infectious Diseases:

#### Must know:

- Epidemiology, basic pathology, natural history, symptoms, signs, complications, investigations, differential diagnosis, management and prevention of common bacterial, viral and parasitic infections in the region, with special reerence to vaccine-preventable diseases: Tuberculosis, Poliomyelitis, Diptheria, Whooping cough, Tetanus including neonatal tetanus, Measles, Mumps, Rubella, Typhoid, Viral Hepatitis, Cholera, Chickenpox, Giardiasis, Amoebiasis, Intestinal helminthiasis, Malaria, Dengue fever, AIDS.

#### Desirable to know:

- Kala-azar, Leprosy, Chlamydia infection.

### 3) Hematology:

#### Must know:

- Causes of anemia in childhood, Classification based on etiology and morphology.
- Epidemiology, recognition, diagnosis, management and prevention of nutritional anemia-iron deficiency, megaloblastic.
- Clinical approach to a child with anemia with lymphadenopathy and hepatosplenomegaly.
- Epidemiology, clinical features, investigations and management of thalassemia.
- Approach to a bleeding child.
- Diagnosis of acute lymphoblastic leukemia and principles of treatment.
- Clinical features and management of hemophilia, ITP.
- Diagnosis and principles of management of lymphomas.

#### Desirable to know:

- Types, clinical features and management of acute hemolytic anemia.
- Non-thrombocytopenic pupura (Henoch-Schonlein purpura).

#### 4) **Respiratory System:**

##### **Must know:**

- Clinical approach to a child with cyanosis, respiratory distress, wheezing. Significance of recession, retraction.
- Etiopathogenesis, clinical features, complications, investigations, differential diagnosis and management of acute upper respiratory infections, pneumonia with emphasis on bronchopneumonia, bronchiolitis, bronchitis. Acute and chronic otitis media.
- Etiopathogenesis, clinical features, diagnosis, classification and management of bronchial asthma. Treatment of acute severe asthma.
- Pulmonary tuberculosis-tuberculous infection versus tuberculous disease, difference between primary and post-primary tuberculosis. Etiopathogenesis, diagnostic criteria in children versus adults. Diagnostic aids-technique and interpretation of mantoux test and BCG test. Radiological patterns, Chemoprophylaxis and treatment.
- Diagnosis and management of foreign body aspiration. Differential diagnosis of stridor.
- Pathogenesis, clinical features and management of pneumothorax, pleural effusion and empyema.

##### **Desirable to know:**

- Multidrug resistant tuberculosis, Bronchiectasis, pulmonary cysts.

#### 5) **Gastro Intestinal Tract :**

##### **Must know:**

- Clinical approach to a child with jaundice, vomiting, abdominal pain, bleeding, hepatosplenomegaly.
- Acute diarrhoeal disease-Etiopathogenesis, clinical differentiation of watery and invasive diarrhoea, complications of diarrheal illness. Assessment of dehydration, treatment at home and in hospital. Fluid and electrolyte management. Oral rehydration, composition of ORS.
- Clinical features and management of acute viral hepatitis, causes & diagnosis of Chronic Liver Disease.
- Common causes of constipation.
- Abdominal tuberculosis.

##### **Desirable to know:**

- Causes, clinical features and management of Portal hypertension, Reye's syndrome, Coeliac disease.
- Drug induced hepatitis.

#### 6) **Central Nervous System:**

##### **Must know:**

- Clinical approach to a child with coma, convulsion, mental retardation.
- Clinical diagnosis, investigations and treatment of acute pyogenic meningitis, encephalitis & Tubercular Meningitis.
- Seizure Disorder-Causes and types of convulsions at different ages. Diagnosis, categorization and management of Epilepsy (Broad outline). Febrile convulsions, definition, types, management.

- Causes, diagnosis and management of cerebral palsy.
- Acute flaccid paralysis – Differentiation between Polio and Gullain-Barre syndrome.
- Microcephaly, Hydrocephalus, chorea.

**Desirable to know**

- Infantile tremor syndrome, infantile hemiplegia.

**7) Cardiovascular System:**

**Must know:**

- Clinical features, diagnosis, investigation, treatment and prevention of acute rheumatic fever. Common forms of rheumatic heart disease in childhood. Differentiation between rheumatic and rheumatoid arthritis.
- Recognition of congenital acyanotic and cyanotic heart disease. Hemodynamics, clinical features and management of VSD, PDA, ASD and Fallot's tetralogy (Cyanotic spells).
- Recognition of congestive cardiac failure in children.
- Hypertension in children –recognition and referral.

**Desirable to know**

- Diagnosis and management of bacterial endocarditis, pericardial effusion, myocarditis.

**8) Genito Urinary System:**

**Must know:**

- Basic etiopathogenesis, clinical features, diagnosis, complications and management of acute post-streptococcal glomerulonephritis and nephrotic syndrome.
- Etiology, clinical features, diagnosis and management of urinary tract infection – acute and recurrent.
- Etiology, diagnosis and principles of management of acute renal failure.
- Causes and diagnosis of obstructive uropathy in children.
- Diagnosis and principles of management of chronic renal failure.
- Causes and diagnosis of hematuria.

**Desirable to know:**

- Renal and bladder stones.
- Hemolytic-uremic syndrome.

**9) Endocrinology :**

**Must know:**

- Etiology clinical features and diagnosis of diabetes and hypothyroidism, hyperthyroidism and goiter in children.

**Desirable to know**

- Delayed and precocious puberty.



**10) Neonatology:**

**Must know:**

- Definition – live birth, neonatal period, classification according to weight and gestation, mortality rates.
- Delivery room management including neonatal resuscitation and temperature control.
- Etiology, clinical features, principles of management and prevention of birth asphyxia.
- Birth injuries-causes and their recognition.
- Care of the normal newborn in the first week of life. Normal variations and clinical signs in the neonate.
- Breast feeding-Physiology and its clinical management.
- Identification of congenital anomalies at birth with special reference to anorectal anomalies, tracheo-esophageal fistula, diaphragmatic hernia, neural tube defects.
- Neonatal Jaundice: causes, diagnosis, principles of management.
- Neonatal infection – etiology, diagnosis, principles of management. Superficial infections, sepsis.
- Low birth weight babies-causes of prematurity and small for date baby, clinical features and differentiation. Principles of feeding and temperature regulation. Problems of low birth weight babies.
- Identification of sick newborn (i.e. detection of abnormal signs – cyanosis, jaundice, respiratory distress, bleeding, seizures, refusal to feed, abdominal distension, failure to pass meconium and urine).

**Desirable to know:**

- Recognition and management of specific neonatal problems – hypoglycemia, hypocalcemia, anemia, seizures, necrotising enterocolitis, haemorrhage.
- Common intra-uterine infections.
- Transportation of sick neonate.

**11) Paediatric Emergencies:**

**Must know:**

- Status epilepticus.
- Status asthmaticus / Acute Severe Asthma.
- Shock and anaphylaxis.
- Burns.
- Hypertensive emergencies.
- Gastrointestinal bleed.
- Comatose child.
- Congestive cardiac failure.
- Acute renal failure

**12) Fluid – Electrolyte:**

**Must know:**

- Principles of fluid and electrolyte therapy in children
- Pathophysiology of acid-base imbalance and principle of management.

**13) Genetics:**

**Must know:**

- Principles of inheritance and diagnosis of genetic disorders.
- Down's syndrome.

**14) Behavioral Problems:**

**Must know:**

- Breath holding spells, nocturnal enuresis, temper tantrums, pica.

**15) Paediatric Surgical Problems :**

**Must know:**

- Diagnosis and timing of surgery of Cleft lip / palate, hypospadias, undescended testis, tracheo-esophageal fistula, hydrocephalus, CTEV, Umbilical and inguinalhernia, anorectal malformations, hypertrophic pyloric stenosis.

**16) Therapeutics:**

**Must know:**

- Paediatric doses, drug combinations, drug interactions, age specific choice of antibiotics etc.,

**Suggested Topics for Integrated Seminars**

1. Convulsions including status epilepticus
2. Coma
3. PUO
4. Jaundice
5. Portal hypertension
6. Respiratory failure
7. Shock and anaphylaxis
8. Rheumatic Heart Disease
9. Hypertension.
10. Diabetes mellitus
11. Hypothyroidism
12. Anemia
13. Bleeding
14. Renal failure
15. Tuberculosis
16. Malaria
17. HIV infection.
18. Poliomyelitis and AFP surveillance.
19. Perinatal asphyxia (with obstetrics)
20. Intrauterine growth retardation (with obstetrics)

### **List of Tutorials**

1. Protein energy malnutrition.
2. Rickets.
3. Acute Diarrhea including fluid therapy.
4. Persistent Diarrhea.
5. Hepatosplenomegaly and splenohepatomegaly.
6. Hemolytic anemia and other anemias.
7. Bleeding child.
8. Leukemia.
9. Generalised lymphadenopathy.
10. Congenital heart disease. (left to right shunt and right to left shunt).
11. Rheumatic Heart disease.
12. Nephrotic syndrome (generalized anasarca).
13. Acute glomerulonephritis.
14. Pleural effusion / consolidation.
15. Bronchial asthma (respiratory distress).
16. Upper respiratory infections.
17. Bronchopneumonia.
18. Rash.
19. Meningitis.
20. Hemiparesis.
21. Monoparesis including acute flaccid paralysis.
22. Mental retardation (Preventable and cerebral palsy).
23. Epilepsy and febrile convulsions.
24. Hydrocephalus.
25. Normal newborn.
26. Low birth weight babies.
27. Preterm babies.
28. Neonatal jaundice.
29. Neonatal septicemia.
30. Newborn resuscitation.
31. Respiratory distress in new born.

### **List of usual Clinical Cases to be Covered**

1. Normal New born
2. Normal development in a child.
3. Low birth weight babies
4. Temperature regulation in new born.
5. Neonatal Infections.
6. Neonatal Respiratory distress
7. Jaundice in New born.
8. Malaria and Typhoid Fever
9. Immunization.
10. Adolescent growth and disorders of puberty
11. Common exanthematous illness
12. Infant Feeding.
13. Xerophthalmia & Rickets.
14. Protein energy malnutrition.

15. Fluid and electrolyte imbalance.
16. Acute diarrhea
17. Persistent diarrhea
18. Chronic liver disease
19. Seizure disorders.
20. Acute flaccid paralysis
21. Cerebral palsy & mental retardation.
22. Leukemias
23. Hemolytic anemias & Thalassemia
24. Bleeding and coagulation disorders
25. Iron deficiency anemia.
26. Ac. Glomerulonephritis & Hematuria.
27. Nephrotic Syndrome.
28. Rheumatic fever and heart disease
29. Acute respiratory infections.
30. Congenital heart disease
31. Congestive heart failure
32. Meningitis
33. Bronchial asthma
34. Behavioural Disorders
35. Childhood tuberculosis.

#### **Suggested List of Instruments And X-Rays**

##### List of Instruments:

- |                          |                    |
|--------------------------|--------------------|
| ➤ Lumber puncture needle | Ambu bag and mask  |
| Liver biopsy needle      | Tongue depressor   |
| Bone marrow aspiration   | Tuberculin syringe |
| Intravenous Cannula      | Endotracheal tube  |
| Ryles tube               | Laryngoscope       |
| Emergency drugs          | Vaccines.          |

##### List of X-rays:

- Pneumonia, primary complex – hilar and parahilar lymphadenopathy, military tuberculosis, obstructive emphysema, Pleural effusion, pneumothorax, normal thymus, primary complex, Congenital heart disease, increased and decreased pulmonary vascularity, cardiomegaly, Rickets, Scurvy, Hemolytic anemia, skull (sutural separation, enlarged sella and raised intracranial tension).

#### **RECOMMENDED BOOKS**

1. IAP Text Book of Pediatrics.
2. Essential Pediatrics by O.P.Ghai.
3. Text Book of Neonatology by Meharban Singh.
4. Text Book of Pediatrics by Suraj Gupte.
5. Clinical methods in Pediatrics by Meharban Singh
6. Principles of Pediatrics, by Tirthankar Dutta.
7. Approach to Pediatric Problems by S.K.Mittal & Vijay Aggarwal.

#### **Reference Books:**

- Text Book of Pediatrics by Nelson.

### III rd PROFESSIONAL - PART – II SYLLABUS

#### (3) GENERAL SURGERY (including Paediatric Surgery)

##### (i) Goal :

The broad goal of the teaching of undergraduate students in Surgery is to produce graduates capable of delivering efficient first contact surgical care.

##### (ii) Objectives :

###### (a) KNOWLEDGE :

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

- (1) Describe aetiology, pathophysiology, principles of diagnosis and management of common surgical problems including emergencies, in adults and children;
- (2) define indication and methods for fluid and electrolyte replacement therapy including blood transfusion;
- (3) define asepsis, disinfection and sterilization and recommend judicious use of antibiotics;
- (4) describe common malignancies in the country and their management including prevention;
- (5) enumerate different types of anaesthetic agents. Their indications, mode of administration, contraindications and side effects.

###### (b) SKILLS:

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

- (1) Diagnose common surgical conditions both acute and chronic in adult and children;
- (2) plan various laboratory tests for surgical conditions and interpret the results;
- (3) identify and manage patients of haemorrhagic, septicaemic and other types of shock;
- (4) be able to maintain patent air-way and resuscitate;
  - (i) a critically injured patient;
  - (ii) patient with cardio-respiratory failure;
  - (iii) a drowning case;
- (5) monitor patients of head, chest, spinal and abdominal injuries, both in adults and children.
- (6) Provide primary care for a patient of burns;
- (7) Acquire principles of operative surgery, including preoperative operative and post operative care and monitoring;
- (8) Treat open wounds including preventive measures against tetanus and gas gangrene;
- (9) Diagnose neonatal and paediatric surgical emergencies and provide sound primary care before referring the patient to secondary / tertiary centres;
- (10) Identify congenital anomalies and refer them for appropriate management.

**In addition to the skills referred above in items(1) to (10), he shall have observed /assisted /performed the following:**

1. Incision and drainage of abscess;
2. Debridement and suturing open wound;
3. Venesections;
4. Excision of simple cyst and tumours;
5. Biopsy of surface malignancy;
6. Catheterisation and nasogastric intubation;
7. Circumcision;
8. Meatotomy;
9. Vasectomy;
10. Peritoneal and pleural aspirations;
11. Diagnostic proctoscopy;
12. Hydrocele operation;
13. Endotracheal intubation;
14. Tracheostomy and cricothyroidotomy;
15. Chest tube insertion

**(c) INTEGRATION:**

The undergraduate teaching in surgery shall be integrated at various stages with different pre and para and other clinical departments

**THEORY SYLLABUS IN SURGERY:**

<b>Sl.No.</b>	<b>Name of the unit</b>	<b>No.of Hours</b>
1.	Wounds-closed and open, wound-healing and management.	} 16
2.	Hemorrhage and shock	
3.	Fluid and Electrolyte balance & Acid-Base Balance.	
4.	Blood transfusion	
5.	Pyogenic infections – Local, diffuse and septic	
6.	Common clinical lesions – swelling , ulcer etc.,	
7.	Thermal injuries, burns, electrical injuries;	} 16
8.	Ulceration and Gangrene : Simple non- specific ulceration, acute and chronic ulcers, skin grafting, gangrene, threatened, dry and moist, vascular, infective, traumatic and toxic gangrene	
9.	Chemotherapy: Definition, Sulphanamide group penicillin, Streptomycin and the newer antibiotics, principles of radiation.	

10. Diseases of the skin; Boils , Carbuncles, Impetigo, Tuberculosis, Infections, Growth, Cysts and Sebaceous Glands, Nails;
11. Infections of the Fingers and hand :Anatomy, Prophylaxis The distal Segment of the fingers, Tenosynovitis, Abscess in the palm, Lymphangitis
12. The surgery of the Blood vessels: Arteries: Injury, Diseases, Atheroma, Arteriosclerosis, Aneurysm, Thrombosis and Embolism; Veins: Injury, Phlebitis Varicose Veins, growths of the blood vessels;
13. The diseases of lymphatic system: The diseases and growths of lymphatics, elephantiasis, infections of the lymph glands, lymphoedema, Lympho sarcoma, Lymph nodes – Diseases and surgery, slides of TB. And Hodgkins.
14. Diseases of the Mouth Palate, Lips, Cheek, Tongue, Teeth, Gums jaws – Salivary glands, Maxillofacial injuries, Tumours of jaw and mouth
15. Anatomy of oesophagus, stomach, small and large bowel and anal canal ( including vermiform appendix Peritoneum, congenital anomalies) Diseases affecting them with emphasis on cancer colon and volvulus of sigmoid – Specimens of Cancer colon and Ileocaecal TB. & Colostomy
  - a) Anorectal suppuration
  - b) Haemorrhoids internal and external
  - c) Ulcers and Tumours of Anal Canal
  - d) Rectum – Specimens of cancer Rectum
16. Thyroid – surgical anatomy, Physiology Classification of goitres, thyrotoxicosis, tumours and surgery – specimens and slides of Thyrotoxicosis, Carcinoma and Colloid goitre.
17. Parathyroid & Adrenal glands.  
Breast \_ Surgical Anatomy, Physiology, Diseases and Surgery; specimens and slides of Fibroadenoma and Carcinoma
18. Hernias
19. Penis – Ulcers and tumors of penis
20. Anatomy of abdominal wall – ventral hernia- Abdominal incision and Mc. Burney's point
  - b) Anatomy of inguinal canal and inguinal hernia- Bassinis' operation.
  - c) Other types of Hernia
21. Abdominal injuries-open and closed.

- 22. Anatomy and diseases of liver
    - a. Abscess
    - b. Tumours
    - c. Specimens of Hydatid cyst and liver abscess.
    - d. Cholecystitis and cholelithiasis- Specimens of Cholecystitis and gall stones.
    - e. Surgical Jaundice
    - f. Pancreatitis, Pancreatic Calculi and tumours
    - g. Spleen
    - h. Testis
  - 23. Thorax and chest injuries.
  - 24. Urinary symptoms, investigations of urinary tract
  - 25. Kidney – Ureter, Bladder, Prostate, Seminal Vesicles, Urethra and Genito Urinary Surgery.
  - 26. Cranium, spinal cord, Peripheral nerves and Head injuries.
- } 32

**OPERATIVE SURGERY:**

- 1. Sepsis and Antisepsis
- 2. Sterilization –Methods
- 3. General surgical Techniques: Antiseptic and aseptic surgery, Theatre arrangements and technique, Ligature materials, pre-operative preparation and post-operative treatment.
- 4. Surgical anatomy of neck with block dissection

Demarcation of syllabus for University Exam paperwise:-

**Paper-I** : Units 1 to 14

**Paper-II** : Units 15 to 26.

**Recommended Books:**

- 1. Short Practice of Surgery by Bailey & Love.
- 2. Principles of Surgery by Schwartz
- 3. Text Book of Surgery by Sabiston
- 4. Text Book of Surgery by Das
- 5. Manual of Clinical Surgery by Das K.
- 6. Practical guide to operative Surgery by Das S.
- 7. Current Surgical Diagnosis & Treatment by Lawrence.
- 8. Demonstration of Physical signs in Clinical Surgery by Hamilton Bailey.
- 9. Manual of Surgery by Dr.G.Lakshmana prasad.



### III rd PROFESSIONAL - PART – II SYLLABUS

#### 4) ORTHOPAEDICS & TRAUMATOLOGY

##### i) Theory Syllabus

Sl. No.	CHAPTER	No.of Hours
1.	<b>ORTHOPAEDICS : GENERAL</b> History- Orthopaedics in India- Emblem- Deformities- Acquired deformities- Causes – Principle & management – clinical examination of an orthopaedic patient- investigations, Radiological and imaging Techniques- walk cycle – Abnormal gaits – splinting – traction Procedures – Materials – Preventive Orthopaedics – Geriatric Orthopaedics.	2
2.	<b>CONGENITAL DEFORMITIES:</b> Etiology :- Congenital talipes- equino varus- congenital dislocation hip – congenital genu recurvatum, Sprengel's – Madelung's deformity – congenital torticollis – Spina Bifida.	2
3.	<b>DEVELOPMENTAL DISORDERS OF BONES:-</b> Anatomical and physiological factors-multiple exostosis, Enchondromatosis-Chondro osteodystrophy- Osteogenesis imperfecta – Fibrous dysplasia- Neurofibromatosis – Congenital pseudarthrosis of tibia.	2
4.	<b>INFECTIONS OF BONES AND JOINTS:</b> Osteomyelitis - Acute pyogenic osteomyelitis-chronic osteomyelitis – Primary Subacute osteomyelitis Brodie's abscess-Garre's osteomyelitis, Typhoid osteomyelitis – Septic spondylitis – Brucellar osteomyelitis – mycotic infection of bone- Syphilitic infection of bone – Parasitic infection of bone. Arthritis – Acute Pyogenic arthritis – Septic arthritis of infancy – smallpox arthritis – Acute Rheumatic arthritis- Chronic arthritis- Syphilitic infection of joints – Guinea worm arthritis.	3
5.	<b>BONE AND JOINT TUBERCULOSIS:</b> Tuberculosis of the spine – Pott's paraplegia- Tuberculosis of the Hip Joint & Knee joint – tuberculosis of other joints- sacro iliac joint – Ankle – Tarsal joints – Shoulder – Elbow- Wrist; Tuberculosis osteomyelitis – Dactylitis – caries Rib- BCG Osteomyelitis – Poncet's tuberculous rheumatism.	4
6.	<b>GENERALISED DISEASES OF BONES:</b> Rickets-Osteoporosis-Parathyroid Osteodystrophy- Paget's disease- Fluorosis.	1
7.	<b>DISEASES OF JOINTS :</b> Synovial fluid- classification- ankylosing spondylitis- osteoarthritis knee-gout-haemophilic arthritis – Villonodular synovitis.	1

Sl. No.	CHAPTER	No.of Hours
8.	AVASCULAR NECROSIS OF BONE AND EPIPHYSEAL OSTEOCHONDRITIS: Definition- Pathogenesis- Clinical features- Radiological staging, Epiphyseal osteochondritis –Perthes disease- Osgood Sch letter's disease.	1
9.	TUMORS OF BONE Osteoid osteoma-Osteoma- Osteochondroma- Aneurysmal bone cyst-osteosarcoma- Giant cell tumour – Chondroblastoma- Ewing's Sarcoma Plasmacytoma Bone metastasis.	4
10.	NEUROLOGICAL AND MUSCULAR DISORDERS : Cerebral Palsy- Types – Treatment – Anterior poliomyelitis – stages Management – Physiotherapy.	1
11.	REGIONAL CONDITIONS OF NECK AND UPPER LIMB : Spondylosis – Cervical rib – Torticollis – Pariarthrits shoulder Tennis elbow – Cubitus varus – Ganglion – De quervain's disease- Trigger finger – carpal tunnel syndrome – Dupuytren's contracture.	2
12.	REGIONAL CONDITIONS OF THE SPINE AND LOWER LIMB: Spondylolithesis – Fibrositis back – Hip clinical Examination- Coxa vara – Genu valgum – Genu varum- Recurrent dislocation of patella- Plantar Fascitis.	2
13.	PHYSICAL MEDICINE AND REHABILITATION: Definitions – Rehabilitation- Medical Rehabilitation- Physical Medicine- Massage therapy – Exercise therapy- Hydrotherapy – Electrotherapy – Short wave diathermy- Ultrasound therapy- Laser therapy – Lower limb prosthesis – Upper limb prosthesis.	5
14.	INJURIES TO BONES AND JOINTS :- GENERAL Fractures – Types of fractures – Mechanism of fracture – Biology of fracture healing – Factors which influence fracture healing- General Principles of management of fractures- Diagnosis- Conservative management – Functional Cast Bracing – Open reduction and internal fixation. Complications of Fractures.	5
15.	INJURIES OF THE SHOULDER AND ARM: SHOULDER:- Fracture clavicle – Injuries of the Acromio Clavicular joint – Dislocation of the shoulder joint –Recurrent dislocation of shoulder. The arm – fracture of the Proximal end of humerus- Fracture neck of humerus –Fracture of the shaft of the humerus.	2

Sl. No.	CHAPTER	No.of Hours
16.	<p>INJURIES OF ELBOW, FOREARM AND WRIST</p> <p>Elbow – Supra condylar fracture – Intercondylar fracture – Fracture of the medial epicondyle-Fracture of the lateral condyle to the humerus – Dislocation of the elbow – Fractures of the head of the radius – Fractures of the neck of the radius – Fractures of the olecranon. The forearm-Fracture both bone forearm – Monteggia fracture dislocation- Gallezzi fracture dislocation.</p> <p>The Wrist- Colles fracture – Fracture separation of lower epiphysis of radius – Smith’s fracture – Barton’s fracture Fracture of Scaphoid bone – Dislocation of the Lunate bone.</p>	3 2
17.	<p>INJURIES OF THE HAND :</p> <p>Closed injuries – Fractures of Metacarpal bones – Fractures of the phalanges – Dislocation of metacarpo phalangeal joint Bennett’s fracture dislocation – Open injuries- Principles of management – Tidy wounds-Crush injuries – Tendon injuries, Flexor tendon injuries- Extensor tendon injuries – Mallet finger.</p>	1
18.	<p>INJURIES OF THE HIP AND THIGH:</p> <p>The Hip – Dislocation of the hip joint :- Posterior dislocation – Anterior dislocation – Central dislocation – Anatomy and Vascular supply- Fracture of the neck of femur- Intracapsular fracture- Trochanteric fracture of femur. The Thigh :- Fracture shaft of the femur – Proximal third –Middle third – Distal third – Fracture femur in children.</p>	4 1
19.	<p>INJURIES OF THE KNEE, LEG :-</p> <p>The Knee :- Fracture patella The Leg :- Fracture of Tibia and Fibula.</p>	1 1
20.	<p>INJURIES OF THE ANKLE AND FOOT :-</p> <p>The Ankle – Fracture and fracture dislocation of the ankle Epiphyseal injury lower end Tibia. The foot :- Fractures of the talus- Fracture of the calcaneum- fractures of the metatarsals and phalanges.</p>	1
21.	<p>INJURIES OF THE SPINE :</p> <p>Dorso lumbar spine – Classification- Mechanism and Types of injuries – stable fractures with out para plegia- Fracture dislocation with paraplegia – Management of the fracture – management of paraplegia – Bed sore – Bladder care The cervical spine :- Lower Cervial spine injuries – Upper cervical spine injuries.</p>	1

Sl. No.	CHAPTER	No.of Hours
22.	FRACTURES OF THE PELVIS : Fractures of the Pelvis – Mechanism – Classification- Management – Fracture of the acetabulum- Fracture of the Sacrum and Coccyx.	1
23.	POLY TRAUMA Poly Trauma – Incidence – Primary Survey – Glasgow coma Scale – Trauma –Resuscitation – Management.	1
24.	COMPOUND FRACTURES : Classification – Emergency surgical treatment – Management of Wound – management of infected open fracture – Complications of open fracture.	1
25.	SOFT TISSUE INJURIES INCLUDING SPORTS INJURIES : Injuries to ligaments : Cruciate ligament injuries- injuries to Semilunar cartilage.	1
26.	NERVE INJURIES : Pathology of nerve injury –Wallerian degeneration Regeneration – Injuries of the peripheral nerves – Classification – Mechanism of closed nerve injuries – Diagnosis of nerve lesion – clinical examination – management of nerve injuries.	2

**Recommended Books:**

- a. Text Book of Orthopaedics and Traumatology by Natarajan.
- b. Text Book of Orthopaedics by Maheswari
- c. Outlines of Orthopaedics by Adams.
- d. Outlines of Fractures by Adams.
- e. Clinical Orthopaedics Examination by Mc.Rae.
- f. Text book of Orthopaedics by Dr.C.Vyaghreswarudu.
- g. Text book of Orthopaedics by Graham Appley.

### III rd PROFESSIONAL - PART – II SYLLABUS

#### 5. OBSTETRICS AND GYNAECLIOLOGY :

Obstetrics and Gynaecology to include family welfare and family planning.

##### (i) Goal :

The broad goal of under graduate students in obstetrics and Gynecology is that he/she shall acquire understanding of anatomy , physiology and pathophysiology of the reproductive system and gain the ability to optimally manage common conditions affecting it.

##### ii) Objectives :

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

- (1) Outline the anatomy, physiology and pathophysiology of the reproductive system and the common conditions affecting it ;
- (2) Detect normal pregnancy labour puerperium and manage the problems he/she is likely to encounter therein;
- (3) List the leading causes of maternal and perinatal morbidity and mortality;
- (4) Understand the principles of contraception and various techniques employed , methods of medical termination of pregnancy, sterilisation and their complications;
- (5) Identify the use, abuse and side effects of drugs in pregnancy, pre-menopausal and post menopausal periods;
- (6) Describe the national programme of material and child health and family welfare and their implementation at various levels;
- (7) Identify common gynecological diseases and describe principles of their management;
- (8) State the indications, techniques and complications of surgeries like Caesarian section, laprotomy, abdominal and vaiginal hysterectomy, Fothergill's operation, and vaccum aspiration for Medical Termination of Pregnancy (MTP).

#### THEORY SYLLBUS: SYLLABUS OF OBSTETRICS:

- 1) Anatomy of the Genital Tract
- 2) Physiology of the Genital Tract
- 3) Anatomy of the Peivis
- 4) Anatomy of the Foetal Skull
- 5) Maturation & Fertilisation of ovum
- 6) Development of Placenta
- 7) Endocrinology of Placenta
- 8) Diagnosis of Pregnancy.
- 9) Signs & Symptoms of Pregnancy.
- 10) Physiological Changes in Pregnancy.

- 11) Fetal Physiology
- 12) Physiology of Labour
- 13) Physiology of Puerperium.
- 14) Breast, Lactation.
- 15) Abortion
- 16) Ectopic Gestation.
- 17) Trophoblastic Tumors
  - a) Mole
  - b) Choriocarcinoma
- 18) Anatomy of Pelvic Floor
- 19) Physiology of Menstruation.
- 20) Development of Genital Organs
- 21) Gynaecological Diagnosis
- 22) Physiology of Menopause
- 23) Abnormalities of Menstruation.
- 24) S.T.D. & HIV
- 25) Leucorrhoea
- 26) Hyperemesis
- 27) PIH
- 28) Eclampsia
- 29) Heart Disease complicating Pregnancy
- 30) Anaemia complicating Pregnancy
- 31) Rh incompatibility
- 32) Face, Brow Presentation
- 33) Occipitoposterior
- 34) Transverse lie
- 35) Breech
- 36) Multiple Pregnancy
- 37) Abnormal Labour
- 38) Bad Obstetric history
- 39) Cephalopelvic disproportion
- 40) IIIrd stage complication
- 41) Induction of Labour

- 42) Rupture Uterus
- 43) Obstructed Labour
- 44) Caesarean Section
- 45) Post Caesarean Pregnancy
- 46) Puerperal Sepsis
- 47) Intra Uterine Growth Retardation
- 48) Ultrasonography & Radiology
- 49) Social obstetrics
- 50) Neonatology

**FAMILY PLANNING:**

- 1. Anatomy of Pelvic Floor
- 2. Contraception
  - A. Temporary Methods
    - a. Barrier
    - b. IUCD
    - c. Hormonal – Oral, Injectable, Implants,
  - B. Permanent
    - a. Tubectomy – Minilap, Puerperal sterilization, Laparoscopic sterilization
    - b. Vasectomy & N.S.V
    - c. Recanalisation – Fallopian tube, Vas
    - d. Counselling
- 3. Antenatal Care
- 4. Anaemia Complicating Pregnancy
- 5. Pregnancy Induced Hypertension(PIH)
- 6. Antepartum Hemorrhage

**GYNAECOLOGY**

- 1. Genital Tract Anomalies
- 2. Infertility
- 3. Anomalies of uterus
- 4. Endometriosis
- 5. Amenorrhoea
- 6. Dysfunctional uterine bleeding
- 7. Post Menopausal Bleeding
- 8. pelvic Inflammatory disease
- 9. genital T.B.
- 10. Genital Fistulae
- 11. Stress incontinence
- 12. Trophoblastic disease
- 13. Prolapse Uterus
- 14. Retroversion & Chronic inversions of Uterus
- 15. Gynaecological Oncology

- Cancer Cervix
  - Cancer Breast
  - Cancer Body of uterus
  - Cancer Vulva
  - Cancer ovary
16. Endoscopy
  17. Chemotherapy & Radiotherapy
  18. Medical Termination of Pregnancy
  19. Hormones in Gynaecology
  20. Inter sex

**TOPICS FOR INTEGRATED TEACHING**

1. Anaemia complicating pregnancy
2. Hypertension complicating Pregnancy
3. diabetes complicating Pregnancy
4. Heart disease complicating pregnancy
5. T.B. Asthma complicating Pregnancy
6. Hepatitis complicating pregnancy
7. STD complicating pregnancy
8. HIV complicating pregnancy
9. Acute Surgical Emergencies
10. Acute Renal failure
11. Acute abdomen in immediate post operative period.

**\* Recommended Text Books:**

1. Shaw's text book of Gynaecology by Dr.Daftari & V.Pdubaidri
2. Text book of Obstetrics – by Dr.DL.Dutta
3. Text Book of Gyanecology – by Dr.D.C.Dutta.
4. Text Book of Obstetrics – Dr.C.S.(Dawn)
5. Text Book of Gynaecology – Dr.C.S.Dawn
6. Text Book of Obstetrics – Dr.G.R.K.Raju
7. Manual of Obstetrics – Dr.Sirish Daftary
8. Text Book of Obstetrics – by Mudaliar
- 9.

**\* Reference Books:**

1. Williams – Obstetrics.
2. Jeffcoetes Gynaecology
3. Practical Obstetrics by landonala
4. Fertility control by Dr.Chand
5. Post graduate obstetrics & Gynaecology ol-I & II by Dr.Ratnam & Dr.Arul Kumaran  
Management of labour – Dr.Arul Kumaran.

Paper – I

- Obstetrics including social obstetrics.

Paper - II

- Gynaecology family welfare and Demography



**SCHEDULE OF CLINICAL POSTINGS FROM 3<sup>RD</sup> TO 9<sup>TH</sup> SEMETERS**

Total Subject	3 <sup>rd</sup> Semester (Weeks)	4 <sup>th</sup> Semester (Weeks)	5 <sup>th</sup> Semester (Weeks)	6 <sup>th</sup> Semester (Weeks)	7 <sup>th</sup> Semester (Weeks)	8 <sup>th</sup> Semester (Weeks)	9 <sup>th</sup> Semester (Weeks)	Total (Weeks)
1	2	3	4	5	6	7	8	9
General Medicine***	6	-	4	-	4	6	6	26
Paediatrics	-	2	-	2	-	4	2	10
Tuberculosis and Chest Diseases	-	2	-	-	-	-	-	02
Skin and STD	-	2	-	2	-	2	-	06
Psychiatry	-	-	2	-	-	-	-	02
Radiology*	-	-	-	-	2	-	-	02
General Surgery****	6	-	4	-	4	6	6	26
Orthopaedic**	-	-	4	4	-	-	2	10
Ophthalmology	-	2	-	4	4	-	-	10
Ear, Nose and Throat	-	2	-	4	4	-	-	08
Obstetrics ***** and Gynaecology including Family welfare	2	4	4	-	4	4	6	24
Planning Community Medicine	4	4	-	4	-	-	-	12
Emergency Medicine	-	-	-	-	-	-	-	-
Casualty	-	-	-	2	-	-	-	02
Dentistry	-	2	-	-	-	-	-	02
Total (in Weeks)	18	20	18	22	22	22	22	142

Clinical methods in Medicine and Surgery for whole class will be for 2 weeks each respectively at the start of 3<sup>rd</sup> semester.

- \* This posting includes training in Radiodiagnosis and Radiotherapy where existent.
- \*\* This posting includes exposure to Rehabilitation and Physiotherapy.
- \*\*\* This posting includes exposure to laboratory medicine and infectious diseases.
- \*\*\*\* This posting includes exposure to dressing and Anaesthesia
- \*\*\*\*\* This posting includes maternity training and Family medicine and the 3<sup>rd</sup> semester posting shall be in Family welfare planning.

### **SUGGESTED MODEL TIME TABLES:**

Following minimum teaching hours are prescribed in various disciplines

#### **A. PRE CLINICAL SUBJECTS :-**

(Phase - I First & Second Semesters)

Foundational Course stage - I

Anatomy	650 Hrs
Physiology	480 Hrs
Biochemistry	240 Hrs
Community	60 Hrs

#### **B. PARA CLINICAL SUBJECTS :-**

(Phase – II Third to Seventh Semesters)

Foundational course stage - II

Pathology	300 Hrs
Pharmacology	300 Hrs
Microbiology	250 Hrs.
Community Medicine	200 Hrs.
(Including 8 weeks posting of 3 hrs. each )	
Forensic Medicine	100 Hrs.

Teaching of paraclinical subjects shall be 4 hours per day. In 3<sup>rd</sup> Semester and 3hrs. per day in 4<sup>th</sup> and 5<sup>th</sup> Semesters (See attached time table).

#### **C. CLINICAL SUBJECTS :-**

(Phase – II and III – 3<sup>rd</sup> to 9<sup>th</sup> Semesters)

1. Clinical postings as per chart attached.

2. Theory lectures, demonstration and Seminars etc., in addition to clinical postings as under the clinical lecturers to be held from 4<sup>th</sup> semester onwards (See attached Time Table)

Gen.Surgery	300 Hrs
Gen.Medicine	300 Hrs
Paediatrics	100 Hrs
Pulmonary Diseases	20 Hrs
Psychiatry	20 Hrs
Skin and STD	30 Hrs
Community Medicine	50 Hrs
Anaesthesia including Emergency medicine	20 Hrs
Orthopaedics	100 Hrs
Ophthalmology	100hrs.
E.N.T.	70 Hrs
Radiology	20 Hrs.
Dentistry	10 Hrs.
Obst & Gynaec.	300 Hrs.

**NOTE :** This period of training is the minimum suggested. Adjustments where required depending on availability of time be made.

This period of training does not include university examination period.  
Extra time available be devoted to other sub – specialties

During semesters 3 to 9 clinical posting of 3 hours duration is suggested for various departments after introductory course in clinical methods in medicine and surgery of two weeks each, for the whole class.

MODEL TIME TABLE

(Subject to modifications as per local situation).

Phase-I

First Semester:

Days Time	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4
Mon	Anat.	Anat.	Anat.	Anat.	L	Phys.	Phys.	Phys.
Tues	Anat.	Anat.	Anat.	Anat.	U	Phys.	Phys.	Phys.
Wed	Anat.	Anat.	Anat.	Bioch.	N	Bioch.	Bioch.	Bioch.
Thurs	Anat.	Anat.	Anat.	Phys.	C	Phys.	Phys.	Phys.
Fri	Anat.	Anat.	Anat.	Anat.	H	Bioch	Bioch	Bioch
Sat	Anat.	Anat.	Anat.	Phys.		Phys.	Phys.	Phys.

Phase-I  
Second Semester:

Days Time	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4
Mon	Phys.	Phys.	Phys.	Anat.	L	Anat.	Anat.	Anat.
Tues	Phys.	Phys.	Phys.	Anat.	U	Anat.	Anat.	Anat.
Wed	Bioch.	Bioch.	Bioch.	Bioch.	N	Anat.	Anat.	Anat.
Thurs	Phys.	Phys.	Phys.	Phys.	C	Anat.	Anat.	Anat.
Fri	Bioch	Bioch	Bioch	Anat.	H	Anat.	Anat.	Anat.
Sat	Phys.	Phys.	Phys.	Phys.		Anat.	Anat.	Anat.

NOTE: Community Medicine lecture be arranged in consultation with other preclinical departments in the above timings.

Phase-II

Third Semester:

Days Time	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4
Mon	Para Clinical lecturers	Clinical Postings			Para clinical lectures	L	Practicals	
Tues	Do.	Do.			Do.	U	Para Clinical	
Wed	Do.	Do.			Do.	N	Do	
Thurs	Do.	Do.			Do.	C	Do	
Fri	Do.	Do.			Do.	H	Do	
Sat	Do.	Do.			Do.		Do	

Phase-II  
Fourth and Fifth Semesters:

Days Time	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4
Mon	Lectures in Clinical Subjects	Clinical Postings			Lectures in Para clinical Subjects	L	Practicals	
Tues	Do.	Do.			Do.	U	Para Clinical	
Wed	Do.	Do.			Do.	N	Do	
Thurs	Do.	Do.			Do.	C	Do	
Fri	Do.	Do.			Do.	H	Do	
Sat	Do.	Do.			Do.		Do	

PHASE-III

Sixth, Seventh, Eight & Ninth Semesters:

Days Time	8-9	9-10	10-11	11-12	12-1	1-2	2-3	3-4
Mon	Lectures in Clinical Subjects.	Clinical Postings			Lectures or Demonst ra-tions in clinical	L	Practicals Demonstra- tions in clinical subjects.	
Tues	Do.	Do.	Do.	Do.	Do.	U	Do	
Wed	Do.	Do.	Do.	Do.	Do.	N	Do	
Thurs	Do.	Do.	Do.	Do.	Do.	C	Do	
Fri	Do.	Do.	Do.	Do.	Do.	H	Do	
Sat	Do.	Do.	Do.	Do.	Do.		Do	

Note: These are suggested time tables, Adjustments where required, depending upon the availability of time and facility be made.



**The Andhra Pradesh Gazette Notification regarding prohibition of Ragging.**

**THE ANDHRA PRADESH GAZETTE  
PART-IV.B. EXTRAORDINARY  
PUBLISHED BY AUTHORITY**

No.36] HYDERABAD, THURSDAY, AUGUST 21, 1997

**ANDHRA PRADESH ACTS, ORDINANCES AND REGULATIONS Etc.**

The following Act of the Andhra Pradesh Legislative Assembly received the assent of the Governor on the 19<sup>th</sup> August, 1997 and the said assent is hereby first published on the 21 at August, 1997 in the Andhra Pradesh Gazette for general information.

**ACT No. 26 of 1997**

**AN ACT TO PROHIBIT RAGGING IN EDUCATIONAL INSTITUTIONS IN THE STATE OF ANDHRA PRADESH.**

Be it enacted by the Legislative Assembly of the State of Andhra Pradesh in the Forty-eighth year of the Republic of India, as follows:-

1. (1) This Act may be called the Andhra Pradesh Prohibition of Ragging Act, 1997.
- (2) It extends to the whole of the State of Andhra Pradesh.
- (3) It shall be deemed to have come into force with effect from 4<sup>th</sup> July.

**Short title, extent and commencement**

2. In this act, unless the context otherwise requires:-

- a) 'act' includes words either spoken or written or signs or sounds or gestures of visible representations;
- b) 'Educational Institution' means and includes a college, or other institution by whatever name called, carrying on the activity or imparting education therein (either exclusively or among other activities); and includes an orphanage or boarding home or hostel or tutorial institution or any other premises attached thereto.
- c) 'government' means the State Government of Andhra Pradesh.
- d) 'notification' means the notification published in the Andhra Pradesh Gazette and the word 'notified' shall be construed accordingly;
- e) 'ragging' means doing an act which causes 'or is likely' to cause insult or annoyance of fear or apprehension or threat or intimidation or outrage of modesty' or injury to a student.
- f) 'student' means a person who is admitted to an educational institution. And whose name is lawfully borne on the attendance register thereof;
- g) All words and expressions used but not defined in this Act shall have the meanings assigned to them under the Andhra Pradesh Education Act, 1982 or Indian Penal Code, 1660 respectively.

**Definitions.**

**A.P. Act 1 of 1982 Central Act 45 of 1860.**

3. Ragging within or outside any educational institution is prohibited.

**Prohibition of Ragging.**

4. Whoever, with the intention of causing ragging or with the knowledge that he is likely by such act to cause ragging, commits or abets ragging and thereby.

**Penalty for Ragging.**

- i. teases or embarrasses or humiliates a student shall be punished with imprisonment for a term which may extend to six months or with fine which may extend to one thousand rupees or with both; or
- ii. assaults or uses criminal force to or criminally intimidates, a student shall be punished with imprisonment for a term 'which' may extend to one year or with fine which may extend to two thousand rupees or with both; or
- iii. wrongfully restrains or wrong fully confines or causes hurt to a student shall be punished with imprisonment for a term which may extend to two years or with fine which may extend to five thousand rupees or with both; or
- iv. causes grievous hurt to or kidnaps or abducts of rapes or commits unnatural offence with a student shall be punished with imprisonment for a term 'which 'may extent to five years and with fine which may extend to ten thousand rupees; or
- v. causes death of abets suicide shall be punished with imprisonment forlife or with imprisonment for a term which may extend to ten years and with a fine which may extend to fifty thousand rupees.

5. (1) A student convicted of an offence under section 4 and punished with imprisonment for a term shall be dismissed from the educational institution.

**Dismissal of student.**

(2) A student convicted of an offence under section 4 and punished with imprisonment for a term of more than six months shall not be admitted in any other educational institution.

6. (1) Without prejudice to the foregoing provisions, whenever any student complains of ragging to the head or manager of an educational institution, such head or manager shall inquire into or cause an inquiry to be made into the same forthwith and if the complaint is prima-facie found true, shall Suspend' the student or students complained against for such period as may be deemed necessary.

**Suspension of student.**

(2) The decision of the head or manager of the educational institution under sub section (1) shall be final.

7. (1) If the head or the manager of an educational institution fails or neglects to take action in the manner specified in sub-section (1) of section 6, such person shall be deemed to have abetted the offence and shall be punished with the punishment provided for the offence.  
(2) If a student commits suicide due to or in consequence of ragging, the person who commits such ragging shall be deemed to have abetted such suicide. **Abetment.**
8. The provisions of this Act shall be in addition to and not derogatory of any law for the time being in force. **Other laws not affected.**
9. (1) The Government may by notification, make rules for carrying out all or any of the purposes of this Act. **Power to make rules.**  
(2) Every rule made under this Act shall immediately after it is made, be laid before the Legislative Assembly of the State, if it is in session and if it is not in session, in the session immediately following for a total period of fourteen days which may be comprised in one session or in two successive sessions, and if, before the expiration of the session in which it is so laid or the session immediately following the Legislative Assembly agrees in making any modification in the rule or in the annulment of the rule, the rule shall, from the date on which the modified form or shall stand annulled as the case may be so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.
10. The Andhra Pradesh Prohibition of Ragging Ordinance, 1997 is hereby Repealed. **Repeal of ordinance 12 of 1997.**

**G.BHAVANI PRASAD,**  
Secretary to Government,  
Legislative Affairs & Justice,  
Law Department.

### **STANDING ORDERS ON PUNISHMENT FOR USE OF UNFAIR MEANS.**

1. During the University examination if a candidate is found in malafide possession of papers, books or notes or written notes on his clothes, body or table or chair, which is relevant to the examination(s) he will be disqualified from appearing in any university exam for one year and if found having copied will be disqualified for two years.
2. If a candidate is found talking to another candidate or person inside or outside the examination hall without permission even after a warning before, his answer book for that particular paper shall be cancelled.
3. If a candidate shows his / her answer book to another candidate or if he receives or attempts to receive help from any source, including consulting books, notes or papers or any other matter outside the exam hall or has given help or attempted to give help, he / she shall be disqualified from appearing in any university exam for two years.
4. If a candidate swallows or attempts to swallow a note or paper or runs away with the paper or causes disappearance or destruction of any such material (s), he shall be disqualified for two years.
5. If a candidate writes even a question or anything concerned either on blotting paper, or any other piece of paper including question paper or hall ticket, or attempts to pass on question paper or part there of he / she shall be disqualified for that examination.
6. If a candidate exchanges his / her seat or writes the registered number of another candidate on his / her answer book or creates any disturbance during the examination or refuses to obey the supervisory staff, he / she will be disqualified for three years.
7. If a candidate is found guilty of smuggling in or out or of replacing answer book or additional sheet during or after the exam with or without the connivance of any staff he / she shall be disqualified for three years and shall be liable to any punishment decided by Vice-Chancellor.
8. If a candidate takes away the answer book outside the examination hall or intentionally tears off or otherwise disposes his answer book or any part there of or additional sheet, he / she shall be disqualified for two years.
9. If a candidate is found guilty of serious misconduct in the examination hall or of misbehaviour towards the supervisory staff even outside the examination hall or any other place during the period, the examination is being held he / she be disqualified for a period upto five years.
10. If a person impersonates a candidate, he / she be disqualified from appearing for any university exam for five years and if he is not on university rolls, will not be admitted to any course for five years and the case may be reported to police, the candidate who is impersonated also will be disqualified for 5 years.

11. Chief superintendents and Assistant Superintendents who have reasons to suspect misconduct on the part of any candidate of candidates should forth with make all possible preliminary investigation and communicate with the registrar immediately forwarding all material evidence available together with the answer-book and the written explanation of the candidate. All such communications shall be sent by registered post acknowledgement due on the same day addressed to the registrar by name. In all such chief cases of a suspected nature, the superintendents may use their discretion and decide whether the candidate in question shall be permitted to continue sitting for the rest of the examination or not the decision shall be reported to the registrar.
12. In all cases where the evidence is such as will leave no doubt in regard to the misconduct or when the candidate is caught redhanded, as it were, the candidate or the candidate involved shall be sent out of the hall forthwith and kept out from the rest of the examination, but before the candidate leaves premises, his / her explanation shall be taken in writing and forwarded to the Registrar along with the report setting forth in detail all the material evidence.
13. In the case of the person who commits an offence under any of these rules but is not a candidate for any university examination, the chief superintendent may handover the case to the police.
14. In the case of a teacher or a person connected with an institution, who commits an offence, under any of these rules, his conduct shall be reported to the managing body of the institution, and to the government in the case of Government Institution, and shall be debarred from any remunerative job in the university permanently or for such period as the vice-chancellor may decide and also liable for such disciplinary action as may be decided by the University and the management of the college should abide by the decision of the University.
15. In case the candidate refuses to give a statement he is not to be forced to do so, only the fact of his refusal shall be recorded by the superintendent and attested by two other members of the supervisory staff on duty at the time of occurrence and such candidates are liable for punishment for a period of 3 years.
16. A candidate guilty of communicating or attempting to communicate directly or through a relative, guardian or friend with an examiner or with the Registrar or any functionary involved in the conduct of examination or publication of results with the object of influencing him in the award of marks shall be disqualified from passing that examination and the one following it.
17. A candidate found guilty of approaching or influencing directly or indirectly regarding his unfair means case, a member of the committee or any University Official, shall be disqualified for one year in addition to the punishment awarded to him under the rules for her / his offence and for using unfair means.

18. Where a candidate alleged to have employed unfair means has not been awarded any opportunity to explain the misconduct of which he / she is reported to be guilty, the Registrar, or an officer authorized by him in this behalf, shall call upon the candidate to show cause why action should not be taken against him for his misconduct. If the candidate fails to do so within 15 days of the issue of such notice the university shall proceed with the case.
19. If the Executive Council is satisfied after enquiry that the integrity of a University Examination has been violated at an examination center, as a consequence of wholesale unfair assistance rendered to examinees, the Executive Council may order re-examination besides taking action under rules relating to unfair means and may also abolish the examination center for future or for a specified period.
20. For a case of unfair means not covered by these rules, the Executive Council may on the recommendation of the committee impart any such punishment as they deem fit accordingly to the nature of the offences.

**Addition to the Standing orders of the Executive Council on punishment for use of unfair means:**

1. One invigilator for every 20 candidates shall be appointed. However, there will be at least two invigilators in a room irrespective of number of candidates. Care should be taken not to keep the same invigilator in the same room and for same numbers everyday. The invigilators should report to the Chief Superintendent atleast 20 minutes before the commencement of examination. They are under the control of Chief Superintendents during the period they are on such duty. They should not leave the examination hall without the permission of the chief Superintendent.
2. Examination shall start exactly at 9.00 AM. Candidates should be in their seats 15 minutes before the schedule commencement of the examinations i.e., 8.45 AM. The answer books should be distributed ten minutes prior to the commencement of the examination i.e., 8.50 AM and all entries should be made and checked by 9.00 AM.
3. No candidate should be permitted to enter the examination hall after the commencement of examination i.e, 9.00 AM. No candidate shall be permitted to leave the exam hall earlier than half an hour before the completion of time of the exam.
4. Pagers, Cellular Phones or any other gadgets are strictly prohibited in the college premises during the examination days especially in examination hours by the students, House Surgeons and staff. The Principal should circulate this information widely. Further, the Principal, Chief Superintendents and observers are to be empowered to seize such articles and shall initiate disciplinary action under intended malpractice.

5. There shall not be any overwriting in the registered number and if there is any correction, it should be attested by the Chief Superintendent.
6. To affix Cellophane tape on the Regd.No.after it is entered in the column provided on the answer script (as is done for bank draft etc) by the concerned invigilator before the papers are collected.
7. To fix individual independent accountability on the invigilator, the Attendance sheet system should be introduced. The Attendance sheet contains the name of the invigilator with his / her signature and the list of the Regd.Nos. allotted to the invigilator for supervision. Against the Regd.No. the serial no. of the booklet No. and No. of additional sheets taken should be noted. They should be signed by the candidates. The invigilator also must sign in the last column as acknowledgement of having received the answer script from the candidate. The format of the Attendance sheet is enclosed.
8. When the time is over, all answer books must be collected immediately and the candidates should not be allowed to leave the room without handing over the answer books. The invigilators are responsible for the safe delivery of the answer books of the candidates under their charge to the Chief Superintendent after the examination is over and as such they should taken proper precautions for the same.
9. No staff member except Head of the Department of the concerned subject or officially authorized person in place of HOD should be permitted to the examination hall to verify the question paper.

## MEDICAL ETHICS

### A. CODE OF MEDICAL ETHICS

#### 1) Character of Physician:

(Doctors with qualification of MBBS or MBBS with PG degree / diploma or with equivalent qualification in any medical discipline)

A physician shall uphold the dignity and honour of his profession. The prime object of the medical profession is to render service to humanity; reward or financial gain is a subordinate consideration. A Physician should be an upright man, instructed in the art of healings. He shall keep himself pure in character and be diligent in caring for the sick; he should be modest, sober, patient, and prompt in discharging his duty without anxiety.

No person other than a doctor having qualification recognized by Medical Council of India and registered with Medical Council of India / State Medical Council(s) is allowed to practice Modern system of Medicine or Surgery.

#### 2) Maintaining good medical practice:

The principal objective of the medical profession is to render service to humanity with full respect for the dignity of profession and man. Physicians should merit the confidence of patients, rendering to each a full measure of service and devotion. Physicians should try continuously to improve medical knowledge and skills and should make available to their patients and colleagues the benefits of their professional attainments. The responsibilities of the physician extend not only to individuals but also to society. For advancement of his profession he should associate with associations/societies and participate in meetings /CME etc.

#### 3) Maintenance of Medical records:

Every physician shall maintain the medical records for a period of 3 years from the date of commencement of the treatment as per standard format supplied by M.C.I. If any request is made for medical records either by the patients / authorized attendant or legal authorities involved may be duly acknowledged and shall be issued within 72 hours.

A registered medical practitioner shall maintain a Register of Medical Certificates and enter the identification marks, record the signature / thumb mark of the patient and keep a copy of the certificate prepared as per standard format supplied by M.C.I.

#### 4) Display of Degrees and registration numbers:

Every physician shall display the registration number accorded to him by the State Medical Council / MCI in his clinic and in all his Prescriptions/Certificates/ Receipts given to his patients. Physicians shall display as suffix to their names only recognized medical degrees or such certificates / diplomas and memberships / honors which confer professional

#### 5) Use of Generic names of drugs:

Every physician should, as far as possible; prescribe drugs with generic names



- 6) **Highest Quality Assurance in patient care:**  
Physician should aid in safeguarding the profession. Physician shall employ an attendant who is their registered or enlisted under the Medical Council in force and shall not permit such persons to attend, treat or perform operations.
- 7) **Exposure of Unethical Conduct:**  
A physician should expose, without fear or favour, incompetent or corrupt, dishonest or unethical conduct on the part of members of the profession.
- 8) **Payment of Professional Services:**  
The personal financial interests of a physician should not conflict with the medical interests.  
A physician should announce his fees before rendering service. It is unethical to enter into a contract of "no cure no payment".
- 9) **Evasion of Legal Restrictions:**  
The Physician shall observe the laws of the country. He should be cooperative in observance and enforcement of sanitary laws and regulations in the interest of public

#### **B. DUTIES OF PHYSICIANS TO THEIR PATIENTS:**

- 1) **Obligations to the Sick:**  
Though a physician is not bound to treat each and every person asking his services, he should not only be everready to respond to the sick and the injured, but should be mindful of the high character of his mission and the responsibility he discharges in the course of his professional duties. A physician should visit at the hour indicated to the patients. In case of emergency a physician must treat the patient and shall not refuse treatment to a patient. However for good reason he may refer the patient to another physician. Medical practitioner having any incapacity detrimental to the patient is not permitted to practice his profession.
- 2) **Patience, Delicacy and Secrecy:**  
Patience and delicacy should characterize the physician. Confidences concerning individual or domestic life entrusted by patients to a physician and defects in the disposition or character of patients observed during medical attendance should never be revealed unless the laws of the State require their revelation
- 3) **Prognosis:**  
The Physician should neither exaggerate nor minimize the gravity of a patient's condition.
- 4) **The patient must not be neglected:**  
A physician is free to choose whom he will serve. He should, however, respond to any request for his assistance in an emergency. Once having undertaken a case, the physician should not neglect the patient. Provisionally or fully registered medical practitioner shall not willfully commit an act of negligence .

- 5) **Engagement for an Obstetric Case:**  
When a physician who has been engaged to attend an obstetric case is absent and another is sent for and delivery accomplished, the acting physician is entitled to his professional fees.

**C. DUTIES OF PHYSICIAN IN CONSULTATION:**

- 1) **Unnecessary consultations should be avoided:**  
However in case of serious illness the physician should request consultation, such consultation should be justifiable and in the interest of the patient Consulting pathologists / radiologists or asking for any other diagnostic Lab investigation should be done judiciously
- 2) **Consultation for Patient's Benefit:**  
In every consultation, the benefit to the patient is of foremost importance.
- 3) **Punctuality in Consultation:**  
Utmost punctuality should be observed by a physician
- 4) **Statement to patient after consultation:**  
All statements to the patient or his representatives should take place in the presence of the consulting physicians. The disclosure of the opinion to the patient or his relatives or friends shall rest with the medical attendant .Differences of opinion should be frankly and impartially explained to the patient or his relatives or friends.
- 5) **Treatment after Consultation:**  
No decision should restrain the attending physician from making such subsequent variations in the treatment, the reasons for the variations should be discussed / explained. The same privilege, with its obligations, belongs to the consultant when sent for in an emergency during the absence of attending physician. The attending physician may prescribe medicine, whereas the consultant may prescribes only in case of emergency .
- 6) **Patient Referred to Specialists:**  
When a patient is referred to a specialist by the attending physician, a case summary of the patient should be given to the specialist
- 7) **Fees and other charges:**  
A physician shall clearly display his fees and other charges on the board of his chamber / hospital.  
Prescription should also make clear if the physician himself dispensed any medicine. A physician shall write his name and designation in full along with registration particulars in his prescription letter head .In Government hospital the name of the prescribing doctor can be written below signature.

D. RESPONSIBILITIES OF PHYSICIANS TO EACH OTHER:

- 1) **Dependence of Physicians on each other:**  
A physician should render gratuitous service to all physicians and their immediate family members.
  - 2) **Conduct in Consultation:**  
No insincerity, rivalry or envy should be indulged in Consultation, respect should be observed towards the physician in-charge.& no discussion should be carried on in the presence of the patient.
  - 3) **Consultant not to take charge of the case:**  
When a physician has been called for consultation, the Consultation should normally not take charge of the case, especially on the solicitation of the patient or friends. The consultant shall not criticize the referring physician. He / she shall discuss the diagnosis & treatment
- Appointment of Substitute:**  
Whenever a physician requests another physician to attend his patients during his temporary absence from his practice, professional courtesy requires the acceptance of such appointment as additional responsibility & such patients should be restored to the care of the latter upon his return.
- 4) **Visiting another Physician's Case:**  
When it becomes the duty of a physician occupying an official position to see and report upon an illness or injury, he should communicate to the physician in attendance so as to give him an option of being present & should avoid remarks upon the diagnosis or the treatment that has been adopted.

E. DUTIES OF PHYSICIAN TO THE PUBLIC AND TO THE PARAMEDICAL PROFESSION:

- 1) **Physicians as Citizens:**  
Physicians, as good citizens, possessed of special training should disseminate advice on public health issues. They should play their part in enforcing the laws of the community and in sustaining the institutions that advance the interests of humanity.
- 2) **Public and Community Health:**  
Physicians, especially those engaged in public health work, should enlighten the public concerning quarantine regulations and measures for the prevention of epidemic and communicable diseases. When an epidemic occurs a physician should not abandon his duty for fear of contracting the disease himself.

3) **Pharmacists / Nurses:**

Physicians should recognize and promote the practice of different paramedical services such as, pharmacy and nursing as professions and should seek their cooperation wherever required.

**F.UNETHICAL ACTS:**

A physician shall not aid or abet or commit any of the following acts which shall be construed as unethical

1) **Advertising:**

Soliciting of patients directly or indirectly, by a physician, by a group of physicians or by institutions or organizations is unethical. Advertising or publicity through any mode to invite attention to him or to his professional position, skill, qualification, achievements, associations, affiliations or honors would ordinarily result in his self aggrandizement. A Medical practitioner is however permitted to make a formal announcement in press regarding the following:

- i) On starting practice
- ii) On change of type of practice
- iii) On changing address
- iv) On temporary absence from duty
- v) On resumption of another practice.
- vi) On succeeding to another practice.
- vii) Public declaration of charges.

Printing of self-photograph, in the letter head or on sign board of the consulting room shall be regarded as acts of, self advertisement and unethical However, Printing of sketches, diagrams, picture of human system shall not be treated as unethical.

2) **Patent and copy rights:**

A physician may patent surgical instruments, appliances and medicine or copyright applications, methods and procedures. However, it shall be unethical if the benefits are not made available to institutions where the interest of large population is involved.

3) **Running an open shop (Dispensing of Drugs and Appliances by Physicians):**

A physician should not run an open shop for sale of medicine for dispensing prescription prescribed by doctors other than himself. It is not unethical for a physician to prescribe or supply drugs, remedies or appliances as long as there is no exploitation of the patient.

4) **Rebates and Commission:**

A physician shall not give, solicit, or receive nor shall he offer to give solicit or receive, any gift, gratuity, commission or bonus in consideration of or return for the referring, recommending or procuring of any patient for medical, surgical or other. Nothing, shall prohibit payment of salaries by a qualified physician to other duly qualified person rendering medical care

5) **Secret Remedies:**

The prescribing or dispensing by a physician of secret remedial agents of which he does not know the composition, or the manufacture or promotion of their use is unethical and as such prohibited.

6) **Human Rights:**

The physician shall not aid or abet torture nor shall he be a party to either infliction of mental or physical trauma or concealment of torture inflicted by some other person or agency in clear violation of human rights.

7) **Euthanasia:**

Practicing euthanasia shall constitute unethical conduct. However on specific occasion, the question of withdrawing supporting devices to sustain cardiopulmonary function even after brain death, shall be decided only by a team of doctors. A team of doctors shall declare withdrawal of support system. Such team shall consist of the doctor in charge of the patient, Medical Officer in charge of the hospital and a doctor nominated by the in-charge of the hospital from the hospital staff or in accordance with the provisions of the Transplantation of Human Organ Act, 1994.

**G. WHAT IS MISCONDUCT:**

The following acts of commission or omission on the part of a physician shall constitute professional misconduct rendering him / her liable for disciplinary action.

1) **Violation of the Regulations:**

If he / she commits any violation of these regulations.

2) If he / she does not maintain the medical records of his / her indoor patients for a period of three years as per regulation 1.3 and refuses to provide the same within 72 hours when the patient or his / her authorized representative makes a request for it as per the regulation 1.3.2. (CHAPTER-1)

3) If he / she does not display the registration number accorded to him/ her by the State Medical Council or the Medical Council of India in his clinic, prescriptions and certificates etc. issued by him or violates the provisions of regulation 1.4.2. (CHAPTER-1)

4) **Adultery or improper conduct:**

Abuse of professional position by committing adultery or improper conduct with a patient or by maintaining an improper association with a patient will render a physician liable for disciplinary action as provided under the Indian Medical Council Act, 1956 or the concerned State Medical Council Act.

5) **Conviction by Court of Law:**

Conviction by a court of law for offences involving moral turpitude / Criminal acts.

- 6) Sex Determination Tests:  
On no account sex determination test shall be undertaken with the intent to terminate the life of a female foetus developing in her mother's womb, unless there are other absolute indications for termination of pregnancy as specified in the Medical Termination of Pregnancy act, 1971.
- 7) Signing Professional Certificates, Reports and Other Documents:  
Registered medical practitioners are in certain cases bound by law to give, or may from time to time be called upon or requested to give certificates, notification, reports and other documents of similar character signed by them in their professional capacity for subsequent use in the courts or for administrative purposes etc.
- 8) A registered medical practitioner shall not contravene the provisions of the Drugs and Cosmetics Act and regulations made there under.
- 9) Performing or enabling unqualified persons to perform an abortion or any illegal operation for which there is no medical, surgical or psychological indication.
- 10) A registered medical practitioner shall not issue certificates of efficiency in modern medicine to unqualified or non-medical person.
- 11) A physician should not contribute to the lay press articles and give interviews regarding diseases and treatments which may have the effect of advertising himself or soliciting practices; but is open to write to the lay press under his own name on matters of public health, hygienic living or to deliver public lectures, give talks on the radio / TV / Internet chat for the same purpose and send announcement of the same to lay press.
- 12) An institution run by a physician for a particular purpose such as a maternity home, nursing home, private hospital, rehabilitation center or any type of training institution etc. may be advertised in the lay press, but such advertisements should not contain anything more than the name of the institution, type of patients admitted, type of training and other facilities offered and the fees.
- 13) It is improper for a physician to use an unusually large sign board and write on it anything other than his name, qualifications obtained from a University or a statutory body, titles and name of his speciality, registration number including the name of the State Medical Council under which registered. The same should be the contents of his prescription papers. It is improper to affix a sign-board on a chemist's shop or in places where he does not reside or work.
- 14) The registered medical practitioner shall not disclose the secrets of a patient that have been learnt in the exercise of his / her profession except-
  - i) In a court of law under orders of the Presiding Judge; ii) In circumstances where there is a serious and identified risk to a specific person and / or community; and iii) Notifiable diseases.
  - ii) In case of communicable diseases public health authorities should be informed immediately.

- 15) The registered Medical practitioner shall not refuse on religious grounds alone to give assistance in or conduct of sterility, birth control, circumcision and medical termination of pregnancy when there is medical indication, unless the medical practitioner feels himself / herself incompetent to do so.
- 16) Before performing an operation the physician should obtain in writing the consent from the husband or wife parent or guardian in the case of minor, or the patient himself as the case may be. In an operation which may result in sterility the consent of both husband and wife is needed.
- 17) A registered medical practitioner shall not public photographs or case reports of his / her patients without their permission, in any medical or other journal in a manner by which their identity could be made out. If the identity is not to be disclosed, the consent is not needed.
- 18) In the case of running of a nursing home by a physician and employing assistants to help him / her, the ultimate responsibility rests on the physician.
- 19) A physician shall not use touts or agents for procuring patients.
- 20) A Physician shall not claim to be specialist unless he has a special qualification in that branch.
- 21) No act of invitro fertilization or artificial insemination shall be undertaken without the informed consent of the female patient and her spouse as well as the donor, such consent shall be obtained in writing only after the patient is provided, at her own level of comprehension, with sufficient information about the purpose, methods, risks, inconveniences, disappointments of the procedure and possible risks and hazards.
- 22) Research:  
Clinical drug trials or other research involving patients or volunteers as per the guidelines of ICMR can be undertaken, provided ethical consideration are borne in mind. Violation of existing MCMR guidelines in this regard shall constitute misconduct. Consent taken from the patient for trial of drug or therapy which is not as per the guidelines shall also be constructed as misconduct.
- 23) If a physician posted in rural area is found absent on more than two occasions during inspection by the Head of the District Health Authority or the Chairman, Zila Parishad, the same shall be constructed as a misconduct if it is recommended to the Medical Council of India / State Medical Council by the State Government for action under these Regulations.
- 24) If a physician posted in a medical college / institution both as teaching faculty or otherwise shall remain in hospital / college during the assigned duty hours. If they are found absent on more than two occasions during this period, the same shall be construed as a misconduct if it is certified by the Principal / Medical superintendent and forwarded through the State Government to Medical Council of India / State Medical Council for action under these Regulations.

#### H. PUNISHMENT AND DISCIPLINARY ACTION:

- 1) It must be clearly understood that the instances of offences and of Professional misconduct which are given above do not constitute and are not intended to constitute a complete list of the infamous acts which calls for disciplinary action, and that by issuing this notice the Medical Council of India and or State Medical Councils are in no way precluded from considering and dealing with any other form of professional misconduct on the part of a registered practitioner. Circumstances may and do arise from time to time in relation to which there may occur questions of professional misconduct which do not come within any of these categories. Every care should be taken that the code is not violated in letter or spirit. In such instances as in all others, the Medical Council of India and / or State Medical Councils have to consider and decide upon the facts brought before the Medical Council of India and / or State Medical Councils.
- 2) It is made clear that any complaint with regard to professional misconduct can be brought before the appropriate Medical Council for Disciplinary action. Upon receipt of any complaint of professional misconduct, the appropriate Medical Council would hold an enquiry and give opportunity to the registered medical practitioner to be heard in person or by pleader. If the medical practitioner is found to be guilty of committing professional misconduct, the appropriate Medical Council may award such punishment as deemed necessary or may direct the removal altogether or for a specified period, from the register of the name of the delinquent registered practitioner. Deletion from the Register shall be widely publicized in local press as well as in the publications of different Medical Associations / Societies / Bodies.
- 3) In case the punishment of removal from the register is for a limited period, the appropriate council may also direct that the name so removed shall be restored in the register after the expiry of the period for which the name was ordered to be removed.
- 4) Decision on complaint against delinquent physician shall be taken within a time limit of 6 months.
- 5) During the pendency of the complaint the appropriate Council may restrain the physician from performing the procedure or practice which is under scrutiny.
- 6) Professional incompetence shall be judged by peer group as per guidelines prescribed by Medical Council of India.

( This is a condensed form of Medical Ethics taken from "Professional conduct, Etiquette and Ethics" as published in, Regulations of Indian medical Council, 2002  
for full details visit <http://www.mciindia.org/know/rules/ethics.htm>)



**MEDICAL COUNCIL OF INDIA**

**No.MCI-34(1)/2009-Med./99639**

**Date: 21/02/2009**

To,

1. The Deans / Principals of all the Medical Colleges/Institutions in India.
2. The Directorate of Medical Education of all the States in India.
3. The Health secretary's of all the States Government in India.
4. The Registrar of all the Universities and Deemed Universities in India.

**Subject:- Implementation of the guidelines framed by the Medical Council of India to curb the menace of ragging in medical colleges.**

Sir/Madam,

This is to inform you that as per the decision taken in the meeting of Dr. R.K. Raghvan Committee appointed by the Hon'ble Supreme Court to supervise the measures being implemented to prevent the ragging, the Medical Council of India has prepared the guidelines to curb the menace of ragging in medical colleges which has been approved by the members of Adhoc Committee appointed by the Hon'ble Supreme Court of India and of the Executive Committee of the Council at its meeting held on 30.12.2008.

The guidelines to curb the menace of ragging in medical colleges are as under:-

- 1) Every students for the purposes of his/her admission to Medical College shall furnish a Character Certificate from the institutions wherefrom he/she has passed his qualifying examination, which would mention the status of his/her behavioral pattern specially in terms as to whether he/she has displayed persistent violent or aggressive behavior or any desire to harm others.
- 2) The admitting medical institution shall keep intense watch upon students who has a negative entry in this regard.
- 3) An annual undertaking signed by each student, whether fresher or senior and his/her parent (s) jointly stating that each of them have read the relevant instructions/regulations against ragging, as well as punishments, and that if the ward has been found guilty he/she shall be proceeded against, shall be procured.
- 4) Such an undertaking shall be furnished in English as well as in vernacular (mother tongue of the parent) at the beginning of each academic year by every student.
- 5) An undertaking to the similar effect should be obtained every year from each student admitted to the hostel.

- 6) The undertaking should be appended to the brochure containing the guidelines and other relevant instructions in regard to ragging and consequences of indulging in ragging.
- 7) The Compliance to the above effect shall be ensured by each of the affiliating university to which the concerned medical institution is affiliated and would be verified by the council annually.
- 8) In order to ensure the 'ragging free environment' in the campus, each institution shall compulsorily in the 'prospectus' and other admission related documents, shall depict the earlier directions of the Apex court and/or of the Central or State Governments as applicable, so that candidates and their parents are sensitized in respect of the prohibition and consequences of ragging.
- 9) Each institution should engage or seek the assistance of 'professional counselor' at the time of admissions to counsel 'freshers' in order to prepare them for the life ahead, specially for adjusting to the life in hostels.
- 10) It should be ensured that there would be a clear gap of one to two weeks between the date of joining of 'freshers' and the 'seniors', ensuring that classes for the seniors shall commence later, so as to enable the 'freshers' to familiarize themselves with the campus environment and adjust to the sudden changeover from schools to higher education.
- 11) It shall be mandatory for the institutions to inform the parents of senior students to send their wards only on the due date of commencement of the academic session and not earlier.
- 12) All the examining Universities with which the institutions are affiliated or the deemed to be Universities shall compulsorily amend their relevant ordinances or byelaws, as the case may be, to incorporate the schedule gap of one or two weeks between the date joining of 'freshers' and 'seniors'.
- 13) Each institutions shall arrange a joint 'sensitization' programme and 'counselling' of both 'freshers' and 'seniors' to be addressed by the Principal/Head of the institution and the Convener of the Anti Ragging Committee. The inmates of the Hostel shall be addressed on this count by the Hostel Warden.
- 14) Each institution shall have an Anti-Ragging Committee and Anti Ragging Squad, which shall comprise of other than senior teachers of the institution, representatives of Civil & Police administration and local media.
- 15) Each institution shall constitute a 'Mentoring Cell' to oversee and involve senior students as 'Mentors' for the 'freshers'.

- 16) Such a Mentoring Cell shall be constituted at the end of every academic year, where application shall be invited from the students to join the Mentoring Cell as Mentors for the succeeding academic year.
- 17) An anonymous random survey shall be conducted by each institution across the entire 1<sup>st</sup> year batch of students every fortnight during the first three months of the academic session in order to verify and cross-check whether the campus is genuinely ragging free or not.
- 18) The methodology of such survey may be designed by the institution appropriately. However, doing so it shall be ensured that the institution does not compromise with the anonymity of the 'whistle blowers'.
- 19) The institution shall ensure that private commercially managed lodges or hostels outside campuses, must be registered with the local Police Authorities and permission to start such hostel or their registration must necessarily be recommended by the Heads of the Medical Institutions.
- 20) In case the victim of ragging his/her parent/guardian is not satisfied with the action taken by the Head of the Institution or by other institutional authorities, or where Head of the institution is of the opinion that the incident ought to be so reported, it shall be mandatory for the institution to file a First Information Report with the local police authorities.
- 21) It must be ensured by each of the institution that the Complaints or information in regard to ragging could be oral or written and even from third parties and the confidentiality thereof must be protected at all costs.
- 22) Each institution shall ensure that remedial action is initiated and completed within a week of the incident itself, so that complaints do not linger and allow either interest in pursuing the matter to wane or enable the culprits to tamper evidence or influence witnesses.

In view of above, you are requested to implement the above guidelines and take immediate action in the matter, accordingly.

The status report on the compliance may be sent within four (4) weeks positively.

**Yours faithfully,**  
**(Lt. Col.(Retd) Dr. A.R.N. Setalvad)**  
**Secretary**

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## **MESSAGE FOR THE FRESH BATCH STUDENTS**

On behalf of the University, it gives me immense pleasure in welcoming the fresh batch of students joined in the Professional courses. They deserve congratulations for having succeeded in getting admission to professional courses of this university. This is a very crucial period for all the students because they are entering the portals of the higher education straightway from the school environment. The professional courses like Medical, Dentistry, Physiotherapy, Nursing etc., consists of very difficult subjects, the syllabi are very heavy and the duration of the courses are lengthy. Therefore, the students should learn and adopt to the new methods of teaching and training in professional colleges.

I recommend the students that they should consult library and museums at regular intervals. They should also adopt self-learning techniques. There are number of books available in the market on the subjects like Communication Skills, How to read better? etc. Every medical student must acquire enough knowledge and skills to operate computer programmes.

The students should behave in a dignified manner both inside and outside the college premises because they have entered in to a noble profession and doctors always enjoy higher position in the society.

Regular reading habits, sincere and honest effort for learning will help the students to achieve their objective of becoming a good doctor.

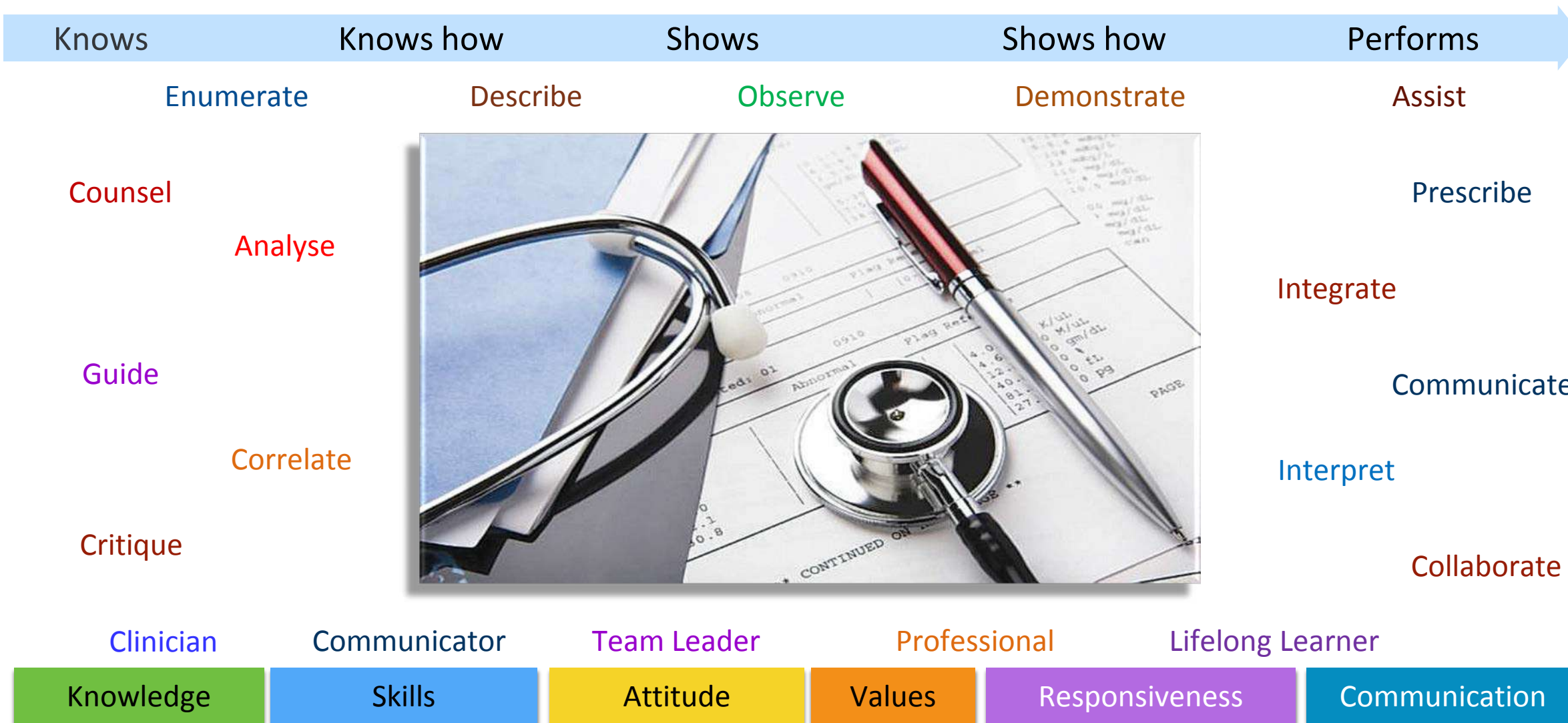
I wish all the best and very bright future to all the students.

Sd/-  
**(Dr. I.V Rao M.D.)**  
VICE-CHANCELLOR,  
Dr. N.T.R. University of Health Sciences, A.P.  
VIJAYAWADA.



# 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**



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### 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.

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-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.

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# **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**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
1.	<b>Human Anatomy</b>	82	409
2.	<b>Physiology</b>	11	137
3.	<b>Biochemistry</b>	11	89
4.	<b>Pharmacology</b>	05	85
5.	<b>Pathology</b>	36	182
6.	<b>Microbiology</b>	08	54
7.	<b>Forensic Medicine &amp; Toxicology</b>	14	162
	<b>Total</b>	<b>167</b>	<b>1118</b>

## **Topics & outcomes in Medicine and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>Community Medicine</b>	20	107
<b>2.</b>	<b>General Medicine</b>	26	506
<b>3.</b>	<b>Respiratory Medicine</b>	02	47
<b>4.</b>	<b>Pediatrics</b>	35	406
<b>5.</b>	<b>Psychiatry</b>	19	117
<b>6.</b>	<b>Dermatology, Venereology &amp; Leprosy</b>	18	73
<b>7.</b>	<b>Physical Medicine &amp; Rehabilitation</b>	09	43
	<b>Total</b>	<b>129</b>	<b>1299</b>

## **Topics & outcomes in Surgery and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>General Surgery</b>	30	133
<b>2.</b>	<b>Ophthalmology</b>	09	60
<b>3.</b>	<b>Otorhinolaryngology</b>	04	76
<b>4.</b>	<b>Obstetrics &amp; Gynaecology</b>	38	126
<b>5.</b>	<b>Orthopedics</b>	14	39
<b>6.</b>	<b>Anesthesiology</b>	10	46
<b>7.</b>	<b>Radiodiagnosis</b>	01	13
<b>8.</b>	<b>Radiotherapy</b>	05	16
<b>9.</b>	<b>Dentistry</b>	05	23
	<b>Total</b>	<b>116</b>	<b>532</b>



## **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
<b>Physiology</b>									
<b>Summary</b>									
Name of Topic: <b>General Physiology</b>									
Number of Competencies: <b>(08)</b>									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM15.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Description of competency

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.

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
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PA42.1*	At the end of the session the <b>phase II student</b> must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the <b>phase II student</b> must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the <b>phase II student</b> must be able to <b>describe</b> the CSF features for a given etiology of meningitis <b>accurately</b>
PA42.4*	At the end of the session the <b>phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>

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 <b>Phase II student</b> must be able to enumerate the most common causes of meningitis <b>correctly</b>	Lecture → small group discussion
PA42.2*	At the end of the session the <b>Phase II student</b> must be able to enumerate the components of a CSF analysis <b>correctly</b>	Related objectives can be combined into one teaching session
PA42.3*	At the end of the session the <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given etiologic of meningitis <b>accurately</b>	
PA42.4*	At the end of the session the <b>Phase II student</b> must the able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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 <del>Phase I</del> <b>Phase II student</b> 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 <b>Phase II student</b> 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 <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given aetiology of meningitis <b>accurately</b>	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 <b>Phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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
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↓  
**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.

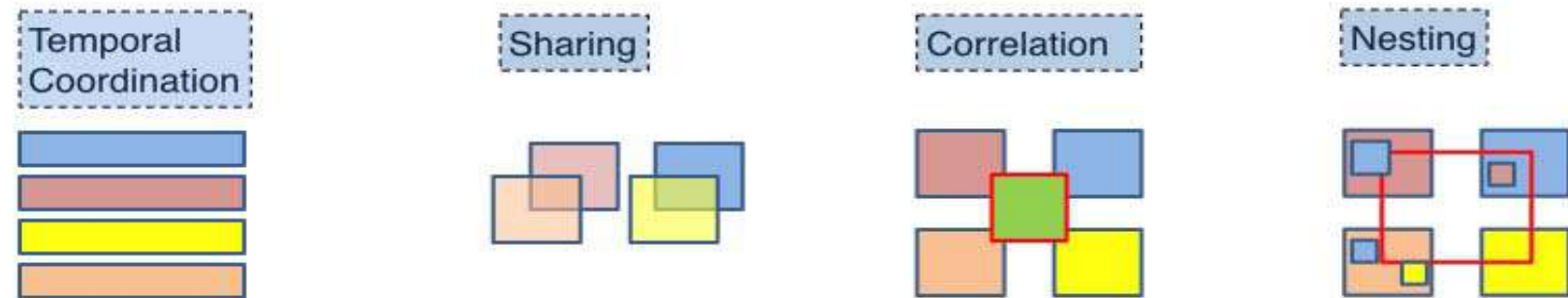


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement 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
<b>Human Anatomy</b>									
<b>Topic: Anatomical terminology</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: General features of bones &amp; Joints</b>		<b>Number of competencies: (6)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: General features of Muscle</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: General features of skin and fascia</b>		<b>Number of competencies: (5)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: General features of the cardiovascular system</b>		<b>Number of competencies: (8)</b>			<b>Number of procedures for certification: (NIL)</b>				
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
<b>Topic: General Features of lymphatic system</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Introduction to the nervous system</b>		<b>Number of competencies: (8)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Features of individual bones (Upper Limb)</b>		<b>Number of competencies: (6)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Pectoral region</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Axilla, Shoulder and Scapular region</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Forearm &amp; hand</b>		<b>Number of competencies: (15)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: General Features, Joints, radiographs &amp; surface marking</b>		<b>Number of competencies: (8)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Features of individual bones (Lower Limb)</b>		<b>Number of competencies: (4)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Front &amp; Medial side of thigh</b>		<b>Number of competencies: (5) ♂</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Gluteal region &amp; back of thigh</b> <span style="float: right;">Number of competencies: (6)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Hip Joint</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Knee joint, Anterolateral compartment of leg &amp; dorsum of foot</b> <span style="margin-left: 150px;"><b>Number of competencies: (7) ♂</b></span> <span style="margin-left: 150px;"><b>Number of procedures for certification: (NIL)</b></span>									
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	
<b>Topic: Back of Leg &amp; Sole</b> <span style="margin-left: 150px;"><b>Number of competencies: (7)</b></span> <span style="margin-left: 150px;"><b>Number of procedures for certification: (NIL)</b></span>									
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	
<b>Topic: General Features, Joints, radiographs &amp; surface marking</b> <span style="margin-left: 150px;"><b>Number of competencies: (10)</b></span> <span style="margin-left: 150px;"><b>Number of procedures for certification: (NIL)</b></span>									
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 <sup>st</sup> rib and typical thoracic vertebra	K/S	SH	Y	Lecture, DOAP session	Viva voce/ skill assessment			
AN21.2	Identify & describe the features of 2 <sup>nd</sup> , 11 <sup>th</sup> and 12 <sup>th</sup> ribs, 1 <sup>st</sup> , 11 <sup>th</sup> and 12 <sup>th</sup> 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			
<b>Topic: Heart &amp; Pericardium</b> <span style="float: right;">Number of competencies: (7)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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
<b>Topic: Mediastinum</b> <span style="margin-left: 200px;"><b>Number of competencies: (7)</b></span> <span style="margin-left: 200px;"><b>Number of procedures for certification: (NIL)</b></span>									
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
<b>Topic: Lungs &amp; Trachea</b>									
<b>Number of competencies: (6)</b>				<b>Number of procedures for certification: (NIL)</b>					
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			
<b>Topic: Thorax</b>									
<b>Number of competencies: (9)</b>				<b>Number of procedures for certification: (01)</b>					
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
<b>Topic: Skull osteology</b> <span style="margin-left: 200px;"><b>Number of competencies: (7)</b></span> <span style="margin-left: 200px;"><b>Number of procedures for certification: (NIL)</b></span>									
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 <sup>th</sup> cervical vertebra	K/S	SH	N	DOAP session	Viva voce			
<b>Topic: Scalp</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Face &amp; parotid region</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Posterior triangle of neck</b> <span style="float: right;">Number of competencies: (4)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Cranial cavity</b> <span style="float: right;">Number of competencies: (5)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Orbit</b> <span style="float: right;">Number of competencies: (5)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Anterior Triangle</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Temporal and Infratemporal regions</b> <span style="float: right;">Number of competencies: (5)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Submandibular region</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Deep structures in the neck</b> <span style="float: right;">Number of competencies: (10)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Mouth, Pharynx &amp; Palate</b>		<b>Number of competencies: (5)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Cavity of Nose</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Larynx</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Tongue</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Organs of hearing and equilibrium</b>		<b>Number of competencies: (5)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Eyeball</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Back Region</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Head &amp; neck Joints, Histology, Development, Radiography &amp; Surface marking</b>		<b>Number of competencies: (9)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Anterior abdominal wall</b> <span style="margin-left: 200px;"><b>Number of competencies: (7)</b></span> <span style="margin-left: 200px;"><b>Number of procedures for certification: (NIL)</b></span>									
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	
<b>Topic: Posterior abdominal wall</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Male external genitalia</b>		<b>Number of competencies: (5)</b>			<b>Number of procedures for certification: (NIL)</b>				
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 Varicocele	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	
<b>Topic: Abdominal cavity</b>		<b>Number of competencies: (14)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Pelvic wall and viscera</b> <span style="margin-left: 200px;"><b>Number of competencies: (8)</b></span> <span style="margin-left: 200px;"><b>Number of procedures for certification: (NIL)</b></span>									
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	
<b>Topic: Perineum</b> <span style="float: right;">Number of competencies: (5)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Vertebral column</b> <span style="float: right;">Number of competencies: (4)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Sectional Anatomy</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Histology &amp; Embryology</b>		<b>Number of competencies: (8)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Osteology</b> <span style="float: right;">Number of competencies: (4)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Radiodiagnosis</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Surface marking</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Meninges &amp; CSF</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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
<b>Topic: Spinal Cord</b> <span style="float: right;">Number of competencies: (5)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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
<b>Topic: Medulla Oblongata</b>		<b>Number of competencies: (4)</b>			<b>Number of procedures for certification: (NIL)</b>				
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
<b>Topic: Pons</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Cerebellum</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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
<b>Topic: Midbrain</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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
<b>Topic: Cranial nerve nuclei &amp; Cerebral hemispheres</b> <span style="float: right;">Number of competencies: (6)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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
<b>Topic: Ventricular System</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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
<b>Topic: Histology &amp; Embryology</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Epithelium histology</b>		<b>Number of competencies: (2)</b>			<b>Number of competencies for certification: (01)</b>				
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			
<b>Topic: Connective tissue histology</b>		<b>Number of competencies: (2)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Muscle histology</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				

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			
<b>Topic: Nervous tissue histology</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Blood Vessels</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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			
<b>Topic: Glands &amp; Lymphoid tissue</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									
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	
<b>Topic: Bone &amp; Cartilage</b> <span style="float: right;">Number of competencies: (2)</span> <span style="float: right;">Number of procedures for certification: (NIL)</span>									

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	
<b>Topic: Integumentary System</b>		<b>Number of competencies: (1)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Chromosomes</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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			
<b>Topic: Patterns of Inheritance</b>		<b>Number of competencies: (4)</b>			<b>Number of procedures for certification: (NIL)</b>				
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
<b>Topic: Principle of Genetics, Chromosomal Aberrations &amp; Clinical Genetics</b> <b>Number of competencies: (5)</b> <b>Number of procedures for certification: (NIL)</b>									
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	
<b>Topic: Introduction to embryology</b> <b>Number of competencies: (2)</b> <b>Number of procedures for certification: (NIL)</b>									
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			
<b>Topic: Gametogenesis and fertilization</b> <b>Number of competencies: (6)</b> <b>Number of procedures for certification: (NIL)</b>									
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	
<b>Topic: Second week of development</b>									
				<b>Number of competencies: (5)</b>		<b>Number of procedures for certification: (NIL)</b>			
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	
<b>Toic: 3rd to 8th week of development</b>									
				<b>Number of competencies: (6)</b>		<b>Number of procedures for certification: (NIL)</b>			
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
<b>Topic: Fetal membranes</b>		<b>Number of competencies: (7)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Prenatal Diagnosis</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures for certification: (NIL)</b>				
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	
<b>Topic: Ethics in Anatomy</b>		<b>Number of competencies: (1)</b>			<b>Number of procedures for certification: (NIL)</b>				

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	
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Physiology</b>									
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
<b>Biochemistry</b>									
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
<b>Pathology</b>									

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
<b>Forensic Medicine &amp; Toxicology</b>									
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
<b>Anesthesiology</b>									
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	
<b>ENT</b>									
EN1.1	Describe the Human Anatomy & physiology of ear, nose, throat, head & neck.	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/Skill assessment		Human Anatomy	
<b>Ophthalmology</b>									
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	
<b>Dentistry</b>									
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	
<b>General Medicine</b>									
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	
<b>Obstetrics &amp; Gynaecology</b>									

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	
<b>General Surgery</b>									
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	
<b>Orthopaedics</b>									
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	
<b>Physical Medicine &amp; Rehabilitation</b>									
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
<b>Pediatrics</b>									
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
<b>PHYSIOLOGY</b>									
<b>Topic: General Physiology</b>		<b>Number of competencies: (09)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Haematology</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures that require certification: (NIL)</b>				

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	
<b>Topic: Nerve and Muscle Physiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (18)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Gastro-intestinal Physiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (10)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Cardiovascular Physiology (CVS)</b> <span style="float: right;">Number of competencies: (16)</span> <span style="float: right;">Number of procedures that require certification: (03)</span>									
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			
<b>Topic: Renal Physiology</b>		<b>Number of competencies: (09)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Endocrine Physiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (06)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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			
<b>Topic: Reproductive Physiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (12)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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	
<b>Topic: Neurophysiology</b>									
				<b>Number of competencies: (20)</b>			<b>Number of procedures that require certification: (09)</b>		
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	
<b>Topic: Integrated Physiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (14)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Biochemistry</b>									
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
<b>Pathology</b>									
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
<b>Forensic Medicine &amp; Toxicology</b>									
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	
<b>Anesthesiology</b>									
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	
<b>Ophtalmology</b>									
OP1.1	Describe the physiology of vision.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology	
<b>General Medicine</b>									
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	
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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
<b>BIOCHEMISTRY</b>									
<b>Topic: Basic Biochemistry</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Enzyme</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Chemistry and Metabolism of Carbohydrates</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Chemistry and Metabolism of Lipids</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Molecular biology</b> <span style="margin-left: 200px;"><b>Number of competencies: (07)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: Nutrition</b>									
		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Extracellular Matrix</b>									
		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Oncogenesis and immunity</b>									
		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification: (NIL)</b>				

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	
<b>Topic: Biochemical Laboratory Tests</b>		<b>Number of competencies: (24)</b>			<b>Number of procedures that require certification: (05)</b>				
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	
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#### 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
<b>PHARMACOLOGY</b>									
<b>KNOWLEDGE: Topic: Pharmacology</b>		<b>Number of competencies: (64 )</b>			<b>Number of procedures that require certification : (NIL)</b>				
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 dugs, their mechanisms of action, side effects and doses.	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	
PH1.45	Describe the dugs 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, Filariasis, 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			
<b>SKILLS: Topic: Clinical Pharmacy</b> <b>Number of competencies: (04)</b> <b>Number of procedures that require certification : (NIL)</b>									
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	
<b>SKILLS: Topic: Clinical Pharmacology</b> <b>Number of competencies: (08)</b> <b>Number of procedures that require certification : (04)</b>									
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			
<b>SKILLS: Topic: Experimental Pharmacology</b> <b>Number of competencies: (02)</b> <b>Number of procedures that require certification :(NIL)</b>									
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			
<b>Communication Topic: Pharmacology</b> <b>Number of competencies: (07)</b> <b>Number of procedures that require certification : (NIL)</b>									
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
<b>Anesthesiology</b>									
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 anaesthesia	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 anaesthesia	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 <b>personality</b> 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 <b>psychosomatic</b> 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	
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#### 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
<b>PATHOLOGY</b>									
<b>Topic: Introduction to Pathology</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Cell Injury and Adaptation</b>		<b>Number of competencies: (08)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Amyloidosis</b> <span style="float: right;">Number of competencies: (02)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Inflammation</b> <span style="float: right;">Number of competencies:(04)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Healing and repair</b> <span style="float: right;">Number of competencies: (01)</span> <span style="float: right;">Number of procedures that require certification:(NIL)</span>									

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	
<b>Topic: Hemodynamic disorders</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification :(NIL)</span>									
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			
<b>Topic: Neoplastic disorders</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Basic diagnostic cytology</b> <span style="float: right;">Number of competencies:(03)</span> <span style="float: right;">Number of procedures that require certification:(NIL)</span>									
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			
<b>Topic: Immunopathology and AIDS</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Infections and Infestations</b> <b>Number of competencies: (04)</b> <b>Number of procedures that require certification:(NIL)</b>									
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
<b>Topic: Genetic and paediatric diseases</b> <b>Number of competencies: (03)</b> <b>Number of procedures that require certification :(NIL)</b>									
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	
<b>Topic: Environmental and nutritional diseases</b> <b>Number of competencies:(03)</b> <b>Number of procedures that require certification:(NIL)</b>									



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	
<b>Topic: Introduction to haematology</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Microcytic anemia</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Macrocytic anemia</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				

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	
<b>Topic: Hemolytic anemia</b>									
			<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (01)</b>			
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			
<b>Topic: Aplastic anemia</b>									
			<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification:(NIL)</b>			

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	
<b>Topic: Leukocyte disorders</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Lymph node and spleen</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Plasma cell disorders</b> <span style="float: right;">Number of competencies: (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
PA20.1	Describe the features of plasma cell myeloma	S	SH	Y	DOAP session	Skill assessment			
<b>Topic: Hemorrhagic disorders</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification:(NIL)</span>									
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	
<b>Topic: Blood banking and transfusion</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Clinical Pathology</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Gastrointestinal tract</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Hepatobiliary system</b> <span style="margin-left: 200px;"><b>Number of competencies: (06)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (01)</b></span>									
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
<b>Topic: Respiratory system</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Cardiovascular system</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Male Genital Tract</b>									
			<b>Number of competencies: (05)</b>		<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Female Genital Tract</b> <span style="margin-left: 200px;"><b>Number of competencies: (09)</b></span> <span style="margin-left: 100px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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	
<b>Topic: Breast</b> <span style="float: right;">Number of competencies: (04)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Endocrine system</b> <span style="float: right;">Number of competencies: (09)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Bone and soft tissue</b> <span style="margin-left: 200px;"><b>Number of competencies: (05)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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	
<b>Topic: Skin</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Central Nervous System</b>		<b>Number of competencies:(03)</b>			<b>Number of procedures that require certification: (01)</b>				
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	
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**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	
<b>Physiology</b>									
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	
<b>Biochemistry</b>									
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	
<b>Microbiology</b>									
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
<b>Community Medicine</b>									
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
<b>Forensic Medicine &amp; Toxicology</b>									
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 Medicicne, 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 Medicicne, Physiology	
<b>Dermatology, Venereology &amp; Leprosy</b>									
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
<b>Anesthesiology</b>									

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
<b>ENT</b>									
EN1.2	Describe the pathophysiology of common diseases in ENT	K	KH	Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce		Pathology	
<b>Ophthalmology</b>									
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	
<b>Dentistry</b>									
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
<b>General Medicine</b>									

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	
<b>Obstetrics &amp; Gynaecology</b>									
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	
<b>Pediatrics</b>									
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	
<b>General Surgery</b>									
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,	
<b>Respiratory Medicine</b>									
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	
<b>Orthopaedics</b>									
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
<b>Radiotherapy</b>									

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
<b>MICROBIOLOGY</b>									
<b>Topic: General Microbiology and Immunity</b>		<b>Number of competencies: (11)</b>			<b>Number of procedures that require certification : (01)</b>				
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			
<b>Topic: CVS and Blood</b> <span style="margin-left: 200px;"><b>Number of competencies: (7)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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
<b>Topic: Gastrointestinal and hepatobiliary system</b> <span style="float: right;">Number of competencies: (8)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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
<b>Topic: Musculoskeletal system skin and soft tissue infections</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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	
<b>Topic: Central Nervous System infections</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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	
<b>Topic: Respiratory tract infections</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures that require certification : (02)</span>									
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	
<b>Topic: Genitourinary &amp; Sexually transmitted infections</b> <span style="float: right;">Number of competencies: (3)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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	
<b>Topic: Zoonotic diseases and miscellaneous</b> <span style="float: right;">Number of competencies: (16)</span> <span style="float: right;">Number of procedures that require certification : (01)</span>									
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.								
	<b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b> <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b> <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b> <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b>								
<b>Integration</b>									
<b>Biochemistry</b>									
BI10.5	Describe antigens and concepts involved in vaccine development.	K	KH	Y	Lectures, Small group discussion	Written/ Viva voce		Pathology, Pediatrics, Microbiology	
<b>Pathology</b>									
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
<b>Pharmacology</b>									
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
<b>Community Medicine</b>									
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
<b>Dermatology, Venereology &amp; Leprosy</b>									
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
<b>Dentistry</b>									
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	
<b>General Medicine</b>									
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
<b>Pediatrics</b>									
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	
<b>General Surgery</b>									
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	
<b>Orthopaedics</b>									
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	
<b>Respiratory Medicine</b>									

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
<b>FORENSIC MEDICINE &amp; TOXICOLOGY</b>									
<b>Topic: General Information</b>		<b>Number of competencies: (11)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Forensic Pathology</b> <span style="margin-left: 200px;"><b>Number of competencies: (35)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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, lightning, 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	
<b>Topic: Clinical Forensic Medicine</b>		<b>Number of competencies:(33)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Medical Jurisprudence (Medical Law and ethics)</b>		<b>Number of competencies: (30)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Forensic Psychiatry</b>		<b>Number of competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Forensic Laboratory investigation in medical legal practice</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Emerging technologies in Forensic Medicine</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Toxicology: General Toxicology</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Toxicology : Chemical Toxicology</b> <span style="margin-left: 200px;"><b>Number of competencies: (06)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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-Carboic 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	
<b>Topic: Toxicology : Pharmaceutical Toxicology</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				

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	
<b>Topic: Toxicology : Biotoxicology</b> <span style="margin-left: 200px;"><b>Number of competencies: (01)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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	
<b>Topic: Toxicology : Sociomedical Toxicology</b> <span style="margin-left: 200px;"><b>Number of competencies: (01)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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	
<b>Topic: Toxicology : Environmental Toxicology</b> <span style="margin-left: 200px;"><b>Number of competencies: (02)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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
<b>Topic: Skills in Forensic Medicine &amp; Toxicology</b>									
					<b>Number of competencies: (22)</b>		<b>Number of procedures that require certification: (NIL)</b>		
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, gandasa, 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			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Human Anatomy</b>									
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
<b>Pharmacology</b>									
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
<b>Radiodiagnosis</b>									
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	
<b>Psychiatry</b>									
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	
<b>General Medicine</b>									
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	
<b>Obstetrics &amp; Gynaecology</b>									
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	
<b>General Surgery</b>									
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

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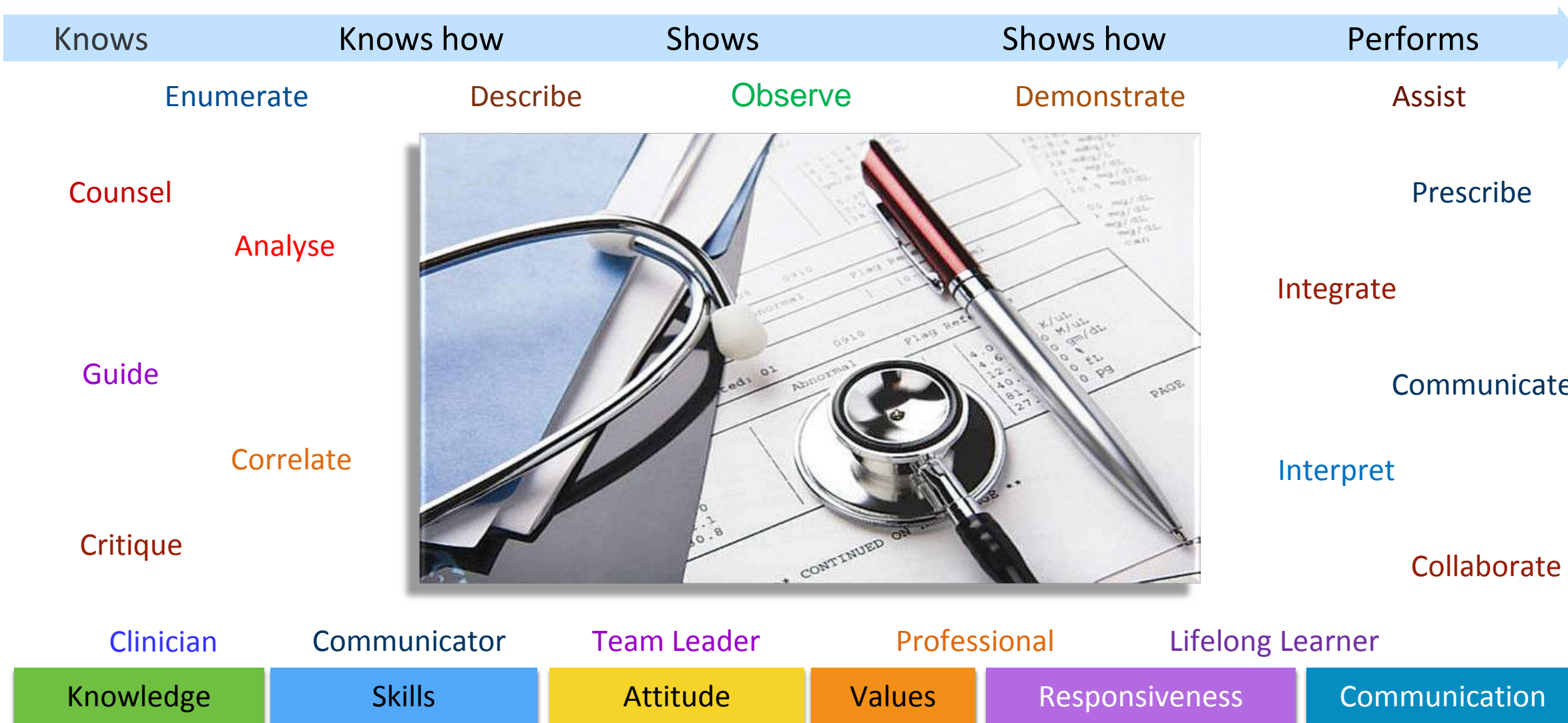
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# MEDICAL COUNCIL OF INDIA

## 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  
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### 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.

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-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.

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# **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**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
1.	<b>Human Anatomy</b>	82	409
2.	<b>Physiology</b>	11	137
3.	<b>Biochemistry</b>	11	89
4.	<b>Pharmacology</b>	05	85
5.	<b>Pathology</b>	36	182
6.	<b>Microbiology</b>	08	54
7.	<b>Forensic Medicine &amp; Toxicology</b>	14	162
	<b>Total</b>	<b>167</b>	<b>1118</b>

## **Topics & outcomes in Medicine and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>Community Medicine</b>	<b>20</b>	<b>107</b>
<b>2.</b>	<b>General Medicine</b>	<b>26</b>	<b>506</b>
<b>3.</b>	<b>Respiratory Medicine</b>	<b>02</b>	<b>47</b>
<b>4.</b>	<b>Pediatrics</b>	<b>35</b>	<b>406</b>
<b>5.</b>	<b>Psychiatry</b>	<b>19</b>	<b>117</b>
<b>6.</b>	<b>Dermatology, Venereology &amp; Leprosy</b>	<b>18</b>	<b>73</b>
<b>7.</b>	<b>Physical Medicine &amp; Rehabilitation</b>	<b>09</b>	<b>43</b>
	<b>Total</b>	<b>129</b>	<b>1299</b>

## **Topics & outcomes in Surgery and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>General Surgery</b>	30	133
<b>2.</b>	<b>Ophthalmology</b>	09	60
<b>3.</b>	<b>Otorhinolaryngology</b>	04	76
<b>4.</b>	<b>Obstetrics &amp; Gynaecology</b>	38	126
<b>5.</b>	<b>Orthopedics</b>	14	39
<b>6.</b>	<b>Anesthesiology</b>	10	46
<b>7.</b>	<b>Radiodiagnosis</b>	01	13
<b>8.</b>	<b>Radiotherapy</b>	05	16
<b>9.</b>	<b>Dentistry</b>	05	23
	<b>Total</b>	<b>116</b>	<b>532</b>

## **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
<b>Physiology</b>									
<b>Summary</b>									
Name of Topic: <b>General Physiology</b>									
Number of Competencies: <b>(08)</b>									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM15.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Description of competency

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.

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
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PA42.1*	At the end of the session the <b>phase II student</b> must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the <b>phase II student</b> must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the <b>phase II student</b> must be able to <b>describe</b> the CSF features for a given etiology of meningitis <b>accurately</b>
PA42.4*	At the end of the session the <b>phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>

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 <b>Phase II student</b> must be able to enumerate the most common causes of meningitis <b>correctly</b>	Lecture → small group discussion
PA42.2*	At the end of the session the <b>Phase II student</b> must be able to enumerate the components of a CSF analysis <b>correctly</b>	Related objectives can be combined into one teaching session
PA42.3*	At the end of the session the <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given etiologic of meningitis <b>accurately</b>	
PA42.4*	At the end of the session the <b>Phase II student</b> must the able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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 <del>Phase I</del> <b>Phase II student</b> 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 <b>Phase II student</b> 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 <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given aetiology of meningitis <b>accurately</b>	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 <b>Phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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
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**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.

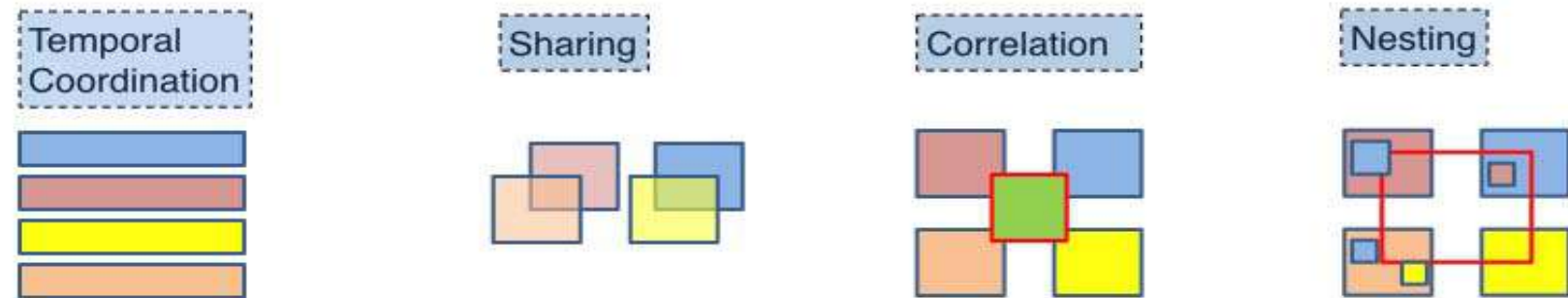


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement 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
<b>COMMUNITY MEDICINE</b>									
<b>Topic: Concept of Health and Disease</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Relationship of social and behavioural to health and disease</b> <b>Number of competencies: (5)</b> <b>Number of procedures that require certification: (NIL)</b>									
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			
<b>Topic: Environmental Health Problems</b> <b>Number of competencies: (8)</b> <b>Number of procedures that require certification: (NIL)</b>									
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	
<b>Topic: Principles of health promotion and education</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Nutrition</b>		<b>Number of competencies: (08)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Basic statistics and its applications</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Epidemiology</b> <span style="margin-left: 200px;"><b>Number of competencies: (09)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: Epidemiology of communicable and non- communicable diseases</b>		<b>Number of competencies:(7)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Demography and vital statistics</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Reproductive maternal and child health</b>		<b>Number of competencies:(09)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Occupational Health</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Geriatric services</b> <span style="float: right;">Number of competencies: (04)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Disaster Management</b> <span style="float: right;">Number of competencies: (04)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Hospital waste management</b> <span style="float: right;">Number of competencies: (03)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Mental Health</b> <span style="float: right;">Number of competencies: (03)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Health planning and management</b>									
		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Health care of the communitiy</b>									
		<b>Number of competencies:(05)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: International Health</b>									
		<b>Number of competencies: (2)</b>			<b>Number of procedures that require certionat(NIL)</b>				
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
<b>Topic: Essential Medicine</b>		<b>Number of competencies: (3)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Recent advances in Community Medicine</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b> <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b> <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b> <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b>									
<b>Intergration</b>									
<b>Physiology</b>									
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
<b>Biochemistry</b>									
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	
<b>Pathology</b>									
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	
<b>Microbiology</b>									
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			
<b>Pharmacology</b>									
PH1.55	Describe and discuss the following National Health programmes including Immunisation, Tuberculosis, Leprosy, Malaria, HIV, Filariasis, Kala Azar, Diarrhoeal diseases, Anaemia & nutritional disorders, Blindness, Non-communicable diseases, Cancer and Iodine deficiency	K	KH	Y	Lecture	Written / Viva voce			Community Medicine
<b>Forensic Medicine &amp; Toxicology</b>									
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	
<b>Dermatology, Venereology &amp; Leprosy</b>									
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
<b>Ophthalmology</b>									
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
<b>Psychiatry</b>									
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	
<b>General Medicine</b>									
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
<b>General Surgery</b>									
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	
<b>Respiratory Medicine</b>									
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
<b>GENERAL MEDICINE</b>									
<b>Topic: Heart Failure</b>		<b>Number of competencies: (30)</b>				<b>Number of procedures that require certification : (01)</b>			
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	
<b>Topic: Acute Myocardial Infarction/ IHD</b>									
<b>Number of competencies: (24)</b>					<b>Number of procedures that require certification : (02)</b>				
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	
<b>Topic: Pneumonia</b>		<b>Number of competencies: (19)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Liver disease</b>		<b>Number of competencies: (18)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: HIV</b> <span style="margin-left: 200px;"><b>Number of competencies: (23)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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	
<b>Topic: Rheumatologic problems</b>		<b>Number of competencies: (27)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Hypertension</b>		<b>Number of competencies: (20)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Anemia</b>		<b>Number of competencies: (21)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Acute Kidney Injury and Chronic renal failure</b>		<b>Number of competencies: (31)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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, glycemis 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			
<b>Topic: Diabetes Mellitus</b>		<b>Number of competencies: (24)</b>			<b>Number of procedures that require certification : (02)</b>				
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			
<b>Topic: Thyroid dysfunction</b>		<b>Number of competencies: (15)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Common malignancies</b>		<b>Number of competencies: (19)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Obesity</b>		<b>Number of competencies: (15)</b>				<b>Number of procedures that require certification: ( NIL)</b>			
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			
<b>Topic: GI bleeding</b> <span style="margin-left: 200px;"><b>Number of competencies: (18)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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
<b>Topic: Diarrheal disorder</b>		<b>Number of competencies: (17)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Headache</b>		<b>Number of competencies: (14)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Cerebrovascular accident</b>		<b>Number of competencies: (17)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Movement disorders</b>		<b>Number of competencies: (09 )</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Envenomation</b>		<b>Number of competencies: (09)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Poisoning</b>		<b>Number of competencies: (08)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Mineral, Fluid Electrolyte and Acid base Disorder</b> <span style="margin-left: 150px;"><b>Number of competencies: (13)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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	
<b>Topic: Nutritional and Vitamin Deficiencies</b>									
			<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification: (NIL)</b>			
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			
<b>Topic: Geriatrics</b>		<b>Number of competencies: (22)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Miscellaneous Infections</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: The role of the physician in the community</b>									
<b>Number of competencies: (49)</b>					<b>Number of procedures that require certification : (NIL)</b>				
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			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

## Integration

### Human Anatomy

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
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	
<b>Physiology</b>									
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	
<b>Biochemistry</b>									
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	
<b>Pathology</b>									
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
<b>Microbiology</b>									
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	
<b>Pharmacology</b>									
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	
<b>Community Medicine</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									
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	
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	
<b>Anesthesiology</b>									
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
<b>Otorhinolaryngology (ENT)</b>									
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
<b>Ophthalmology</b>									
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	
<b>Dentistry</b>									
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	
<b>Psychiatry</b>									
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
<b>Obstetrics &amp; Gynaecology</b>									
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
<b>Pediatrics</b>									

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
<b>General Surgery</b>									
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
<b>Orthopaedics</b>									
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
<b>Physical Medicine &amp; Rehabilitation</b>									
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
<b>Radiotherapy</b>									
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
<b>RESPIRATORY MEDICINE</b>									
<b>Topic: Tuberculosis</b>		<b>Number of competencies: (19)</b>			<b>Number of procedures that require certification : (01)</b>				
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) 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	
<b>Topic: Obstructive airway disease</b> <span style="margin-left: 200px;"><b>Number of competencies: (28)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (01)</b></span>									
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			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

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
<b>Integration</b>									
<b>Physiology</b>									
PY6.8	Demonstrate the correct technique to perform & interpret Spirometry	S	SH	Y	DOAP sessions	Skill assessment/ Viva voce		Respiratory Medicine	
<b>Pharmacology</b>									
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
<b>General Medicine</b>									
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
<b>Pediatrics</b>									
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
<b>PEDIATRICS</b>									
<b>Topic: Normal Growth and Development</b>		<b>Number of competencies : (07)</b>			<b>Number of procedures that require certification: (02)</b>				
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		
<b>Topic: Common problems related to Growth</b>		<b>Number of competencies:(06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Common problems related to Development -1 (Developmental delay , Cerebral palsy)</b> <b>Number of competencies:(08)      Number of procedures that require certification: (NIL)</b>									
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
<b>Topic: Common problems related to Development-2 (Scholastic backwardness, Learning Disabilities , Autism , ADHD)</b> Number of competencies: (06) <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Common problems related to behavior</b> <span style="margin-left: 100px;">Number of competencies: ( 11)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<p><b>Topic: To promote and support optimal Breast feeding for Infants      Number of competencies: (11)      Number of procedures that require certification: (01)</b></p>									
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			
<b>Topic: Complementary Feeding</b> <span style="margin-left: 200px;"><b>Number of competencies : (05)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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	
<b>Topic: Provide nutritional support , assessment and monitoring for common nutritional problems</b> <b>Number of competencies: (06)</b> <b>Number of procedures that require certification: (NIL)</b>									
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			
<b>Topic: Obesity in children</b> <b>Number of competencies: (06)</b> <b>Number of procedures that require certification: (01)</b>									
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			
<b>Topic: Micronutrients in Health and disease-1 (Vitamins ADEK, B Complex and C)</b> <b>Number of competencies: (21)</b> <b>Number of procedures that require certification: (NIL)</b>									
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	
<b>Topic: Toxic elements and free radicals and oxygen toxicity</b> <span style="margin-left: 150px;"><b>Number of competencies: (05)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification (NIL)</b></span>									
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			
<b>Topic: Fluid and electrolyte balance</b> <span style="float: right;">Number of competencies:(07)</span> <span style="float: right;">Number of procedures that require certification:(NIL)</span>									
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			
<b>Topic: Integrated Management of Neonatal and Childhood Illnesses (IMNCI) Guideline</b> <span style="float: right;">Number of competencies:(03)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: The National Health programs, NHM</b> <span style="margin-left: 150px;"><b>Number of competencies:(02)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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	
<b>Topic: The National Health Programs: RCH</b> <span style="margin-left: 150px;"><b>Number of competencies: (08)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: National Programs, RCH - Universal Immunizations program      Number of competencies: (16)      Number of procedures that require certification: (01)</b>									
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, Icthyosis, 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			
<b>Topic: Approach to and recognition of a child with possible Rheumatologic problem</b> <p style="text-align: center;">Number of competencies: (03) <span style="float: right;">Number of procedures that require certification:(NIL)</span></p>									
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			
<b>Topic: Cardiovascular system- Heart Diseases</b> <p style="text-align: center;">Number of competencies: (18) <span style="float: right;">Number of procedures that require certification:(NIL)</span></p>									
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, Osler's 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	
<b>Topic:Diarrhoeal diseases and Dehydration</b>		<b>Number of competencies: (17)</b>			<b>Number of procedures that require certification:(03)</b>				
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		
<b>Topic: Malabsorption</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Acute and chronic liver disorders</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Pediatric Emergencies – Common Pediatric Emergencies</b> <b>Number of competencies: (35)</b> <b>Number of procedures that require certification:(10)</b>									
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			
<b>Topic: Respiratory system</b>		<b>Number of competencies: (20)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Anemia and other Hemato-oncologic disorders in children</b> <b>Number of competencies: (20 )</b> <b>Number of procedures that require certification: (NIL)</b>									
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			
<b>Topic: Systemic Pediatrics-Central Nervous system</b> <span style="margin-left: 150px;"><b>Number of competencis: (23)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification:(NIL)</b></span>									
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			
<b>Topic: Chromosomal Abnormalities</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Endocrinology</b> <span style="margin-left: 200px;"><b>Number of competencies: ( 11)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (02)</b></span>									
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		
<b>Topic:Vaccine preventable Diseases - Tuberculosis</b> <span style="margin-left: 150px;"><b>Number of competencies: ( 20)</b></span> <span style="margin-left: 150px;"><b>Number of procedures that require certification: (03)</b></span>									
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	
<b>Topic: The role of the physician in the community</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
PE35.1	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to health care in children (including parental rights and right to refuse treatment)	K	KH	Y	Small group discussion	Written/ Viva voce			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH- Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Human Anatomy</b>									
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	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	
<b>Physiology</b>									
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	
<b>Biochemistry</b>									
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	
<b>Pathology</b>									
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	
<b>Microbiology</b>									

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	
<b>Pharmacology</b>									
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	
<b>Community Medicine</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									

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	
<b>Dermatology, Venereology &amp; Leprosy</b>									
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	
<b>Psychiatry</b>									
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
<b>General Medicine</b>									
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
<b>Obstetrics &amp; Gynecology</b>									
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
<b>Physical Medicine &amp; Rehabilitation</b>									
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
<b>PSYCHIATRY</b>									
<b>Topic: Doctor patient relationship</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Mental health</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Introduction to psychiatry</b>		<b>Number of competencies: (12)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Psychotic disorders</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Psychotic disorders</b>		<b>Number of competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Depression</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				



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			
<b>Topic: Bipolar disorders</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Anxiety disorders</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Stress related disorders</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Somatoform disorders</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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 <b>somatoform</b> 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			
<b>Topic: Personality disorders</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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 <b>personality</b> 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			
<b>Topic: Psychosomatic disorders</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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 <b>psychosomatic</b> 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
<b>Topic: Psychosexual and gender identity disorders</b>									
		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Psychiatric disorders in childhood and adolescence</b>									
		<b>Number of competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Mental retardation</b> <span style="float: right;">Number of competencies: (04 )</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Psychiatric disorders in the elderly</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Psychiatric emergencies</b> <span style="float: right;"><b>Number of competencies: (03)</b> <b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Therapeutics</b> <span style="float: right;"><b>Number of competencies: (03)</b> <b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Miscellaneous</b> <span style="float: right;"><b>Number of competencies: (06)</b> <b>Number of procedures that require certification: (NIL)</b></span>									
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			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

### 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	
<b>Community Medicine</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									

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	
<b>General Medicine</b>									
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
<b>Pediatrics</b>									
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
<b>Physical Medicine &amp; Rehabilitation</b>									
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
<b>Dermatology, Venereology &amp; Leprosy</b>									
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
<b>Forensic Medicine &amp; Toxicology</b>									
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	<b>SEXUAL OFFENCES</b> 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 <b>P</b>	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
<b>DERMATOLOGY, VENEREOLOGY &amp; LEPROSY</b>									
<b>Topic: Acne</b>		<b>Number of competencies:(03)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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			
<b>Topic: Vitiligo</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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			
<b>Topic: Papulosquamous disorders</b>		<b>Number of competencies:(03)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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			
<b>Topic: Lichen Planus</b>		<b>Number of competencies:(02)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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			
<b>Topic: Scabies</b>		<b>Number of competencies:(03)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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
<b>Topic: Pediculosis</b>		<b>Number of competencies : (02)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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	
<b>Topic: Fungal Infections</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certificaion:(NIL)</b>				
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
<b>Topic: Viral infections</b>		<b>Number of competencies (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				



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
<b>Topic: Sexually Transmitted Diseases</b> <span style="margin-left: 200px;"><b>Number of competencies: (11)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification:(NIL)</b></span>									
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	
<b>Topic: HIV</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Dermatitis and Eczema</b>		<b>Number of competencies: (07)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Vesicubullous Lesions</b> <span style="float: right;">Number of competencies:(03)</span> <span style="float: right;">Number of procedures that require certificaion:(NIL)</span>									
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			
<b>Topic: Urticaria Angioedema</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certificaion:(NIL)</span>									
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
<b>Topic: Pyoderma</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Collagen Vascular disease</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification:(NIL)</b>				
<b>See also major competencies listed in General Medicine</b>									
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
<b>Topic: Nutritional Deficiencies and Skin</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Systemic diseases and the skin</b>		<b>Number of competencies:(02)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Human Anatomy</b>									
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	
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**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
<b>PHYSICAL MEDICINE &amp; REHABILITATION</b>									
<b>Topic: Introduction to Physical Medicine</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Cerebrovascular accident</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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
<b>Topic: Cerebral Palsy</b>		<b>Number ocompetencies: (07)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Amputation</b> <span style="float: right;"><b>Number of competencies : (04)</b> <b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: Lower motor neuron lesion</b> <span style="float: right;"><b>Number of competencies :(04)</b> <b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: Spinal injury</b> <span style="float: right;"><b>Number of competencies:(09)</b> <b>Number of procedures that require certification: (NIL)</b></span>									

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
<b>Topic: Geriatrics</b>		<b>Number of competencies:(01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

### 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
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- 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
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## **6. Microbiology**

- Dr. S. Geetalakshmi, Dean, Professor, Department of Microbiology, Stanley Medical College, Chennai, Tamil Nadu.
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## **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**

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- 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, Department of Paediatrics, Sri Ramachandra Medical College & Research Institute, Chennai.

#### **11. Psychiatry**

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- 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**

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- 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

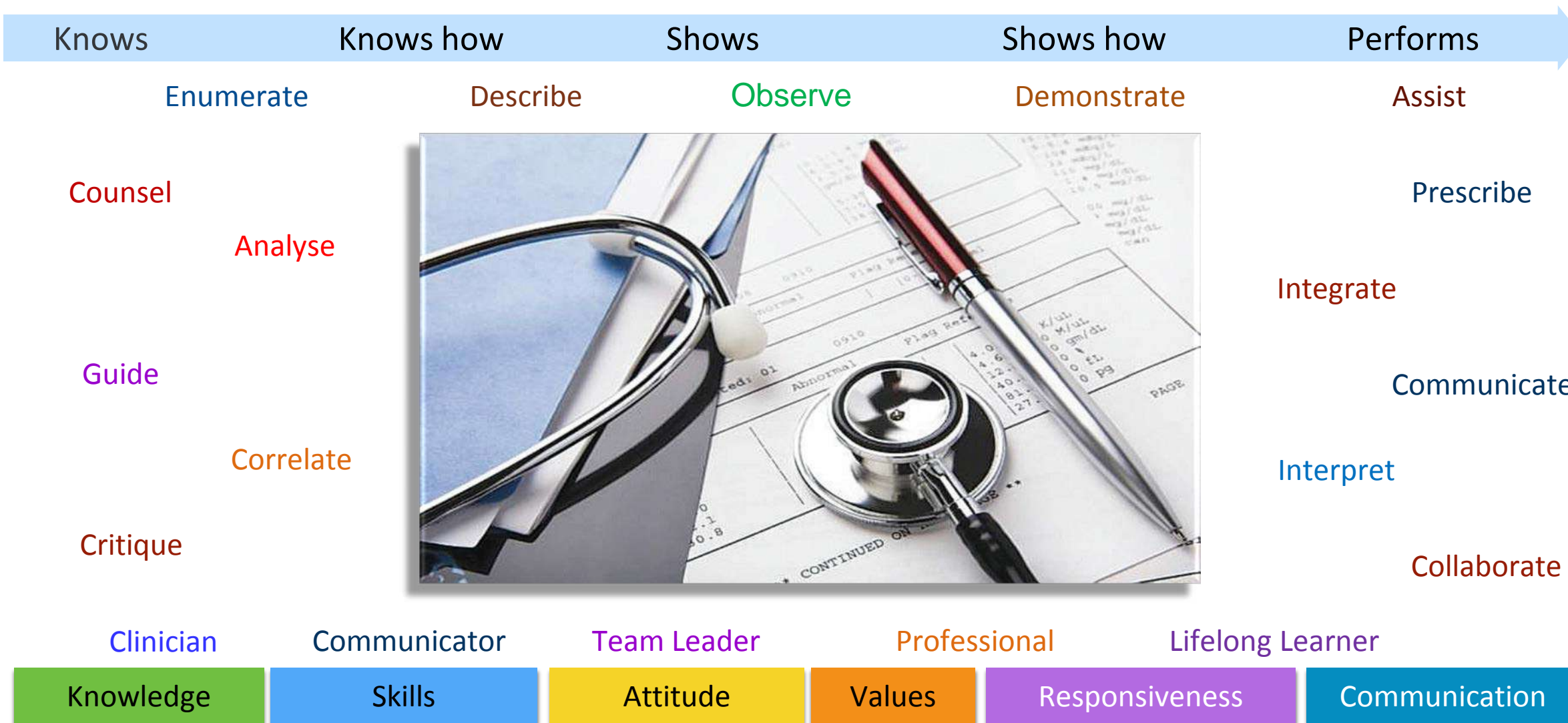
## **22. Dentistry**

- 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-III (2018)

**COMPETENCY BASED UNDERGRADUATE CURRICULUM  
FOR THE  
INDIAN MEDICAL GRADUATE**

**2018**



**Medical Council of India  
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## 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.

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-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.

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# **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**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
1.	<b>Human Anatomy</b>	82	409
2.	<b>Physiology</b>	11	137
3.	<b>Biochemistry</b>	11	89
4.	<b>Pharmacology</b>	05	85
5.	<b>Pathology</b>	36	182
6.	<b>Microbiology</b>	08	54
7.	<b>Forensic Medicine &amp; Toxicology</b>	14	162
	<b>Total</b>	<b>167</b>	<b>1118</b>

## **Topics & outcomes in Medicine and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>Community Medicine</b>	20	107
<b>2.</b>	<b>General Medicine</b>	26	506
<b>3.</b>	<b>Respiratory Medicine</b>	02	47
<b>4.</b>	<b>Pediatrics</b>	35	406
<b>5.</b>	<b>Psychiatry</b>	19	117
<b>6.</b>	<b>Dermatology, Venereology &amp; Leprosy</b>	18	73
<b>7.</b>	<b>Physical Medicine &amp; Rehabilitation</b>	09	43
	<b>Total</b>	<b>129</b>	<b>1299</b>

## **Topics & outcomes in Surgery and Allied subjects**

<b>Sr. No.</b>	<b>Subjects</b>	<b>Number of topics</b>	<b>Number of outcomes</b>
<b>1.</b>	<b>General Surgery</b>	30	133
<b>2.</b>	<b>Ophthalmology</b>	09	60
<b>3.</b>	<b>Otorhinolaryngology</b>	04	76
<b>4.</b>	<b>Obstetrics &amp; Gynaecology</b>	38	126
<b>5.</b>	<b>Orthopedics</b>	14	39
<b>6.</b>	<b>Anesthesiology</b>	10	46
<b>7.</b>	<b>Radiodiagnosis</b>	01	13
<b>8.</b>	<b>Radiotherapy</b>	05	16
<b>9.</b>	<b>Dentistry</b>	05	23
	<b>Total</b>	<b>116</b>	<b>532</b>

## **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
<b>Physiology</b>									
<b>Summary</b>									
Name of Topic: <b>General Physiology</b>									
Number of Competencies: <b>(08)</b>									
PY1.1	Describe the structure and functions of a	K	KH	Y	Lectures, Small group discussion	Written/Viva			Biochemistry
IM15.4	Elicit <i>document</i> and present a medical history that helps delineate the	S	SH	Y	Bed Side clinic, DOAP	Skill assessment		Community Medicine	

Description of competency

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.

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
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PA42.1*	At the end of the session the <b>phase II student</b> must be able to enumerate the most common causes of meningitis correctly
PA42.2*	At the end of the session the <b>phase II student</b> must be able to enumerate the components of CSF analysis correctly
PA42.3*	At the end of the session the <b>phase II student</b> must be able to <b>describe</b> the CSF features for a given etiology of meningitis <b>accurately</b>
PA42.4*	At the end of the session the <b>phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>

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
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**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 <b>Phase II student</b> must be able to enumerate the most common causes of meningitis <b>correctly</b>	Lecture → small group discussion
PA42.2*	At the end of the session the <b>Phase II student</b> must be able to enumerate the components of a CSF analysis <b>correctly</b>	Related objectives can be combined into one teaching session
PA42.3*	At the end of the session the <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given etiologic of meningitis <b>accurately</b>	
PA42.4*	At the end of the session the <b>Phase II student</b> must the able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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
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**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 <del>Phase I</del> <b>Phase II student</b> 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 <b>Phase II student</b> 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 <b>Phase II student</b> must be able to <b>describe</b> the CSF features for a given aetiology of meningitis <b>accurately</b>	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 <b>Phase II student</b> must be able to identify the aetiology of meningitis correctly from a <b>given set of CSF parameters</b>	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
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**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.

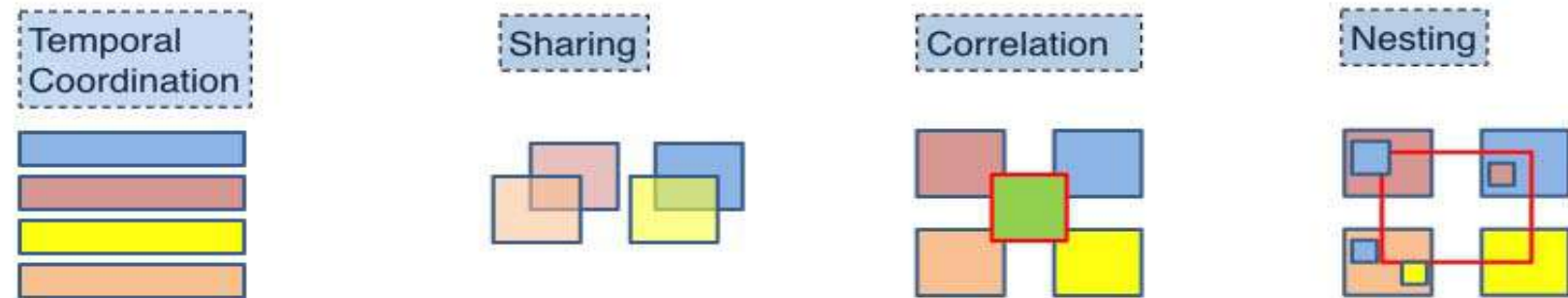


Figure 1 : Integration concepts framed in the GMR. Coloured boxes represent subjects. 1 a. Temporal coordination: The timetable is adjusted so that topics within the subjects or disciplines which are related, are scheduled at the same time. b. Sharing: Two disciplines may agree to plan and jointly implement 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
<b>GENERAL SURGERY</b>									
<b>Topic: Metabolic response to injury</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Shock</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Blood and blood components</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Burns</b>		<b>Number of competencies: (04 )</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Wound healing and wound care</b>		<b>Number of competencies: (04 )</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Surgical infections</b> <span style="float: right;">Number of competencies: (02)      Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Surgical Audit and Research</b> <span style="float: right;">Number of competencies: (02)      Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Ethics</b> <span style="float: right;">Number of competencies: (03)      Number of procedures that require certification: (NIL)</span>									
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	
<b>Topic: Investigation of surgical patient</b> <span style="float: right;">Number of competencies (03)      Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Pre, intra and post- operative management.                      Number of competencies: (04)                      Number of procedures that require certification: (NIL)</b>									
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			
<b>Topic: Anaesthesia and pain management                      Number of competencies: (06)                      Number of procedures that require certification: (NIL)</b>									
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			
<b>Topic: Nutrition and fluid therapy</b>		<b>Number of competencies: (03 )</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Transplantation</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Basic Surgical Skills</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Biohazard disposal</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
SU15.1	Describe classification of hospital waste and appropriate methods of disposal.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	
<b>Topic: Minimally invasive General Surgery</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Trauma</b>		<b>Number of competencies: (10)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Developmental anomalies of face, mouth and jaws</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Oropharyngeal cancer</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Disorders of salivary glands</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Endocrine General Surgery: Thyroid and parathyroid</b>		<b>Number of competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Adrenal glands</b> <span style="margin-left: 200px;"><b>Number of competencies: (03)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<b>Topic: Pancreas</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Breast</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Cardio-thoracic General Surgery- Chest - Heart and Lungs</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Vascular diseases</b> <span style="float: right;"><b>Number of competencies: (08)</b></span> <span style="float: right;"><b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Abdomen</b> <span style="float: right;"><b>Number of competencies: (18)</b></span> <span style="float: right;"><b>Number of procedures that require certification: (NIL)</b></span>									
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 management 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			
<b>Topic: Urinary System</b> <span style="margin-left: 200px;"><b>Number of competencies: (11)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Penis, Testis and scrotum</b>		<b>Number of competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<p><b>Column C: K- Knowledge, S – Skill , A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Human Anatomy</b>									
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, 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	

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 Phimosis & 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	
<b>Biochemistry</b>									
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
B110.2	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	
B110.3	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	
<b>Pathology</b>									
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	
<b>Microbiology</b>									
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
<b>Community Medicine</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									
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	
<b>Dermatology, Venereology &amp; Leprosy</b>									
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	
<b>Anesthesiology</b>									
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
<b>General Medicine</b>									
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
<b>Obstetrics &amp; Gynaecology</b>									
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
<b>Pediatrics</b>									
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, hypospadias, Torsion testis, hernia Hydrocele, Vulval Synechia	S	SH	Y	Bed side clinics, Skills lab	Log book assessment			General Surgery
<b>Orthopedics</b>									
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
<b>Physical Medicine &amp; Rehabilitation</b>									
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
<b>Radiotherapy</b>									
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
<b>OPHTHALMOLOGY</b>									
<b>Topic: Visual Acuity Assessment</b>		<b>Number of Competens: (05)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Lids and Adnexa, Orbit</b>		<b>Number of Competencies: (08)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Conjunctiva</b>		<b>Number of Competencies (09 )</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Corneas</b> <span style="float: right;">Number of Competencies: (10)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Sclera</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Iris and Anterior chamber</b> <span style="margin-left: 200px;"><b>Number of Competencies (10)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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			
<b>Topic: Lens</b>		<b>Number of Competencies: (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Retina &amp; optic Nerve</b>		<b>Number of Competencies (05)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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 fundoscopic 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			
<b>Topic: Miscellaneous</b>		<b>Number of Competencies (05)</b>			<b>Number of procedures that require certification: (01)</b>				
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	
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#### Pharmacology

PH1.58	Describe drugs used in Ocular disorders	K	KH	Y	Lecture	Written/ Viva voce		Ophthalmology	
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#### 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
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**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
<b>OTORHINOLARYNGOLOGY (ENT)</b>									
<b>Topic: Anatomy and Physiology of ear, nose, throat, head &amp; neck</b>		<b>Number of competencies:(02)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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	
<b>Topic: Clinical Skills</b>		<b>Number of competencies: (15)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Diagnostic and Therapeutic procedures in ENT</b>		<b>Number of competencies:(06)</b>			<b>Number of procedures that require certification:(NIL)</b>				
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			
<b>Topic: Management of diseases of ear, nose &amp; throat</b> <span style="margin-left: 200px;"><b>Number of competencies: (53)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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	
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

## 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	
<b>Physiology</b>									
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	
<b>Community Medicine</b>									
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	
<b>Dentistry</b>									
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
<b>General Medicine</b>									
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
<b>Pediatrics</b>									
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	
<b>General Surgery</b>									
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
<b>OBSTETRICS &amp; GYNAECOLOGY</b>									
<b>Topic: Demographic and Vital Statistics</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Anatomy of the female reproductive tract (Basic anatomy and embryology)</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Physiology of conception</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
OG3.1	Describe the physiology of ovulation, menstruation, fertilization, implantation and gametogenesis.	K	K	Y	Lecture, seminars	Theory		Physiology	
<b>Topic: Development of the fetus and the placenta</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Preconception counselling</b> <span style="float: right;">Number of competencies:(02)      Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Diagnosis of pregnancy</b> <span style="float: right;">Number of competencies:(01)      Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Maternal Changes in pregnancy</b> <span style="float: right;">Number of competencies: (01)      Number of procedures that require certification : (NIL)</span>									
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	
<b>Topic: Antenatal Care</b> <span style="float: right;">Number of competencies: (08)      Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Complications in early pregnancy</b> <span style="margin-left: 200px;"><b>Number of competencies: (05)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
OG9.1	Classify, define and discuss 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			
<b>Topic: Antepartum haemorrhage</b>		<b>Number of competencies: (02)</b>			<b>Number of competencies that require certification: (NIL)</b>				
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	
<b>Topic: Multiple pregnancies</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Medical Disorders in pregnancy</b>		<b>Number of competencies: ( 08)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Labour</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification : (01)</b>				
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		
<b>Topic: Abnormal Lie and Presentation; Maternal Pelvis</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that need certification : (NIL)</b>				
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			
<b>Topic: Operative obstetrics</b> <span style="float: right;">Number of competencies: (02)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Complications of the third stage</b> <span style="float: right;">Number of competencies: (03)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Lactation</b> <span style="margin-left: 200px;"><b>Number of competencies: (03)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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			
<b>Topic: Care of the new born</b> <span style="margin-left: 200px;"><b>Number of competencies: (04)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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
<b>Topic: Normal and abnormal puerperium.</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Medical termination of pregnancy</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Contraception</b> <span style="float: right;">Number of competencies: (02)      Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Vaginal discharge</b> <span style="float: right;">Number of competencies: (02)      Number of procedures that require certification :(NIL)</span>									
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			
<b>Topic: Normal and abnormal puberty</b> <span style="float: right;">Number of competencies: (03)      Number of procedures that require certification : (NIL)</span>									
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
<b>Topic: Abnormal uterine bleeding</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Amenorrhoea</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
OG25.1	Describe and discuss the causes of primary and secondary amenorrhoea, its investigation and the principles of management.	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
<b>Topic: Genital injuries and fistulae</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Genital infections</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Infertility</b> <span style="float: right;"><b>Number of competencies:(04)</b> <b>Number of procedures that require certification : (NIL)</b></span>									
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			
<b>Topic: Uterine fibroids</b> <span style="float: right;"><b>Number of competencies: (01)</b> <b>Number of procedures that require certification : (NIL)</b></span>									
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			
<b>Topic: PCOS and hirsutism</b> <span style="float: right;"><b>Number of competencies: (02)</b> <b>Number of procedures that require certification : (NIL)</b></span>									
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
<b>Topic: Uterine prolapse</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification :(NIL)</b>				
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			
<b>Topic: Menopause</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Benign, Pre-malignant (CIN) and Malignant Lesions of the Cervix</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Benign and malignant diseases of the uterus and the ovaries</b> <b>Number of competencies: (04)</b> <b>Number of procedures that require certification : (NIL)</b>									
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			
<b>Topic: Obstetrics &amp; Gynecological skills - I</b> <b>Number of competencies: (17)</b> <b>Number of procedures that require certification : (NIL)</b>									
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			
<b>Topic: Obstetrics &amp; Gynecological skills - II</b> <span style="float: right;">Number of competencies: (03)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Obstetrics &amp; Gynecological skills - III</b> <span style="float: right;">Number of competencies: (07)</span> <span style="float: right;">Number of procedures that require certification : (NIL)</span>									
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			
<b>Topic: Should observe</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									

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
<b>Integration</b>									
<b>Human Anatomy</b>									
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	
<b>Physiology</b>									
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	
<b>Biochemistry</b>									
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	
<b>Pathology</b>									
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	
<b>Pharmacology</b>									
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		<b>Obstetrics &amp; Gynaecology</b>	
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	
<b>Community Medicine</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									
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	
<b>Dermatology &amp; Venereology</b>									
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
<b>General Medicine</b>									
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	
<b>Radiodiagnosis</b>									
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	
<b>Pediatrics</b>									
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
<b>Radiotherapy</b>									
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
<b>ORTHOPEDICS</b>									
<b>Topic: Skeletal Trauma, Poly trauma</b>		<b>Number of competencies : (06)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Fractures</b>		<b>Number of competencies : (16)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	<b>COMPETENCY</b> 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
<b>Topic: Musculoskeletal Infection</b> <span style="float: right;">Number of competencies : (03)</span> <span style="float: right;">Number of Procedures that require certification: (NIL)</span>									
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
<b>Topic: Skeletal Tuberculosis</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Rheumatoid Arthritis and associated inflammatory disorders</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									

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
<b>Topic: Degenerative disorders</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Metabolic bone disorders</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Poliomyelitis</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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			
<b>Topic: Cerebral Palsy</b> <span style="float: right;">Number of competencies : (01)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									



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			
<b>Topic: Bone Tumors</b>		<b>Number of competencies : (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Peripheral nerve injuries</b>		<b>Number of competencies : (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Congenital lesions</b>		<b>Number of competencies : (01)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<b>Topic: Procedural Skills</b>		<b>Number of competencies : (02)</b>			<b>Number of procedures that require certification: (NIL)</b>				

Number	<b>COMPETENCY</b> 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
<b>Topic: Counselling Skills</b> <span style="margin-left: 200px;"><b>Number of competencies : (03)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Human Anatomy</b>									
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	
<b>Pathology</b>									

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	
<b>Microbiology</b>									
MI4.2	Describe the etiopathogenesis, clinical course and discuss the laboratory diagnosis of bone & joint infections.	K	KH	Y	Lecture	Written/ Viva voce		Orthopedics	
<b>Forensic Medicine &amp; Toxicology</b>									
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	<b>COMPETENCY</b> 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	
<b>General Medicine</b>									
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	<b>COMPETENCY</b> 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
<b>Physical Medicine &amp; Rehabilitation</b>									
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	<b>COMPETENCY</b> 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	<b>COMPETENCY</b> 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
<b>ANAESTHESIOLOGY</b>									
<b>Topic: Anaesthesiology as a specialty</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Cardiopulmonary resuscitation</b>		<b>Number of competencies: (02 )</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Preoperative evaluation and medication</b>		<b>Number of competencies: (06 )</b>			<b>Number of procedures that require certification : (NIL)</b>				

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	
<b>Topic: General Anaesthesia</b> <span style="margin-left: 200px;"><b>Number of competencies: (07)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification : (NIL)</b></span>									
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 anaesthesia	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			
<b>Topic: Regional anaesthesia</b> <span style="margin-left: 200px;"><b>Number of competencies: (06)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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 anaesthesia	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
<b>Topic: Post-anaesthesia recovery</b> <span style="float: right;">Number of competencies: (03)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Intensive Care Management</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Pain and its management</b> <span style="float: right;">Number of competencies: (05)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									
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
<b>Topic: Fluids</b> <span style="float: right;">Number of competencies: (04)</span> <span style="float: right;">Number of procedures that require certification: (NIL)</span>									



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
<b>Topic: Patient safety</b> <span style="margin-left: 200px;"><b>Number of competencies: (04)</b></span> <span style="margin-left: 200px;"><b>Number of procedures that require certification: (NIL)</b></span>									
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
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Physiology</b>									
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	
<b>Pharmacology</b>									
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	
<b>Forensic Medicine &amp; Toxicology</b>									

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	
<b>General Medicine</b>									
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
<b>General Surgery</b>									
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
<b>Orthopaedics</b>									
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
<b>RADIODIAGNOSIS</b>									
<b>Topic: Radiological investigations and Radiation safety</b>		<b>Number of competencies: (13)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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	
<p><b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b>  <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b>  <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b>  <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b></p>									
<b>Integration</b>									
<b>Human Anatomy</b>									
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	
AN541.	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	
<b>Forensic Medicine &amp; Toxicology</b>									
FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially: <ul style="list-style-type: none"> <li>-- maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres.</li> <li>-- maintenance of medico-legal register like accident register.</li> <li>-- documents of issuance of wound certificate</li> <li>-- documents of issuance of drunkenness certificate.</li> <li>-- documents of issuance of sickness and fitness certificate.</li> <li>-- documents for issuance of death certificate.</li> <li>-- documents of Medical Certification of Cause of Death - Form Number4 and 4A</li> <li>-- documents for estimation of age by physical, dental and radiological examination and issuance of certificate</li> </ul>	K	KH	Y	Lecture/ Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Pediatrics	
<b>General Medicine</b>									
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	
<b>Obstetrics &amp; Gynaecology</b>									
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
<b>Pediatrics</b>									
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
<b>General Surgery</b>									
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	

**RADIOTHERAPY (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
<b>RADIOTHERAPY</b>									
<b>Topic: Principles of Radiation Oncology (Radiotherapy)</b>		<b>Number of competencies: (03)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Topic: Radiation Protection</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
RT2.1	Describe and discuss radiation protection and personnel monitoring during radiation treatment	K	KH	Y	Lecture	Written/ Viva voce			
<b>Topic: Radiobiology &amp; Chemoradiation</b>		<b>Number of competencies: (02)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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			
<b>Topic: Radiation Treatment Delivery &amp; outcome</b>		<b>Number of competencies: (09)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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	
<b>Topic: Cancer Prevention &amp; Registries</b>		<b>Number of competencies: (01)</b>			<b>Number of procedures that require certification : (NIL)</b>				
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
<b>Orthopaedics</b>									
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
<b>DENTISTRY</b>									
<b>Topic: Dental Caries</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification (NIL)</b>				
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			
<b>Topic: Edentulous state</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification (NIL)</b>				
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
<b>Topic: Malocclusion</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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			
<b>Topic: Oral cancer</b>		<b>Number of competencies: (04)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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
<b>Topic: Periodontal disease</b>		<b>Number of competencies: (05)</b>			<b>Number of procedures that require certification: (NIL)</b>				
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**

<b>Integration</b>									
<b>Pathology</b>									
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
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## **10. Pediatrics**

- Dr. Harish Chellani, Professor of Pediatrics, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi
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- Dr. S. Aneja, Director Professor & Head, Department of Pediatrics, Kalawati Saran Children's Hospital, New Delhi
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- Dr. Jagdish R Varma, Associate Professor, Department of Psychiatry, Pramukhswami Medical College, Karamsad, Gujarat

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#### **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

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- Dr. Dinesh Bhatnagar, Professor, Department of General Surgery, North Delhi Municipal Corporation Medical College, Hindu Rao Hospital, Malka Ganj, Delhi

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#### **17. Obstetrics and Gynaecology**

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## **18. Orthopaedics**

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- Dr. SC. Goel, Professor, Department of Orthopaedics, Institute of Medical Sciences, BHU, Varanasi, Uttar Pradesh

## **19. Anaesthesiology**

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- Dr. Mridula Pawar, Consultant & Head, Department of Anaesthesia, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi

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## **21. Radiotherapy**

- Dr. P. K. Jhulka, Dean & Professor of Radiotherapy, All India Institute of Medical Sciences, New Delhi.
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राष्ट्रीय आयुर्विज्ञान आयोग  
**National Medical Commission**  
**(Undergraduate Medical Education Board)**

**No. U.14021/8/2023-UGMEB**


**Dated, the 01<sup>st</sup> August, 2023**

**Subject: - Competency Based Medical Education Curriculum (CBME)  
Guidelines- National Medical Commission.**

Under Graduate Medical Education Board invited comments on draft Competency Based Medical Education Guidelines vide Public Notice of even no. dated 23/06/2023.

2. After consideration of comments received, in exercise of powers conferred by the National Medical Commission Act, 2019 and particularly by sections 10, 24, 25, and 57 of the said Act, Under Graduate Medical Education Board publishes the Competency Based Medical Education Guidelines.

3. Guidelines shall be effective from the date of its publication i.e.; 01/08/2023.



01/08/2023

(Shambhu Sharan Kumar)  
Director, UGMEB

**CBME CURRICULUM**

**1. 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.

About 25 years have passed since the existing Regulations on Graduate Medical Education, 1997 were 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, advancements in medical education 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, 2019 will reveal that the 2019 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.

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.

## **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.

### **3. 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 social obligations towards realization of this goal.
- b. Learn key aspects of National policies on health and devote 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.

### **4. 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, palliative 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. 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 and advocacy;
  - vi) Indian Public Health Standards (IPHS) at various level of service delivery;
  - vii) Bio-medical waste disposal
  - 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 with maximum community participation.
- 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.

#### **5. Goals for the Learner**

In order to fulfill these goals, the Indian Medical Graduate must be able to function in the following roles appropriately and effectively:-

- a. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
- b. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
- c. Communicator with patients, families, colleagues and community.
- d. Lifelong learner committed to continuous improvement of skills and knowledge.
- e. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession.
- f. Critical thinker who demonstrates problem solving skills in professional practice

- g. Researcher who generates and interprets evidence

## **6. 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 fulfill the roles, the Indian Medical Graduate would have obtained the following set of competencies at the time of graduation:

### **Clinician, who understands and provides preventive, promotive, curative, palliative and holistic care with compassion**

- Demonstrate knowledge of normal human structure, function and development from a molecular, cellular, biologic, clinical, behavioral and social perspective.
- Demonstrate knowledge of abnormal human structure, function and development from a molecular, cellular, biological, clinical, behavioral and social perspective.
- Demonstrate knowledge of medico-legal, societal, ethical and humanitarian principles that influence healthcare.
- 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.
- 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.
- 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.
- Demonstrate ability to perform a physical examination that is complete and relevant to disease identification, disease prevention and health promotion.
- Demonstrate ability to perform a physical examination that is contextual to gender,

social and economic status, patient preferences and values.

- 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.
- Maintain accurate, clear and appropriate record of the patient in conformation with legal and administrative frameworks.
- Demonstrate ability to choose the appropriate diagnostic tests and interpret these tests based on scientific validity, cost effectiveness and clinical context.
- 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 programmers and policies for the following:
  - Disease prevention,
  - Health promotion and cure,
  - Pain and distress alleviation, and
  - Rehabilitation and palliation.
- Demonstrate ability to provide a continuum of care at the primary (including home care) and/or secondary level that addresses chronicity, mental and physical disability.
- Demonstrate ability to appropriately identify and refer patients who may require specialized or advanced tertiary care.
- Demonstrate familiarity with basic, clinical and translational research as it applies to the care of the patient.

#### **Leader and member of the health care team and system**

- Work effectively and appropriately with colleagues in an inter-professional health care team respecting diversity of roles, responsibilities and competencies of other professionals.
- Recognize and function effectively, responsibly and appropriately as a health care team leader in primary and secondary health care settings.



- 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.
- 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.
- Participate appropriately and effectively in measures that will advance quality of health care and patient safety within the health care system.
- 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.

#### **Communicator with patients, families, colleagues and community**

- 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.
- Demonstrate ability to establish professional relationships with patients and families that are positive, understanding, humane, ethical, empathetic, and trustworthy.
- Demonstrate ability to communicate with patients in a manner respectful of patient's preferences, values, prior experience, beliefs, confidentiality and privacy.
- Demonstrate ability to communicate with patients, colleagues and families in a manner that encourages participation and shared decision- making.

#### **7. Lifelong learner committed to continuous improvement of skills and knowledge**

- Demonstrate ability to perform an objective self-assessment of knowledge and skills, continue learning, refine existing skills and acquire new skills.
- Demonstrate ability to apply newly gained knowledge or skills to the care of the patient.
- Demonstrate ability to introspect and utilize experiences, to enhance personal and professional growth and learning.

- Demonstrate ability to search (including through electronic means), and critically re-evaluate the medical literature and apply the information in the care of the patient.
- Be able to identify and select an appropriate career pathway that is professionally rewarding and personally fulfilling.

**Professional who is committed to excellence, is ethical, responsive and accountable to patients, community and the profession**

- Practice selflessness, integrity, responsibility, accountability and respect.
- Respect and maintain professional boundaries between patients, colleagues and society.
- Demonstrate ability to recognize and manage ethical and professional conflicts.
- Abide by prescribed ethical and legal codes of conduct and practice.
- Demonstrate a commitment to the growth of the medical profession as a whole.

**A. CURRICULUM**

➤ **1<sup>st</sup> Professional Year:**

**1. ANATOMY**

**a. Competencies:**

The undergraduate must demonstrate:

- Understanding of the gross and microscopic structure and development of human body,
- Comprehension of the normal regulation and integration of the functions of the organs and systems on basis of the structure and genetic pattern,
- Understanding of the clinical correlation of the organs and structures involved and interpret the anatomical basis of the disease presentations.

**b. Broad subject specific objectives**

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

- Comprehend the normal disposition, clinically relevant interrelationships, functional and cross -sectional Anatomy of the various organs and structures of the body.
- Identify the microscopic structure and correlate elementary ultra structure of various organs and tissues with the functions as a prerequisite for understanding the altered state in various disease processes.
- Comprehend the basic structure and connections of the central nervous system to analyze the integrative and regulative functions of the organs and systems. He should be able to locate the site of gross lesions according to the deficits encountered
- Demonstrate knowledge of the basic principles and sequential development of the organs and systems; recognize the critical stages of development and the effects of common teratogens, genetic mutations and environmental hazards. He should be able to explain the developmental basis of the major variations and abnormalities.

**c. Skills:**

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

- Identify and locate all the structures of the body and mark the topography of the Living Anatomy.
- Understand clinical basis of some common clinical procedures i.e. intramuscular and intravenous injection, lumbar puncture and kidney biopsy etc.
- Identify the organs and tissues under the microscope.
- Understand the principles of karyotyping and identify the gross congenital anomalies.
- Understand principles of newer imaging techniques and interpretation of CT scan, sonogram, MRI & Angiography.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in organ systems with clinical correlation that will provide a context for the learner to

understand the relationship between structure and function and interpret the anatomical basis of various clinical conditions and procedures.

## **2. PHYSIOLOGY**

### **a. Competencies: The undergraduates must demonstrate:**

- Understanding of the normal functioning of the organs and organ systems of the body,
- Comprehension of the normal structure and organization of the organs and systems on basis of the functions,
- Understanding of age-related physiological changes in the organ functions that reflect normal growth and development,
- Understand the physiological basis of diseases.

### **b. Broad subject specific objectives**

#### **Knowledge**

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

- Describe the normal functions of all the systems, the regulatory mechanisms and interactions of the various systems for well-coordinated total body functions.
- Understanding the relative contribution of each organ system in the maintenance of the milieu interior (homeostasis)
- Explain the physiological aspects of the normal growth and development.
- Analyze the physiological responses and adaptation to environmental stress. Comprehend the physiological principles underlying pathogenesis and treatment of disease.
- Correlate knowledge of physiology of human reproductive system in relation to National Family welfare program.

### **c. Skills**

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

- Conduct experiments designed for study of physiological phenomenon.
- Interpret experimental /investigative data.
- Distinguish between normal and abnormal data derived as a result of clinical examination and tests, which he has performed and observed in the laboratory.
- Recognize and get familiar with newer computerized and advanced instruments like medspiror, semen quality analyzer, EMG and TMT

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in organ systems in order to provide a context in which normal function can be correlated both with structure and with the biological basis, its clinical features, diagnosis and therapy.

## **3. BIOCHEMISTRY**

### **a. Competencies:**

The learner must demonstrate an understanding of:

- Biochemical and molecular processes involved in health and disease,
- Importance of nutrition in health and disease,
- Biochemical basis and rationale of clinical laboratory tests, and demonstrate ability to interpret these in the clinical context.

### **b. Broad subject specific objectives:**

#### **Knowledge:**

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

- Enlist and describe the cell organelles with their molecular and functional organization.
- Delineate structure, function and interrelationships of various biomolecules and consequences of deviation from the normal.
- Understand basic enzymology and emphasize on its clinical applications wherein regulation of enzymatic activity is disturbed.
- Describe digestion and assimilation of nutrients and consequences of malnutrition.
- Describe and integrate metabolic pathways of various biomolecules with their regulatory mechanisms.
- Explain the biochemical basis of inherited disorders with their associated sequelae.
- Describe mechanisms involved in maintenance of water, electrolyte and acid base balance and consequences of their imbalances.
- Outline the molecular mechanisms of gene expression and regulation, basic principles of biotechnology and their applications in medicine.

**c. Skills**

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

- Make use of conventional techniques / instruments to perform biochemical analysis relevant to clinical screening and diagnosis;
- Analyse and interpret investigative data;
- Demonstrate the skills of solving scientific and clinical problems and decision making.

**d. Integration:**

The teaching/learning programme should be integrated horizontally and vertically, as much as possible, to enable learners to make clinical correlations and to acquire an understanding of the cellular and molecular basis of health and disease.

**2<sup>nd</sup> Professional Year:**

**4. PATHOLOGY**

**a. Competencies:**

The undergraduate must demonstrate:

- Comprehension of the causes, evolution and mechanisms of diseases,
- Knowledge of alterations in gross and cellular morphology of organs in disease states,
- Ability to correlate the natural history, structural and functional changes with the clinical manifestations of diseases, their diagnosis and therapy,

**b. Broad subject specific objectives**

**Knowledge:**

At the end of one and half years, the student shall be able to:-

- Describe the structure and ultra structure of a sick cell, causes and mechanisms of cell Injury, cell death and repair.
- Correlate structural and functional alterations in the sick cell.
- Explain the path physiological processes, which govern the maintenance of homeostasis, mechanisms of their disturbance and the morphological and clinical manifestation associated with it.
- Describe the mechanisms and patterns of tissue response to injury so as to appreciate the path physiology of disease processes and their application to clinical science.
- Correlate the gross and microscopic alterations of different organ systems in common disease to the extent needed for understanding disease processes and their clinical significance.
- Develop an understanding of steps in neoplastic changes in the body and their effects in order to appreciate need for early diagnosis and further management of neoplasia.
- Understand mechanisms of common hematological disorders and develop a logical approach in their diagnosis and management.
- Develop understanding of the blood banking, blood donors & transfusion of blood & blood products, (components).
- Understand pathophysiology of infectious diseases in relation with tissue changes.

- Describe the various immunological reactions in understanding the disease process & tissue transplant.
- Develop an understanding for genetic disorders.
- Understand the vital organ function test of Kidney, liver & thyroid.

### c. Skills

At the end of one and half years, the student shall be able to:

- Describe the rationale and principles of routine technical procedures of the diagnostic laboratory tests & perform it.
- Interpret routine diagnostic laboratory tests and correlate with clinical, hematological and morphological changes.
- Perform the simple bed-side tests on blood, urine and other biological fluid samples:
- Draw a rational scheme of investigations aimed at diagnosing and managing the cases of common disorders.
- Able to understand the microscopic and macroscopic features of common diseases.
- Develop different type of skills such as observation skills, communication skill and presentation skill.
- Understand biochemical/physiological disturbances that occur as a result of disease in collaboration with all concerned departments.

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in organ systems recognizing deviations from normal structure and function and clinically correlated so as to provide an overall understanding of the etiology, mechanisms, laboratory diagnosis, and management of diseases.

## 5. MICROBIOLOGY

### a. Competencies:

The undergraduate learner demonstrates:



- Understanding of role of microbial agents in health and disease,
- Understanding of the immunological mechanisms in health and disease,
- Ability to correlate the natural history, mechanisms and clinical manifestations of infectious diseases as they relate to the properties of microbial agents,
- Knowledge of the principles and application of infection control measures,
- An understanding of the basis of choice of laboratory diagnostic tests and their interpretation, antimicrobial therapy, control and prevention of infectious diseases.
- Knowledge of outbreak investigation and its control.

**b. Broad subject specific objectives**

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

- Explain how the different microorganisms can cause human infection.
- Understand commercial, opportunistic and pathogenic organisms and describe host parasite relationship.
- Describe the characteristics (morphology, cultural characteristics, resistance, virulence factors, incubation period, mode of transmission etc.) of different microorganisms.
- Explain the various defense mechanisms of the host against the microorganisms which can cause human infection.
- Describe the laboratory diagnosis of microorganisms causing human infections and disease.
- Describe the prophylaxis for the particular infecting microorganisms

**c. Skills**

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

- Plan the laboratory investigations for the diagnosis of infectious diseases.
- Perform laboratory procedures to arrive at the etiological diagnosis of infectious diseases caused by bacteria, fungi, viruses and parasites including the drug sensitivity profile.
- Perform and interpret immunological and serological tests.
- Operate routine and sophisticated instruments in the laboratory.
- Develop microteaching skills and Pedagogy
- Successfully implement the chosen research methodology

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in organ systems with emphasis on host-microbe-environment interactions and their alterations in disease and clinical correlations so as to provide an overall understanding of the etiological agents, their laboratory diagnosis and prevention.

## **6. PHARMACOLOGY**

**a. Competencies:** The undergraduate must demonstrate:

- Knowledge about essential and commonly used drugs and an understanding of the pharmacologic basis of therapeutics,
- Ability to select and prescribe medicines based on clinical condition and the pharmacologic properties, efficacy, safety, suitability and cost of medicines for common clinical conditions of national importance,
- Knowledge of pharmacovigilance, essential medicine concept and sources of drug information and industry-doctor relationship,
- Ability to counsel patients regarding appropriate use of prescribed drug and drug delivery systems.

**b. Broad subject specific objectives**

**(A) Knowledge:**

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

- Describe the Pharmacokinetics and Pharmacodynamics of essential and commonly used drugs.
- Enlist the indications, contraindications, interactions and adverse reactions of commonly used drugs.
- Tailor the use of appropriate drugs in disease with consideration of its cost, efficacy and safety for-
  - a. Individual needs and
  - b. Mass therapy, under National Health Programs.
- Integrate the list of drugs of addiction and recommend the management of drug addiction.
- Explain pharmacological basis of prescribing drugs in special medical situations such as pregnancy, lactation, infancy, old age, renal damage, hepatic damage and immunocompromised patients.
- Explain the concept of rational drug therapy in clinical pharmacology.
- State the principles underlying the concept of 'Essential Drugs'.
- Evaluate the ethics and modalities involved in the development and introduction of new drugs.

**c. Skills**

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

- Prescribe drugs for common ailments.
- Identify adverse reactions and drug interactions of commonly used drugs.
- Interpret the data obtained from the experiments designed for the study of effect of drugs in various experimental and clinical studies.
- Analyze the information regarding common pharmaceutical preparations and critically evaluate drug formulations.
- Appraise the Principles of Clinical Pharmacy and Dispense the Medications giving proper instructions.

**d. Integration:** Practical knowledge of use of drugs in Clinical Practice will be acquired through Integrated Teaching vertically with phase 1 subjects and horizontally with other phase 2 subjects.

### **3<sup>rd</sup> Professional year**

## **7. FORENSIC MEDICINE AND TOXICOLOGY**

**a. Competencies:** The learner must demonstrate:

- Understanding of medico-legal responsibilities of physicians in primary and secondary care settings,
- Understanding of the rational approach to the investigation of crime, based on scientific and legal principles,
- Ability to manage medical and legal issues in cases of poisoning /overdose,
- Understanding the medico-legal framework of medical practice and medical negligence,
- Understanding of codes of conduct and medical ethics,
- Understanding concept of deceased donor, brain death, and Human Organ Transplantation Act.

**b. Broad subject specific objectives:**

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

- Identify the basic Medico-legal aspects of hospital and general practice.
- Define the Medico-legal responsibilities of a general physician while rendering community service either in a rural primary health centre or an urban health centre.

- Appreciate the physician's responsibilities in criminal matters and respect for the codes of Medical ethics.
- Diagnose, manage and identify legal aspect of common acute and chronic poisonings.
- Describe the Medico-legal aspects and findings of post-mortem examination in cases of death due to common unnatural conditions and poisonings.
- Detect occupational and environmental poisoning, prevention and epidemiology of common poisoning and their legal aspects particularly pertaining to Workmen's Compensation Act.
- Describe the general principles of analytical toxicology.

#### **c. Skills**

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

- Make observations and draw logical inferences in order to initiate enquiries in criminal matters and Medico-legal problems and be able to -
- Carry on proper Medico-legal examination and documentation/Reporting of Injury and Age.
- Conduct examination for sexual offences and intoxication.
- Preserve relevant ancillary materials for medico-legal examination.
- Identify important post-mortem findings in common unnatural deaths.
- Diagnose and treat common emergencies in poisoning and chronic toxicity.
- Make observations and interpret findings at post-mortem examination.
- Observe the principles of medical ethics in the practice of his profession.

#### **d. Integration:**

The teaching should be aligned and integrated horizontally and vertically recognizing the importance of medico-legal, ethical and toxicological issues as they relate to the practice of medicine.

## **8. COMMUNITY MEDICINE**

**a. Competencies:** The undergraduate must demonstrate:

- Understanding of the concept of health and disease,
- Understanding of demography, population dynamics and disease burden in National and global context,
- Comprehension of principles of health economics and hospital management,
- Understanding of interventions to promote health and prevent diseases as envisioned in National and State Health Programmes.
- Understanding of physical, social, psychological, economic and environmental determinants of health and disease,
- Ability to recognize and manage common health problems including physical, emotional and social aspects at individual family and community level in the context of National Health Programmes,
- Ability to Implement and monitor National Health Programmes in the primary care setting,
- General knowledge about Organ and Tissue donation,
- Knowledge of maternal and child wellness as they apply to national health care priorities and programmes,
- Ability to recognize, investigate, report, plan and manage community health problems including malnutrition and emergencies.

**b. Broad subject specific objectives:**

**Knowledge:** At the end of the course the student shall be able

- Explain the principles of sociology including demographic population dynamics.
- Identify social factors related to health, disease and disability in the context of urban and rural societies.
- Appreciate the impact of urbanization on health and disease.
- Observe and interpret the dynamic of community behaviors.

- Describe the elements of normal psychology and social psychology.
- Observe the principles of practice of medicine in hospital and community settings.
- Describe the health care delivery systems including rehabilitation of the disabled in the country.
- Describe the National Health Programmes with particular emphasis on maternal and child health programmes, family welfare planning and population control.
- Describe the epidemiological methods and techniques.
- Outline the demographic pattern of the country and appreciate the roles of the individuals, family, community and socio-cultural milieu in health and disease.
- Describe the health information systems.
- Acquire, understand, integrate, apply and manage information in context to health care problems and health care delivery system in various communities, health care settings and hospitals.
- Describe the principles and components of primary health care, National Rural Health Mission and the national health policies to achieve the goal of “Health for all” with regards to identify the environmental, bio-waste and occupational hazards and their control.
- Describe the importance of water and sanitation in human health.
- Describe the principles of health economics, health administration, health education in relation to community.
- Critically analyze the problem (s) and apply his/her knowledge to solve the problem in holistic manner.
- Describe and apply principles of prevention, promotion and maintenance of health.

**c. Skills:** At the end of the course, the student shall be able to –

- Use the principles and practice of medicine in hospital and community settings and familiarization with elementary practices.
- Use the Art of communication with patients including history taking and medico social work.

- Use epidemiology as a scientific tool to make rational decisions relevant to community and individual patient intervention.
- Organize health care services for vulnerable and disadvantages groups.
- Organize health care services in case of calamities.
- Collect, analyze, interpret and present simple community and hospital base data.
- Diagnose and manage common health problems (including communicable and non-communicable diseases) and emergencies at the individual, family and community levels keeping in mind the existing health care resources and in the context of the prevailing socio-culture beliefs.
- Diagnose and manage common nutritional problems at the individual and community level.
- Plan, implement and evaluate a health education Programme with skill to use simple audio-visual aids.
- Interact with other members of the health care team and participate in the organization of health care services, health advocacy and implementation of national health programmes.
- Perform Administrative functions at health centers
- Observe the principles of medical ethics in the practice of his profession.

**d. Integration:**

Department shall adopt an integrated approach towards other clinical disciplines, public health services, NGOs, environmental sciences, social sciences, management, hospital administration, research, etc. to impart training to enable the graduate to work at all levels of health care. The teaching should be aligned and integrated horizontally and vertically in order to allow the learner to understand the impact of environment, society and national health priorities as they relate to the promotion of health and prevention and cure of disease.

**9. OTO-RHINOLARYNGOLOGY (ENT)**



**a. Competencies:** The learner must demonstrate:

- Knowledge of the common Otorhinolaryngological (ENT) emergencies and problems,
- Ability to recognize, diagnose and manage common ENT emergencies and problems in primary care setting,
- Ability to perform simple ENT procedures as applicable in a primary care setting,
- Ability to recognize hearing impairment and refer to the appropriate hearing impairment rehabilitation programme.

**b. Broad subject specific objectives:**

- **Knowledge:** At the end of the course, the student shall be able to :
- Describe the basic pathophysiology of common Ear, Nose & Throat (ENT) diseases & emergencies.
- Adopt the rational use of commonly used drugs keeping in mind their adverse reactions.
- Suggest common investigative procedures & their interpretation.

**c. Skills:** At the end of the course the student shall be able to

- Examination & Diagnose common ENT problems including pre-malignant & Malignant disorders of the Head & Neck.
- Manage ENT problems at first level of care & be able to refer whenever necessary.
- Assist / carry out minor ENT procedures like ear syringing, ear dressing, nasal packing.
- Assist in certain procedures such as tracheotomy, endoscopy & removal of foreign bodies.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in

order to allow the learner to understand the structural basis of ENT problems, their management and correlation with function, rehabilitation and quality of life. The undergraduate training ENT will provide an integrated approach towards other disciplines especially, neurosciences, ophthalmology & general surgery.

## 10. OPHTHALMOLOGY

**a. Competencies:** The student must demonstrate:

- Knowledge of common eye problems in the community
- Recognize, diagnose and manage common eye problems and identify indications for referral,
- Ability to recognize visual impairment and blindness in the community and implement national programmes as applicable in the primary care setting.

**b. Broad subject specific objectives**

**Knowledge:** At the end of the course, student shall have the knowledge of

- Common problems affecting the eye.
- Principles of management of major ophthalmic emergencies.
- Main systemic disease affecting the eye.
- Effects of local and systemic diseases on patient's vision and the necessary action required minimizing the sequelae of such diseases.
- Adverse drug reaction with special reference to ophthalmic manifestations.
- Magnitude of blindness in India and its main causes.
- National programme for control of blindness and its implementation at various levels.
- Eye care education for prevention of eye problems.
- Role of primary health center in organization of eye camps.

- Organization of primary health care and the functioning of the ophthalmic assistant.
- Integration of the national programme for control of blindness with the other national health programmes.
- Eye bank organization.

**c. Skills**

- Elicit a history pertinent to general health and ocular status.
- Assist in diagnostic procedures such as visual acuity testing, examination of eye, Schiottz tonometry, Staining of Corneal pathology, confrontation, perimetry, Subjective refraction including correction of Presbyopia and aphakia, direct ophthalmoscopy and conjunctival smear examination and Cover test.
- Diagnose and treat common problems affecting the eye.
- Interpret ophthalmic signs in relation to common systemic disorders.
- Assist/observe therapeutic procedures such as Subconjunctival injection, corneal conjunctival foreign body removal, carbolic cautery for corneal ulcers, Nasolacrimal duct syringing and tarsorrhaphy
- Provide first aid in major ophthalmic emergencies.
- Assist to organize community surveys for visual check-up.
- Assist to organize primary eye care service through primary health centers.
- Use effective means of communication with the public and individual to motivate for surgery in cataract and for eye donation.
- Establish rapport with his seniors, colleagues and paramedical workers, so as to effectively function as a member of the eye care team.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order to allow the student to understand the structural basis of ophthalmologic problems, their management and correlation with function,

rehabilitation and quality of life.

### **3<sup>rd</sup> PROFESSIONAL YEAR PART - II**

#### **Medicine Allied Subjects:**

#### **11. GENERAL MEDICINE**

**a. Competencies:** The student must demonstrate ability to do the following in relation to common medical problems of the adult in the community:

- Demonstrate understanding of the pathophysiologic basis, epidemiological profile, signs and symptoms of disease and their investigation and management,
- Competently interview and examine an adult patient and make a clinical diagnosis,
- Appropriately order and interpret laboratory tests,
- Initiate appropriate cost-effective treatment based on an understanding of the rational drug prescriptions, medical interventions required and preventive measures,
- Follow up of patients with medical problems and refer whenever required,
- Communicate effectively, educate and counsel the patient and family,
- Manage common medical emergencies and refer when required,
- Independently perform common medical procedures safely and understand patient safety issues.

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**b. Broad subject specific objectives:**

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

- Diagnose common clinical disorders with special reference to infectious diseases,

nutritional disorders, tropical and environmental diseases;

- Outline various modes of management including drug therapeutics especially dosage, side effects, toxicity, interactions, indications and contra-indications;
- Propose diagnostic and investigative procedures and ability to interpret them;
- Provide first level management of acute emergencies promptly and efficiently and decide the timing and level of referral, if required;
- Recognize geriatric disorders and their management.

**c. Skills**

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

- Develop clinical skills (history taking, clinical examination and other instruments of examination) to diagnose various common medical disorders and emergencies;
- Refer a patient to secondary and/or tertiary level of health care after having instituted primary care;
- Perform simple routine investigations like hemogram, stool, urine, sputum and biological fluid examinations;
- Assist the common bedside investigative procedure like pleural tap, Lumbar puncture, bone marrow aspiration/biopsy and liver biopsy.

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in order to provide sound biologic basis and incorporating the principles of general medicine into a holistic and comprehensive approach to the care of the patient. With other relevant academic inputs which provide scientific basis of clinical medicine e.g. anatomy, physiology, biochemistry, microbiology, pathology and pharmacology.

## **12. PEDIATRICS**

**a. Competencies:** The student must demonstrate:

- Ability to assess and promote optimal growth, development and nutrition of children and adolescents and identify deviations from normal,
- Ability to recognize and provide emergency and routine ambulatory and First

Level Referral Unit care for neonates, infants, children and adolescents and refer as may be appropriate,

- Ability to perform procedures as indicated for children of all ages in the primary care setting,
- Ability to recognize children with special needs and refer appropriately,
- Ability to promote health and prevent diseases in children,
- Ability to participate in National Programmes related to child health and in conformation with the Integrated Management of Neonatal and Childhood Illnesses (IMNCI) Strategy,
- Ability to communicate appropriately and effectively.

**b. Broad subject specific objectives:**

**Knowledge:-**At the end of the course, the students shall be able to:-

- Describe the normal Growth and Development during fetal life, Neonatal period, Childhood and Adolescence and the deviations thereof.
- Describe the common Pediatric disorders and emergencies in terms of Epidemiology, Etiopathogenesis, Clinical manifestations, Diagnosis and also describe the rational therapy and rehabilitation services.
- Workout age related requirements of calories, nutrients, fluids, dosages of drugs etc. in health and disease.
- Describe preventive strategies for common infectious disorders, Malnutrition, Genetic and Metabolic disorders, Poisonings, Accidents and Child abuse.
- Outline national programs related to child health including Immunization programs.

**c. Skills**

At the end of the course, the students shall be able to:-

- Take detailed Pediatric and Neonatal history and conduct an appropriate physical examination of children and neonates, make clinical diagnosis, conduct common

bedside investigative procedures, interpret common laboratory investigations, plan and institute therapy.

- Take anthropometric measurements, resuscitate newborn, prepare oral rehydration solution, perform tuberculin test, administer vaccines available under current National programs, perform venesection, start intravenous fluids and provide nasogastric feeding.
- Conduct diagnostic procedures such as lumbar puncture, liver and kidney biopsy, bone marrow aspiration, pleural and ascitic tap.
- Distinguish between normal Newborn babies and those requiring special care and institute early care to all newborn babies including care of preterm and low birth weight babies, provide correct guidance and counseling about breastfeeding and Complementary feeding.
- Provide ambulatory care to all not so sick children, identify indications for specialized/ inpatient care and ensure timely referral to those who require hospitalization.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order to provide comprehensive care for neonates, infants, children and adolescents based on a sound knowledge of growth, development, disease and their clinical, social, emotional, psychological correlates in the context of national health priorities.

### **13. DERMATOLOGY**

**a. Competencies:**

The undergraduate student must demonstrate:

- Understanding of the principles of diagnosis of diseases of the skin, hair, nail and mucosa,
- Ability to recognize, diagnose, order appropriate investigations and treat common diseases of the skin including leprosy in the primary care setting and refer as

appropriate,

- A syndromic approach to the recognition, diagnosis, prevention, counseling, testing and management of common sexually transmitted diseases including HIV based on national health priorities,
- Ability to recognize and treat emergencies including drug reactions and refer as appropriate.

**b. Broad subject specific objectives:**

**Knowledge:**

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

- Demonstrate sound knowledge of common diseases, their clinical manifestations, including emergent situations and of investigative procedures to confirm their diagnosis
- Demonstrate comprehensive knowledge of various modes of therapy used in treatment of cutaneous, sexually transmitted diseases and leprosy
- Describe the mode of action of commonly used drugs, their doses, side effects/toxicity, indications and contra-indications and interactions
- Describe commonly used modes of management including the medical and surgical procedures available for the treatment of various diseases and to offer a comprehensive plan of management for a given disorder

**c. Skills:**

The student shall be able to

- Interview the patient, elicit relevant and correct information and describe the history in a chronological order:
- Conduct clinical examination, elicit and interpret physical findings and diagnose common disorders and emergencies.
- Demonstrate simple, routine investigative and laboratory procedures required for making the bed-side diagnosis, especially the examination of scrapings for fungus,



preparation of slit smears and staining for AFB for leprosy patients and for STD cases and take a skin biopsy for diagnostic purposes.

- Manage common diseases and recognizing the need for referral for specialized care, in case of inappropriateness of therapeutic response.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order to emphasize the biologic basis of diseases of the skin, sexually transmitted diseases and leprosy

## **14. PSYCHIATRY**

**a. Competencies: The student must demonstrate:**

Ability to promote mental health and mental hygiene,

- Knowledge of etiology (bio-psycho-social-environmental interactions), clinical features, diagnosis and management of common psychiatric disorders across all ages,
- Ability to recognize and manage common psychological and psychiatric disorders in a primary care setting, institute preliminary treatment in disorders difficult to manage, and refer appropriately,
- Ability to recognize alcohol/ substance abuse disorders and refer them to appropriate centers,
- Ability to assess risk for suicide and refer appropriately,
- Ability to recognize temperamental difficulties and personality disorders,
- Assess mental disability and rehabilitate appropriately,
- Understanding of National and State programmes that address mental health and welfare of patients and community.

**b. Broad subject specific objectives:**

**Knowledge:**

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

- Understand the comprehensive nature & development of different aspects of normal human behavior like learning, memory, motivation, personality & intelligence
- Recognize differences between normal & abnormal behavior
- Classify psychiatric disorders
- Recognize clinical manifestations of the following common syndromes & plan their appropriate management of organic psychosis, functional psychosis, schizophrenia, affective disorders, neurotic disorders, personality disorders, psycho physiological disorders, drug & alcohol dependence, psychiatric disorders of childhood & adolescence
- Describe rational use of different mode of therapy in psychiatric disorders.

**c. Skills:**

The student shall be able to:

- Interview the patient & understand different methods of communications in patient-doctor relationship
- Elicit detailed psychiatric case history & conduct clinical examination for assessment of mental status
- Define, elicit & interpret psychopathological symptoms & signs
- Diagnose & manage common psychiatric disorders
- Identify & manage common psychological reactions & psychiatric disorders in medical & surgical patients in clinical practice & in community setting

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order to allow the student to understand bio-psycho-social-environmental interactions that lead to diseases/ disorders for preventive, promotive, curative, rehabilitative services and medico-legal implications in the care of patients both in family and

community.

## **16. GENERAL SURGERY**

### **a. Competencies:**

The student must demonstrate:

- Understanding of the structural and functional basis, principles of diagnosis and management of common surgical problems in adults and children
- Ability to choose, calculate and administer appropriately intravenous fluids, electrolytes, blood and blood products based on the clinical condition
- Ability to apply the principles of asepsis, sterilization, disinfection, rational use of prophylaxis, therapeutic utilities of antibiotics and universal precautions in surgical practice
- Knowledge of common malignancies in India and their prevention, early detection and therapy
- Ability to perform common diagnostic and surgical procedures at the primary care level
- Ability to recognize, resuscitate, stabilize and provide Basic & Advanced Life Support to patients following trauma
- General knowledge about organ retrieval from deceased donor and living donor
- Ability to administer informed consent and counsel patient prior to surgical procedures,
- Commitment to advancement of quality and patient safety in surgical practice.

### **b. Broad subject specific objectives.**

#### **Knowledge:**

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

- Describe aetiology, pathophysiology, principles of diagnosis and management of common surgical problems including emergencies in adult and children.
- Define indications and methods for fluid and electrolytes replacement therapy including blood transfusion.
- Define asepsis, disinfection and sterilization and recommend judicious use of antibiotics.
- Describe common malignancies in the country and their management including prevention.
- Enumerate different types of anaesthetic agents, their indications, contraindications, mode of administration, and side effects.

**c. Skills**

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

- Diagnose common surgical conditions both acute and chronic, in adults and children.
- Plan various laboratory tests for surgical conditions and interpret the results.
- Identify and manage patients of hemorrhagic, septicaemia and other types of shock.
- Be able to maintain patent air-way and resuscitate.
- Monitor patient of head, chest, spinal and abdominal injuries, both in adults and children.
- Provide primary care for a patient of burns.
- Acquire principles of operative surgery including preoperative, operative and post operative care and monitoring.
- Treat open wound including preventive measures against tetanus and gas gangrene.

- Diagnose neonatal and pediatric surgical emergencies and provide sound primary care before referring the patient to secondary/tertiary centres.
- Identify congenital anomalies and refer them for appropriate management.

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in order to provide a sound biologic basis and a holistic approach to the care of the surgical patient.

- Apply knowledge of basic medical sciences and other relevant subjects to support understanding of various pathologies, facilitate examination of and intervention for the patients.
- To apply the principles of quality of health care, legal and ethical principles and regulations as recommended by Medical Council of India and WHO.

## **17. OBSTETRICS AND GYNAECOLOGY**

### **a. Competencies:**

The student must demonstrate ability to:

- Provide peri-conceptual counseling and antenatal care,
- Identify high-risk pregnancies and refer appropriately,
- Conduct normal deliveries, using safe delivery practices in the primary and secondary care settings,
- Prescribe drugs safely and appropriately in pregnancy and lactation,
- Diagnose complications of labor, institute primary care and refer in a timely manner,
- Perform early neonatal resuscitation,
- Provide postnatal care, including education in breast-feeding,
- Counsel and support couples in the correct choice of

contraception,

- Interpret test results of laboratory and radiological investigations as they apply to the care of the obstetric patient,
- Apply medico-legal principles as they apply to tubectomy, Medical Termination of Pregnancy (MTP), Pre-conception and Prenatal Diagnostic Techniques (PC PNDT Act) and other related Acts.
- Elicit a gynecologic history, perform appropriate physical and pelvic examinations and PAP smear in the primary care setting,
- Recognize, diagnose and manage common reproductive tract infections in the primary care setting,
- Recognize and diagnose common genital cancers and refer them appropriately.

**b. Broad subject specific objectives**

**Knowledge**

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

- Outline the anatomy, physiology and pathophysiology of the reproductive system and the common conditions affecting it.
- Diagnose normal pregnancy, labour, puerperium and manage the problems he is likely to encounter therein.
- List of leading causes of maternal and perinatal morbidity and mortality.
- Understand the principles of contraception and various techniques employed, methods of medical termination of pregnancy, sterilization and their complications.
- Identify the use, abuse and side effects of drugs in pregnancy, peri- menopausal and post menopausal periods.
- Describe the national programme of maternal and child health and family welfare and their implementation at various levels.

- Identify common gynecological diseases and describe principles of their management.
- State the indications, techniques and complications of surgeries like Caesarian section, laparotomy, abdominal and vaginal hysterectomy, Fothergill's operation and vacuum
- Aspiration for Medical Termination of pregnancy (MTP) and minor surgeries like EB, D and C, Cervical Biopsy and Cervical encirclage.

**c. Skills**

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

- Take proper history and writing a good case sheet
- Writing a good discharge summary, proper referral letter
- Examination of patient and arrival at a diagnosis
- Planning for investigation and treatment
- Community orientation, participation in community health promoting and preventing programmes
- Examine a pregnant woman, recognize high- risk pregnancies and make appropriate referrals.
- Conduct a normal delivery, plot and interpret partogram
- recognize complications and decision of referral, provide postnatal care,
- Resuscitate the newborn and recognize the congenital anomalies.
- Advise a couple on the use of various available contraceptive devices (student should see at least 5 Cu-T insertions and 5 cases of female sterilization operations.)
- Perform pelvic examination, diagnose and manage common. gynecological problems including early detection of genital malignancies.
- Make a vaginal cytological smear, perform a post coital test and wet vaginal smear examination for Trichomonas vaginalis, Moniliasis and gram stain for gonorrhoea, catheterization of urinary bladder
- Interpretation of data of investigations like biochemical, histopathological, radiological ultrasound etc.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order

to provide comprehensive care for women in their reproductive years and beyond, based on a sound knowledge of structure, functions and disease and their clinical, social, emotional, psychological correlates in the context of national health priorities. The student shall be able to integrate clinical skills with other disciplines and bring about coordination of family welfare programme for the national goal of population control.

## **18. ORTHOPAEDICS (INCLUDING TRAUMA)**

### **a. Competencies:**

- The student must demonstrate:
- Ability to recognize and assess bone injuries, dislocation and poly-trauma and provide first contact care prior to appropriate referral,
- Knowledge of the medico-legal aspects of trauma,
- Ability to recognize and manage common infections of bone and joints in the primary care setting,
- Recognize common congenital, metabolic, neoplastic, degenerative and inflammatory bone diseases and refer appropriately,
- Ability to perform simple orthopedic techniques as applicable to a primary care setting,
- Ability to recommend rehabilitative services for common orthopaedic problems across all ages.

### **b. Broad subject specific objectives**

#### **Knowledge:**

The student shall be able to understand:

- The principles, diagnosis and primary management and be able to give appropriate referral for further definitive management of bones and joint injuries.



- Osteogenesis, manifestation and diagnosis, primary management and give their referral for appropriate correction or rehabilitation of common musculoskeletal disorders including infections of bones and joints; congenital skeletal anomalies, metabolic bone diseases and neoplasm affecting bones.

**c. Skills**

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

- Detect soft tissue injuries such as sprains and strains.
- Detect common fractures of extremities.
- Deliver first aid measures for common fractures and sprains.
- Deliver emergency measures to poly trauma patients.
- Manage uncomplicated fractures of clavicle, forearm, phalanges etc.
- Use techniques of splinting such as application of Thomas splint, plaster slab and casts, immobilization by skin tractions etc.
- Learn indications for closed reductions, open reductions, internal fixation and external fixations of fracture.
- Manage common bone infection; learn indications for sequestration, amputation and corrective measures for bone deformities.
- Advice and counsel patient for rehabilitation for post traumatic, poliomyelitis, cerebral palsy and amputation.
- Be able to perform certain orthopedic skills, provide sound advice of skeletal and related conditions at primary or secondary health care level.

**d. Integration:**

The teaching should be aligned and integrated horizontally and vertically in order to allow the student to understand the structural basis of orthopedic problems, their management and correlation with function, rehabilitation and quality of life.

## **19. ANAESTHESIOLOGY**

### **a. Competencies:**

The student must demonstrate ability to:

- Describe and discuss the pre-operative evaluation, assessing fitness for surgery and the modifications in medications in relation to anesthesia /surgery,
- Describe and discuss the roles of Anesthesiologist as a peri-operative physician including pre-medication, endotracheal intubation, general anesthesia and recovery (including variations in recovery from anesthesia and anaesthetic complications),
- Describe and discuss the management of acute and chronic pain, including labour analgesia,
- Demonstrate awareness about the maintenance of airway in children and adults in various situations,
- Demonstrate the awareness about the indications, selection of cases and execution of cardio- pulmonary
- Resuscitation in emergencies and in the intensive care and high dependency units,
- Choose cases for local / regional anesthesia and demonstrate the ability to administer the same,
- Discuss the implications and obtain informed consent for various procedures and to maintain the documents.

### **b. Broad subject specific objectives:**

#### **Knowledge:**

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

- Know of simple nerve block and pain relief
- Awareness of the principles of administration of general, regional and local anesthesia.

- Know importance of hypoglycemia/hyperglycemia, hypotension/hypertension, IHD, Myocardial infarction.
- Know ventilators.

**c. Skills**

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

- Perform cardio-pulmonary resuscitation with the available resources and transfer the patients to a bigger hospital for advanced life support.
- Set up intravenous infusion and manage fluid therapy
- Clear and maintain airway in unconscious patient.
- Administer oxygen correctly
- General knowledge about diagnosis of brain death and relevance in deceased donor organ transplantation

**d. Integration:** The teaching should be aligned and integrated horizontally and vertically in order to provide comprehensive care for patients undergoing various surgeries, in patients with pain, in intensive care and in cardio respiratory emergencies. Integration with the departments of Anatomy, Pharmacology and horizontal integration with any/all surgical specialties is proposed.

**20. RADIODIAGNOSIS**

**a. Competencies:** The student must demonstrate:

- Understanding of indications for various radiological investigations in common clinical practice,
- Awareness of the ill effects of radiation and various radiation protective measures to be employed,

- Ability to identify abnormalities in common radiological investigations.

**b. Broad subject specific objectives:**

**Knowledge:**

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

- Enlist and describe the various diagnostic modalities
- Delineate normal and abnormal radiological findings
- Understand basic radiology and emphasize on its clinical applications
- Describe radiographic, ultra sonographic, CT, MRI features of common pathologies.
- Describe and integrate radiological findings in CNS, GIT, RS, CVS, MSK, GUT

**d. Skills**

- At the end of the course, the student shall be able to:
- Make use of Imaging findings to reach to a diagnosis;
- Analysis and interpret radiological data;
- Demonstrate the skills of solving clinical problems by illustrative evidences and decision making.

- e. Integration:** Horizontal and vertical integration to understand the fundamental principles of radiologic imaging, anatomic correlation and their application in diagnosis and therapy.

## **B. PHASE WISE TRAINING AND TIME DISTRIBUTION FOR PROFESSIONAL DEVELOPMENT**

The Competency based Undergraduate Curriculum and Attitude, Ethics and Communication (AETCOM) course, as published by the Medical Council of India and also made available on the Council's website, shall be the curriculum for the batches admitted in MBBS from the academic year 2019-20 onwards.

In order to ensure that training is in alignment with the goals and competencies required for a medical graduate, there shall be a **Foundation Course** to orient medical learners to MBBS programme, and provide them with requisite knowledge, communication (including electronic), technical and language skills.

### **I. Training period and time distribution:**

Universities shall organize admission timing and admission process in such a way that teaching in the first Professional year commences with induction through the Foundation Course by the 1<sup>st</sup> of August of each year from academic year 2024-25. There shall be no admission of students in respect of any academic session beyond 30<sup>th</sup> August from academic year 2024-25. The Universities shall not register any student admitted beyond the said date.

The National Medical Commission may direct, that any student identified as having Obtained admission after the last date for closure of admission be discharged from the Course of study, or any medical qualification granted to such a student shall not be a recognized qualification by National Medical Commission.

The institution which grants admission to any student after the last date specified from the same shall also be liable to face such action as may be prescribed by National Medical Commission.

Every learner shall undergo a period of certified study extending over 4 ½ academic years, divided into four professional years from the date of commencement of course to the date of completion of examination which shall be followed by one year of compulsory rotating internship.

Each academic year will have at least 39 teaching weeks with a minimum of eight hours of working on each day including one hour as lunch break.

Didactic lectures shall not exceed one third of the schedule; two third of the schedule shall include interactive sessions, practicals, clinical or/and group discussions. The learning process should include clinical experiences, problem- oriented approach, case studies and community health care activities.

Teaching and learning shall be aligned and integrated across specialties both vertically and horizontally for better learner comprehension. Learner centered learning methods should include Early Clinical Exposure, problem-oriented learning, case studies, community- oriented learning, self- directed, experiential learning& Electives

At the end of each professional year university examination will be conducted. If any student fails to clear university examination, he will appear in supplementary examination.

**Supplementary examinations and declaration of results shall be processed within 3-6 weeks from the date of declaration of the results of the main examination for every professional year, so that the candidates, who pass, can join the main batch for progression.**

**If the candidate fails in the supplementary examination of first MBBS, he shall join the batch of next academic /subsequent year. There shall be no supplementary batches. Partial attendance of examination in any subject shall be counted as an attempt.**

- **A candidate, who fails in the First Professional examination, shall not be allowed to join the Second Professional.**
- **A candidate, who fails in the second Professional examination, shall be allowed to join the third Professional Part I training, however he shall not be allowed to appear for the examination unless he has passed second professional examination.**
- **A candidate who fails in the third Professional (Part I) examination shall be**

allowed to join third Professional part II training, however he shall not be allowed to appear for the examination unless he has passed second professional examination.

**II. The period of 4½ years is divided as follows:**

**Phase I –Total 12 months**

**i) First Professional phase of 12 months including Foundation Course of one week and university exams.** It shall consist of – Anatomy, Physiology, Biochemistry, Introduction to Community Medicine, Humanities, Professional development including Attitude, Ethics & Communication (AETCOM) module, family adoption programme through village outreach where-in each student shall adopt minimum of three (03) families and preferably at least five (05) families, Pandemic module and early clinical exposure, ensuring alignment & all types of integration and simulation- based learning.

**Phase II- Second Professional (12 months) including university exams.** It will consist of Pathology, Pharmacology, Microbiology, family visit under Community Medicine, General Surgery, General Medicine & Obstetrics & Gynecology Professional development including AETCOM module, simulation-based learning and introduction to clinical subjects ensuring both alignment & all types of integration.

The clinical exposure to learners will be in the form of learner-doctor method of clinical training in all phases. The emphasis will be on primary, preventive and comprehensive health care. A part of training during clinical postings should take place at the *primary level* of health care. It is desirable to provide learning experiences in secondary health care, wherever possible. This will involve:

- Experience in recognizing and managing common problems seen in outpatient, inpatient and emergency settings,
- Involvement in patient care as a team member,
- Involvement in patient management and performance of basic procedures.

**iii) Phase III - 30 months**

**a. Third Professional Part I (12 months, including University exams)**

Forensic Medicine and Toxicology, Community Medicine, Medicine & allied, Surgery & allied, Pediatrics and Obstetric & Gynecology including AETCOM, Pandemic module, Clinical teaching in General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, Orthopedics, Dermatology, Community Medicine, Psychiatry, Respiratory Medicine, Radio-diagnosis (& Radiotherapy) and Anesthesiology & Professional development.

**b. Electives** (1 month) shall be included here. These will be in 2 blocks of 15 days each in Final first; 1<sup>st</sup> block after annual exam of III MBBS part 1 and 2<sup>nd</sup> block after the end of 1<sup>st</sup> elective.

**c. Third Professional Part II (18 months, including University exam)-**

**Subjects include:**

- M  
edicine and allied specialties (General Medicine, Psychiatry, Dermatology, Venereology and Leprosy (DVL), Respiratory Medicine including Tuberculosis)
- S  
urgery and allied specialties (General Surgery, Otorhinolaryngology, Ophthalmology, Orthopedics, Dentistry, Physical Medicine and rehabilitation, Anesthesiology and Radiodiagnosis)
- O  
bstetrics and Gynecology (including Family Welfare)
- P  
ediatrics
- A  
ETCOM module

**III. Distribution of teaching hours phase wise**

**a. First, second and third Professional part-I, teaching hours:**

**Time allotted:** 12 months (approx. 52weeks)

**Time available:** Approx. 39 weeks (excluding 13 weeks) (39 hours/ week)



Prelim / University Exam & Results: 9 weeks

Vacation: 2 weeks

Public Holidays: 2 weeks

**Time distribution in weeks: 39 weeks x 39 hours = 1521 hours for Teaching- Learning**

**b. Final MBBS part-2, teaching hours:**

**Time allotted:** 18 months (approx. 78 weeks)

**Time available:** Approx. **62 weeks** (excluding 16 weeks) (39 hours/ week)

Prelim / University Exam & Results: 10 weeks

Vacation: 3 weeks

Public Holidays: 3 weeks

**Time distribution in weeks: 62 x 39 hrs = 2418 hrs available for Teaching- Learning**

**(Clinical Postings: 15 hours/ week II MBBS onwards included in academic schedule)**

These are attached in sperate annexure with all relevant tables.

Academic calender shall be as per the Table 1.

Distribution of subjects for Professional Phase – wise training is given in Table 2.

Minimum teaching hours prescribed in various disciplines are given in Tables 3-7.

Distribution and duration of clinical postings is given in Table 8.

Time allotted excludes time reserved for internal /University examinations, and vacation.

Second professional clinical postings shall commence before / after declaration of results of the first professional phase examinations, as decided by the institution/ University.

Third Professional parts I and part II clinical postings shall start no later than two weeks after the completion of the previous professional examination.

A total of 25% of allotted time of third Professional shall be utilized for integrated learning with phase I and II subjects. This will be included in the assessment of clinical subjects.

**Note**

- The period of training is minimum suggested. Adjustments where required depending on availability of time may be made by the concerned college/ institution. This period of training does not include university examination period.
- An exposure to skills lab for at least two (02) weeks prior to clinical postings shall be made available to all student.

### **C) New teaching /learning elements**

#### **1) Foundation Course**

**Goal:** The goal of the Foundation Course is to prepare a learner to study medicine effectively.

#### **Objectives:**

- (a) Orient the learner to:**
- The medical profession and the physician's role in society
  - The MBBS programme
  - Alternate health systems i.e. AYUSH in India and history of Medicine
  - Medical ethics, attitudes and professionalism
  - Health care system and its delivery
  - National health programmes and policies
  - Universal precautions and vaccinations
  - Patient safety and biohazard safety
  - Principles of primary care (general and community based care)
  - The academic ambience
- (b) Enable the learner to acquire enhanced skills in:**
- Language
  - Interpersonal relationships

- Communication
- Learning including self-directed learning
- Time management
- Stress management
- Use of information technology, and artificial intelligence

(c) **Train the learner to provide:**

- First-aid
- Basic life support
- In addition to the above, learners maybe enrolled in one of the following programmes which will be run concurrently:
  - Local language programme
  - English language programme
  - Computer skills
- These may be done in the last two hours of the day. These sessions must be as interactive as possible.

Sports (to be used through the Foundation Course as protected 04 hours /week).

Leisure and extracurricular activity (to be used through the Foundation Course as projected 02 hours per week).

Institutions shall develop learning modules and identify the appropriate resource persons for their delivery.

The time committed for the Foundation Course may not be used for any other curricular activity.

The Foundation Course shall have a minimum of 75% attendance of all students mandatorily. This will be certified by the Dean of the college.

The Foundation Course shall be organized by the Coordinator appointed by the Dean

of the college and shall be under supervision of the Heads of MBBS phase 1 departments.

Every college shall arrange for a meeting with parents/ wards of all students and records of the same shall be made available to UGMEB of NMC.

## 2) Early Clinical Exposure

**Objectives:** The objectives of early clinical exposure of the first-year medical learners are to enable the learner to:

- Recognize the relevance of basic sciences in diagnosis, patient care and management,
- Provide a context that will enhance basic science learning,
- Relate to experience of patients as a motivation to learn,
- Recognize attitude, ethics and professionalism as integral to doctor-Patient relationship,
- Understand the socio-cultural context of disease through the study of humanities.

### Elements

- Basic science correlation: i.e. apply and correlate principles of basic sciences as they relate to patient care (this shall be part of integrated modules).
- Clinical skills: to include basic skills in interviewing patients, doctor-patient communication, ethics and professionalism, critical thinking and analysis and self-learning (this training shall be imparted in the time allotted for early clinical exposure).
- Humanities: To introduce learners to a broader understanding of the socio-economic framework and cultural context within which health is delivered through the study of humanities and social sciences.

## 3) Electives

**Objectives:** To provide the learner with opportunities:

- For diverse learning experiences,
- It is mandatory for learners to do an elective. The elective time shall not be used to make up for missed clinical postings, shortage of attendance or other purposes.
- Institutions will pre-determine the number and nature of electives, names of the supervisors, and the number of learners in each elective based on the local conditions, available resources and faculty.
- Electives on topics in areas such as Research methodology, Use of Artificial intelligence and computers in Health and Medical Education, Health Management, Health economics, Indian system of medicine, Medical photography /clinical photography, Global health, Evidence based medicine, Art and music in medicine, Literary activities, etc. may be provided by the college/ institution.
  - It shall be preferable that elective choices are made available to the learners in the beginning of the academic year.
  - The learner must submit a learning log book based on both blocks of the electives.
  - 75% attendance in the electives and submission of log book maintained during electives is required for eligibility to appear in the final MBBS examination/ NEXT.
  - Institutions may use part of this time for strengthening basic skill certification.

#### **4) Professional Development including Attitude, Ethics and Communication Module**

##### **(AETCOM)**

**Objectives** of the programme: At the end of the programme, the learner must demonstrate ability to:

- Understand and apply principles of bioethics and law as they apply to medical practice and research, understand and apply the principles of clinical reasoning as they apply to the care of the patients,
- Understand and apply the principles of system-based care as they relate to the care of the patient,
- Understand and apply empathy and other human values to the care of the patient,
- Communicate effectively with patients, families, colleagues and other health care professionals,
- Understand the strengths and limitations of alternative systems of medicine,
- Respond to events and issues in a professional, considerate and humane fashion,
- Translate learning from the humanities in order to further his professional and personal growth.

**Learning experiences:**

- This will be a longitudinal programme spread across the continuum of the MBBS programme including internship,
- Learning experiences shall include small group discussions, patient care scenarios, workshops, seminars, role plays, lectures etc.
- Attitude, Ethics & Communication Module (AETCOM module) developed by the erstwhile Medical Council of India should be used longitudinally for purposes of instruction.
- 75% attendance in Professional Development Programme (AETCOM Module) shall be mandatory for eligibility to appear for final examination in each professional year.

**Internal Assessment shall include:**

- Written tests comprising of short notes and creative writing experiences,

OSCE based clinical scenarios /viva voce.

- At least one question in each paper of each clinical specialty in the University examination shall test knowledge competencies acquired during the professional development programme.
- Skill competencies acquired during the Professional Development Programme must be tested during the clinical, practical and viva voce.

#### **5) Learner-doctor method of clinical training (Clinical Clerkship)**

**a. Goal:** To provide learners with experience in:

- Longitudinal patient care,
- Being part of the health care team,
- Hands-on care of patients in outpatient and in-patient setting.

**b. Structure:**

- The first clinical posting in second professional shall orient learners to the patient, their roles and the specialty.
- The learner-doctor programme shall progress as outlined in Table 9.
- The learner shall function as a part of the health care team with the following responsibilities:
  - Be a part of the units' out-patient services on admission days,
  - Remain with the admission unit until at least 6 PM except during designated class hours,
  - Be assigned patients admitted during each admission day for whom he will undertake responsibility, under the supervision of a senior resident or faculty member,

- Participate in the unit rounds on its admission day and will present the assigned patients to the supervising physician,
- Follow the patient's progress throughout the hospital stay until discharge,
- Participate, under supervision, in procedures, surgeries, deliveries etc. of assigned patients,
- Participate in unit rounds on at least one other day of the week excluding the admission day,
- Discuss ethical and other humanitarian issues during unit rounds,
- Attend all scheduled classes and educational activities,
- Document his observations in a prescribed log book /case record.

**No learner will be given independent charge of the patient in the capacity of primary physician of the concerned patient.**

The supervising physician shall be responsible for all patient care decisions and guide the learner from time to time as required.

**6) Assessment:**

- A designated faculty member in each unit will coordinate and facilitate the activities of the learner, monitor progress, provide feedback and review the log book/ case record.
- The log book/ case record must include the written case record prepared by the learner including relevant investigations, treatment and its rationale, hospital course, family and patient discussions, discharge summary etc.
- The log book shall also include records of outpatients assigned. Submission of the log book/ case record to the department is required for eligibility to appear for the final examination of the subject.



## **D) Assessment**

### **I. Eligibility to appear for Professional examinations**

The performance in essential components of training are to be assessed, based on:

#### **(a) Attendance**

- There shall be a minimum of 75% attendance in theory and 80% in practical /clinical for eligibility to appear for the examinations in that subject. In subjects that are taught in more than one phase – the learner must have 75% attendance in theory and 80% in practical in each phase of instruction in that subject. There shall be minimum of 80% attendance in family visits under Family adoption programme. Each student shall adopt minimum 3 families and preferably five families. The details shall be as per Family Adoption Program guidelines.
- If an examination comprises more than one subject (for e.g., General Surgery and allied branches), the candidate must have a minimum of 75% attendance in each subject including its allied branches, and 80% attendance in each clinical posting.
- Learners who do not have at least 75% attendance in the electives will not be eligible for the Third Professional - Part II examination/ NEXT.

**(b) Internal Assessment:** Internal assessment shall be based on day-to-day assessment. It shall relate to different ways in which learners participate in learning process including assignments, preparation for seminar, clinical case presentation, preparation of clinical case for discussion, clinical case study/ problem solving exercise, participation in project for health care in the community. Internal assessment shall not be added to summative assessment. However, internal assessment should be displayed under a separate column in detailed marks card.

**(c)** Learners must have completed the required certifiable competencies for that phase of training and completed the log book

appropriate for that phase of training to be eligible for appearing at the final university examination of that subject.

(d) Regular periodic examinations shall be conducted throughout the course. There shall be no less than three internal assessment examinations in each subject of first and second professional year, and no less than two examinations in each subject of final professional year. An end of posting clinical assessment shall be conducted for each clinical posting in each professional year.

- When subjects are taught in more than one phase, the internal assessment must be done in each phase and must contribute proportionately to final assessment. For example, General Medicine must be assessed in second Professional, third Professional Part I and third Professional Part II, independently.
- Day to day records and log book (including required skill certifications) should be given importance in internal assessment. Internal assessment should be based on competencies and skills.
- The final internal assessment in a broad clinical specialty (e.g., Surgery and allied specialties etc.) shall comprise of marks from all the constituent specialties. The proportion of the marks for each constituent specialty shall be determined by the time of instruction allotted to each.
- Learners must secure at least 50% marks of the total marks (combined in theory and practical / clinical; not less than 40% marks in theory and practical separately) for internal assessment in a particular subject in order to be eligible for appearing at the final University examination of that subject. Internal assessment marks will reflect as separate head of passing at the summative examination.
- The results of internal assessment should be displayed on the notice board within one week of the test.
- Universities shall guide the colleges regarding formulating policies for remedial measures for students who are either not able to score qualifying marks or have missed on some assessments due to any reason.

## **II. University Examinations:**

University examinations are to be designed with a view to ascertain whether the candidate has acquired the necessary knowledge, minimal level of skills, ethical and professional values with clear concepts of the fundamentals which are necessary for him/her to function effectively and appropriately as a physician of first contact. Assessment shall be carried out on an objective basis to the extent possible.

- Nature of questions shall include different types such as structured assays (Long-Answer Questions -LAQ), Short-Answer Questions (SAQ) and objective type questions (e.g. Multiple Choice Questions - MCQ). Marks for each part shall be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks. Practical /clinical examinations shall be conducted in the laboratories and /or hospital wards. The objective will be to assess proficiency and skills to conduct experiments, interpret data and form logical conclusion. Clinical cases kept in the examination must be common conditions that the learner may encounter as a physician of first contact in the community. Selection of rare syndromes and disorders as examination cases is to be discouraged. Emphasis should be on candidate's capability to elicit history, demonstrate physical signs, write a case record, analyze the case and develop a management plan.
- Viva/oral examination should assess approach to patient management, emergencies, and attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data, X-rays, identification of specimens, ECG, etc. is to be also assessed.

**University Examinations shall be held as under:**

**(a) First Professional**

The first Professional examination shall be held at the end of first Professional training (in the 12<sup>th</sup> month of that training), in the subjects of Anatomy, Physiology and Biochemistry.

**(b) Second Professional**

The second Professional examination shall be held at the end of second

professional training (12<sup>th</sup> month of that training), in the subjects of Pathology, Microbiology, and Pharmacology.

**(c) Third Professional**

- Third Professional Part I examination shall be held at end of third Professional part 1 of training (12<sup>th</sup> month of that training) in the subjects of Community Medicine, and Forensic Medicine including Toxicology
- Third Professional Part II / National Exit Test (NExT) as per NExT regulations- (Final Professional) examination shall be at the end of 17<sup>th</sup> / 18<sup>th</sup> month of that training, in the subjects of General Medicine, General Surgery, Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, and Pediatrics, and allied subjects as per NExT REGULATIONS.

**Note:**

- At least one question in each paper of each PHASE shall test the knowledge, and competencies acquired during the professional development programme (AETCOM module).
- Skills competencies acquired during the Professional Development Programme (AETCOM module) shall be tested during clinical, practical and viva.

**In subjects that have two papers, the learner must secure** minimum 50% of marks in aggregate (both papers together) to pass in the said subject.

**Criteria for passing in a subject:** A candidate shall obtain 50% marks in University conducted examination separately in Theory and in Practical (practical includes: practical/ clinical and viva voce) in order to be declared as passed in that subject.

**Appointment of Examiners**

- **Person appointed as an examiner in the particular subject must have at least four years of total teaching experience as Assistant Professor after obtaining postgraduate degree following MBBS, in the subject in a**

college affiliated to a recognized medical college (by UGMEB of NMC).

- For Practical /Clinical examinations, there shall be at least four examiners for every learner, out of whom not less than 50% must be external examiners. Of the four examiners, the senior-most internal examiner shall act as the Chairman and coordinator of the whole examination programme so that uniformity in the matter of assessment of candidates is maintained.
  - A University having more than one college shall have separate sets of examiners for each college, with internal examiners from the concerned college. External examiner may be from outside the college/ university/ state/ union territory.
  - There shall be a Chairman of the Board of paper-setters who shall be an internal examiner and shall moderate the questions.
  - All eligible examiners with requisite qualifications and experience can be appointed internal examiners by rotation in their subjects.
  - All theory paper assessment should be done as central assessment program (CAP) of concerned university.
  - Internal examiners shall be appointed from the same institution for unitary examination in the same institution. For pooled examinations at one centre, the approved internal examiners from same university may be appointed.
  - The Examiners for General Surgery and allied subjects as well as for General Medicine and allied subjects, shall be from General Surgery and General Medicine respectively.
  - There shall be no grace marks to be considered for passing in an examination.
-

**ANNEXURES:**

1. COMPETENCIES
2. TABLES RELATED TO CBME/ CURRICULUM, ASSESSMENTS
3. FAMILY ADOPTION PROGRAMME
4. GUIDELINES FOR MANPOWER REQUIREMENT FOR RESEARCH FACILITIES
5. DISABILITY CRITERIA FOR ADMISSION TO MBBS

## AETCOM COMPETENCIES

### AETCOM Competencies for First MBBS

<b>Subject</b>	<b>Competency Number</b>	<b>Competency</b>
<b>Anatomy</b>	<b>Module 1.5</b>	<b>The cadaver as our first teacher Demonstrate respect and follow the correct procedure when handling cadavers and other biologic tissue</b>
	<b>Module 1.1</b>	<b>Identify, discuss Physician's role and responsibility to society and the community that she/he serves</b>
<b>Physiology</b>	<b>Module 1.2, Module 1.3</b>	<b>Demonstrate empathy in patient encounters</b>
	<b>Module 1.4</b>	<b>Demonstrate ability to communicate to patients in a patient, respectful, non- threatening, non-judgmental and empathetic manner</b>
<b>Biochemistry</b>	<b>Module 1.1,</b>	<b>Enumerate and Describe the role of a physician in health care system</b>
	<b>Module 1.1</b>	<b>Describe and discuss the commitment to lifelong learning as an important part of physician growth</b>

**AETCOM Competencies for Second MBBS**

<b>Subject</b>	<b>Competency Number</b>	<b>Competency</b>
<b>Pathology</b>	<b>2.6</b>	<b>Identify, discuss and defend medico-legal, socio-cultural and ethical issues as they pertain to refusal of care including do not resuscitate and withdrawal of life support.</b>
	<b>2.4 A</b>	<b>Demonstrate ability to work in a team of peers and superiors.</b>
	<b>2.4 B</b>	<b>Demonstrate respect in relationship with patients, fellow team members, superiors and other health care workers.</b>
	<b>2.7</b>	<b>Identify, discuss and defend, medico-legal, socio-cultural and ethical issues as they pertain to consent for surgical procedures.</b>
<b>Microbiology</b>	<b>Module 2.2 A</b>	<b>Describe and discuss the role of non-maleficence as a guiding principle in patient care</b>
	<b>Module 2.2 B</b>	<b>Describe and discuss the role of autonomy and shared responsibility as a guiding principle in patient care</b>
	<b>Module 2.2 C</b>	<b>Describe and discuss the role of beneficence of a guiding principle inpatient care</b>
	<b>Module 2.2 D</b>	<b>Describe and discuss the role of a physician in health care system</b>
	<b>Module 2.2 E</b>	<b>Describe and discuss the role of justice as a guiding principle in patient Care</b>
	<b>Module 2.3</b>	<b>Describe and discuss the role of justice as a guiding principle in patient care</b>
	<b>Module 2.5</b>	<b>Identify, discuss and defend medico-legal, socio-cultural and ethical issues as it pertains to patient autonomy, patient rights and shared responsibility in health care</b>
<b>Pharmacology</b>	<b>Module 2.1</b>	<b>Demonstrate ability to communicate to patients in a patient, respectful, non-threatening, non-judgmental and empathetic manner.</b>
	<b>Module 2.8</b>	<b>Demonstrate empathy in patient encounters.</b>



**AETCOM Competencies for Third Year (Part I)**

<b>Subject</b>	<b>Competency Number</b>	<b>Competency</b>
<b>Ophthalmology</b>	<b>3.1</b>	<b>Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner</b>
	<b>3.2</b>	<b>Demonstrate an understanding of the implications and the appropriate procedure and response to be followed in the event of medical error</b>
<b>ENT</b>	<b>3.3 A</b>	<b>Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner</b>
	<b>3.3 B</b>	<b>Identify, discuss and defend, medico-legal, socio-cultural and ethical issues as they pertain to consent for surgical procedures</b>
<b>Forensic Medicine &amp; Toxicology</b>	<b>3.3 C</b>	<b>Administer informed consent and appropriately address patient queries to a patient undergoing a surgical procedure in a simulated environment</b>
	<b>3.4</b>	<b>Identify, discuss and defend medico-legal, socio-cultural and ethical issues as it pertains to confidentiality in patient care</b>
<b>Community Medicine</b>	<b>3.5 A</b>	<b>Identify, discuss and defend medico-legal, socio-cultural, professional and ethical issues as it pertains to the physician - patient relationship (including fiduciary duty)</b>
	<b>3.5 B</b>	<b>Identify and discuss physician's role and responsibility to society and the community that she/ he serves</b>

### AETCOM Competencies for Third Year (Part II)

Subject	Competency Number	Competency
Medicine and Allied Subjects	4.1 A	The student should be able to: Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner
	4.1 B	The student should be able to: Communicate diagnostic and therapeutic options to patient and family in a simulated environment
	4.3	The student should be able to: Identify and discuss medico-legal, socio-economic and ethical issues as it pertains to organ donation
Surgery and Allied Subjects	4.4 A	The student should be able to: Demonstrate empathy in patient encounters
	4.4 B	The student should be able to: Communicate care options to patient and family with a terminal illness in a simulated environment
	4.5	The student should be able to: Identify and discuss and defend medico-legal, socio-cultural, professional and ethical issues in physician - industry relationships
	4.6	The student should be able to: Identify conflicts of interest in patient care and professional relationships and describe the correct response to these conflicts
Obstetrics and Gynecology	4.2	The student should be able to: Identify, discuss and defend medico-legal, socioeconomic and ethical issues as it pertains to abortion / Medical Termination of Pregnancy and reproductive rights
	4.7	The student should be able to: Identify conflicts of interest in patient care and professional relationships and describe the correct response to these conflicts
	4.8 A	The student should be able to: Identify conflicts of interest in patient care and professional relationships and describe the correct response to these conflicts.

	<b>4.8 B</b>	<b>The student should be able to: Demonstrate empathy to patient and family with a terminal illness in a simulated environment.</b>
<b>Pediatrics</b>	<b>4.9 A</b>	<b>The student should be able to: Identify, discuss and defend medico-legal, socio-cultural, professional and ethical issues pertaining to medical negligence</b>
	<b>4.9 B</b>	<b>The student should be able to: Identify, discuss and defend medico-legal, socio-cultural, professional and ethical issues pertaining to malpractice</b>

**Table1: Time distribution of MBBS Programme & Examination Schedule**

Proposed Academic Calendar for CBME 2023-24 Batch 2023

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2023									1	2	3	4
2024	5	6	7	8	9	10	11	12-1st Prof, exam, result	13- 2 <sup>nd</sup> MBBS	14	15	16
2025	17	18	19	20	21	22	23	24- 2 <sup>nd</sup> Prof exam, result	25- Final 1st	26	27	28
2026	29	30	31	32	33	34	35	36- Final 1 <sup>st</sup> exam, result	37- Final 2 <sup>nd</sup>	38	39	40
2027	41	42	43	44	45	46	47	48	49	50	51	52
2028	53	54 NEXT-1	1- CRMI	2	3	4	5- 2 <sup>nd</sup> proposed NEXT	6	7	8	9	10
2029	11	12-NEXT-Step 2										

**Legends:**

**AETCOM:** Attitude, Ethics and Communication skills

**FAP:** Family Adoption Programme (village outreach)

**SDL:** Self Directed Learning

**SGL:** Small Group Learning (tutorials/ Seminars/ Integrated Learning)

**PCT (mentioned in Assessments):** Part Completion Test

**Table2: Distribution of subjects in each Professional Phase**

Phase & year of MBBS training	Subjects & Teaching Elements	Duration (months)	University Examination
First Professional MBBS	(i) Foundation course -1 week, remaining spread over 6 months at the discretion of college (ii) Anatomy, Physiology & Biochemistry, Introduction to Community Medicine, including Family adoption programme (FAP) through village outreach (iii) Early Clinical Exposure (iv) Attitude, Ethics, and communication Module (AETCOM) including Humanities	12 months	1 <sup>st</sup> professional
Second Professional MBBS	(i) Pathology, Microbiology, Pharmacology (ii) Introduction to clinical subjects (iii) Clinical postings, Family visits for FAP (iv) AETCOM	12 months	2 <sup>nd</sup> professional
Third Professional part 1, MBBS, including Electives 1 month	(i) Community Medicine, Forensic Medicine and Toxicology, Medicine & allied, Surgery & allied, Pediatrics, Obstetrics & Gynecology (ii) Family visits for FAP (iii) Clinical postings (iv) AETCOM (v) Electives- 1 month, 2 blocks, 15 days each	12 months	Final professional - Part I
Third Professional part 2, MBBS	(i) General Medicine, Dermatology, Psychiatry, Respiratory medicine, Pediatrics, General Surgery, Orthopedics, Oto-rhinolaryngology, Ophthalmology, Radiodiagnosis, Anesthesiology, Obstetrics & Gynecology (ii) Clinical postings (iii) AETCOM	18 months	Final Professional - Part II

**Table 3: Foundation Course**

(one week + spread over 6 months at the discretion of college)

<b>Subjects/Contents</b>	<b>Teaching hours</b>
Orientation	30
Skills Module	34
Field visit to Community Health Center	08
Introduction to Professional Development & AETCOM module	40
Sports, Yoga and extra-curricular activities	16
Enhancement of language/computer skills	32
<b>Total</b>	<b>160</b>

**Table no. 4 Distribution of Subject Wise Teaching Hours for 1<sup>st</sup> MBBS**

<b>Subject</b>	<b>Lectures</b>	<b>SGL</b>	<b>SDL</b>	<b>Total</b>
Foundation Course				39
Anatomy	210	400	10	620
Physiology	130	300	10	440
Biochemistry *	78	144	10	232
Early Clinical Exposure**	27	-	0	27
Community Medicine	20	20		40
FAP			27	27
(AETCOM)***	-	26	-	26
Sports and extra-curricular activities	-	-	-	10
Formative Assessment and Term examinations	-	-	-	60
<b>Total</b>	<b>464</b>	<b>918</b>	<b>30</b>	<b>1521 #</b>

\* Including Molecular Biology

\*\* Early Clinical exposure hours to be divided equally in all three subjects.

\*\*\*AETCOM module shall be a longitudinal programme.

# Includes hours for Foundation course also

**Table no. 5- Distribution of Subject Wise Teaching Hours for II MBBS**

<b>Subjects</b>	<b>Lectures</b>	<b>SGL</b>	<b>Clinical Postings*</b>	<b>SDL</b>	<b>Total</b>
Pathology	80	165	-	10	255
Pharmacology	80	165	-	10	255
Microbiology	70	135	-	10	215
Community Medicine	15	0	0	10	25
FAP	0	0	30		30
Forensic Medicine and Toxicology	12	22	-	08	42
Clinical Subjects	59		540	-	599
AETCOM	-	29	-	8	37
Sports, Yoga and extra-curricular activities	-	-	-	20	35
Pandemic module				28	28
Final total	316	516	585	104	1521

***Pl. note: Clinical postings shall be for 3 hours per day, Monday to Friday.***

***There will be 15 hours per week for all clinical postings.***



**Table no. 6 - Distribution of Subject Wise Teaching Hours for Final MBBS part 1.**

<b>Subject</b>	<b>Lectures</b>	<b>SGL</b>	<b>SDL</b>	<b>Total</b>
Electives	0	156	0	156
Gen. Med.	30	50	10	90
Gen Surgery	30	50	10	90
Obs. & Gyn	30	50	10	90
Pediatrics	25	30	10	65
Orthopedics	15	20	10	45
For. Med.& Tox.	40	70	20	130
Community Med	55	70	20	145
FAP (Visits +log book submission)	-	21	10	31
Otorhinolaryngology (ENT)	15	20	10	45
Ophthalmology	15	20	10	45
Clinical posting			540	540
AETCOM	0	19	12	31
Pandemic module	18	0	0	18
<b>Total</b>	<b>273</b>	<b>546</b>	<b>672</b>	<b>1521</b>

**Table 7: Distribution of Subject wise Teaching Hours for  
Third professional part-2/ Final MBBS**

<b>Subjects</b>	<b>Lectures</b>	<b>SGL</b>	<b>SDL</b>	<b>Total</b>
General Medicine	95	155	55	<b>260</b>
General Surgery	80	140	40	<b>260</b>
Obstetrics and Gynecology	80	140	40	<b>260</b>
Pediatrics	30	60	30	<b>120</b>
Orthopedics	25	35	25	<b>85</b>
AETCOM	30	0	22	<b>52</b>
Dermatology	15	10	15	<b>40</b>
Psychiatry	15	15	15	<b>45</b>
Otorhinolaryngology (ENT)	15	25	15	<b>55</b>
Ophthalmology	15	25	15	<b>55</b>
Radiodiagnosis	8	15	15	<b>38</b>
Anesthesiology	8	15	15	<b>38</b>
Pandemic module	28	-	-	<b>28</b>
<b>TOTAL</b>	<b>444</b>	<b>610</b>	<b>302</b>	<b>1356</b>

*Extra hours may be used for preparation of NExT or SDL.*

**Table no. 8: Clinical Posting Schedules in weeks**

Subjects	Period of training in weeks			Total Weeks
	II MBBS	III MBBS Part I	III MBBS Part II	
Electives	0	4	0	4
General Medicine	9	4	14	27
General Surgery	7	4	10	21
Obstetrics & Gynaecology	7	4	10	21
Pediatrics	4	4	5	13
Community Medicine	4	4	0	8
Orthopaedics	2	2	4	8
Otorhinolaryngology	0	3	4	7
Ophthalmology	0	3	4	7
Psychiatry	0	2	4	6
Radio-diagnosis	0	0	2	2
Dermatology	2	2	2	6
Dentistry	1	0	0	1
Anaesthesiology	0	0	3	3
<b>Total</b>	<b>36</b>	<b>36</b>	<b>62</b>	<b>134</b>

**Table 9: Learner- Doctor programme (Clinical Clerkship)**

<b>Year of Curriculum</b>	<b>Focus of Learner-Doctor programme</b>
Year 1	Introduction to hospital environment, early clinical exposure, understanding perspectives of illness, family adoption program
Year 2	History taking, physical examination, assessment of change in clinical status, communication and patient education, family adoption program
Year 3	All of the above and choice of investigations, basic procedures and continuity of care
Year 4	All of the above (except Family adoption programme) and decision making, management and outcomes

**Table 10 : Marks distribution for various subjects for University Annual Examinations**

<b>Phase of Course</b>	<b>Theory</b>	<b>Practicals</b>	<b>Passing criteria</b>
<b>1<sup>st</sup> MBBS</b>			
Anatomy- 2 papers	Paper 1- 100	100	Mandatory to get 40% marks separately in theory and in practicals; and totally 50% for theory plus practicals.
	Paper 2 -100		
Physiology- 2 papers	Paper 1- 100	100	
	Paper 2 -100		
Biochemistry- 2 papers	Paper 1- 100	100	
	Paper 2- 100		
<b>2<sup>nd</sup> MBBS</b>			
Pathology - 2 papers	Paper 1- 100	100	
	Paper 2 -100		
Microbiology- 2 papers	Paper 1- 100	100	
	Paper 2- 100		
Pharmacology- 2 papers	Paper 1 -100	100	
	Paper 2- 100		
<b>Final MBBS part 1</b>			
Forensic Med. Tox.- 1 paper	Paper 1 - 100	50	
Community Med- 2 papers	Paper 1 -100	100	
	Paper 2- 100		

**For NEXT, as per NEXT regulations.**

Name of Institute:

**DEPARTMENT OF Anatomy/Physiology/Biochemistry**

Faculty : MBBS	Year/Phase- I	Date : dd/mm/yyyy
----------------	---------------	-------------------

		Formative Assessment Theory			Continuous Internal assessment Theory						
Roll No.	Name of Student	1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Continuou s Class Test (LMS)	Self Directed Learning			Attendance Theory	Total
							Seminar	Museum study	Library assignments		
		100	100	200	15	30	15	15	15	10	500

Professor & Head  
 Department of \_\_\_\_\_  
 Name of Institute

**Name of Institute :**

**Department of Anatomy/Physiology/Biochemistry**

**Faculty : MBBS**

**Year/Phase- I**

**Date : dd/mm/yyyy**

**Formative Assessment**

**Continuous Internal Assessment (Practical)**

S.No.	Roll No.	Name of Student	1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (150)				Journal (Record book/Portfolio)	Attendance (Practical)	Total
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other )	AETCOM competencies	SVL Lab activity	Research			

**Professor & Head**  
**Department of \_\_\_\_\_**  
**Name of Institute**

**Name of Institute :**

**DEPARTMENT OF Pathology/Pharmacology/Microbiology**

**Faculty : MBBS**

**Year/Phase- II**

			Formative Assessment Theory			Continuous Internal assessment Theory						
S.No.	Roll No.	Name of Student	1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar	Museum study	Library assignments	Attendance Theory	Total
			100	100	200	15	30	15	15	15	10	500

**Professor & Head**

**Department of \_\_\_\_\_**

**Name of Institute**



<b>Name of Institute :</b>												
<b>Department of Pathology/Pharmacology/Microbiology</b>												
<b>Faculty : MBBS</b>			<b>Year/Phase- II</b>						<b>Date : dd/mm/yyyy</b>			
			<b>Formative Assessment</b>			<b>Continuous Internal Assessment (Practical)</b>						
S.No.	Roll No.	Name of Student	1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (150)				Journal (Record book/ Portfolio)	Attendance (Practical)	Total
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/ Other)	AETCOM competencies	SVL Lab activity	Research			
						100	100	100	60			
<b>Professor &amp; Head</b> <b>Department of _____</b> <b>Name of Institute</b>												

## DEPARTMENT OF Community Medicine

Faculty : MBBS Year/Phase 3, part 1

S.No.	Roll No.	Name of Student	Formative Assessment_Theory			Continuous Internal assessment_Theory						Total	Percentage Theory (Minimum cut off 40%)	Cumulative percent of Theory & Practical  Theory+ Practical = 500+500= 1000 (Minimum cut off 50%)  <i>Note: Minimum 40% separately for theory and practical and 50% cumulative in IA for eligibility in Summative examination</i>
			1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Seminar	Continuous Class Test (LMS)	Museum study	Library assignments	Attendance Theory			
									Self Directed Learning					
			100	100	200	15	15	30	15	15	10	500	%	
1														
2														
3														

## DEPARTMENT OF FMT

Faculty: MBBS,  
Year/ Phase 3, part

1

S.No.	Roll No.	Name of Student	Formative Assessment_Theory			Continuous Internal assessment_Theory						Total	Percentage Theory (Minimum cut off 40%)	Cumulative percent of Theory & Practical  Theory+ Practical = 375+500= 875 (Minimum cut off 50%)
			1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Seminar	Continuous Class Test (LMS)	Museum study	Library assignments	Attendance Theory			
									Self Directed Learning					
			100	100	100	10	10	25	10	10	10	375	%	
1														
2														
3														

S/d  
Professor & Head  
Department of \_\_\_\_\_  
\* Medical College  
University  
State/  
U.T.

S.No.	Roll No.	Name of Student	Formative Assessment			Continuous Internal Assessment (Practical)					Total	Percentage Practical (Minimum cut off 40%)
			1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (150)			Journal (Record book/Portfolio)	Attendance (Practical)		
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other)	Family Adoption Programme competencies in Comm. Med	AETCOM competencies				
			100	100	100	60	30	30	40	10	500	%
1												
2												
3												

S/d  
 Professor & Head  
 Department of \_\_\_\_\_  
 \* Medical College  
 University  
 State/ U.T.

S.No.	Roll No.	Name of Student	Formative Assessment			Continuous Internal Assessment (Practical)					Total	Percentage Practical (Minimum cut off 40%)
			1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (150)			Journal (Record book/Portfolio)	Attendance (Practical)		
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other)	AETCOM competencies	SVL Lab activity				
			100	100	100	70	40	40	40	10	500	%
1												
2												
3												

S/d  
 Professor & Head  
 Department of \_\_\_\_\_  
 \* Medical College  
 University  
 State/ U.T.

Name of Institute :

Faculty : Final MBBS | Year/Phase- Part - II

Date : dd/mm/yyyy

**DEPARTMENT OF Paediatrics/ENT/Ophthalmology**

S.No.	Roll No.	Name of Student	Formative Assessment_Theory			Continuous Internal assessment_Theory						Total
			1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignmen t	Continuous Class Test (LMS)	Seminar	Museum study	Library assignments	Attendance Theory	
			100	100	100	10	25	10	10	10	10	375

Name of Institute :												
Department of Paediatrics/ENT/Ophthalmology												
Faculty : Final MBBS			Year/Phase- Part -II				Date : dd/mm/yyyy					
			Formative Assessment			Continuous Internal Assessment (Practical)						
S.No.	Roll No.	Name of Student	1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (150)				Journal (Record book/Portfolio)	Attendance (Practical)	Total
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other)	AETCOM competencies	SVL Lab activity	Research			
			100	100	100	60	30	50	20	40	10	500

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**DEPARTMENT OF Medicine, Surgery, OBGY**

*Final MBBS Year-3, Part II*

S.No.	Roll No.	Name of Student	Formative Assessment Theory			Continuous Internal assessment Theory						Total
			1st PCT Theory	2nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar	Museum study	Library assignments	Attendance Theory	
			100	100	200	15	30	15	15	15	10	500

Professor & Head

Department of \_\_\_\_\_

Name of Institute

**DEPARTMENT OF Medicine, Surgery, OBGY**

Faculty : Final MBBS			Year/Phase- Part - II								Date : dd/mm/yyyy	
			Formative Assessment			Continuous Internal Assessment (Practical)						
S.No.	Roll No.	Name of Student	1st PCT Practical/First Ward Leaving Examination	2nd PCT Practical /Second Ward Leaving Examination	Prelims Practical	Log book (200)				Journal <i>(Record book/Portfolio)</i>	Attendance <b>(Practical)</b>	Total
						Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other)	AETCOM competencies	SVL Lab activity	Research			
						100	100	200	100	40	40	20
Professor & Head Department of _____ Name of Institute												

## **National Medical Commission (Undergraduate Medical Education) Guidelines, 2023**

### **CURRICULUM FOR FAMILY ADOPTION PROGRAMME**

#### **FAMILY ADOPTION PROGRAM:**

This is being introduced with the aim of village outreach program for MBBS students. Every student shall ideally adopt 5(five) families. However, minimum 3(three) families are mandatorily to be adopted by every MBBS students. Every college may arrange one diagnostic medical camp in the village wherein identification of:

- a) anaemia, malnutrition in children, hypertension, diabetes mellitus, ischemic heart diseases, kidney diseases, any other local problems may be addressed.
- b) If required, patients shall be admitted in the hospital for acute illness under care of student, charges may be waived off or provide concession or govt. schemes.
- c) For chronic illness, students shall be involved.
- d) Subsidized treatment charges may be provided under govt. schemes or welfare schemes.
- e) Medical student may be allocated about 5 families and introduced in the first visit.
- f) Camps may be arranged by Dean and Community Medicine/ P.S.M. department with active involvement of Associate/ Asst. Professors, social worker and supporting staff. Local population may be involved with village leaders.
- g) Visit by students be made to the visit as mentioned in table below. Annual follow up diagnostic camp can be continued by the PSM department.

#### **TARGETS TO BE ACHIEVED BY STUDENTS:**

##### **First Professional Year:**

- a) Learning communication skills and inspire confidence amongst families
- b) Understand the dynamics of rural set-up of that region
- c) Screening programs and education about ongoing government sponsored health related programs
- d) Learn to analyse the data collected from their families
- e) Identify diseases/ ill-health/ malnutrition of allotted families and try to improve the standards

##### **Second Professional Year**

- a) Inspire active participation of community through families allotted
- b) Continue active involvement to become the first doctor /reference point of the family by continued active interaction
- c) Start compiling the outcome targets achieved

##### **Third Professional Year**

Analysis of their involvement and impact on existing socio-politico-economic dynamics in addition to improvement in health conditions



**-Final visit to have last round of active interaction with families**

**-prepare a report to be submitted to department addressing:**

- 1) Improvement in general health
- 2) Immunization
- 3) Sanitation,
- 4) De-addiction
- 5) Whether healthy lifestyles like reading good books, sports/ yoga activities have been inculcated in the house-holds.
- 6) Improvement in anaemia, tuberculosis control
- 7) Sanitation awareness
- 8) Any other issues
- 9) Role of the student in supporting family during illness/ medical emergency
- 10) Social responsibility in the form of environment protection programme in form of plantation drive (medicinal plants/trees), cleanliness and sanitation drives with the initiative of the medical student

**Curriculum for Family Adoption Programme**

Professional Year	Competency The student should be able to	Objectives	Suggested Teaching Learning methods	Suggested Assessment methods	Teaching Hours
1 <sup>st</sup> Professional	<ul style="list-style-type: none"> <li>• Collect demographic profile of allotted families, take history and conduct clinical examination of all family members</li> </ul>	By the end of this visit, students should be able to compile the basic demographic profile of allocated family members	Family survey, Community clinics	Community case presentation, OSPE, logbook, journal of visit	6 hrs
	<ul style="list-style-type: none"> <li>• Organize health check-up and coordinate treatment of adopted family under overall guidance of mentor</li> </ul>	By the end of this visit, students should be able to report the basic health profile and treatment history of allocated family members	Community clinics, Multispecialty camps	Community case presentation, OSPE, logbook, journal of visit	9 hrs
	<ul style="list-style-type: none"> <li>• Maintain communication &amp; follow up of remedial measures</li> </ul>	By the end of this visit, students should be able to provide details of communication maintained with family members for follow-up of treatment and	Reporting of follow up visits, PRA techniques (transact walk, group discussion) Community	Community case presentation, OSPE, logbook based of competency, journal of visit	6 hrs

		suggested remedial measures	clinics.		
	<ul style="list-style-type: none"> <li>• Take part in environment protection and sustenance activities.</li> </ul>	<p>By the end of this visit, students should be able to report the activities undertaken for environment protection and sustenance like study of environment of families, tree plantation, herbal plantation activities conducted in the village</p>	<p>Participation in and Process documentation of activities (NSS activities) along with reporting of photographic evidences</p>	<p>logbook certification of competency, journal of visit</p>	<p>based of 6hrs</p> <p>( Total 27 hrs, 9 visits)</p>
2 <sup>nd</sup> Professional	<ul style="list-style-type: none"> <li>• Take history and conduct clinical examination of all family members</li> </ul>	<p>By the end of this visit, students should be able to compile the updated medical history of family members and report their vitals and anthropometry</p>	<p>Family survey, Community clinics</p>	<p>Community case presentation, OSPE, logbook, journal of visit</p>	<p>6 hrs</p>
	<ul style="list-style-type: none"> <li>• Organize health check-up and coordinate treatment of adopted family under overall guidance of mentor</li> </ul>	<p>By the end of this visit, students should be able to report the details of clinical examination like Hb %, blood group, urine routine and blood sugar along with treatment history of allocated family members</p>	<p>Community clinics, Multispecialty camps</p>	<p>Community case presentation, OSPE, logbook, journal of visit</p>	<p>9 hrs</p>

	<ul style="list-style-type: none"> <li>Maintain communication &amp; follow up of remedial measures</li> </ul>	By the end of this visit, students should be able to provide details of communication maintained with family members for follow-up of treatment, and suggested remedial measures along with details of vaccination drive	Reporting of follow up visits, PRA techniques (transact walk, group discussion) Community clinics,	Community case presentation, OSPE, logbook based certification of competency, journal of visit	9 hrs
	<ul style="list-style-type: none"> <li>Take part in environment protection and sustenance activities.</li> </ul>	By the end of this visit, students should be able to report the activities undertaken for environment protection and sustenance like study of environment of families, tree plantation herbal plantation activities conducted in the village	Participation in and Process documentation of activities (NSS activities) along with reporting of photographic evidences	logbook based certification of competency, journal of visit	6 hrs
					( Total 30 hrs, 10 visits)
3 <sup>rd</sup> Professional	<ul style="list-style-type: none"> <li>Take history and conduct clinical examination of all family members</li> </ul>	By the end of this visit, students should be able to update the medical history of family members and their vitals and anthropometry	Family survey, Community clinics	Community case presentation, OSPE, logbook, journal of visit	3hrs
	<ul style="list-style-type: none"> <li>Organize health check-up and coordinate treatment of adopted family under overall guidance of mentor</li> </ul>	By the end of this visit, students should be able to report the details of clinical examination like Hb %, blood group, urine	Community clinics, Multispecialty camps	Community case presentation, OSPE, logbook, journal of visit	3hrs

		<p>routine and blood sugar along with treatment history of allocated family members.</p>			
	<ul style="list-style-type: none"> <li>Maintain communication &amp; follow up of remedial measures</li> </ul>	<p>By the end of this visit, students should be able to provide details of communication maintained with family members for follow-up of treatment, and suggested remedial measures along with details of vaccination drive</p>	<p>Reporting of follow up visits, PRA techniques (transact walk, group discussion) Community clinics,</p>	<p>Community case presentation, OSPE, logbook based certification of competency, journal of visit</p>	<p>3hrs</p>
	<ul style="list-style-type: none"> <li>Take part in environment protection and sustenance activities.</li> <li>Council the family members of allotted families and analyze the health trajectory of adopted family under overall guidance of mentor</li> </ul>	<p>By the end of this visit, students should be able to report the activities undertaken for environment protection and sustenance like study of environment of families, tree plantation, herbal plantation activities conducted in the village.</p> <p>By the end of this visit, students should be able to analyze and report the health trajectory of adopted family along with remedial measures adopted at individual, family and community level</p>	<p>Participation in and Process documentation of activities (NSS activities) along with reporting of photographic evidences, Small group discussion (report of the health trajectory of adopted family)</p>	<p>logbook based certification of competency, journal of visit</p>	<p>3hrs</p>
					<p>( total 21 hrs, 7 visits)</p>

**LOG BOOK FOR FAMILY ADOPTION**

COLLEGE NAME :

UNIVERSITY :

ADDRESS DETAILS :

NAME OF THE STUDENT :

ROLL NO. :

VILLAGE NAME :

TEHSIL/ DISTRICT :

STATE/ UNION TERRITORY :

NAME OF THE MENTOR :

MENTOR STATUS :

Asst. Prof/ S.R. And Details  
(If changed, details of subsequent  
mentors)

NAME OF ASHA WORKER :

ADDRESS OF ASHA WORKER :

EXPERIENCE :

(SINCE HOW MANY YEARS IS HE/ SHE EMPLOYED)

(SEPARATE PAGE FOR EACH FAMILY BE MAINTAINED)

- Family name and address
- Approximate size of living space of house-hold
- Malaria/ flu/ etc pertinent to the region

- 1) If there is any illness or medical emergency required by the house-hold, the student should take initiative in being the primary contact for the family.
- 2) The student in turn should consult his/her mentor for further management of the patient.
- 3) The hospital to which the college is attached must provide treatment facilities to the patient.
- 4) Government schemes may be utilized for optimal management.
- 5) Follow-up records must be maintained by the student. These must be periodically evaluated by mentors with the help of senior residents.
- 6) The entire data sheet may be prepared by every student and submitted by the end of 6<sup>th</sup> semester for evaluation.
- 7) Progress notes must include every demographic point and history recorded.



**GUIDELINES FOR MANPOWER REQUIREMENT FOR RESEARCH FACILITIES  
IN A MEDICAL COLLEGE**

Research labs can be under following categories:

1. Molecular lab
2. Stem cell research lab
3. Cytogenetics
4. HLA and tissue typing research lab

Applied Clinical research for organ perfusion, cancer research, in vitro fertilization, etc. can be under any of the above research facilities.

**MAN POWER**

**(1) Lab Director post-1**

**Minimum Qualifications required :** MD Path/MD Microbiology/MD  
Transfusion Medicine/MD Biochemistry.  
Faculty with PhD ( Medical subject will  
be preferred)

**Lab work :** 10 years experience

**Lab research related publications :** Minimum 10 in last 10 years

**(2) Lab Supervisor post-1 (per research facility)**

**Minimum Qualifications required :** MD Path/ MD Microbiology/ MD  
Transfusion Medicine/ MD Biochemistry  
Faculty with PhD (Medical subject) will  
be preferred or MSc in life sciences with  
Ph.D. from Medical college

**Lab work :** 7 years experience

**Lab research related publications :** Minimum 5 in last 5 years

**(3) Senior Scientific Research Officer posts- 1 or more (per research facility)**

- Minimum Qualifications required :** PhD with MD Path/ MD Microbiology/  
MD Transfusion Medicine/ MD  
Biochemistry/PhD in medical college or  
MSc in life sciences with PhD from  
medical college
- Lab work :** 4years experience
- Lab research related publications :** Minimum 3 in last 3 years

**(4) Junior Research Officer-posts- 1 or more (per research facility)**

- Minimum Qualifications required :** MD Path/ MD Microbiology/ MD  
Transfusion Medicine/ MD Biochemistry  
or Diploma in Clinical Pathology/ MSc  
in life sciences, PhD scholar/ Postdoc  
fellow
- Diploma holder in any branch may  
pursue PhD if experience / research  
inclinations proved for minimum of 1  
year. They can be enrolled for integrated  
Master's PhD course.
- Lab work :** 1 year experience
- Lab research related publications :** Preferably 1 in last 2 years

**(5) Laboratory Technicians- Posts- 2 (minimum)**

- Minimum Qualifications required :** B.Sc/ M.Sc, in life sciences including  
Biotechnology,  
DMLT

**(6) Data entry operator/ Clerk – (As per requirement)**

**(7) Store keeper – post 1 (minimum)**

**(8) Biostatistician- post 1(minimum)**

**(9) Lab attendant (As per requirement)**

**(10) Peon/ Multi-task worker (As per requirement)**

**(11) Clinical Monitors (As per requirement)**

**Minimum Qualifications required** : A medical professional having MBBS degree or above with research inclination

**(12) Social worker/ MSW with applied research inclinations (As per requirement)**



**Guidelines regarding admission of students with “Specified Disabilities” under the Rights of Persons with Disabilities Act, 2016 with respect to admission in MBBS Course.**

- Note : 1. The “Certificate of Disability” shall be issued in accordance with the Rights of Persons with Disabilities Rules, 2017 notified in the Gazette of India by the Ministry of Social Justice and Empowerment [Department of Empowerment of Persons with Disabilities (*Divyangjan*)] on 15th June 2017.
2. The extent of “specified disability” in a person shall be assessed in accordance with the “Guidelines for the purpose of assessing the extent of specified disability in a person included under the Rights of Persons with Disabilities Act, 2016 (49 of 2016)” notified in the Gazette of India by the Ministry of Social Justice and Empowerment [Department of Empowerment of Persons with Disabilities (*Divyangjan*)] on 4th January 2018.
3. The minimum degree of disability should be 40% (Benchmark Disability) in order to be eligible for availing reservation for persons with specified disability.
4. **The term ‘Persons with Disabilities’ (PwD) is to be used instead of the term ‘Physically Handicapped’ (PH).**

S. No.	Disability Type	Type of Disabilities	Specified Disability	Disability Range				
				Eligible for Medical Course, Not Eligible for PwD Quota	Eligible for Medical Course, Eligible for PwD Quota	Not Eligible for Medical Course		
1.	Physical Disability	A. Locomotor Disability, including Specified Disabilities (a to f).	a. Leprosy cured person*	Less than 40% disability	40-80% disability Persons with more than 80% disability may also be allowed on case to case basis and their functional competency will be determined with the aid of assistive devices, if it is being used, to see if it is brought below 80% and whether they possess sufficient motor ability as required to pursue and complete the course satisfactorily.	More than 80%		
			b. Cerebral Palsy**					
			c. Dwarfism					
			d. Muscular Dystrophy					
			e. Acid attack victims					
			f. Others*** such as Amputation, Poliomyelitis, etc.					
		<p>* Attention should be paid to loss of sensations in fingers and hands, amputation, as well as involvement of eyes and corresponding recommendations be looked at.</p> <p>** Attention should be paid to impairment of vision, hearing, cognitive function etc. and corresponding recommendations be looked at.</p> <p>*** (i) Both hands intact, with intact sensations, sufficient strength and range of motion are essential to be considered eligible for medical course.</p> <p>(ii) Movement of the upper limb with respect to all the joints (shoulder, elbow, forearm, wrist and all fingers) to be considered – full power, intact, in the dominant upper limb is necessary.</p> <p>(iii) For non-dominant upper limb, power of 4/5 or above is recommended.</p>						
		B. Visual Impairment (*)	a. Blindness	Less than 40% disability	-	Equal to or More than 40% Disability		
			b. Low vision					
		C. Hearing impairment@	a. Deaf	Less than 40% Disability	-	Equal to or more than 40% Disability		
b. Hard of hearing								
<p>(*) Persons with Visual impairment / visual disability of equal to or more than 40% may be made eligible to pursue MBBS Course and may be given reservation, subject to the condition that the visual disability is brought to a level of less than the benchmark of 40% with advanced low vision aids such as telescopes / magnifier etc.</p> <p>@Person with hearing disability of more than 40% may be made eligible to pursue MBBS Course and may be given reservation subject to condition that the hearing disability is brought to a level of less than the bench mark of 40% with the aid of assistive devices/cochlear implants (CI). In addition to this, the individual should have speech discrimination score of more than 60%</p>								

	Type of Disabilities	Disability Range				
		Specified Disability	Eligible for Medical Course, Not Eligible for PwD Quota	Eligible for Medical Course, Eligible for PwD Quota	Not Eligible for Medical Course	
	D. Speech & language disability§	Organic/neurological causes	Less than 40% Disability	-	Equal to or more than 40% Disability	
	§ Persons with Speech Intelligibility Affected (SIA) shall be eligible to pursue MBBS Courses, provided Speech Intelligibility Affected (SIA) score shall not exceed 3 (three), which is 40% or below. Persons with Aphasia shall be eligible to pursue MBBS Courses, provided Aphasia Quotient (AQ) is 40% or below.					
2.	Intellectual disability	a. Specific learning disabilities (Perceptual disabilities, Dyslexia, Dyscalculia, Dyspraxia & Developmental aphasia)#	# currently there is no Quantification scale available to assess the severity of Spl.D, therefore the cut-off of 40% is arbitrary and more evidence is needed.	Less than 40% Disability	Equal to or more than 40% disability and equal to or less than 80%. But selection will be based on the learning competency evaluated with the help of the remediation/assisted technology/aids/infrastructural changes by the Expert Panel.  According to the Notification dated 09.12.2020 by the Department of empowerment of Persons with Disabilities (Divyanganj), Ministry of Social Justice, diagnosis of SLD using NIMHANS SLD Battery should be equated to more than 40% disability. Any person with SLD and more than 40% disability should be allowed to complete at par with other PwDs under the reservation quota for PwDs.	More than 80% or severe nature or significant cognitive/intellectual disability.
		b. Autism spectrum disorders		Absence or Mild Disability, Asperger syndrome (disability of upto 60% as per ISAA) where the individual is fit for MBBS course by an expert panel.	Currently not recommended due to lack of objective method to establish presence and extent of mental illness. However, the benefit of reservation/quota may be considered in future after developing better methods of disability assessment.	More than 60% disability or presence of cognitive/intellectual disability and/or if the person is unfit for pursuing MBBS course by an expert panel.
3.		Mental Behavior	*** Mental Illness	Mental Illness will be no bar for taking admission in MBBS Course provided the candidate is able to qualify the NEET UG. <i>However, the benefit of reservation quota may be considered in future after developing better methods of disability assessment.</i>		
4.	Disability caused due to	a. Chronic Neurological Conditions	i. Multiple Sclerosis	Less than 40% Disability	40-80% disability	More than 80%
			ii. Parkinsonism			
		b. Blood Disorders	i. Hemophilia	Less than 40% Disability	40-80% disability	More than 80%
		ii. Thalassemia				
		iii. Sickle cell disease				

S. No.	Disability Type	Type of Disabilities	Specified Disability	Disability Range		
				Eligible for Medical Course, Not Eligible for PwD Quota	Eligible for Medical Course, Eligible for PwD Quota	Not Eligible for Medical Course
5.	Multiple disabilities including deaf		More than one of the above specified disabilities	<p>Must consider all above while deciding in individual cases recommendations with respect to presence any of the above, namely, Visual, Hearing, Speech &amp; Language disability, Intellectual Disability, and Mental Illness as a component of Multiple Disability.</p> <p>Combining Formula as notified by the related Gazette Notification issued by the Govt. of India</p> $a + b(90-a)$ $90$ <p>(where a= higher value of disability % and b=lower value of disability % as calculated for different disabilities)</p> <p>is recommended for computing the disability arising when more than one disabling condition is present in a given individual. This formula may be used in cases with multiple disabilities, and recommendations regarding admission and/or reservation made as per the specific disabilities present in a given individual</p>		

\*\*\* That by virtue of the order dated 18.05.2023 passed by the Hon'ble Supreme Court of India in WP (C) No. 1093 of 2023 titled Vishal Gupta Vs UOI & Ors., the Under Graduate Medical Education Board, an autonomous board under National Medical Commission, constituted an expert committee. Accordingly on 14<sup>th</sup> July, 2023, the expert meeting was held and the issues related to the review of guidelines specifically with respect to Specific learning disabilities (SLD), Autism spectrum disorders (ASD) and Mental Illness, were discussed in detail. Thereafter recommendations based on the discussions held in the meeting were received in the commission and such recommendations were considered by the UGMEB.