



Third Year MBBS 2023 Study

Guide

Cardiovascular & Respiration Module-VI



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## CVS & Respiration Module Team

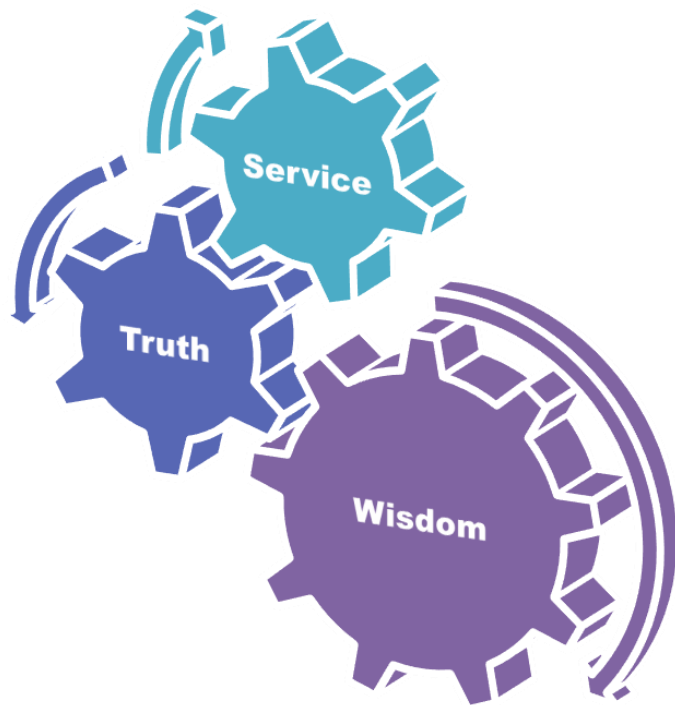
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## University Moto, Vision, Values & Goals

### RMU Motto



### Mission Statement

To impart evidence-based research-oriented health professional education in order to provide best possible patient care and inculcate the values of mutual respect, ethical practice of healthcare and social accountability.

### Vision and Values

Highly recognized and accredited centre of excellence in Medical Education, using evidence-based training techniques for development of highly competent health professionals, who are lifelong experiential learner and are socially accountable.

### Goals of the Undergraduate Integrated Modular Curriculum

The Undergraduate Integrated Learning Program is geared to provide you with quality medical education in an environment designed to:

- Provide thorough grounding in the basic theoretical concepts underpinning the practice of medicine.
- Develop and polish the skills required for providing medical services at all levels of the Health care delivery system.
- Help you attain and maintain the highest possible levels of ethical and professional conduct in your future life.
- Kindle a spirit of inquiry and acquisition of knowledge to help you attain personal and professional growth & excellence.

## Module – VI: CVS & Respiration Module

**Introduction:** CVS and Respiration module aims to provide students with essential knowledge of pathological processes involved in cardiovascular and respiratory system. Detailed understanding of these is the essence of the study for intelligent clinical practice, presentation/interpretation of diseases & management.

**Rationale :** The CVS & Respiration module is designed to impart knowledge about the concepts & principles of the basic sciences in context of clinical symptoms & signs of commonly occurring CVS & Respiratory diseases and develop a problem solving approach in diagnosing and management of these diseases.

### Module Outcomes

Each student will be able to:

#### Knowledge

Acquire knowledge about the basic terminologies used in Pharmacology, Pathology & Forensic Medicine as well as the concepts of diseases in the community

- Appreciate concepts & importance of
- Research
- Biomedical Ethics
- Family Medicine
- Artificial Intelligence

#### Skills

- Interpret and analyze various practical of Pre-clinical Sciences.

#### Attitude

- Demonstrate a professional attitude, team building spirit and good communication skills.

This module will run in 6 weeks duration. The content will be covered through introduction of topics. Instructional strategies are given in the time table and learning objectives are given in the study guides. Study guides will be uploaded on the university website. Good luck!

## Section I – Terms & Abbreviations

### Contents

- Domains of Learning
- Teaching and Learning Methodologies/Strategies
  - Large Group Interactive Session (LGIS)
  - Small Group Discussion (SGD)
  - Self-Directed Learning (SDL)
  - Case Based Learning (CBL)

### Tables & Figures

- Table1. Domains of learning according to Blooms Taxonomy
- Figure 1. Prof Umar's Model of Integrated Lecture
- Table2. Standardization of teaching content in Small Group Discussions
- Table 3. Steps of taking Small Group Discussions



Table1. Domains of learning according to Blooms Taxonomy

Sr. #	Abbreviation	Domains of learning
1.	C	Cognitive Domain: knowledge and mental skills.
	C1	Remembering
	C2	Understanding
	C3	Applying
	C4	Analyzing
	C5	Evaluating
	C6	Creating
2.	P	Psychomotor Domain: motor skills.
	P1	Imitation
	P2	Manipulation
	P3	Precision
	P4	Articulation
	P5	Naturalization
3.	A	Affective Domain: feelings, values, dispositions, attitudes, etc
	A1	Receive
	A2	Respond
	A3	Value
	A4	Organize
	A5	Internalize

## Teaching and Learning Methodologies / Strategies

### Large Group Interactive Session (LGIS)

The large group interactive session is structured format of Prof Umar Model of Integrated lecture. It will be followed for delivery of all LGIS. Lecturer will introduce a topic or common clinical condition and explains the underlying phenomena through questions, pictures, videos of patients, interviews and exercises, etc. Students are actively involved in the learning process.

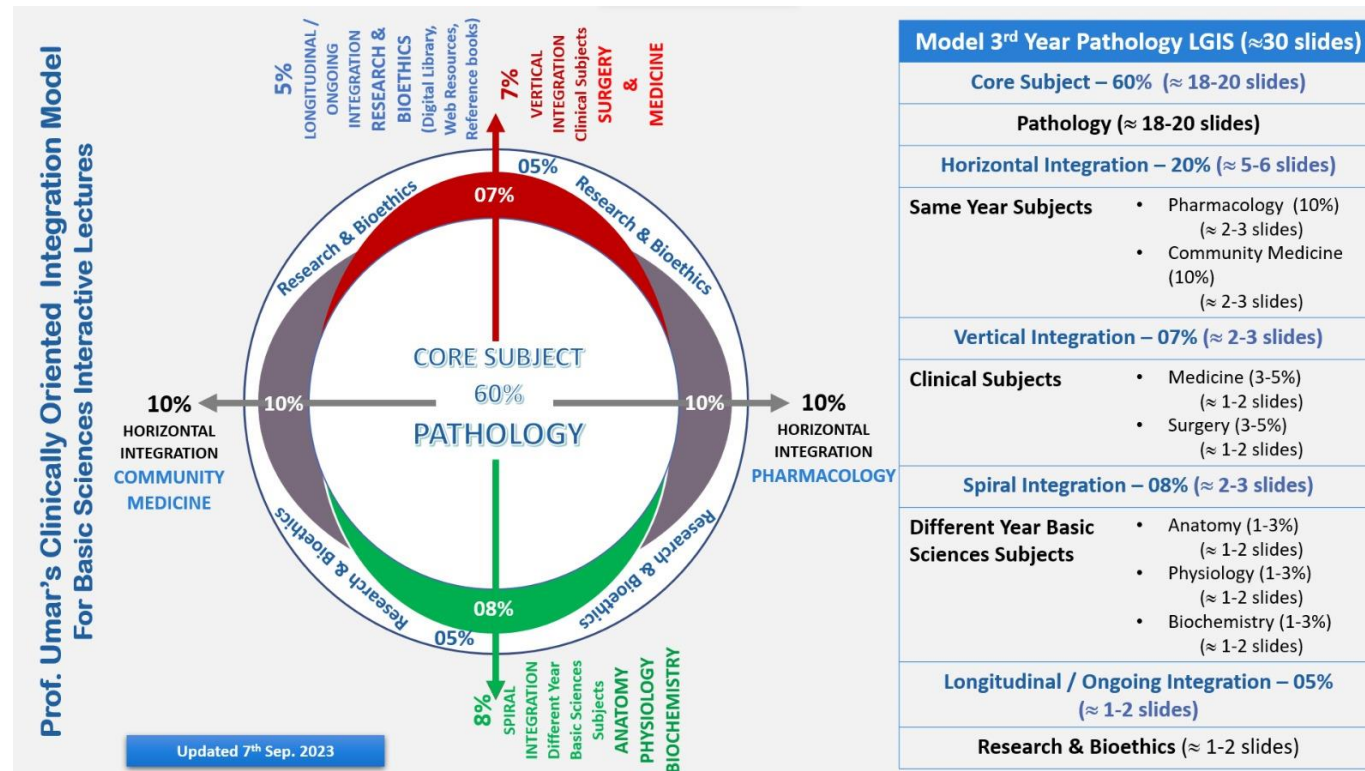


Figure 1. Prof Umar's Model of Integrated Lecture

### Small Group Discussion (SGD)

This format helps students to clarify concepts acquire skills and attitudes. Sessions are structured with the help of specific exercises such as patient case, interviews or discussion topics or power point presentations. Students exchange opinions and apply knowledge gained from Lectures, SGDs and Self-study. The facilitator role is to ask probing questions, summarize and helps to clarify the concepts.

Table 2.

#### Standardization of teaching content in Small Group Discussions

S.No	Topics	Approximate %
1	Title Of SGD	
2	Learning Objectives from Study Guides	
3	Horizontal Integration	5%+5%=10%
4	Core Concepts of the topic	60%
5	Vertical Integration	20%
6	Related Advance Research points	3%
7	Related Ethical points	2%

Table 3.

#### Steps of taking Small Group Discussions

Step 1	Sharing of Learning objectives by using students Study guides	First 5 minutes
Step 2	Asking students pre-planned questions from previous teaching session to develop co-relation (these questions will be standardized)	5minutes
Step 3	Students divided into groups of three and allocation of learning objectives	5minutes
Step 4	ACTIVITY: Students will discuss the learning objectives among themselves	15 minutes
Step 5	Each group of students will present its learning objectives	20 min
Step 6	Discussion of learning content in the main group	30min
Step 7	Clarification of concept by the facilitator by asking structured questions from learning content	15 min
Step 8	Questions on core concepts	
Step 9	Questions on horizontal integration	
Step 10	Questions on vertical integration	
Step 11	Questions on related research article	
Step 12	Questions on related ethics content	
Step 13	Students Assessment on online MS teams (5 MCQs)	5 min
Step 14	Summarization of main points by the facilitator	5 min
Step 15	Students feedback on the SGD and entry into log book	5 min
Step 16	Ending remarks	

### Self-Directed Learning (SDL)

- Self-directed learning is a process where students take primary charge of planning, continuing and evaluating their learning experiences.
- Time Home assignment
- Learning objectives will be defined
- Learning resources will be given to students : Text book (page no), web site
- Assessment: Will be online on LMS (Mid module/ end of Module)

### Case Based Learning (CBL)

- It's a learner centered model which engages students in discussion of specific scenarios that resemble typically are real world examples.
- Case scenario will be given to the students
- Will engage students in discussion of specific scenarios that resemble or typically are real-world examples.
- Learning objectives will be given to the students and will be based on
  - i. To provide students with a relevant opportunity to see theory in practice
  - ii. Require students to analyze data in order to reach a conclusion.
  - iii. Develop analytic, communicative and collaborative skills along with content knowledge.

**Section- II:**  
**Learning Objectives, Teaching Strategies & Assessments**

**Contents**

- Horizontally Integrated Clinical Sciences (Pharmacology, Pathology & Forensic Medicine)
- Large Group Interactive Session:
  - Pharmacology (LGIS)
  - Pathology (LGIS)
  - Forensic Medicine (LGIS)
- Small Group Discussions
  - Pharmacology (SGD)
  - Pathology (SGD)
  - Forensic Medicine (SGD)
- Self-Directed Topic, Learning Objectives & References
  - Pharmacology(SDL)
  - Pathology (SDL)
  - Forensic Medicine (SDL)
  - Practical
- Vertical horizontal integration
  - Medicine & Allied
  - Surgery & Allied

## Learning Objectives

### Week 1

Week 1						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L-1	Thanatology- I (Introduction & Types of death Immediate & Early changes of death)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define death and Classify its types</li> <li>State the WHO criteria &amp; indicators to diagnose death</li> <li>Briefly describe the causes, manner, mode, mechanisms, medico legal aspects of death</li> <li>Define Algor mortis and state its medico-legal importance</li> <li>Enlist various factors affecting algor mortis.</li> <li>Briefly explain the method to measure the temperature of body after death.</li> <li>Briefly describe Postmortem caloricity.</li> </ul>	C1 C1 C2 C2 C2 C2	LGIS	MCQ SEQs VIVA
L-2	Thanatology- II (Livor mortis & Rigor mortis)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define Livor mortis and state its medico legal importance</li> <li>Differentiate between Livor mortis and bruise.</li> <li>State the mechanism of Rigor Mortis in the body after death and its medico legal importance</li> <li>Enumerate the factors which modify the onset &amp; duration of rigor mortis</li> <li>Enlist the conditions simulating rigor mortis and differentiate them</li> </ul>	C1 C3 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L-3	Concept of environment & water	Community Medicine	<ul style="list-style-type: none"> <li>Define safe wholesome water</li> <li>Describe sources of water supply</li> <li>Explain water pollution, pollutants, indicators of water pollution</li> <li>Differentiate between shallow and deep wells</li> <li>Enlist guidelines for drinking water quality</li> <li>Elaborate concepts of water</li> </ul>	C1 C2 C4 C1 C2	LGIS	MCQ SEQs VIVA
L-4	Approach to a patient with chronic Peripheral arterial Disease	Surgery	<ul style="list-style-type: none"> <li>Recall the vascular anatomy and histology briefly.</li> <li>Briefly describe the features of chronic peripheral occlusive arterial disease.</li> <li>Enlist the investigations and state treatment options for occlusive arterial disease.</li> <li>Explain the principles of management of the chronic ischemic limb and role of surgery .</li> </ul>	C1 C2 C2 C3	LGIS	MCQs SEQs VIVA
L-5	Artherosclerosis Pathogenesis and morphology	Pathology	<ul style="list-style-type: none"> <li>Classify risk factors for atherosclerosis</li> <li>Describe the role of endothelium in pathogenesis of atheromatous plaque</li> <li>Describe the role of vessel smooth muscles in pathogenesis of atheromatous plaque</li> <li>Describe the roll of endothelium in pathogenesis of atheromatous plaque</li> <li>Describe the roll of extracellular matrix in pathogenesis of atheromatous plaque</li> <li>Describe the morphology of atheromatous plaque</li> </ul>	C3 C2 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA

L-6	Anti-hypertensive I (Introduction and classification)	Pharmacology	<ul style="list-style-type: none"> <li>Define hypertension</li> <li>Classify anti-hypertensive drugs groups</li> <li>Explain the mechanisms of action of centrally acting antihypertensive drugs</li> </ul>	C1 C2 C2	LGIS	MCQs SEQs VIVA
L-7	Consequences of Atherosclerosis	Pathology	<ul style="list-style-type: none"> <li>Enlist complications of Atheroma</li> <li>Correlate the consequences of atherosclerosis with clinical features .</li> </ul>	C2 C3	LGIS	MCQs SEQs VIVA
L-8	Water distribution, Conservation and purification	Community Medicine	<ul style="list-style-type: none"> <li>Define intermittent and continuous system of distribution of water.</li> <li>Define water conservation.</li> <li>Describe hardness of water and types.</li> <li>Explain ways for removal of hardness of water.</li> <li>Describe methods of purification.</li> <li>Enlist artificial and natural methods of purification.</li> <li>Elaborate concepts on purification on large and small scale.</li> </ul>	C1 C1 C2 C2 C2 C1 C2	LGIS	MCQs SEQs VIVA
L-9	Hypertension	Medicine	<ul style="list-style-type: none"> <li>Define hypertension.</li> <li>Enlist causes of hypertension.</li> <li>Describe clinical manifestations of hypertension including target organ damage.</li> <li>Outline investigations and management of hypertension.</li> <li>Highlight choice of antihypertensive drugs in different comorbidities</li> </ul>	C1 C1 C2 C2 C1	LGIS	MCQs SEQs
L-10	Hypertensive disorders in pregnancy PIH, Preeclampsia	Obstetric	<ul style="list-style-type: none"> <li>Define hypertension in pregnancy</li> <li>Classify the types of hypertension in pregnancy</li> <li>State the pathophysiology of pre-eclampsia</li> <li>Describe the clinical presentation of pre-eclampsia and understand the principles of its management</li> <li>Enlist and discuss maternal and fetal complications and long term risks to both mother and baby associated with hypertensive disorders</li> </ul>	C 1 C 1 C 2 C 3 C 2	LGIS	MCQs SEQs VIVA
L-11	Antihypertensive II ( ACE inhibitors and ARBs)	Pharmacolog	<ul style="list-style-type: none"> <li>Enlist ACEI and ARB</li> <li>Describe mechanism of action, uses and adverse effects of this groups</li> </ul>	C1 C2	LGIS	MCQs SEQs VIVA
L-12	Air and Ventilation (control of air pollution)	Community Medicine	<ul style="list-style-type: none"> <li>Enlist indices of thermal comfort</li> <li>Describe the factors responsible for vitiation of air</li> <li>Define air pollution</li> <li>Identify sources of air pollution and air pollutants</li> <li>Demonstrate selection of air sample for analysis</li> <li>Enumerate the methods to prevent &amp; control of air pollution</li> <li>Describe standards and types of ventilation</li> </ul>	C1 C2 C1 C3 C4 C1 C1 C2	LGIS	MCQs SEQs

S-1	Hypertensive Heart Disease	Patholog	<ul style="list-style-type: none"> <li>• Define criteria of systemic hypertensive heart disease</li> <li>• Classify the etiological factors of hypertension</li> <li>• Differentiate between benign and malignant Hypertension</li> <li>• Describe the pathogenic mechanisms of essential hypertension</li> <li>• Describe morphology of heart in systemic hypertensive heart disease</li> <li>• Describe Morphology of cor –pulmonale</li> <li>• Differentiate b/w systemic and pulmonary hypertension</li> <li>• Demonstrate clinical reasoning in interpreting the clinical history and symptomatology</li> </ul>	C1 C3 C3 C2 C2 C2 C3 A2	SGD	MCQs SEQs VIVA
L-13	Air and Ventilation (global warming.)	Community Medicine	<ul style="list-style-type: none"> <li>• Enlist natural and artificial methods of air purification.</li> <li>• Describe the green house effect</li> <li>• Enlist green house gases.</li> <li>• Identify sources of green house gases.</li> <li>• Describe global warming.</li> <li>• Define ozone hole.</li> <li>• Describe link between global warming and climate change.</li> </ul>	C1 C2 C1 C3 C2 C1 C2	LGIS	MCQs SEQs VIVA



## 2nd Week

Code no	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L-14	Antihypertensives III (Vasodilators)	Pharmacology	<ul style="list-style-type: none"> <li>Classify vasodilators</li> <li>Discuss mechanism of action ,clinical uses and side effects of different types of vasodilators</li> </ul>	C1 C2	LGIS	MCQs SEQs VIVA
L-15	Antihypertensives IV (Ca Channel Blockers)	Pharmacolog	<ul style="list-style-type: none"> <li>Classify calcium channel blockers</li> <li>Discuss mechanism of action ,clinical uses and side effects of calcium channel blockers</li> </ul>	C2 C1	LGIS	PBQS
L-16	Prevention of Radiation Hazards	Community Medicine	<ul style="list-style-type: none"> <li>Describe sources of radiation exposure</li> <li>Describe types of radiations</li> <li>Discuss biological effects of radiation</li> <li>Discuss radiation protection</li> </ul>	C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L-17	Antianginal I	Pharmacology	<ul style="list-style-type: none"> <li>Enlist Anti-Anginal Drugs</li> <li>Describe mechanism of action and adverse effects of nitrates</li> </ul>	C1 C2	LGIS	MCQs SEQs VIVA
L-18	Thanatology- III ( Late changes of Death Putrefaction)	Forensic Medicine	<ul style="list-style-type: none"> <li>Enlist the bacteria participates in putrefaction</li> <li>Briefly describe the features of putrefaction and its mechanism</li> <li>State the medicolegal importance of maggots.</li> </ul>	C1 C2 C2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> <li>Briefly describe the factors affecting putrefaction in water.</li> </ul>	C2		
S-2	Pathophysiology of Angina	Pathology	<ul style="list-style-type: none"> <li>Classify the ischemic heart disease on the basis of pattern of clinical presentation</li> <li>Describe the types of angina</li> <li>Describe the pathophysiology of angina</li> <li>Correlate the pathogenesis of ischemic heart disease with various etiological factors</li> </ul>	C3 C2 C2 C3	SGD	MCQs SEQs VIVA
L-19	Ischemic Heart Disease	Medicine	<ul style="list-style-type: none"> <li>Classify coronary heartdiseases.</li> <li>Explain clinical manifestation of ischemic heart disease including stable angina, unstable angina,MI and heart failure.</li> <li>Describe investigation of IHD.</li> <li>Outline management of IHD</li> </ul>	C1 C2 C2 C3	LGIS LGIS	MCQs SEQs VIVA
L-20	Antianginal II	Pharmacology	<ul style="list-style-type: none"> <li>Describe mechanism of action and adverse effects of other anti angina Drugs</li> </ul>	C2	LGIS	MCQs SEQs VIVA

C-1	Diuretics	Pharmacology	<ul style="list-style-type: none"> <li>Rationalize the use of diuretics in specific clinical scenario</li> </ul>	C3	CBL	MCQs SEQs VIVA
L-21			□			
S-3	Ischemic Heart Disease	Pathology	<ul style="list-style-type: none"> <li>Describe morphological features of MI</li> <li>Correlate pathogenesis, And Complications of MI.</li> <li>Describe chronic ischemic heart disease</li> <li>Describe the pathogenesis of myocardial infarction</li> <li>Describe the patterns of myocardial infarction</li> <li>Correlate the evolution of morphological changes in myocardial infarction with time duration of infarct</li> <li>Correlate the complications of myocardial infarction with clinical features</li> </ul>	C2 C3 C2 C2 C3 C3	SGD	MCQs SEQs
C-2	Vasculitis	Pathology	<ul style="list-style-type: none"> <li>Describe Pathogenesis of vasculitis</li> <li>Clarify Various forms of vasculitis</li> <li>Describe complication of vasculitis</li> <li>Differentiate among Morphological features of various type of vasculitis</li> <li>Interpret the clinical features and lab findings of a case with vasculitis</li> <li>Demonstrate collaborative learning skills</li> <li>Demonstrate adequate communication skills in describing the clinical problem</li> </ul>	C2 C3 C2 C3 P2 A3 A3	CBL	MCQs SEQs
L-22	Cyanotic congenital heart disease	Paediatrics	<ul style="list-style-type: none"> <li>Define Tetralogy of Fallot</li> <li>Describe the haemodynamics of the defect and its clinical presentation</li> <li>Plan investigations, interpret and to take appropriate action</li> <li>Discuss medical and surgical Management</li> <li>Assess for complications and their management</li> </ul>	C1 C2 C2 C3 C3	LGIS	MCQs SEQs VIVA

L-23	Approach to a patient with Gangrene and Amputations	Surgery	<ul style="list-style-type: none"> <li>Recall the causes of acute limb ischemia.</li> <li>State definition of thromboembolism.</li> <li>Describe the Pathophysiology of Thromboembolism .</li> <li>Discuss the various types of Gangrene.</li> <li>Explain the types of amputations according to ischemia site in a patient.</li> </ul>	C1 C1 C2 C2 C3	LGIS	PBQS
L-24	Thanatology- IV Adipocere, Mummification Estimation of time since death	Forensic Medicine	<ul style="list-style-type: none"> <li>Define Adipocere and state its medicolegal importance.</li> <li>Define mummification and state its medicolegal importance</li> <li>Briefly describe the method to calculate the time since death.</li> <li>Enumerate different changes after death which helps to calculate the time since death.</li> </ul>	C1 C2 C3 C2	LGIS	MCQs SEQs VIVA
L-25	Acyanotic heart disease	Paediatrics	<ul style="list-style-type: none"> <li>Describe the haemodynamics of VSD and PDA</li> <li>Discuss the clinical presentation</li> <li>Make Plan of Investigations</li> <li>Discuss the medical and surgical treatment</li> <li>Identify Complications and manage them</li> </ul>	C2 C2 C1 C3 C2	LGIS	MCQs SEQs VIVA
L-26	CCFI (Introduction & classification)	Pharmacology	<ul style="list-style-type: none"> <li>Classify drug groups used in CCF</li> <li>Describe mechanism of action of digoxin</li> <li>Describe digoxin toxicity and its management</li> </ul>	C2 C2 C2	LGIS	MCQs SEQs VIVA
P-1	P drug and prescription of HTN	Pharmacology	<ul style="list-style-type: none"> <li>Clinical pharmacology of anti hypertensive drugs.</li> </ul>	C3	practical	OSPE
P-2	Cardiac Poisons	Forensic Medicine	<ul style="list-style-type: none"> <li>Enlist important cardiac poisons ,</li> <li>Mention the alkaloids, fatal dose and fatal period along with medicolegal significance of Digitalis and Aconite</li> <li>Briefly describe sign and symptoms and autopsy findings of these poisons.</li> <li>Write down important steps of management of such cases.</li> </ul>	C1 C2 C2 C2	practical	OSPE
P-3	Morphology of vascular lesions	Pathology	<ul style="list-style-type: none"> <li>Identify the morphological features of Calcification</li> <li>Identify the morphological features of atherosclerosis</li> <li>Identify the morphological features of thrombus</li> <li>Demonstrate collaborative working skills</li> </ul>	P3 P3 P3 A3	practical	OSPE

### 3rd Week

Code no	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
S-4	Aneurysms & Dissection	Pathology	<ul style="list-style-type: none"> <li>Classify aneurysms</li> <li>Correlate the etiological factors with the pathogenic mechanisms of aneurysm formation.</li> <li>Correlate atherosclerosis with abdominal aortic aneurysms</li> <li>Enlist the etiological factors for aortic dissection</li> <li>Describe the morphological features of aortic dissection</li> <li>Differentiate between Type A and Type B aortic dissections.</li> </ul>	C3 C3 C3  C1 C2 C3	SGD	MCQs SEQs VIVA
L-27	Rheumatic fever	Medicine	<ul style="list-style-type: none"> <li>Explain pathogenesis of rheumatic fever.</li> <li>Describe clinical manifestations and JONES criteria for diagnosis of Rheumatic fever</li> <li>Enlist investigations for Rheumatic fever</li> <li>Describe management of acute attack and secondary prevention of Rheumatic fever</li> </ul>	C2 C2 C1 C3	LGIS	MCQs SEQs VIVA
L-28	Forensic Serology Trace Evidence Blood , Semen & Saliva	Forensic Medicine	<ul style="list-style-type: none"> <li>Briefly describe the physical, chemical, microscopic, biochemical, spectroscopic Assessment of blood.</li> <li>Enlist the information gathered from a blood ,saliva &amp; seminal stain.</li> <li>State the Medicolegal importance of blood groups ,secretors and non-secretors.</li> <li>Mention the method to Collect, preserve, and dispatch specimen of blood stain</li> <li>Briefly describe the features of salivary and vomitus stain w.r.t Medicolegal importance</li> </ul>	C2 C1 C2 C2 C2	LGIS	MCQs SEQs VIVA
L-29	Pathogenesis of Rheumatic Fever Morphological changes in Rheumatic Heart Disease	Pathology	<ul style="list-style-type: none"> <li>Describe the Pathogenesis of rheumatic fever C2</li> <li>Describe the Pathogenesis of rheumatic Heart Disease</li> <li>Outline the diagnostic criteria of rheumatic fever</li> <li>Discuss the complications of rheumatic fever</li> <li>Define chronic rheumatic heart disease</li> <li>Describe the morphology of rheumatic heart disease</li> <li>Outline the diagnostic criteria of rheumatic Heart Disease</li> <li>Discuss the complications of rheumatic Heart Disease</li> </ul>	C2 C2 C2 C2 C2 C1 C2 C3 C2	LGIS	MCQs SEQs VIVA
L-30	CCF II (Digoxin and related drugs):	Pharmacology	<ul style="list-style-type: none"> <li>Describe mechanism of action of other drugs used in CCF</li> <li>Enlist their therapeutic uses and adverse effects</li> </ul>	C2 C2	LGIS	PBQs

L-31	Infective Endocarditis	Medicine	<ul style="list-style-type: none"> <li>Describe pathogenesis of Infective Endocarditis.</li> <li>Explain clinical features of Infective Endocarditis and Dukes criteria.</li> <li>Enlist investigation of Infective Endocarditis</li> <li>Outline management of Infective Endocarditis</li> </ul>	C2 C2 C1 C3	LGIS	MCQ SEQ
L-32	Valvular heart disease	Medicine	<ul style="list-style-type: none"> <li>Describe rheumatic heart disease with pathogenesis.</li> <li>Describe clinical features of valvular heart disease including mitral stenosis</li> </ul>	C2 C2	LGIS	MCQs SEQs
L-33	Rheumatic fever	Paediatrics	<ul style="list-style-type: none"> <li>Discuss etiology of rheumatic fever and its diagnostic criteria</li> <li>Briefly describe its clinical features</li> <li>Make plan of investigations and their interpretation</li> <li>State the plan of management and discuss about the prophylaxis of rheumatic fever</li> </ul>	C2 C2 C2 C3	LGIS	MCQs SEQs VIVA
L-34	Introduction to Diuretics	Pharmacology	<ul style="list-style-type: none"> <li>Classify diuretics</li> <li>Describe the role of diuretics in hypertension</li> <li>Rationalize the use of diuretics in specific clinical scenario</li> </ul>	C2 C2 C3	LGIS	MCQs SEQs VIVA
L-35	IHD/CCF	Family Medicine	<ul style="list-style-type: none"> <li>Explain the management strategies of a patient with IHD and heart failure in general practice including the psychosocial impact of disease on patient and their families</li> <li>Describe the strategies for prevention of IHD and CCF</li> </ul>	C2 C2	LGIS	MCQs
L-36	Infective Endocarditis	Pathology	<ul style="list-style-type: none"> <li>Enlist the causes of infective endocarditis</li> <li>Classify infective endocarditis</li> <li>Describe morphology of infective endocarditis</li> <li>Differentiate b/w vegetations of different type of endocarditis</li> </ul>	C1 C2 C2 C3	LGIS	MCQs SEQs VIVA
C-3	Myocarditis & pericarditis	Pathology	<ul style="list-style-type: none"> <li>Differentiate between various types of pericarditis</li> <li>Correlate the pathogenesis of pericardial effusions with the clinical presentation.</li> <li>Correlate different forms of fluid accumulations in pericardial sac with the underlying pathology.</li> <li>Interpret the lab report of a patient with pericardial effusion</li> <li>Demonstrate the critical thinking attitude needed for applying basic knowledge to a clinical situation</li> <li>Enumerate the causes of myocarditis &amp; pericarditis</li> <li>Describe the morphological features of myocarditis</li> <li>Describe the morphology of myocarditis</li> <li>Demonstrate the critical thinking attitude needed for applying basic knowledge to a clinical situation</li> </ul>	C3 C3 C3 P3 A3 C1 C2 C2 A3	CBL	PBQS
L-37	Approach to a patient with DVT and varicose veins	Surgery	<ul style="list-style-type: none"> <li>Briefly recall the venous anatomy and the physiology of venous return.</li> <li>Describe the etiology and pathophysiology of deep venous thrombosis.</li> <li>State the clinical significance and management of varicose veins.</li> </ul>	C1 C2 C3	LGIS	MCQs SEQs VIVA
L-38	Childhood Asthma	Paediatric	<ul style="list-style-type: none"> <li>Define Asthma and Identify risk factors</li> <li>Discuss clinical presentation and Classify as per GINA guidelines</li> <li>Make differential diagnosis</li> <li>Plan pertinent investigations, interpret and take appropriate action</li> <li>Discuss the treatment of Acute Attack of Asthma and long term management</li> </ul>	C1 C2 C1 C3 C2	LGIS	PBQS

L-39	Antiarrhythmic drugs I (Introduction to normal rhythm and classification)	Pharmacology	<ul style="list-style-type: none"> <li>Classify antiarrhythmic drugs</li> </ul>	C2	LGIS	MCQs SEQs VIVA
L-40	Antiarrhythmic drugs II (class I and class II)	Pharmacology	<ul style="list-style-type: none"> <li>Describe mode of action, clinical uses and adverse effects of Class I, Class II antiarrhythmic drugs</li> </ul>	C1	LGIS	MCQs SEQs VIVA
L-41	Gestational diabetesmellitus	Obstetrics	<ul style="list-style-type: none"> <li>Define gestational diabetes mellitus</li> <li>Describe the pathogenesis of GDM</li> <li>Identify and state the risks factor associated with GDM</li> <li>Screen and diagnose GDM</li> <li>Briefly explain the management of GDM</li> </ul>	C1 C2 C2 C1 C3	LGIS	MCQs SEQs
P-4	P drug and prescription of angina	Pharmacology	<ul style="list-style-type: none"> <li>Discuss clinical pharmacology of cardiotoxic drugs</li> </ul>	C2	Practical	OSPE
P-5	Assessment of a Stain	Forensic Medicine	<ul style="list-style-type: none"> <li>State the medicolegal importance of Biological specimens (Blood, Semen, Saliva, Vomitus, Breath, Urine, Hair).</li> <li>Briefly describe the method to Collect, preserve and dispatch various human body specimens</li> </ul>	C2 C2	Practical	OSPE
P-6	Lipid profile and cardiac enzymes	Pathology	<ul style="list-style-type: none"> <li>Enlist cardiac enzymes</li> <li>Enlist parameters for lipid profile</li> </ul>	C1 C1	Practical	OSPE

## 4th Week

Code no	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L-42	Antiarrhythmic drugs III(class IV and class V)	Pharmacology	<ul style="list-style-type: none"> <li>Describe mode of action, clinical uses and</li> <li>adverse effects of Class III and Class IV antiarrhythmic drugs</li> </ul>	C2 C2	LGIS	MCQs SEQs VIVA
L-43	Asphxia-I (Classification& Hanging)	Forensic Medicine	<ul style="list-style-type: none"> <li>Classify Asphyxia</li> <li>Define Hanging , its types/classification and give causes of death of hanging</li> <li>Explain the medicolegal aspects of hanging</li> <li>Differentiate between ante mortem and post mortem hanging</li> <li>Differentiate between suicidal , homicidal and accidental hanging</li> <li>Enumerate its external and internal autopsy findings</li> </ul>	C1 C1 C2  C3 C2 C2	LGIS	MCQs SEQs VIVA
C-4	Cardiomyopathies	Pathology	<ul style="list-style-type: none"> <li>Formulate differential diagnosis of cardiomyopathy</li> <li>Describe pathogenesis of cardiomyopathies</li> <li>Classify Various types of cardiomyopathies</li> <li>Describe Consequences of cardiomyopathies</li> <li>Describe Morphological features of cardiomyopathies</li> <li>Demonstrate adequate communication skills in describing the clinical problem</li> </ul>	C3 C2 C3 C2 C2 A3	CBL	MCQs SEQs VIVA
L-44	Antiasthmatics II (Drug groups)	Pharmacology	<ul style="list-style-type: none"> <li>Discuss the roles of corticosteroids in the treatment of bronchial asthma. C1</li> <li>Discuss the role of ipratropium in asthma C2</li> <li>Discuss the mechanism of action and adverse effects of leukotrine synthesis and receptor blockers used in asthma C2</li> <li>Enlist drugs used in acute and chronic asthma C2</li> </ul>	C1 C2  C2 C2	LGIS	MCQs SEQs VIVA
L-45	Asphxia –II (Strangulation)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define strangulation , its types/classification and give causes of death of strangulation.</li> <li>Explain the medico-legal aspects of strangulation.</li> <li>Differentiate between hanging and strangulation</li> <li>Differentiate between suicidal , homicidal and accidental strangulation</li> </ul>	C1 C2 C2 C2 C3	LGIS	MCQs SEQs VIVA
C-5	Anti asthamatic drugs	Pharmacology	<ul style="list-style-type: none"> <li>Rationalize the use of antiasthamatic drugs in specific clinical scannerio</li> </ul>	C3	CBL	MCQs SEQs
L-46	Chronic bronchitis and emphysema	Pathology	<ul style="list-style-type: none"> <li>Define COPD</li> <li>Enumerate diseases of COPD</li> <li>Differentiate b/w the pathophysiology of emphysema and chronic bronchitis.</li> <li>Correlate morphology of each type of emphysema with its pathogenesis</li> </ul>	C1 C1 C3 C3	LGIS	MCQs SEQs VIVA

L-47	Antiasthmatics-II (Classification)	Pharmacology	<ul style="list-style-type: none"> <li>Describe the mechanism of action &amp; adverse effects of Beta 2 agonists used in asthma</li> <li>Describe the mechanism of action, actions &amp; adverse effects of Methylxanthines</li> <li>Describe mechanism of action and adverse effects of Mast Cell Stabilizers</li> </ul>	C2 C2 C1	LGIS	MCQs SEQs
L-48	Approach to a patient with lymphedema	Surgery	<ul style="list-style-type: none"> <li>Recall the main functions of the lymphatic system</li> <li>Recall the development of the lymphatic system.</li> <li>Enumerate the various causes of limb swelling.</li> <li>Briefly describe the etiology, clinical features and investigations of lymphedema.</li> <li>Outline management plan for lymphedema.</li> </ul>	C1 C1 C2  C2  C3		MCQs SEQs
L-49	Asphxia – III (Suffocation)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define suffocation.</li> <li>Enlist different types of suffocation.</li> <li>Briefly explain the postmortem findings in death due to suffocation</li> <li>State the medico-legal importance of death from different types of suffocation</li> </ul>	C1 C1 C2 C2	LGIS	MCQs SEQs
L-50	Asthma, COPD	Medicine	<ul style="list-style-type: none"> <li>Describe pathophysiology of asthma and its clinical manifestations.</li> <li>Enlist predisposing factors of asthma.</li> <li>Describe diagnostic tests and management of asthma in step wise fashion.</li> <li>Define COPD and briefly describe pathophysiology of COPD.</li> <li>Enumerate risk factors for development of COPD.</li> <li>Outline investigations and management of COPD</li> </ul>	C2 C1 C3 C2 C1 C3	LGIS	MCQs SEQs
L-51	Approach to a patient with cardiac diseases. (Cardiac surgery)	Surgery	<ul style="list-style-type: none"> <li>Describe the cardiac diseases Ischemic heart disease, valvar heart diseases, congenital heart diseases, tumors of heart.</li> </ul> <p>Explain the basics of surgical treatment of different heart diseases like cardiac bypass, valve replacements etc.</p>	C2  C2	LGIS	MCQs SEQs
L-52	Approach to a patient with Chest trauma and its management	Surgery	<ul style="list-style-type: none"> <li>State the life threatening and potentially life threatening chest trauma (ATLS)</li> <li>Describe the treatment of chest trauma according to ATLS principles including chest intubation.</li> </ul>	C2 C3	LGIS	MCQs SEQs VIVA
S-1	Anti tussive drugs	Pharmacology	<ul style="list-style-type: none"> <li>Describe anti-tussive, mucolytics and expectorants</li> <li>Classify Anti-tussives</li> <li>Describe Pharmacodynamics of these drugs</li> </ul>	C2 C2 C2	SGD	PBQs
L-53	Asphxia – IV (Drowning)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define drowning and Classify drowning.</li> <li>State the cause of death in different types of drowning</li> <li>Briefly explain the patho-physiology of wet drowning both in sea and fresh water.</li> <li>Describe the postmortem findings and their medico-legal importance.</li> <li>Differentiate between antemortem and postmortem drowning</li> </ul>	C1 C2 C2 C2 C3	LGIS	



S-5	Tumors of CVS	Pathology	<ul style="list-style-type: none"> <li>Describe epidemiology, pathogenesis, clinical feature and morphology of primary, metastatic and other tumors of heart.</li> <li>Describe epidemiology, pathogenesis, clinical feature and morphology of Benign Tumors and Tumor-Like Conditions of blood vessels.</li> <li>Describe epidemiology, pathogenesis, clinical feature and morphology of Intermediate-Grade (Borderline) Tumors of blood vessels.</li> <li>Describe epidemiology, pathogenesis, clinical feature and morphology of Malignant Tumors of blood vessels.</li> </ul>	C2 C2 C2 C2	SGD	
L-54	Asthma & Bronchiectasis	Pathology	<ul style="list-style-type: none"> <li>Enlist the types of asthma</li> <li>Describe etiology of asthma</li> <li>Describe the pathogenesis of asthma</li> <li>Enlist genetic associations of asthma</li> <li>Describe morphological changes in lungs in a patient with asthma</li> <li>Describe the pathogenesis of bronchiectasis</li> <li>Describe the gross and microscopic changes in bronchiectatic lung</li> </ul>	C1 C2 C2 C1 C2 C2 C2	LGIS	
P-7	P drug and prescription of CCF	Pharmacology	<ul style="list-style-type: none"> <li>Rationalize the use of drugs in specific clinical scenario</li> </ul>	C3	Practical	OSPE
P-8	Asphyxiants	Forensic Medicine	<ul style="list-style-type: none"> <li>Briefly describe the mechanism of action of asphyxial poison.(Carbomonoxide, Carbondioxide, Hydrogen sulphide)</li> <li>Mention the fatal dose, management &amp; medico-legal importance of Asphyxial poison.</li> <li>Briefly explain the autopsy findings of a victim of Asphyxial poison.</li> </ul>	C2 C2 C2 C2	Practical	OSPE
P-9	MI and Rheumatic heart disease	Pathology	<ul style="list-style-type: none"> <li>Illustrate with help of diagram the different types of Vegetation in heart valves</li> <li>Interpret the morphological Changes in MI</li> <li>Demonstrate collaborative work in the group</li> </ul>	P3 P3 A3	Practical	OSPE

## 5th Week

Code no	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L-55	Sexual Offences (Rape & Sodomy)	Forensic Medicine	<ul style="list-style-type: none"> <li>Define rape, intercourse, sodomy.</li> <li>Explain laws relating to sexual offences.</li> <li>Assess the sexual offences and relate it to relevant Sections of Law (Zina and Hudood Ordina •</li> <li>Differentiate between natural and unnatural sexual Offences.</li> <li>Define sodomy &amp; Bestiality</li> <li>Briefly explain the typical finding in active and passive agent of sodomy).</li> </ul>	C1 C2 C3 C1 C1 C2	LGIS	MCQs SEQs VIVA
L-56	Medico-legal aspects of Pregnancy ,Delivery and Abortion	Forensic Medicine	<ul style="list-style-type: none"> <li>Define pregnancy and describe forensic importance of delivery.</li> <li>Briefly explain the signs and symptoms of pregnancy.</li> <li>Describe the autopsy findings in case of recent and remote delivery in living and dead body.</li> <li>Enlist the types and methods of abortion.</li> <li>Briefly explain the causes of death in abortion.</li> <li>Assess the abortion and relate it to relevant Sections of Law &amp; state its medico-legal aspects.</li> <li>Briefly describe the autopsy findings in case of criminal abortion.</li> </ul>	C1 C2 C3 C1 C2 C3 C2	LGIS	MCQs SEQs VIVA
L-57	Medico-legal aspects of Infanticide Child abuse Battered child & wife	Forensic Medicine	<ul style="list-style-type: none"> <li>Define infanticide, live born, dead born &amp; still born.</li> <li>Briefly describe the method of assessing the age of fetus &amp; define Hess's Rule.</li> <li>Differentiate between features of live and dead born.</li> <li>Explain the autopsy findings in case of live and dead born.</li> <li>Explain the magnitude of the problem related to child abuse.</li> <li>Describe the phenomena of battered wife and related laws</li> <li>Identify criminal and non-accidental violence or abuse to a newborn, infant or child</li> </ul>	C1 C2 C3 C2 C1 C2 C2 C3	LGIS	MCQs SEQs VIVA
L-58	Custodial Torture	Forensic Medicine	<ul style="list-style-type: none"> <li>Define Custodial torture</li> <li>Briefly explain various types of custodial torture</li> <li>Enlist the the types of injuries receive in custodial torture</li> <li>State the medicolegal importance of death in custody and custodial torture</li> </ul>	C1 C2 C2 C3	LGIS	MCQs SEQs VIVA

S-6	Interstitial lung disease	Pathology	<ul style="list-style-type: none"> <li>Define and classify interstitial lung diseases.</li> <li>Differentiate between restrictive and obstructive lung diseases</li> <li>Differentiate between fibrosing and granulomatous interstitial lung diseases.</li> <li>Describe the Pathogenesis of idiopathic pulmonary fibrosis (IPF)</li> <li>Describe the clinical features of restrictive lung disease</li> </ul>	C3 C3 C3 C2 C2	SGD	PBQs
L-59	Bronchial Asthma	Family Medicine	<ul style="list-style-type: none"> <li>Discuss the risk factors for Asthma in our population <ul style="list-style-type: none"> <li>Explain the risk assessment for Asthma</li> </ul> </li> <li>Discuss the primary and secondary prevention of Asthma in a primary health setting</li> <li>Identify the guidelines that should be followed in a patient with Asthma</li> </ul>	C2 C2 C2 C3	LGIS	MCQs
L-60	Pleural effusion	Medicine	<ul style="list-style-type: none"> <li>Define pleural effusion.</li> <li>Classify and explain different types of pleural effusion.</li> <li>Enlist causes and clinical features of pleural effusion.</li> <li>Outline investigations and treatment of pleural effusion.</li> <li>Enlist indication of chest intubation in pleural effusion</li> </ul>	C1 C2 C2 C3 C2	LGIS	MCQs SEQs
S-7	Acute Pulmonary infections	Pathology	<ul style="list-style-type: none"> <li>Classify pulmonary infections on basis of etiology and morphology .</li> <li>Describe the pneumonia syndromes.</li> <li>Differentiate between the morphology of different types of pneumonia.</li> </ul>	C3 C3 C3	SGD	PBQS
L-61	Pneumonia	Paediatrics	<ul style="list-style-type: none"> <li>Classify Pneumonia according to the WHO ARI protocol</li> <li>Plan pertinent investigations, interpret and take appropriate action</li> <li>Assess complications</li> <li>Manage Pneumonia and its complications</li> </ul>	C1 C2 C2 C2	LGIS	MCQs SEQs VIVA
L-62	Barbiturates & Hypnotics	Forensic Medicine	<ul style="list-style-type: none"> <li>Briefly describe the mechanism of action of Barbiturates &amp; Hypnotics</li> <li>Mention the fatal dose, management &amp; medico-legal importance of Barbiturates &amp; Hypnotics</li> <li>Briefly explain the autopsy findings of a victim of Barbiturates &amp; Hypnotics poisoning</li> </ul>	C2 C2 C3	LGIS	MCQs SEQs VIVA
S-8	Chronic Pulmonary infections	Pathology	<ul style="list-style-type: none"> <li>Describe chronic pneumonias.</li> <li>Describe epidemiology, pathogenesis, etiology and morphology of Histoplasmosis, Coccidioidomycosis, and Blastomycosis.</li> <li>Describe Pneumonia in the Immunocompromised Host, Opportunistic Fungal Infections and Pulmonary Disease in HIV.</li> </ul>	C2 C2 C2	SGD	PBQS
L-63	TUBERCULOSIS	Pathology	<ul style="list-style-type: none"> <li>Enlist the risk factors for acquiring tuberculosis</li> <li>Describe pathophysiology of primary and secondary tuberculosis.</li> <li>Describe the processes of formation of granulomas</li> <li>Differentiate between the morphology of lesions in primary and secondary tuberculosis</li> <li>Describe the lesions in miliary tuberculosis</li> </ul>	C1 C2 C2 C3 C2	LGIS	MCQs SEQs

			<ul style="list-style-type: none"> <li>Enumerate first and second line drugs for treatment of tuberculosis</li> <li>Describe mechanism of action uses and adverse effects of first line drugs used in tuberculosis</li> </ul>	C2 C2		
C-6	Squamous cell Carcinoma	Pathology	<ul style="list-style-type: none"> <li>Classify lung tumors</li> <li>Describe the carcinogenic pathways of squamous cell carcinoma of lung</li> <li>Describe the morphology of squamous cell carcinoma of lung</li> <li>Correlate the clinical presentation of lung carcinoma with the stage of disease</li> <li>Interpret the clinical data of patient with lung carcinoma for the prognosis of the disease</li> <li>Demonstrate understanding of team work in diagnosing a patient with critical disease</li> </ul>	C1 C2 C2 C3  P3 A2	CBL	MCQs SEQs VIVA
L-64	Croup	Paediatrics	<ul style="list-style-type: none"> <li>State the etiology of croup</li> <li>Briefly explain the Clinical features and make differential diagnosis of stridor</li> <li>Enlist the X-Ray findings of CROUP</li> <li>Describe Treatment and Management plan of Croup</li> </ul>	C1 C2 C1 C3	LGIS	PBQS
L-65	Anti TB drugs I & II	Pharmacology	<ul style="list-style-type: none"> <li>Enlist 1st and 2nd line Anti TB Drugs</li> <li>Discuss their mechanism of action.</li> <li>Discuss their adverse effects and drug interaction</li> <li>Discuss different regimes for treatment of TB</li> <li>Describe drug interactions of isoniazid and Rifampicin</li> </ul>	C1 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L-66	Approach to benign Diseases of the Thorax	Surgery	<ul style="list-style-type: none"> <li>Briefly describe different benign diseases of respiratory system of surgical importance like empyema, lung abscess, lobar collapse, destructive lung disease.</li> <li>Explain the basics of Surgical treatment of the benign diseases of thorax like chest intubation, VATS, thoracotomy.</li> </ul>	C2    C3	LGIS	MCQs SEQs VIVA
L-67	Seminar on TB	Medicine	<ul style="list-style-type: none"> <li>Recognize pathophysiology of Tuberculosis.</li> <li>Explain clinical features of Pulmonary and pulmonary Tuberculosis.</li> <li>Outline Investigations and management plan of Tuberculosis</li> </ul>	C1 C2 C2	LGIS	MCQs SEQs
P-10	P drug and prescription of asthma and TB	Pharmacology	<ul style="list-style-type: none"> <li>Rationalize the use of antiasthmatic drugs in specific clinical scenario</li> </ul>	C3	Practical	OSPE
P-11	Assessment of a Rape victim	Forensic Medicine	<ul style="list-style-type: none"> <li>Briefly describe the procedure of performing clinical Assessment of victim and assailant in case of sexual assault.</li> <li>Explain the method of collection of specific specimens in sexual offences</li> <li>Write a required certification in case of diagnosed sexual assault</li> </ul>	C2  C2 C2	Practical	OSPE

P-12	Morphology of lung lesions	Pathology	<ul style="list-style-type: none"> <li>• Illustrate with the help of a diagram the morphology of emphysema</li> <li>• Illustrate with the help of a diagram the morphology of granuloma</li> <li>• Demonstrate positive attitude towards safe handling of laboratory specimens</li> </ul>	P3 P3 A3	Practical	OSPE
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### Family Medicine

Lecture	Learning Objectives	Cognition level	Teaching Strategy	Assessment Strategy
IHD/CCF	<ul style="list-style-type: none"> <li>• Explain the management strategies of a patient with IHD and heart failure in general practice including the psychosocial impact of disease on patient and their families</li> <li>• Describe the strategies for prevention of IHD and CCF</li> </ul>	C2  C2	LGIS	MCQs
Bronchial Asthma	<ul style="list-style-type: none"> <li>• Discuss the risk factors for Asthma in our population</li> <li>• Explain the risk assessment for Asthma</li> <li>• Discuss the primary and secondary prevention of Asthma in a primary health setting</li> <li>• Identify the guidelines that should be followed in a patient with Asthma</li> </ul>	C2  C2  C2  C3	LGIS	MCQs

SDL Curriculum  
(Self Directed Learning)

Week-1

Pharmacology

Topic	Learning Objectives	References
<ul style="list-style-type: none"> <li>Role of <math>\alpha</math>-2 agonists in clinical settings other than hypertension</li> </ul>	<ul style="list-style-type: none"> <li>Enlist the conditions in which <math>\alpha</math>-2 agonists are used C1</li> <li>Rationalize their use in these conditions C2</li> </ul>	<ul style="list-style-type: none"> <li>Kaye AD, Chernobytsky DJ, Thakur P, Siddaiah H, Kaye RJ, Eng LK, Harbell MW, Lajaunie J, Cornett EM. Dexmedetomidine in enhanced recovery after surgery (ERAS) protocols for postoperative pain. Current pain and headache reports. 2020 May;24:1-3.</li> <li>Baller EB, Hogan CS, Fusunyan MA, Ivkovic A, Luccarelli JW, Madva E, Nisavic M, Praschan N, Quijije NV, Beach SR, Smith FA. Neurocovid: pharmacological recommendations for delirium associated with COVID-19. Psychosomatics. 2020 Nov 1;61(6):585-96.</li> <li>Banas K, Sawchuk B. Clonidine as a treatment of behavioural disturbances in autism spectrum disorder: A systematic literature review. Journal of the Canadian Academy of Child and Adolescent Psychiatry. 2020 May;29(2):110.</li> </ul>

Pathology

<ul style="list-style-type: none"> <li>Disorders of veins &amp; Lymphatics</li> </ul>	<ul style="list-style-type: none"> <li>Define heart failure C1</li> <li>Describe the pathogenesis of right and left heart failure. C2</li> <li>Describe compensatory responses of CVS for heart failure. C2</li> <li>Describe clinical features of right and left heart failure. C2</li> <li>Describe morphology of different tissues in event of heart failure. C2</li> </ul>	
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Forensic Medicine

<ul style="list-style-type: none"><li>• Thanatology</li></ul>	<ul style="list-style-type: none"><li>• Briefly explain Scientific concepts regarding death,</li><li>• State Medico-legal aspect of Brain death</li><li>• Enlist Indicators of Death, medico-legal aspects of Sudden and unexpected deaths</li><li>• Define Cause, manner, mode and mechanisms of death</li></ul>	<p><a href="https://www.merriam-webster.com/dictionary/thanatology">https://www.merriam-webster.com/dictionary/thanatology</a> <a href="https://pubmed.ncbi.nlm.nih.gov/22375350/">https://pubmed.ncbi.nlm.nih.gov/22375350/</a></p> <p>Parikh Text Book Of Forensic Medicine Principles of Forensic Medicine by Gautam Biswas</p>
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## Week-2

### Pharmacology

Topic	Learning Objectives	References
<ul style="list-style-type: none"> <li>Novel Anti anginal drug</li> </ul>	<ul style="list-style-type: none"> <li>Discuss the newer drugs used in management of different types of Angina C2</li> </ul>	<ul style="list-style-type: none"> <li>Dutt HK, Pratik AH, Dhapola VS. Comparative Efficacy and Impact on Quality of Life with Add-on Therapy of Emerging Newer Anti Anginal Drugs in Stable Angina-A Meta-Analysis.</li> <li>Zhu H, Xu X, Fang X, Zheng J, Zhao Q, Chen T, Huang J. Effects of the antianginal drugs ranolazine, nicorandil, and ivabradine on coronary microvascular function in patients with nonobstructive coronary artery disease: a meta-analysis of randomized controlled trials. Clinical therapeutics. 2019 Oct</li> </ul>

### Pathology

<ul style="list-style-type: none"> <li>Heart failure</li> </ul>	<ul style="list-style-type: none"> <li>Define heart failure C1</li> <li>Describe the pathogenesis of right and left heart failure. C2</li> <li>Describe compensatory responses of CVS for heart failure. C2</li> <li>Describe clinical features of right and left heart failure. C2</li> <li>Describe morphology of different tissues in event of heart failure. C2</li> </ul>	
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### Forensic Medicine

<ul style="list-style-type: none"> <li>Forensic Serology</li> <li>(Trace Evidence: Blood</li> <li>Semen &amp; Saliva )</li> </ul>	<ul style="list-style-type: none"> <li>State Forensic importance of Biological specimens (Blood)</li> <li>Enumerate Methods of their collection, preservation and dispatch for common laboratory tests</li> </ul>	<p><a href="https://www.sciencedirect.com/topics/medicine-and-dentistry/forensic-serology">https://www.sciencedirect.com/topics/medicine-and-dentistry/forensic-serology</a></p> <p><a href="https://www.sjsu.edu/people/mary.juno/courses/1066/s7/ForensicSerology.pdf">https://www.sjsu.edu/people/mary.juno/courses/1066/s7/ForensicSerology.pdf</a></p> <p>Parikh Text Book Of Forensic Medicine</p> <p>Principles of Forensic Medicine by Gautam Biswas</p>
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## Week-3

### Pharmacology

Topic	Learning Objectives	References
<ul style="list-style-type: none"> <li>Current guidelines in the management of CCF</li> </ul>	<p>Explain current drug therapies used to treat heart failure C2</p>	<ul style="list-style-type: none"> <li>Berliner D, Hänselmann A, Bauersachs J. The treatment of heart failure with reduced ejection fraction. <i>Deutsches Ärzteblatt International</i>. 2020 May;117(21):376.</li> <li>Authors/Task Force Members:, McDonagh TA, Metra M, Adamo M, Gardner RS, Baumbach A, Böhm M, Burri H, Butler J, Čelutkienė J, Chioncel O. 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure: developed by the Task Force for the diagnosis and treatment of acute and chronic heart failure of the European Society of Cardiology (ESC). With the special contribution of the Heart Failure Association (HFA) of the ESC. <i>European journal of heart failure</i>. 2022 Jan;24(1):4-131.</li> </ul>

### Pathology

<ul style="list-style-type: none"> <li>Congenital heart disease</li> </ul>	<ul style="list-style-type: none"> <li>Define congenital heart diseases. C1</li> <li>Enumerate common congenital heart diseases(CHD). C1</li> <li>Describe pathogenesis of CHD. C2</li> <li>Describe Left-to-Right Shunts, Right-to-Left Shunts and Obstructive Lesions. C2</li> </ul>	
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### Forensic Medicine

<ul style="list-style-type: none"> <li>Asphxia</li> </ul>	<ul style="list-style-type: none"> <li>Detect the Anatomical, Physiological, Biochemical and</li> <li>Enlist Pathological signs of violent death; and of Mechanical, chemical and environmental asphyxia death and their medico legal implications.</li> <li>Recognize signs of violent death, mechanical, chemical and environmental asphyxia death</li> </ul>	<p><a href="https://my.clevelandclinic.org/health/diseases/24725-asphyxiation">https://my.clevelandclinic.org/health/diseases/24725-asphyxiation</a>  <a href="https://www.webmd.com/first-aid/asphyxia-overview">https://www.webmd.com/first-aid/asphyxia-overview</a>                      Parikh Text Book Of Forensic Medicine                      Principles of Forensic Medicine by Gautam Biswas</p>
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	<ul style="list-style-type: none"> <li>• State their medico legal implications.</li> </ul>	
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Week-4		
Pharmacology		
Topic	Learning Objectives	References
Management of TB in immunocompromised patients	<ul style="list-style-type: none"> <li>• Discuss the use of anti TB drugs and antiretroviral drugs in immunocompromised states C2</li> </ul>	<ul style="list-style-type: none"> <li>• Sester M. Tuberculosis in immunocompromised patients. ERS Handbook of Respiratory Medicine. 2019 Sep 1:429.</li> <li>• Bastos ML, Melnychuk L, Campbell JR, Oxlade O, Menzies D. The latent tuberculosis cascade-of-care among people living with HIV: A systematic review and meta-analysis. PLoS Medicine. 2021 Sep 7;18(9):e1003703.</li> <li>• Sterling TR, Njie G, Zenner D, Cohn DL, Reves R, Ahmed A, Menzies D, Horsburgh Jr CR, Crane CM, Burgos M, LoBue P. Guidelines for the treatment of latent tuberculosis infection: recommendations from the National Tuberculosis Controllers Association and CDC, 2020. American Journal of Transplantation. 2020 Apr 1;20(4):1196-206.</li> </ul>
Pathology		
<ul style="list-style-type: none"> <li>• Pulmonary diseases of Vascular origin</li> </ul>	<ul style="list-style-type: none"> <li>• Describe epidemiology, etiology, pathogenesis, morphology, clinical features of Pulmonary Embolism, Hemorrhage, and Infarction. C2</li> <li>• Describe epidemiology, etiology, pathogenesis, morphology, clinical features of Pulmonary Hypertension. C2</li> <li>• Describe epidemiology, etiology, pathogenesis, morphology, clinical features of Diffuse Alveolar Hemorrhage Syndrome. C2</li> </ul>	□

Forensic Medicine

<ul style="list-style-type: none"><li>• SOCIAL CRIME : Sexual Offences, Abortion, Infanticide, Child abuse</li></ul>	<ul style="list-style-type: none"><li>• Define Sexual Offences and Relevant Sections of Law (Zina and Hudood Ordinance)</li><li>• Enlist Natural and unnatural sexual offences</li><li>• Mention Criminal processes during delivery, their medico-legal aspects, Assessment procedure and reporting.</li><li>• Briefly explain Crime against New-Born, Infants and Child.</li><li>• Identify Infanticide and differentiation between live and dead born</li></ul>	<p><a href="https://ojp.gov/ncjrs/virtual-library/abstracts/offence-rape-islamic-law-pakistan">https://ojp.gov/ncjrs/virtual-library/abstracts/offence-rape-islamic-law-pakistan</a> <a href="https://reproductiverights.org/maps/provision/pakistans-abortion-provisions/">https://reproductiverights.org/maps/provision/pakistans-abortion-provisions/</a> <a href="https://www.sciencedirect.com/topics/medicine-and-dentistry/infanticide">https://www.sciencedirect.com/topics/medicine-and-dentistry/infanticide</a></p> <p>Parikh Text Book Of Forensic Medicine Principles of Forensic Medicine by Gautam Biswas</p>
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## Cardiovascular & Respiratory Module



## Integrated Modular Curriculum



## Cardiovascular & Respiratory Module – VI

Time Table 2023

Rawalpindi Medical University

Duration Of Module: 06 Weeks

Coordinator:

Dr. Filza. Ali

Co-Coordinators:

Dr. Naila Batool & Dr. Raheel Baig

Reviewed by: Module Committee

Members of module committee

Prof.Dr.Muhammad Umar	Chairman	Vice Chancellor RMU
Prof. Dr. Tahzeeb ul Hassan	Dean of Basic Sciences/Convener	Physiology Department
Prof. Dr Idrees Anwar	Dean & Member Curriculum Committee	Surgery Department
Dr. Asma Khan	Incharge 3 <sup>rd</sup> year Modular Curriculum	Pharmacology Department
Dr Omaima Asif	Overall Modular Coordinator	Pharmacology Department
Dr Attiya Munir	Focal Person	Pharmacology Department
Dr Mudassara	Focal Person	Pathology Department
Dr Gulzaib	Focal Person	Forensic Medicine Department
Dr Saima Ambreen	Focal Person	Medicine Department
Dr Huma Sabir	Focal Person	Surgery Department
Dr Afifa Kalsoom	Focal Person	Community Medicine Department
Dr Asad Shabbir	Focal Person	Pediatrics Department

Approved by: Curriculum Committee

Documented By: Dr. Filza Ali

Prepared By: Dr. Filza Ali

Tentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023

(Week 1)

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
	Clinical Clerkship			Batch	Practical	Topic of Practical	Teacher	Venue
Monday 2-11-23				Module Assessment of Haematology, Immunology and research(written)				
Tuesday 3-10-23			<b>Forensic Medicine* L-1</b>	Batch Wise Viva Haematology Module				
			Thanatology- I (Introduction & Types of death) Immediate & Early changes of death) Dr. Romana Assot Prof Dr . Filza Ali Asst Prof Venue: lectute hall 1& 2					
Wednesday 4-10-23			<b>Forensic Medicine *L-2</b>	Batch Wise Viva Haematology Module				
			Thanatology- II (Livor mortis & Rigor mortis) Dr. Romana Assot Prof Dr . Filza Ali Asst Prof Venue: lectute hall 1& 2					
Thursday 5-10-23			<b>Community Medicine * L-3</b>	Batch Wise Viva Haematology Module				
			Concept of environment & water Venue: lectute hall 1& 2					
Friday 6-10-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm			
	<b>Surgery * L-4</b>	<b>Pathology * L-5</b>	<b>Pharmacology* L-6</b>	<b>Pathology * L-7</b>	<b>CommunityMedicine*L-8</b>			
	Approach to a patient with chronic Peripheral arterial Disease Dr. Aurangzeb AP, SU II, BBH Dr. Iqbal AP, SU II, BBH Venue: lect hall 1& 2	Artherosclerosis Pathogenesis and morphology Teacher Name: Prof Mobina Ahsan Dodhy Dr Wafa Venue: lecture hall 1& 2	Anti-hypertensive I (Introduction and classification) Dr. ZuneraAssist prof Dr. Asma Khan associate prof Venue: lecture hall 1& 2	Consequences of Atherosclerosis Prof Mobina Ahsan Dodhy Dr Wafa Venue: lecture hall 1& 2	Water distribution, Conservation and purification Dr. Nargis Sr Demo Dr. Maimoona Sr. Demo Venue: lecture hall 1& 2			
Saturday 7-10-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:30am	10:30 AM – 11:00 am	11:00am – 12:00pm	12:00:pm – 01:00pm	01:00pm – 02:pm	
	<b>Medicine *L-9</b>	<b>Obstetrics *L 10</b>	<b>Pharmacology *L-11</b>	<b>BREAK</b>	<b>Community Medicine*L-12</b>	<b>Pathology ** S-1</b>	<b>Community Medicine * L-13</b>	
	Hypertension Dr. Abrar Akbar Dr.Maryam Venue lecture hall 1& 2	Hypertensive disorders in pregnancy PIH, Preeclampsia Dr.Ruqhia Sr DHQ Dr Asma khan Sr BBH Venue: lecture hall 1 & 2	Antihypertensive II ( ACE inhibitors and ARBs) Dr Attiya MunirAsst Prof Dr Sobia Assistant Prof Venue: lecture hall 1 & 2		Air and Ventilation (control of air pollution) Dr. Gulmehar AP Dr. Imran AP Venue: lecture hall 1& 2	Hypertensive Heart Disease Dr. Muddassira,Dr. Tayyaba Dr. Fatima , Dr. Aasiya	Air and Ventilation (global warming.) Dr. Gulmehar AP Dr. Imran AP Venue: lecture hall 1& 2	

**Tentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023 (Week 2)**

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
Monday 9-10-23	Clinical Clerkship	Pharmacology* L-14  Antihypertensives III (Vasodilators) Dr Attiya Assistant prof Dr Sobia Assistant prof Venue: lecture hall 1 & 2	Batch	Practical	Topic of Practical	Teacher	Venue:	
				A	Pharmacology P1	P drug and prescription of HTN	Dr Arsheen	Pharma lab
				B	Forensic Medicine P2	Cardiac Poisons	Dr. Gulzaib	Forensic lab
Tuesday 10-10-23	Clinical Clerkship	Pharmacology *L-15  Antihypertensives IV (Ca Channel Blockers) Dr. Zunera Assist Prof Dr. Asma Khan Assot Prof	Batch	Practical	Topic of Practical			
				C	Pharmacology P1	P drug and prescription of HTN	Dr Arsheen	Pharma lab
				A	Forensic Medicine P2	Cardiac Poisons	Dr. Gulzaib	Forensic lab
Wednesday 11-10-23	Clinical Clerkship	Community Medicine*L-16  Prevention of Radiation Hazards Dr. Imrana Sr Demo Dr. Abdulquddoos Demo Venue: lecture hall 1 & 2	Batch	Practical	Topic of Practical			
				C	Pharmacology P1	P drug and prescription of HTN	Dr Arsheen	Pharma lab
				A	Forensic Medicine P2	Cardiac Poisons	Dr. Gulzaib	Forensic lab
Thursday 12-10-23	Clinical Clerkship	11:10am – 12:00pm Pharmacology* L-17  Antianginal I Dr Asma Assot Prof, Dr Sobiaa Assist Prof Venue: lecture hall 1 & 2	12:00pm – 1:00pm Forensic Medicine* L-18	1:00 pm – 2:00pm Pathology ** S-2				
					Thanatology- III ( Late changes of Death Putrefaction) Dr. Romana Assot Prof Dr. Shahida Sr.Demo Venue: lecture hall 1 & 2	Pathophysiology of Angina Dr. Muddassira Dr. Tayyaba Dr. Fatima tuz Zahra Dr. Aasiya		
Friday 13-10-23	08:00am - 08:45am Medicine *L-19	08:45am – 09:30am Pharmacology *L-20	09:30am – 10:15am Pharmacology ***C-1	10:15am - 11:00am Quran Class * L-21	11:00am – 12:00pm Pathology** S-3			
	Ischemic Heart Disease Dr. Abrar Akbar Dr.Maryam Venue: lecture hall 1 & 2	Antianginal II Dr Asma Assot Prof, Dr Sobiaa Assist Prof Venue: lecture hall 1 & 2	Diuretics Dr RubinaSRDemosnstrtor, Dr Arsheen, Demosnstrtor Dr HaseebaSRDemosnstrtor, Dr OmaimaDemosnstrtor	Venue:CPC	Ischemic Heart Disease Dr. Muddassira Dr. Tayyaba Dr. Fatima tuz Zahra Dr. Aasiya2			
Saturday 14-10-23	08:00am - 08:45am Pathology *** C-2	08:45am – 09:30am Peads* L-22	09:30am – 10:30am Surgery * L-23	10:30 AM – 11:00 am BREAK	11:00am – 12:00pm Forensic Medicine * L-24	12:00:pm – 01:00pm Peads * L-25	01:00pm – 02:pm Pharmacology* L-26	
	Vasculitis Dr SyedaAyesha Dr. Fariha Sardar Dr Iqbal haider Dr. Unaiza	Cyanotic congenital heart disease Dr Hafeez SR HFH, Dr Maria SR HFH Venue: lecture hall 1 & 2	Approach to a patient with Gangrene and Amputations Dr. Nazan SR, SU II, BBH Dr. Yasmeen SR, SU I, BBH Venue: lecture hall 1 & 2		Thanatology- IV Adipocere, Mummification Estimation of time since death Dr. Romana Assot Prof Dr. Shahida Sr.Demo Venue: lecture hall 1 & 2	Acyanotic heart disease Dr Jawaria SR HFH , Dr Faiza Fayyaz SR BBH Venue: lecture hall 1 & 2	CCF I (Introduction classification Dr Attiya Assist Prof, Dr Zunera Assist Prof	



Tentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023

(Week3)

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
Monday 16-10-23	Clinical Clerkship		Pathology ** S-4	Batch	Practical	Topic of Practical	Teacher	Venue
			Aneurysms & Dissection Dr. Muddassira Dr. Tayyaba Dr. Fatima tuz Zahra Dr. Aasiya	A	Pharmacology P4	P drug and prescription of angina	Dr. uzma	Pharma lab
				B	Forensic medicine P5	Assessment of a Stain	Dr. Shahrukh	Forensic lab
Tuesday 17-10-23			Medicine* L-27	Batch	Practical	Topic of Practical		
			Rheumatic fever Dr. Abrar Akbar Dr.Maryam Venue: lecture hall 1 & 22	B	Pharmacology P4	P drug and prescription of angina	Dr. uzma	Pharma lab
				C	Forensic medicine P5	Assessment of a Stain	Dr. Shahrukh	Forensic lab
A	Pathology P6	Lipid profile and cardiac enzymes	Dr Saeed	Patho lab				
Wednesday 18-10-23			Forensic Medicine * L-28	Batch	Tumors of CVS	Topic of Practical		
			Forensic Serology Trace Evidence Blood , Semen & Saliva Dr. Romana Malik Assoct Prof Dr . Filza Ali Asst Prof Venue: lecture hall 1 & 2	C	Pharmacology P4	P drug and prescription of angina	Dr. uzma	Pharma lab
				A	Forensic Medicine P5	Assessment of a Stain	Dr. Shahrukh	Forensic lab
B	Pathology P6	Lipid profile and cardiac enzymes	Dr Saeed	Patho lab				
Thursday 19-10-23			11:10am – 12:00pm	12:00pm – 1:00pm		1:00 pm – 2:00pm		
			Pathology * L-29	Pharmacology *L-30		Medicine *L-31		
			Pathogenesis of Rheumatic Fever Morphological changes in Rheumatic Heart Disease Prof Mobina Ahsan Dodhy Dr Wafa Venue: lect hall 1 & 22	CCF II (Digoxin and related drugs): Dr Attiya, Assistant Prof Dr Zunera Assistant Prof Venue: lecture hall 1 & 2		Infective endocarditis Dr. Abrar Akbar Dr.Maryam Venue: lecture hall 1 & 2		
Friday 20-10-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm			
	Medicine *L-32	Paediatric* L-33	Pharmacology* L-34	Family MedicineL-35	Pathology * L-36			
	Valvular heart disease Dr. Aimen SR HFH , Dr. Ibrar AP HFH lecture hall 1&2	Rheumatic fever Dr Sonia SR HFH Dr Amal Hasham SR HFH Venue: lecture hall 1 & 2	Introduction to Diuretics Dr Zunera Asst Prof Dr,Asma khan Assoct Prof Venue: lecture hall 1&	IHD/CCF Dr Saadia Khan HOD Venue: lecture hall 1 & 2	Infective Endocarditis Prof Dr. Mobina Dodhy, Dr Wafa Venue: lecture hall 1 & 2			
Saturday 21-10-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:30am	10:30 AM – 11:00 am	11:00am – 12:00pm			
	Pathology***C-3	Surgery* L-37	Paediatric * L-38	Break	Pharmacology * L-39	Pharmacology * L-40	Obstetrics *L-41	
	Myocarditis and pericarditis Dr Fatima .Dr Nida, Dr. Abid, Dr. Saeed	Approach to a patient with DVT and varicose veins Dr. Amina SR, SU II, HFH Dr. Omer Qaiser SR, Surgery, DHQ,	Childhood Asthma Dr.Maryam SR HFH Dr,Irum SR HFH Venue: lecture hall 1 & 2		Antiarrhythmic drugs I (Introduction to normal rhythm and classification) Dr Asma Assot Prof , Dr SobiaaAssist Prof	Antiarrhythmic drugs II (class I and class II) Dr Asma Ass prof Dr Sobia Assist Prof Venue: lecture hall 1 & 2	Gestational diabetesmellitus Dr Ruqhia Sr DHQ Dr Asma khan Sr BBH Venue: lecture hall 1 & 2	

Tentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023

(Week 4)

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
Monday 23-10-23	Clinical Clerkship		Pharmacology* L-42	Batch	Practical	Topic of Practical	Teacher	Venue
			Antiarrhythmic drugs III(class IV and class V) Dr Asma associate prof Dr Sobia assistant prof Venue: lecture hall 1 & 2	A	Pharmacology P7	P drug and prescription of CCF	Dr Haseeba	Pharma lab
				B	Forensic medicine P8	Asphyxiants	Dr. Naila	DHQ
Tuesday 24-10-23			Forensic Medicine * L-43 Asphxia-I (Classification& Hanging) Dr. Romana Assot Prof Dr. Filza Ali Asst Prof Venue: lecture hall 1 & 2	Batch	Practical	Topic of Practical		
				B	Pharmacology P7	P drug and prescription of CCF	Dr Haseeba	Pharma lab
				C	Forensic Medicine P8	Asphyxiants	Dr. Naila	DHQ
Wednesday 25-10-23			Pathology ***C-4 Cardiomyopathies Dr. Sayed Ayesha Dr. Fariha Dr Iqbal haider Dr. Unaiza	Batch	Practical	Topic of Practical		
				C	Pharmacology P7	P drug and prescription of CCF	Dr Haseeba	Pharma lab
				A	Forensic Medicine P8	Asphyxiants	Dr. Naila	DHQ
Thursday 26-10-23			11:10am – 12:00pm Pharmacology * L-44 Antiasthmatics-I (Drug groups) Dr Asma assoc prof , Dr Sobia assist prof	12:00pm – 1:00pm		1:00 pm – 2:00pm		
				Forensic Medicine * L-45		Pharmacology***C-5		
Friday 27-10-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm			
	Pathology * L-46	Pharmacology * L-47	Surgery* L -48	Forensic Medicine)* L-49	Medicine* L-50			
	Chronic bronchitis and emphysema Prof Dr.Mobina Ahsan Dodhy , Dr Wafa Lecture 1&2	Antiasthmatics -II (Classification) Dr Asma Assot Prof , Dr Sobia Assist Prof Venue: lecture hall 1& 2	Approach to a patient with lymphedema Dr. Waqas Hassan SR,HFH Dr. Samra , Sr, DHQ Venue: lect hall 1&2	Asphxia – III (Suffocation) Dr. Romana Assot Prof Dr. Filza Ali Asst Prof Venue: lecture hall 1 & 2	Asthma, COPD Dr. Abrar Akbar Dr.Maryam Venue: lec hall 1& 2			
Saturday 28-10-23	08:00am - 08:45am	08:45am – 09:30am		10:30 AM – 11:00 am	11:00am – 12:00pm	12:00:pm – 01:00pm	01:00pm – 02:pm	
	Surgery * L-51	Surgery * L-52	Pharmacology **S-1	BREAK	Forensic medicine * L-53	Pathology** S-5	Pathology*L-54	
	Approach to a patient with cardiac diseases. (Cardiac surgery) Dr. Qasim SR, S U II, HFH Dr. Asifa Diyan SR, Su I, BBH Venue: lecture hall 1&2	Approach to a patient with Chest trauma and its management Dr. Huma Sabir Khan AP, SU II, BBH Dr. Rahat AP, Surgery, BBH Venue: lecture hall 1,2	Anti tussive drugs Dr RubinaSr semonstrator DrArsheen.,Demonstrater Dr HaseebaSr demonstrator Dr Oaima demonstrator Venue: See Anexure		Asphxia – IV (Drowning) Dr. Romana Assot Prof Dr. Filza Ali Asst Prof Venue: lecture hall 1 & 2	Tumors of CVS Dr. Muddassira Dr. Tayyaba Dr. Fatima tuz Zahra Dr. Aasiya	Asthma & Bronchiectasis Prof Mobina Ahsan Dodhy , Dr Wafa Lecture 1&2 hall1&2	

Tentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023

(Week5)

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
Monday 30-10-23	Clinical Clerkship		Forensic medicine * L-55	Batch	Practical	Topic of Practical		
			Sexual Offences (Rape & Sodomy) Dr.Filza Ali Asst Prof Dr. Gulzaib Sr Demo Venue: lecture hall 1, 2	A	Pharmacology P10	P drug and prescription of asthma and TB	Dr Omiamia	Pharma lab
				B	Forensic Medicine P11	Assessment of a Rape victim	Dr Raheel	DHQ
				C	Pathology P12	Morphology of lung leisons	Dr Abid	Patho lab
Tuesday 31-10-23			Forensic Medicine * L-56	Batch	Practical	Topic of Practical		
			Medico-legal aspects of Pregnancy ,Delivery and Abortion Dr. Romana Assoct Prof Dr.Filza Ali Asst Prof Venue: lecture hall 1, 2	B	Pharmacology P10	P drug and prescription of asthma and TB	Dr Omiamia	Pharma lab
				C	Forensic Medicine P11	Assessment of a Rape victim	Dr. Raheel	DHQ
				A	Pathology P12	Morphology of lung leisons	Dr Abid	Patho lab
Wednesday 1-11-23			Forensic Medicine *L-57	Batch	Practical	Topic of Practical		
			Medico-legal aspects of Infanticide child abuse Battered child & wife Dr. Romana Assoct Prof Dr. Shahrukh Sr. Demo Venue: lecture hall 1, 2	C	Pharmacology P10	P drug and prescription of asthma and TB	Dr Omiamia	Pharma lab
				A	Forensic Medicine P11	Assessment of a Rape victim	Dr. Raheel	DHQ
				B	Pathology P12	Morphology of lung leisons	Dr Abid	Patho lab
Thursday 2-11-23			11:10am – 12:00pm	12:00pm – 1:00pm		1:00 pm – 2:00pm		
			Forensic Medicine* L-58	Pathology** S-6		Family Medicine*L-59		
			Custodial Torture Dr. Romana Assoct Prof Dr.Filza Ali Asst Prof Venue: lecture hall 1, 2	Interstitial lung disease Dr. Muddassira Dr. Tayyaba Dr. Fatima tuz Zahra Dr. Aasiya Venue: lect hall 1 & 2		Bronchial Asthma Dr Saadia Khan HOD Venue: lect hall 1 & 2		
Friday 3-11-23	08:00am - 08:45am	08:45am - 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm			
	Medicine* L-60	Pathology** S-7	Paediatrics *L-61	Forensic Medicine*L-62	Pathology** S-8			
	Pleural effusion Dr. Abrar Akbar/ Dr. Maryam Venue: lecture hall 1& 2	Acute Pulmonary infections Dr. Muddassira Dr. Tayyaba Dr. Aasiya Dr. Fatima tuz Zahra	Pneumonia Dr Uzma SR BBH Dr.Afrah SR BBH Venue: lecture hall 1 & 2	Barbiturates & Hypnotics Dr. Shahida Sr.Demo Dr. Naila Sr Demo Venue: lecture hall 1, 2	Chronic Pulmonary infections Dr. MuddassiraDr. Tayyaba Dr. Fatima , Dr. Aasiya			
Saturday 4-11-23	08:00am - 08:45am	08:45am - 09:30am	09:30am – 10:30am	10:30 AM – 11:00 am	11:00am – 12:00pm	12:00:pm – 01:00pm	01:00pm – 02:pm	
	Pathology *L-63	Pathology ***C-6	Paediatrics *L-64	BREAK	Pharmacology *L-65	Surgery *L-66	Medicine *L-67	
SEMINAR	TUBERCULOSIS Prof Dr. Naeem Venue: CPC Hall	Squamous cell Carcinoma Dr Fatima ,Dr Nida, Dr. Abid Dr. Saeed Venue: CPC Hall	Croup Dr Saima Dr Mamona Quadrat Venue: lecture hall 1 & 2		Anti TB drugs I & II Dr AttiyaAssistant prof , Dr Zunera assistant prof Venue: lecture hall 1,2	Approach to benign Diseases of the Thorax Dr. ZafarAP, DHQ Dr. AtifAP,HFH Venue: lecture hall 1,2	Seminar on TB Dr. Abrar Akbar/ Dr.Maryam Venue: lecture hall 1 &2	

Ttentative Time Table 3<sup>rd</sup> Year MBBS – CVS Module 2023 (Week 6)

DATE / DAY	8:00 AM – 9:30 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM
	Clinical Clerkship			
Monday 6-11-23			Block- III (Haematology & CVS Module) Theory Exam	
Tuesday 7-11-23				BLOCK - III OSPE & VIVA
Wednesday 8-11-23				BLOCK - III OSPE & VIVA
Thursday 9-11-23				BLOCK - III OSPE & VIVA
Friday			PREP- LEAVE	

## Teaching Hours

SR No.	Disciplines	LGIS	SGD	CBL	SDL	Seminar	Hours
1.	Pharmacology	13	1	2	0	2	18
2.	Pathology	06	08	4	0	1	19
3.	Forensic Medicine	14	0	0	0	0	14
4.	Community Medicine	5	0	0	0	0	5
5.	Medicine	8	0	0	0	1	9
6.	Paeds	5	0	0	0	1	6
7.	Surgery	6	0	0	0	1	7
8.	obstetrics	2	0	0	0	0	2
	Total						

Disciplines	Practical hours
Pharmacology	2x4= 8
Pathology	2x4 =8
Forensic Medicine	2x4 = 8

- LGIS (L) \*
- SGD (S) \*\*
- CBL (C) \*\*\*'
- SDL (SL) \*\*\*\*

❖ For CBL/SGDs, whole class will be divided into 04 batches

Batch: A = Lecture Hall 01 (starting from batch A1 to A3)

Batch: C = Lecture Hall 06 (starting from batch B3, B4, B5, C1)

Batch: B = Lecture Hall 02 (starting from batch A4, A5, B1,B2)

Batch: D = Pharmacy Lab (starting from batch C2 to C5)

The batch distribution & venues for whole year are fixed with no change except for extra ordinary situation.

## Venues for Academic Sessions

3<sup>rd</sup> Year MBBS

- Large Group Interactive Sessions (LGIS)

Odd roll numbers: Lecture Hall 01

Even roll numbers: Lecture Hall 02

- Small Group Discussion (SGD) /Case Based Learning (CBL)

Lecture Hall 01

Lecture Hall 02

Lecture Hall 06

Pharmacy Lab

In case of non-availability of these venues, CPC will be used for two batches

The batch distribution & venues for whole year are fixed with no change except for extra ordinary situations.

Rawalpindi Medical University Rawalpindi

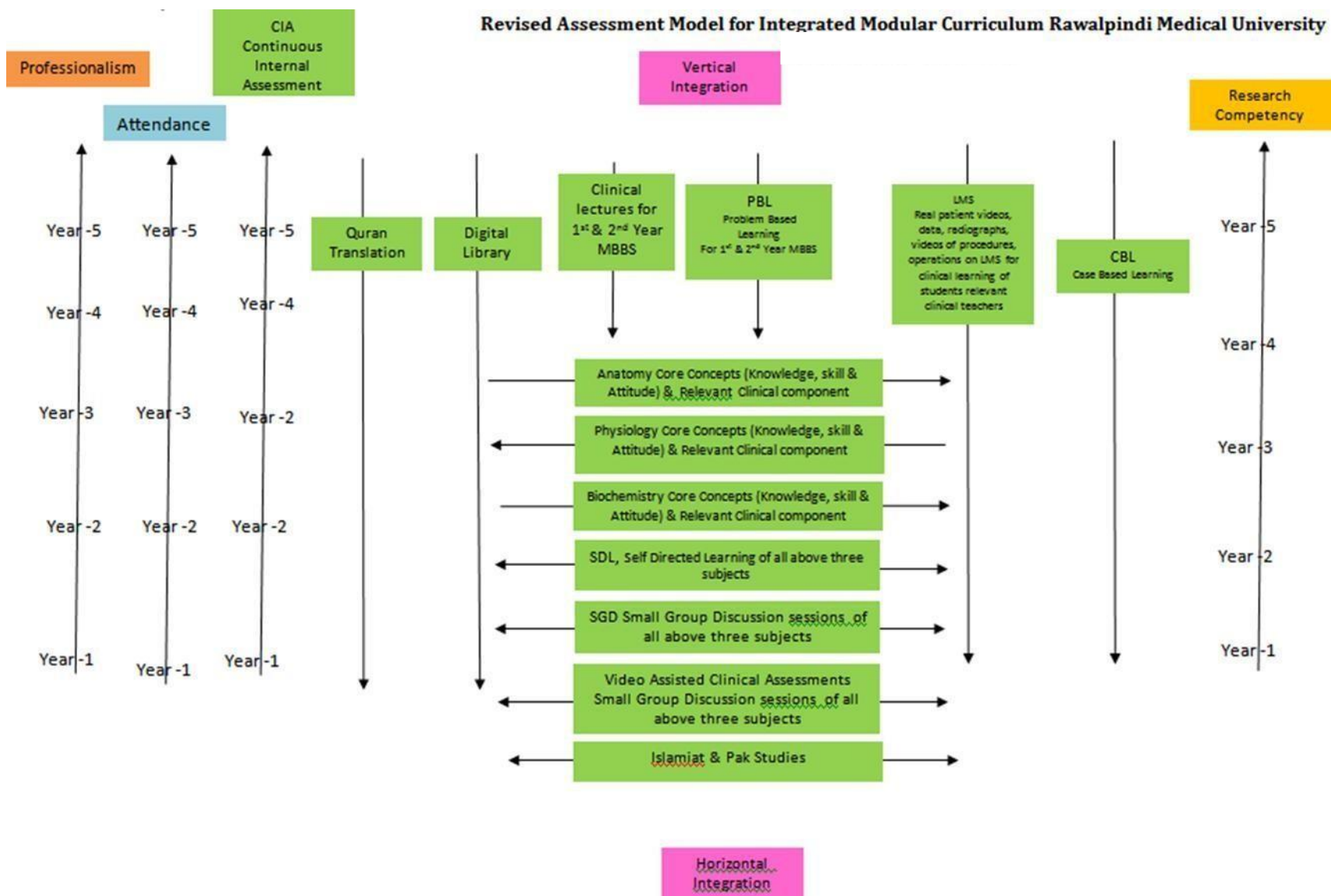
## Section IV

### - Assessment Policies

#### Contents

- Assessment plan
- Types of Assessment:
- Modular Assessments
- Block Assessment
- Table 4: Assessment Frequency & Time in Foundation Module

## Section IV: Assessment Policies



**Gauge for Continuous Internal Assessment (CIA)**

Red Zone	High Alert	Yellow Zone	Green Zone	Excellent	Extra Ordinary
0 - 25%	26 - *50%	51 - 60%	61 - 70%	71 - 80%	81 - 100%

\*50% and above is Passing Marks.

**Gauge for attendance percentage**

Red Zone	High Alert	Yellow Zone-1	Yellow Zone-2	Green Zone	Excellent
0 - 25%	26 - 50%	51 - 60%	61 - 74%	*75 - 80%	81 - 100%

\*75% is eligibility criteria for appearing in professional examination.



## Assessment plan

University has followed the guidelines of Pakistan Medical and Dental Council for assessment. Assessment is conducted at the mid modular, modular and block levels.

### Types of Assessment:

The assessment is formative and summative.

#### Formative Assessment

Formative assessment is taken at modular (2/3<sup>rd</sup> of the module is complete) level through MS Teams. Tool for this assessment is best choice questions and all subjects are given the share according to their hour percentage.

#### Summative Assessment:

Summative assessment is taken at the mid modular (LMS Based), modular and block levels.

### Modular Assessment

#### Theory Paper

There is a module Assessment at the end of first module of each block. The content of the whole teaching of the module are tested in this Assessment.

It consists of paper with objective type questions and structured essay questions. The distribution of the questions is based on the Table of Specifications of the module. (Annexure I attached)

#### Viva Voce:

Structured table viva voce is conducted including the practical content of the module.

### Block Assessment

On completion of a block which consists of two modules, there is a block Assessment which consists of one theory paper and a structured viva with OSPE.

#### Theory Paper

There is one written paper for each subject. The paper consists of objective type questions and structured essay questions. The distribution of the questions is based on the Table of Specifications of the module.

#### Block OSPE

This covers the practical content of whole block.

Table 4-Assessment Frequency & Time in Foundation Module II

Block	Module – 2		Type of Assessments	Total Assessments Time			No. of Assessments	
	Sr #	Foundation Module Components		Assessment Time	Summative Assessment Time	Formative Assessment Time		
Block-I	1	Mid Module Assessments LMS based (Pharmacology, Pathology, Forensic Medicine, Medicine, Surgery, Peads, Family Medicine, Research)	Summative	30 Minutes	7 hours	30 Minutes	1 Formative	5 Summative
	2	Topics of SDL Assessment on MS Team	Formative	10 Minutes (Every Friday)				
	3	End Module Assessments (SEQ & MCQs Based)	Summative	6 Hours				
	4	Pharmacology Structured and Clinically Oriented Viva	Summative	10 Minutes				
	5.	Forensic Medicine Structured and Clinically oriented Viva	Summative	10 Minutes				
	5	Pathology Structured & Clinically oriented Viva	Summative	10 Minutes				

## Learning Resources

Subject	Resources
	1.
Pathology/Microbiology	Text Books 1. Robbins & Cotran, Pathologic Basis of Disease, 10 <sup>th</sup> edition. 2. Rapid Review Pathology, 5 <sup>th</sup> edition by Edward F. Goljan MD. 3. <a href="http://library.med.utah.edu/WebPath/webpath.html">http://library.med.utah.edu/WebPath/webpath.html</a>
Pharmacology	Text Books 1. Basic and Clinical Pharmacology by Bertram Z. Katzung 15th Edition 2. Goodman and Gillmans The Pharmacological basics of Therapeutics, 13th Edition
Forensic Medicine	Text Books 1. Parikh Text Book of Medical Jurisprudence Forensic Medicine & Toxicology Edition 9
Medicine	Text Books Davidsons Textbook of Medicine
Surgery	Text Books Balley & Love textbook of surgery
Research	Digital library

## SECTION VI

**Table of Specification (TOS) For CVS & Resp Module Assessment for 3rd Year MBBS**

Sr. #	Discipline	No. of MCQs (%)	No. of MCQs according to cognitive domain			No. of SEQs (%)		No. of SEQs according to cognitive domain			Viva voce	OSPE Marks	Total Marks
			C1	C2	C3	No. of items	Marks	C1	C2	C3			
1.	Pharmacology	15	2	9	4	7	35	2	4	1	30	20	100
2.	Forensic Medicine	15	4	9	3	5	25	2	2	1	10	0	50
3.	Pathology	25	2	5	3	7	35	2	4	1	40	10	100
4.	Family Medicine	5	1	2	1	0	0	0	0	0	0	0	5
6.	Research	5	0	3	2	0	0	0	0	0	0	0	5
7.	Medicine	5	1	3	1	0	0	0	0	0	0	0	5
8.	Surgery	5	1	3	1	0	0	0	0	0	0	0	5
9.	Peads	5	2	2	1	0	0	0	0	0	0	0	5
<b>Grand Total</b>											<b>275</b>		

## Annexure I

(Sample MCQ & SEQ papers with analysis)



RAWALPINDI MEDICAL UNIVERSITY  
DEPARTMENT OF PATHOLOGY  
RMU & Allied Hospitals

SEND-UP EXAMINATION 2022  
3<sup>rd</sup> Year MBBS

MCQs PAPER

BLOCK-I

ROLL NO. \_\_\_\_\_

Date: --- -- --  
Time: --:--

Total Marks: 55  
Time Allowed: 60min

1. A 29-year man comes to a resident surgeon for removal of plaster cast. The patient states that the plaster was applied due to fracture of his left femoral bone 8 weeks ago. After removal of the cast the resident notices that the diameter of the left calf has decreased in size as compared to the right one. What is the cause of this observation?

- A. Aplasia
- B. Atrophy
- C. Dystrophy
- D. Dysplasia
- E. Hypoplasia

CORE C2 CELLULAR ADAPTATIONS

2. A 22-year college student developed marked right lower abdominal pain over the past day. On physical examination there is rebound tenderness on palpation at the right iliac fossa. Laparoscopic surgery was performed, and the appendix was found to be swollen, erythematous, and partly covered by a yellowish exudate. Which one of the following best describes the process?

- A. Acute inflammation
- B. Granuloma formation
- C. Chronic inflammation
- D. Tissue necrosis
- E. Fibrosis and repair

VERTICAL INTEGRATION SURGERY C2 INFLAMMATION

3. A 34 years man presented with complains of productive cough, low grade fever and weight loss for last 6 months. After investigation he has been diagnosed as having pulmonary tuberculosis. What are the two main cell types involved in this inflammatory disease?

- A. Basophils and Macrophages
- B. Macrophages and Lymphocytes
- C. Eosinophils and neutrophils
- D. Neutrophils and lymphocytes
- E. Basophils and neutrophils

CORE INFLAMMATION C2

4. A 35-year woman takes acetylsalicylic acid (aspirin) for arthritis. The aspirin therapy alleviates her pain mainly through reduction in the synthesis of which of the following mediators?

- A. Complement C1q
- B. Histamine
- C. Leukotriene E4
- D. Nitric oxide
- E. Prostaglandins

HORIZONTAL INTEGRATION PHARMACOLOGY C1 INFLAMMATION

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15/11/22

## Detailed Analysis of Sample of MCQs Paper

Level of Cognition	Question No	Total	Percentage
C1	4, 13, 19, 26, 27, 36, 47, 51, 54	09	16%
C2	1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 20, 22, 23, 25, 28, 29, 30, 32, 33, 34, 40, 41, 42, 43, 45, 46, 48, 49, 50, 52, 53, 55	38	69%
C3	21, 24, 31, 35, 37, 38, 39, 44	08	15%

Type of Integration	Question No	Total	Percentage
Core	1, 3, 6, 7, 9, 10, 11, 12, 13, 14, 15, 16, 19, 26, 27, 28, 29, 30, 32, 33, 34, 36, 37, 39, 40, 41, 42, 43, 46, 47, 48, 49, 51, 53	34	62%
Horizontal	4, 17, 24, 38, 52	05	9%
Vertical	2, 18, 21, 25, 31, 44, 50	07	13%
Spiral	5, 8, 20, 23, 45, 54	06	11%
Research & medical ethics	22, 35, 55	03	5%

*Mobina Ahsan Dodhy*  
15/11/22

**Prof. Mobina Ahsan Dodhy**  
Chairperson Pathology Department  
Rawalpindi Medical University

*Qureshi*  
19/12/22

**Assistant Director**  
Department of Medical Education  
Rawalpindi Medical University

*[Signature]*  
29/12/22

**Vice Chancellor**  
Rawalpindi Medical University  
Rawalpindi

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**RAWALPINDI MEDICAL UNIVERSITY**  
**DEPARTMENT OF PATHOLOGY**  
 RMU & Allied Hospitals

**Haematology Immunology & Research Module Assessment**  
 3<sup>rd</sup> Year MBBS  
**SEQs PAPER**

ROLL NO. \_\_\_\_\_

Date: 07<sup>th</sup> November 2022  
 Time Allowed: 45min

Total Marks: 35  
 Time: 12:00noon

**Q1.** A 3 years boy presents with failure to thrive, repeated infections, lethargy and pallor. Mother gives history of consanguineous marriage. His elder sister is on regular transfusion. Physical examination of the boy shows Pallor, frontal bossing and hepatosplenomegaly. His CBC reveals Hb3.4 g/dL, MCV 52 fl, MCH 18 pg with normal WBC and platelet count.

- What is the most likely diagnosis? 01
- What further tests you would like to perform to confirm diagnosis? 02
- What advice you would give to the parents of this child? 02

**Q2.** A 65-years man presents to clinic with fatigue, night sweats, and lethargy of 6 months duration. He tells you that he has experienced 10 lb weight loss over that period. On physical examination, the spleen is palpable 6 cm below the costal margin, the rest of his examination is normal. Laboratory testing is remarkable for leukocytosis (85 X 10<sup>9</sup>/L) and an elevated lactate dehydrogenase level. A complete spectrum of myeloid cells is seen in the peripheral blood with bimodal peak of neutrophils and myelocytes. There is also increased number of basophils.

- What is the most probable diagnosis? 01
- Briefly discuss the underlying genetic mutation. 2.5
- Enumerate the phases of this disease. 1.5

**Q3.** A 30 years female with history of easy bruising and increased menstrual flow was evaluated for a bleeding disorder. She was diagnosed with immune thrombocytopenic purpura (ITP).

- Discuss Peripheral film and Bone marrow examination findings. 2.5
- Enlist the causes of thrombocytopenia. 2.5

**Q4.** A 47 years woman presented in basic health unit of district Jehlum with complains of fatigue and repeated infections. Physical examination shows scattered bruises on body. Her laboratory investigations reveals Hb 7.3 g/dL, WBC 174 x 10<sup>9</sup>/L and platelet count is 24 x 10<sup>9</sup>/L. Pathologist reports 90% blast cells on peripheral film.

- Briefly compare the morphology of lymphoblast and myeloblast? 02
- Which cytochemical stain helps to differentiate between lymphoblast and myeloblast? 01
- Give any two cytogenetic abnormalities seen in Acute myeloid leukemia. 02

**Q5.** A renal transplant recipient experiences gradual rise of creatinine in 10-month time period despite immunomodulatory drugs. He states that he was alright and all his lab results were normal for few months after the transplant but then his condition deteriorated slowly.

- Which type of graft rejection is this? 01
- Classify different types of grafts on the basis of type of donor. 02
- Differentiate between direct and indirect graft antigen recognition 02

**Q6.** A physician is suspecting Hepatitis B in a patient in the ward. The laboratory performs a rapid kit test but the physician has asked them to perform ELISA for confirmation as it is based on specific antigen antibody reaction technique.

- Enlist 4 the different types of antigen antibody reactions 02
- Enumerate 3 types of ELISA with the underlying principle in each 03

**Q7.** A 45 years female presented with painless diffuse enlargement of thyroid gland. Her thyroid function test shows decreased T3 and T4 levels and she is positive for circulating antithyroid antibodies.

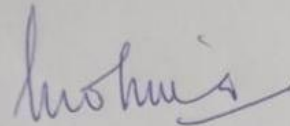
- What is your most likely diagnosis? 01
- Enumerate 3 types of autoimmune diseases? 01
- What is the underlying mechanism of autoimmune tolerance? 01

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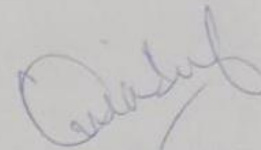


## Detailed Analysis of SEQs Paper

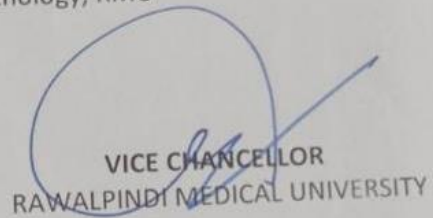
Levels of cognition	Question number	Total	Percentage
C1	5b,6a and 7c	3	16%
C2	2b, 2c, 3b, 4a, 4b, 5c, 6b and 7b	8	42%
C3	1a, 1b, 1c, 2a, 3a, 4c, 5a and 7a	8	42%



**PROF. MOBINA AHSAN DODHY**  
Chairperson, Department of Pathology, RMU



**ASSISTANT DIRECTOR**  
Department of Medical Education, RMU



**VICE CHANCELLOR**  
RAWALPINDI MEDICAL UNIVERSITY

ANNEXURE II

**Time Table 3<sup>rd</sup> year MBBS (Session 2020-2021)**

**Clinical Teaching and Training Posting ----- From 08-02-2023 to 15-10-2023**

Dates		MEDICINE					SURGERY + TRAUMA				
		HFH Unit-I	HFH Unit-II	BBH Unit-I	BBH Unit-II	DHQ	HFH Unit-I	HFH Unit-II	BBH Unit-I	BBH Unit-II	DHQ
<u>S.P.W</u> <u>S.P.V</u>	08-02-2023 To 30-04-2023	A1	A2	A3	A4	A5	B5	B4	B3	B2	B1
<u>S.V</u>	01-05-2023 To 06-08-2022	C1	C2	C3	C4	C5	A5	A4	A3	A2	A1
	07-08-2023 To 15-10-2023	B1	B2	B3	B4	B5	C5	C4	C3	C2	C1

**MISCELLANEOUS**

	8-2-23 To 19-2-23	20-2-23 To 5-3-23	6-3-23 To 19-3-23	<u>S.P.W</u> 20-3-23 To 9-4-23	<u>S.P.V</u> 10-4-23 To 30-4-23	1-5-23 To 14-5-23	15-5-23 To 28-5-23	29-5-23 To 11-6-23	12-6-23 To 25-6-23	<u>S.V</u> 26-6-23 To 6-8-23	7-8-23 To 20-8-23	21-8-23 To 3-9-23	4-9-23 To 17-9-23	18-9-23 To 1-10-23	2-10-23 To 15-10-23
<b>Pathology</b>	C1	C2	C3	C4	C5	B1	B2	B3	B4	B5	A1	A2	A3	A4	A5
<b>Psychiatry</b>	C5	C1	C2	C3	C4	B5	B1	B2	B3	B4	A5	A1	A2	A3	A4
<b>Radiology</b>	C4	C5	C1	C2	C3	B4	B5	B1	B2	B3	A4	A5	A1	A2	A3
<b>Skill Lab</b>	C3	C4	C5	C1	C2	B3	B4	B5	B1	B2	A3	A4	A5	A1	A2
<b>E.R</b>	C2	C3	C4	C5	C1	B2	B3	B4	B5	B1	A2	A3	A4	A5	A1

> Tentative Holidays

Sports Week (S.P.W)	12-03-2023	TO	19-03-2023
Spring Vacations (S.P.V)	24-04-2023	TO	30-04-2023
Summer Vacations (S.V)	03-07-2023	TO	30-07-2023

No T-9/ 544 RMU, RWP. Dated 04-02 /2023

- Copy to all Concerned Departments

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