



Third Year MBBS 2023

Study Guide

GIT, Hepatobiliary & Parasitology Module

Table of Contents

GIT and parasitology Module Team	3
University Moto, Vision, Values & Goals	4
Module - GIT and parasitology Module	5
Section I -	
Terms & Abbreviations	6
Teaching and Learning Methodologies / Strategies	7
Section II-	
Learning Objectives, Teaching Strategies & Assessments	8
Clinically Integrated Learning Objectives.....	9
Self-Directed Learning (SDL)	10
Section III:	
Teaching strategy & Learning Objectives	11
Integrated Modular Timetable.....	32
Teaching hours Summary	42
Venues for Academic Session	43
Section IV:	
Assessment Policies.....	44
Assessment plan	46
Types of Assessment:	47
Learning Resources	48
SECTION V:	
Date of GIT module assessment	49
Table of Specification (TOS) For GI MODULE 3rd year MBBS Modules during running academic session.....	50
Annexure I	51
(Sample MCQ & SEQ papers with analysis).....	45
Annexure II	
Clinical Clerkship Model.....	49

GIT, Hepatobiliary & Parasitology Module Team

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 Duration of module : 05/ 06 Weeks
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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 – GIT, Hepatobiliary and Parasitology

Introduction: GI and parasitology module provides integration of core concepts that underlie the basic science/pathology of GI diseases and their use in clinical medicine. This will eventually lead to develop critical thinking for integration and application of basic knowledge for clinical application.

Rationale: The GI and parasitology module is designed to impart basic knowledge about Pharmacology, Pathology, Forensic Medicine, Community Medicine, family medicine & Surgery. This knowledge will serve as a base on which the student will construct further knowledge about the etiology, pathogenesis and prevention of diseases; the principles of their therapeutics and management.

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
- Professionalism/ Communication Skills
- Use technology based medical education including 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 4 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.

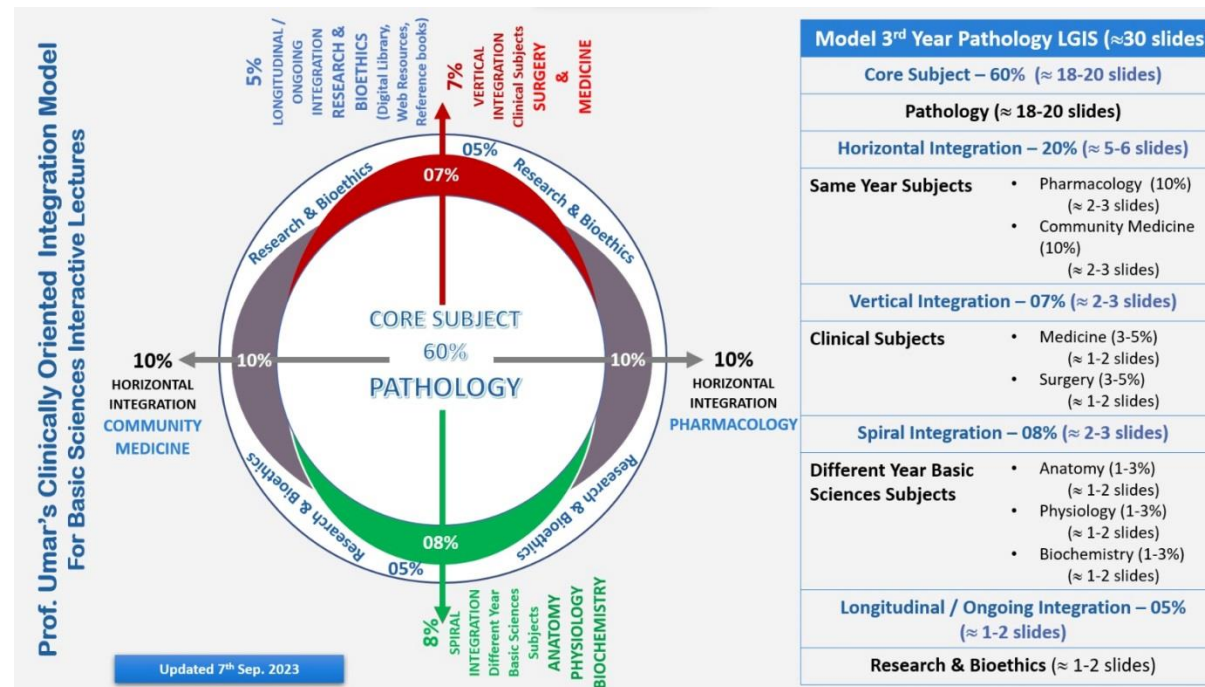


Figure 1. Prof Umar's Model of Integrated Lecture

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)	5 minutes
Step 3	Students divided into groups of three and allocation of learning objectives	5 minutes
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	30 min
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), website
- 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						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L1	Revision of Anatomy	Revision	<ul style="list-style-type: none"> Describe the general organization and topography of Gastrointestinal tract. Explain abdominal wall, peritoneum and viscera of Gastrointestinal tract. Discuss neurovascular organization and lymphatic drainage of Gastrointestinal tract. 	C2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Describe Causes and pathological features of Inflammatory/ reactive Lesions of oral cavity . 	C2		
			<ul style="list-style-type: none"> Explain oral Manifestations of Systemic Disease with examples. Explain causes and pathogenesis of Precancerous and Cancerous Lesion. Discuss epidemiology, pathogenesis morphology of Squamous Cell Carcinoma. 	C2		
L2	Oral Cavity & Salivary Gland Pathology	Pathology	<ul style="list-style-type: none"> Classify salivary gland non neoplastic lesions. Discuss Xerostomia and Sialadenitis. 	C2	SGD	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Classify salivary gland tumors. Describe the clinical presentation of salivary gland tumors Discuss the morphological features of salivary gland tumors. Differentiate between morphological features of Pleomorphic adenoma, Warthin tumor, Mucoepidermoid Carcinoma. 	C2		
C1	Salivary Gland Tumor	Pathology	<ul style="list-style-type: none"> Classify anti-emetics. 	C3	CBL	PBQS
			<ul style="list-style-type: none"> Describe the mechanism of action of Metoclopramide. 	C2		
			<ul style="list-style-type: none"> Describe the uses & adverse effects of Metoclopramide. 	C2		
L3	Antiemetic drugs	Pharmacology	<ul style="list-style-type: none"> Describe mechanism of action and adverse effects of other anti-emetics (5HT3 antagonists, H1 antagonists & hyoscine). 	C2	LGIS	MCQs SEQs VIVA

L4	Hyperemesis gravidarum	Gynaecology	<ul style="list-style-type: none"> Define hyperemesis Enlist cause of hyperemesis. Enumerate Complications of Hyperemesis Know the Principles of management 	C1 C1 C2 C2	LGIS	MCQs SEQs VIVA
L5	Tilawate Quran	Quran Class				
L6	Approach to a patient with dysphagia Students will be able to	Surgery	<ul style="list-style-type: none"> Define dysphagia Enlist causes of dysphagia Understand approach to diagnosis and investigations in a patient of dysphagia Briefly outline surgical management of dysphagia (especially achalasia cardia, hiatal hernia, malignancy, corrosive strictures) 	C2 C2 C3 C2 C2	LGIS	MCQs SEQs VIVA
L7	Introduction, Symptoms and Analysis of GI Investigation	Medicine	<ul style="list-style-type: none"> Discuss different symptoms of gastrointestinal disease and their differential diagnosis. Discuss relevant qualifications in history of common presentations in Gastroenterology. Describe important investigations (e.g. endoscopy) in gastroenterology and their indications and interpretation of results. Acquire accurate history from symptoms. 	C2 C2 C2 A2	LGIS	MCQs SEQs VIVA
C2	Anti emetic drugs	Pharmacology	<ul style="list-style-type: none"> Interpret clinical pharmacology of drugs used for vomiting. 	C3	CBL	PBQS
S1	Introduction to parasitology	Pathology	<ul style="list-style-type: none"> Define and Differentiate between, Definitive host, Intermediate host, Vector, Carrier state, Reservoir, Symbiosis, Mutualism, Forms in which parasites exist. Classify medically important parasites. 	C2 C2	SGD	MCQs SEQs VIVA
L8	Neoplastic lesions of esophagus	Pathology	<ul style="list-style-type: none"> Describe etiology, pathogenesis and morphological features of Reflux Esophagitis, Esophageal Varices, Barrett's Esophagus. enlist the risk factors for carcinoma of esophagus. Classify different types of esophageal tumors on the basis of morphology. correlate the pathogenesis of Barrett's esophagitis with GERD 	C2 C2 C3 C3	SGD	MCQs SEQs VIVA

Week 2						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
			<ul style="list-style-type: none"> Define dyspepsia. 	C1		
L9	Approach to patient with dyspepsia	Medicine	<ul style="list-style-type: none"> Describe pathophysiology of gastric acid secretion. Describe and discuss different clinical presentations and treatment options for dyspepsia. 	C2	LGIS	MCQs SEQs VIVA
L10	Types of gastritis and gastropathies	Pathology	<ul style="list-style-type: none"> Differentiate between etio-pathogenesis and morphological features of gastropathy and Acute Gastritis, Chronic Gastritis. Differentiate morphological features of Helicobacter pylori Gastritis and Autoimmune Gastritis. <p>Explain causes, Pathogenesis and morphological features of Ménétrier Disease and Zollinger-Ellison Syndrome.</p>	C3C3C2	SGD	MCQs SEQs VIVA
L11	H.Pylori Gastritis and Peptic Ulcer	Pathology	<ul style="list-style-type: none"> Correlate pathogenesis of Peptic ulcer disease with its morphology and clinical presentation. Correlate the etiology & pathogenesis of Helicobacter pylori-associated chronic gastritis with clinical presentation. <p>Enlist the complications and other diseases caused by H Pylori infection.</p>	C3 C3 C1	LGIS	MCQs SEQs VIVA
L12	Drugs Used in Peptic Ulcer (H2 receptor antagonist)	Pharmacology	<ul style="list-style-type: none"> Classify drugs used in the treatment of Peptic Ulcer. Describe the mechanism of action of antacids used in the treatment of Peptic Ulcer. Describe the adverse effects of antacids. Describe the mechanism of action of H2 receptor blockers. Describe the adverse effects of H2 Receptor Blockers. Tabulate differences between cimetidine & other H2receptor blockers. 	C1 C2C3C2 C2C4	LGIS	MCQs SEQs VIVA
L13	Intestinal cestodes	Pathology	<ul style="list-style-type: none"> Classify the cestodes. Describe morphological features of cestodes. Enlist diseases caused by each type Describe life cycle of these parasites. Explain transmission, epidemiology and Pathogenesis of 	C2 C2 C2 C2	CBL	PBQS

			diseases caused by them. <ul style="list-style-type: none"> Explain the diagnosis on the basis of clinical features and laboratory findings. Describe treatment and prevention.	C2 C2C2		
L14	Analgesics	Forensic medicine & toxicology	<ul style="list-style-type: none"> Describe the types of Analgesics used commonly as self harm Describe the clinical presentation of analgesic intoxication Describe the Medicolegal and forensic importance of analgesic intoxication. Describe the management of acute analgesic intoxication in general.	C2 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
P1	Introduction to P drugs and prescription writing in hyperemesis gravidarum	Pharmacology	<ul style="list-style-type: none"> illustrate P drug & prescription writing for motion sickness illustrate P drug & prescription writing for VOMITING IN PREGNANCY	P1 P1	PRACTICAL	OSPE
P2	Organophosphorus Compounds	Forensic medicine and toxicology	<ul style="list-style-type: none"> Describe the physical properties of Organophosphorus compounds. Describe mechanism of action in humans. Describe the clinical features of Organophosphorus compounds poisoning and its management. Describe the Medicolegal importance of Organophosphorus compounds poisoning. Describe the autopsy findings of Organophosphorus compounds poisoning. Identify specimen of Organophosphorus compounds.	C2 C2 C2 C2 P3	PRACTICAL	OSPE
P3	Salivary tumor, CA esophagus, peptic ulcer, CA stomach	Pathology	<ul style="list-style-type: none"> Recognize and draw histopathological features of pleomorphic adenoma of parotid gland. Describe the pathological features of gastric ulcers and carcinoma of esophagus and stomach. Identify the slides and recognize two points of identification of pleomorphic adenoma, CA stomach and CA esophagus.	C2 C2 P3	PRACTICAL	OSPE

Week 3						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L15	Drugs used in peptic ulcer (Proton pump inhibitors)	Pharmacology	<ul style="list-style-type: none"> Describe the mechanism of action of Proton Pump Inhibitors. Describe adverse effects of PPIs. Discuss the mechanism of action of Mucosal protective agents. Discuss adverse effects of Mucosal protective agents. Discuss the drugs used for eradication of H. Pylori infection. Identify gross and microscopic images of gastric adenocarcinoma. 	C2 C2 C2 C2 C2 P3	LGIS	MCQs SEQs VIVA
S2	Drug used in acid peptic disorders	Pharmacology	<ul style="list-style-type: none"> Describe Clinical pharmacology of drugs used in Peptic ulcer caused by H Pylori. 	C2	SGD	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Classify different types of gastric Polyps. 	C2		
L16	Neoplastic lesions of stomach	Pathology	<ul style="list-style-type: none"> Explain epidemiology, etiology, Pathogenesis of CA Stomach. Diagnosis of Gastric adenocarcinoma Morphology. Identify microscopic images of inflammatory bowel disease. 	C2 C3	LGIS	MCQs SEQs VIVA
				P3		
L17	Classification of Foods	Community Medicine	<ul style="list-style-type: none"> Define nutrition describe food pyramid utilize food pyramid classify food according to function classify food according to nutritive value classify food according to origin <p>classify food by chemical composition</p>	C1 C2 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L18	Pesticides	Forensic Medicine & toxicology	<ul style="list-style-type: none"> Describe the types of Pesticides commonly implicated in poisoning Describe the clinical presentation of organophosphorus compound poisoning <p>Describe the Absorption, metabolism and excretion of organophosphorus compounds.</p> <ul style="list-style-type: none"> Describe the mechanism of action of organophosphorus compounds. Describe the causes of death due to organophosphorus compounds poisoning. Describe the Medicolegal and forensic importance of organophosphorus compounds. <p>Describe the management of organophosphorus compounds with special emphasis on decontamination, removal of ingested and absorbed poison.</p> <ul style="list-style-type: none"> Use of antidotes. <p>Describe the autopsy findings of a victim of organophosphorus compounds</p>	C2 C2 C2 C2 C2 C3 C2	LGIS	MCQs SEQs VIVA

L19	Taqwa	Quran Class			LGIS	MCQs SEQs VIVA
L20	Small intestinal diseases	pathology	<ul style="list-style-type: none"> Describe Causes, Pathogenesis and morphological features Intestinal Obstruction. Discuss causes, pathogenesis and diagnosis of Malabsorption and Diarrhea. Explain Pathogenesis and diagnosis of Cystic Fibrosis. Describe the pathogenesis and morphology of Celiac disease.	C2 C2 C2 C3	LGIS	MCQs SEQs VIVA
C4	Diarrhea causing protozoa	Pathology	<ul style="list-style-type: none"> Describe transmission & Life cycle Enlist Clinical features of intestinal Amoebiasis Explain Extra intestinal amoebiasis Interpret Lab diagnosis Differentiate between amebic and bacillary dysentery Plan treatment & prevention <ul style="list-style-type: none"> Describe life cycle and diseases caused by Giardia and enlist other non pathogenic amoebas. Describe clinical features of diarrhea caused by different protozoa Identify etiological cause of diarrhea on the basis of clinical features and morphology of fecal specimen.	C2 C1 C2 C3 C2 C3 C2 C2 P3	CBL	PBQS
C5	Antiamebic drugs	Pharmacology	<ul style="list-style-type: none"> Classify amoebic drugs C1 Describe their mechanism of action C2 Describe MOA, other uses and adverse effect of metronidazole C2 Discuss important drug interactions of metronidazole. C2 Identify the egg/ova on stool examination	C1 C2 C2 C2 P3	CBL	PBQS
L21	Anti amebic drugs	Pharmacology	Discuss Clinical pharmacology of drugs used in amoebiasis	C2	LGIS	MCQs SEQs VIVA
L22	Approach to a Patient With UpperGI bleed	Medicine	<ul style="list-style-type: none"> Define hematemesis, melena and hematochezia. C1 Describe anatomical basis and patho-physiological correlation of GI. bleed e.g. potential bleeding areas and mechanism of bleeding from the gut.C2 Discuss common causes of GI bleeding including common life threatening conditions.C2 Describe and discuss relevant questions to differentiate between different causes of upper GI bleed, for example: Peptic Ulcer Variceal bleed, Gastric carcinoma, Mallory Weiss tear. 	C1 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L23	Approach to a patient with acute abdomen	Surgery	<ul style="list-style-type: none"> Students will be able to Describe signs and symptoms of acute surgical abdomen. Enlist common causes of acute abdomen (appendicitis, obstruction, Peritonitis, intestinal perforation, duodenal perforation etc.) Describe resuscitation of an acute abdomen Understand investigations and diagnosis of a patient with acute abdomen Outline management options in a patient with acute abdomen (basics of surgical	C2C1 C3	LGIS	MCQs SEQs VIVA

			management i-e treat the cause e.g appendectomy, exploratory laparotomy and management according to cause)			
L24	Prokinetics	Pharmacology	<ul style="list-style-type: none"> Define Prokinetic drugs. Classify the group of drugs that are used as Prokinetics. explain the , MOA uses and adverse effects of D2 blockers drugs. 	C1 C1 C2	LGIS	MCQs SEQs VIVA
L25	Types of colitis and Inflammatory bowel disease	Pathology	<ul style="list-style-type: none"> Describe causes, pathogenesis and morphological features of Inflammatory Bowel Disease. Differentiate between Ulcerative colitis and crohn's disease, Microscopic Colitis and Graft-Versus-Host Disease. 	C2 C3	LGIS	MCQs SEQs VIVA
L26	Drugs used inflammatory bowel disease	Pharmacology	<ul style="list-style-type: none"> Enlist drugs used in IBD. Describe the therapeutic pyramid approach to inflammatory bowel disease and how treatment choice is made. Enlist drugs used in IBD. Describe the therapeutic pyramid approach to inflammatory bowel disease and how treatment choice is made. 	C1 C2 C1 C2	LGIS	MCQs SEQs VIVA
L27	Tissue cestodes	pathology	<ul style="list-style-type: none"> Classify the cestodes. Describe morphological features of cestodes. Enlist diseases caused by each type. Describe life cycle of these parasites. Explain transmission, epidemiology and Pathogenesis of diseases caused by them Establish the diagnosis on the basis of clinical features and laboratory findings. Describe treatment and prevention. 	C1 C2 C1 C2 C2 C3 C2	SGD	MCQs SEQs VIVA
P4	Rabbit ileum	pharmacology	<ul style="list-style-type: none"> . identification of all the parts of chymograph <p>Demonstrate the effects of gradually increasing doses of acetylcholine on dose response curve.</p>	C3	PRACTICAL	OSPE
C3	Vegetable poison	Forensic Medicine	<ul style="list-style-type: none"> Describe the physical properties of Castor Croton Capsicum Ergot Abrus Describe mechanism of action in humans. Describe the clinical features of Organic irritants poisoning and its management. Describe the Medicolegal importance of Organic irritants poisoning. Describe the autopsy findings of Organic irritants poisoning. <p>Identify specimen of Castor Croton Capsicum Ergot Abrus</p>	C2 C2 C2 C2 C2 P3	CBL	PBQS
P5	Acute appendicitis Intestinal TB Crohn' disease CA colon	Pathology	<ul style="list-style-type: none"> Recall pathological features of acute appendicitis. Differentiate between Intestinal tuberculosis and IBD. <p>Identify the slides and recognize two important points of identification of acute appendicitis Intestinal TB, Crohn' disease and CA colon.</p>	C1 C2 P3	PRACTICAL	OSPE

Week 4						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
L28	Major food groups	Community medicine	<ul style="list-style-type: none"> Describe major food groups Discuss functions of proteins Describe requirements and sources of proteins Explain functions of carbohydrates Describe requirements and sources of carbohydrates Discuss functions of fats State requirements and sources of fats. 	C1 C2 C2 C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L29	Neoplastic lesion of intestine	Pathology	<ul style="list-style-type: none"> Classify intestinal inflammatory and neoplastic Polyps. Describe syndromic association of polyps. Discuss epidemiology, etiology, Pathogenesis and morphological features of intestinal Tumors. 	C3 C2 C2 C3	SGD	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Explain genetic etiology and molecular pathogenesis of colorectal adenocarcinoma. Describe hereditary Non-Polyposis Colorectal carcinoma. Conclude staging of colorectal Adenocarcinoma	C2C2C3		
C6	Colorectal carcinoma	Pathology	<ul style="list-style-type: none"> Discuss differential diagnosis based on clinical and morphological features. Classify intestinal inflammatory and neoplastic Polyps. Explain genetic etiology and molecular pathogenesis of colorectal adenocarcinoma. Describe hereditary Non-Polyposis Colorectal carcinoma. Enumerate staging of colorectal Adenocarcinoma. Identify tumor of colon on gross examination	C3 C3 C2 C2C3 P3	SGD	MCQs SEQs VIVA
L30	Medicolegal autopsy	Forensic and toxicology	<ul style="list-style-type: none"> Describe the contents of Medicolegal/postmortem reports. Describe the requirements of a mortuary. Describe the classification of pattern of injuries in MLC cases.	C2C2 C2	LGIS	MCQs SEQs VIVA
L31	Anal canal appendix and peritoneum	Pathology	<ul style="list-style-type: none"> Describe etio-Pathogenesis and morphology of Tumors of the Anal Canal. Apply morphological diagnosis of acute Appendicitis. Classify tumors of the Appendix on the basis of morphology.	C2C3 C3	SGD	MCQs SEQs VIVA

L32	Fecoral infections – polio	Community medicine	<ul style="list-style-type: none"> Understand polio virus transmission, poliomyelitis disease and global progress toward polio eradication Recognize the vaccines available against polio and the risks and the benefits of the each Describe the rationale for introducing IPV into the routine immunization schedule.	C2 C2P3	LGIS	MCQs SEQs VIVA
L33	Approach to a patient with ascites and abdominal distension	Medicine	<ul style="list-style-type: none"> define Ascities. Explain pathophysiology of Ascities. Describe etiology of Ascities. Classify different types of Ascities. Able to investigate Ascities. Describe management plan.	C1 C2 C3 C2 C1 C2	LGIS	MCQs SEQs VIVA
L34	Approach to a patient with intestinal obstruction	Surgery	<ul style="list-style-type: none"> Students will be able to Describe signs and symptoms of intestinal obstruction. Enlist causes of intestinal obstruction. Understand resuscitation of a patient with intestinal obstruction. Understand investigations and diagnosis of a patient with intestinal obstruction. Outline management options in a patient with intestinal obstruction	C2C2C2	LGIS	MCQs SEQs VIVA
S3	Terematodes liver and lung flukes	Pathology	<ul style="list-style-type: none"> Classify the different important types of flukes. Enlist diseases caused by each type.	C3 C1	CBL	PBQS
			<ul style="list-style-type: none"> Describe life cycle of these parasites. Explain transmission, epidemiology and Pathogenesis of diseases caused by them. Explain the diagnosis on the basis of clinical features and laboratory findings. Describe treatment and prevention.	C2C2 C2C2		
L35	Anti helminthes drugs	Pharmacology	<ul style="list-style-type: none"> Classify anthelmintic therapeutically. Explain mechanism of action of each group. Explain their advance effects. Explain their mode of administration.	C1 C2 C2 C2	LGIS	MCQs SEQs VIVA
L36	Anti helminthes drugs	Pharmacology	<ul style="list-style-type: none"> Classify anthelmintic therapeutically. Explain mechanism of action of each group. Explain their advance effects. Explain their mode of administration.	C1C2 C2C2	LGIS	MCQs SEQs VIVA
L37	Microbes causing GI infections	Pathology	<ul style="list-style-type: none"> Enlist different GI infections caused by bacteria. Enlist the important bacteria responsible for causing GI infections. Explain the clinical features of different GI infections of bacterial etiology. Describe the transmission and pathogenesis. 	C1 C1 C2 C2	CBL	PBQS

			<ul style="list-style-type: none"> • Interpret the lab diagnosis. Describe the treatment and prevention.	C3 C2		
L38	Fecooral infections typhoid and food poisoning	Community medicine	<ul style="list-style-type: none"> • define and clarify diarrhea • Explain knowledge about burden of diarrheal diseases • Describe the epidemiological concepts of acute intestinal infectious diseases Describe of the W.H.O strategies for control and prevention of these diseases.	C2 C2 C2 C2	LGIS	MCQs SEQs VIVA
L39	Antidiarrheal drugs	Pharmacology	<ul style="list-style-type: none"> • Classification of anti-diarrhoeal agents • Describe important pharmacological features Discuss adverse effects and clinical uses	C2C2 C2	LGIS	MCQs SEQs VIVA
L40	Nematodes with disease causing larvae	pathology	<ul style="list-style-type: none"> • Enumerate Nematodes with disease causing larvae. • Describe the morphological features. • Enlist diseases caused by each type. • Describe life cycle of these parasites. • Explain transmission, epidemiology and Pathogenesis of diseases caused by them. Explain the diagnosis on the basis of clinical features and laboratory findings.	C1 C2 C1 C2 C2 C2	SGD	MCQs SEQs VIVA
S4	Antidiarrheal drugs	Pharmacology	Describe Clinical pharmacology of drugs used in diarrhea	C2	SGD	MCQs SEQs VIVA
C7	Hydatid disease	Pathology	<ul style="list-style-type: none"> • Enlist diseases caused by each type. Describe important features of life cycle of these parasites.	C1 C2	CBL	MCQs SEQs VIVA
			<ul style="list-style-type: none"> • Explain transmission, epidemiology and Pathogenesis of diseases caused by them. • Explain the diagnosis on the basis of clinical features and laboratory findings. Describe treatment and prevention.	C2 C2C2		
P6	Rabbit ileum	Pharmacology	<ul style="list-style-type: none"> • demonstrate the effects on dose response curve of different doses of acetylcholine in the presence of atropine Demonstrate the surmountable antagonism between acetylcholine and	C1 C2	Practical	OSPE
P7	Autopsy Visits/Postmortem and Medicolegal work/Research work	Forensic Medicine	<ul style="list-style-type: none"> • Describe the contents of Medicolegal/postmortem reports. • Describe the requirements of a mortuary. • Describe the classification of pattern of injuries in MLC cases. • Observe autopsy and Medicolegal case management at DHQ, Hospital. Preparation of MLC/autopsy report.	C2 C2 C2 C2 P2	Practical	OSPE
P8	Stool examination/ Parasitology (practical)	Pathology	<ul style="list-style-type: none"> • Describe importance of stool examination. • Differentiate common parasite ova on basis of morphology. • Describe sample collection and transportation. Identification of common pathogens and parasites & eggs/ ova	C2 C2 C2 P1	Practical	OSPE

Week 5						
Code No	Topic	Discipline	At the end of the lecture student should be able to	/P/A	Teaching strategies	Assessment tools
C8	Antihelminth esdrugs	Pharmacology	<ul style="list-style-type: none"> Classify anthelmintic therapeutically. Explain mechanism of action of each group. Explain their advance effects. Explain their mode of administration. 	C1 C2 C2 C2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Discuss etiology, pathogenesis, laboratory diagnosis of autoimmune Hepatitis. 	C2		
L41	Types of hepatitis and metabolic liver diseases	Pathology	<ul style="list-style-type: none"> Describe Drug- and Toxin-Induced Liver Injury. Enumerate morphological features of alcoholic Liver Disease Non-alcoholicFatty Liver Disease Disease (NAFLD). Enlist causes and morphological features of metabolic Liver Disease 	C2 C3 C1	LGIS	MCQs SEQs VIVA
			(Hemochromatosis, Wilson Disease, α 1-Antitrypsin Deficiency).			
L42	Drugs used in hepatitis B	Pharmacology	<ul style="list-style-type: none"> Discuss drug used for treatment of Hepatitis B viral infections Discuss the mechanism of action, uses and adverse effects of interferon Identify the gross images of liver tumor. 	C2 C2 P1	LGIS	MCQs SEQs VIVA
L43	Hepatitis A & E	Pathology	<ul style="list-style-type: none"> Enumerate the important properties & Diseases caused by these viruses. Describe the Replicative cycle. Explain the transmission of the diseases caused by these viruses. 	C2 C2 C2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Relate the interaction of pathogenesis of viruses & immunity of individuals. Identify clinical findings of the diseases caused by these viruses. List the laboratory identification. Describe the treatment &Prevention.	C3C1C1 2		
L44	Nematodes: intestinal nematodes	Pathology	<ul style="list-style-type: none"> Classify the Nematodes. Classify the Intestinal Nematodes. Describe the common and differentiating features in morphology and life cycle of the Nematodes Enlist diseases caused by each type Describe life cycle of these parasites. Explain transmission, epidemiology and Pathogenesis of diseases caused by them. Explain the diagnosis on the basis of clinical features and laboratory findings. Describe treatment and prevention.	C2 C2 C2 C1 C2 C2 2	LGIS	MCQs SEQs VIVA

L45	Jaundice and biliary diseases	Pathology	<ul style="list-style-type: none"> • Discuss pathophysiology of Jaundice, Cholestasis, large Bile Duct Obstruction autoimmune Cholangiopathies. • Differentiate between pathological features of Primary Biliary Cirrhosis (PBC) and Primary Sclerosing Cholangitis (PSC). • Discuss Structural Anomalies of the Biliary tree, biliary atresia. • Explain Portal Vein Obstruction and hepatic vein Thrombosis. • Correlate immunological basis with Graft-Versus-Host Disease and Liver Graft Rejection. 	C2 C3 C2 C2 3	LGIS	MCQs SEQs VIVA
L46	Allah or rasool ki muhabbat	Quran			LGIS	MCQs SEQs VIVA
L47	Approach to a patient with gastrointestinal carcinoma	Surgery	<ul style="list-style-type: none"> • Explain signs and symptoms of cholelithiasis, chronic cholecystitis, acute cholecystitis, cholangitis, pancreatitis and obstructive jaundice. • Enlist a D/D for upper abdominal pain. • Enlist a D/D for obstructive jaundice. • Apply his theoretical knowledge to make a management plan for hepatobiliary diseases. 	C2 C1 3	LGIS	MCQs SEQs VIVA
L48	Minor protozoa toxoplasma and trichomonas	Pathology	<ul style="list-style-type: none"> • Students will be able to • Describe signs and symptoms of gastrointestinal intestinal carcinoma. • Understand investigations and diagnosis of a patient with gastrointestinalintestinal carcinoma. • Outline management options in a patient with gastrointestinal carcinoma. <p>Define neoadjuvant therapy, adjuvant therapy and upfront surgery.</p>	2C1C2 C2C2	SGD	MCQs SEQs VIVA
L49	Family Medicine	Acute and chronic hepatitis	<ul style="list-style-type: none"> • Explain the etiology and clinical features of acute hepatitis. • Explain the management strategies of acute hepatitis in family practice • Explain the etiology clinical features and complication of chronic hepatitis • Explain the management strategies of chronic hepatitis in family practice <p>Describe the red flags in a patient with acute and chronic hepatitis forreferral to specialty care.</p>	2C2C2 C2	LGIS	MCQs SEQs VIVA
S5	Gall bladder diseases	Pathology	<ul style="list-style-type: none"> • Discuss morphological features of Congenital Anomalies. • Describe etiology and pathogenesis of Cholelithiasis (Gallstones) andcholecystitis. <p>Classify neoplastic lesions of gall bladder.</p>	C2 C2 2	SGD	MCQs SEQs VIVA
			<ul style="list-style-type: none"> • Discuss causes, Pathogenesis and morphological features of Cirrhosis andPortal Hypertension. • Enumerate causes of chronic hepatitis. 	C2 C2		

L50	LIVER CIRRHOSIS	Pathology	<ul style="list-style-type: none"> Interpret morphological diagnosis of cirrhosis by neuroinflammatory grade and stage. Correlate morphological diagnosis of cirrhosis with clinical outcome of disease. <p>correlate the hepatocellular and sinusoidal injury with complications of cirrhosis.</p>	C3 3C3	LGIS	MCQs SEQs VIVA
L51	Hepatitis B & C	Pathology	<ul style="list-style-type: none"> Enumerate the important properties & Diseases caused by these viruses. Describe the Replicative cycle. Explain the transmission of the diseases caused by these viruses. Relate the interaction of pathogenesis of viruses & immunity of individuals. Identify clinical findings of the diseases caused by these viruses. List the laboratory identification. <p>Describe the treatment & Prevention.</p>	C2 C2 C2 C3 C1 C1 2	LGIS	MCQs SEQs VIVA
L52	Approach to a patient with viral hepatitis and cirrhosis	Medicine	<ul style="list-style-type: none"> define acute and chronic viral hepatitis and Different types of viruses causing Hepatitis and their natural course of disease. Describe Clinical features and complications of viral hepatitis. Describe Investigations to diagnosis different viral hepatitis and for complications. <p>Able to manage acute and chronic viral hepatitis.</p>	1C2C2 C4	LGIS	MCQs SEQs VIVA
L53	Approach to patient with Obstructive jaundice	Surgery	<ul style="list-style-type: none"> Students will be able to Describe signs and symptoms of obstructive jaundice. <p>Enlist causes of obstructive jaundice</p>	C2C1 2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Describe approach to diagnosis of obstructive jaundice. <p>Outline management of obstructive jaundice.</p>	C2		
L54	Preventive measures of viral hepatitis	Community medicine	<ul style="list-style-type: none"> Describe causes of different types of Hepatitis Elaborate the modes of transmission of different types of Hepatitis Describe the prevention of different types of Hepatitis Design control activities for different types of Hepatitis <p>Guide people about immunization against different types of Hepatitis</p>	C2 C3 C2 C2 C3	LGIS	MCQs SEQs VIVA
L55	Antiviral drugs (hep C)	Pharmacology	<ul style="list-style-type: none"> Discuss drug used for treatment of Hepatitis C viral infections <p>Discuss the mechanism of action, uses and adverse effects of interferon</p>	C2 C2	LGIS	MCQs SEQs VIVA
P9	Prescription and P writing of peptic ulcer	pharmacology	P prescription and drug writing for peptic ulcer disease	C1C2	Practical	OSPE

P10	Autopsy visit /Postmortem/ Medicolegal work	Forensicmedicine	<ul style="list-style-type: none"> • Describe the contents of Medicolegal/postmortem reports. • Describe the requirements of a mortuary. • Describe the classification of pattern of injuries in MLC cases. • Observe autopsy and Medicolegal case management at DHQ, Hospital. Preparation of MLC/autopsy report.	C2 C2 C2 C2 P2	Practical	OSPE
P11	Fatty change, Cirrhosis, CA liver	Pathology	<ul style="list-style-type: none"> • Recall important histomorphology features for diagnosis of fatty change, Cirrhosis, CA liver Identify the slides and recognize two points of identification of Fatty change, Cirrhosis, CA liver	C2 C2	Practical	OSPE

Week 6						
Code No	Topic	Discipline	At the end of the lecture student should be able to	C/P/A	Teaching strategies	Assessment tools
			<ul style="list-style-type: none"> Discuss etiology, pathogenesis and morphology of Nodular Hyperplasia's, Hepatocellular Adenomas and Hepatoblastoma. 	C2		
L56	Neoplastic liver diseases	Pathology	<ul style="list-style-type: none"> correlate the etiopathogenesis of HCC with changes in its precursor lesions. Describe the morphology of liver neoplasm. Describe the lab diagnosis of liver neoplasm. 	C3 C2	LGIS	MCQs SEQs VIVA
L57	Amoebiasis Ascaris hookworm infestation	Community Medicine	<ul style="list-style-type: none"> Recall the drugs used in worm infestations. Write a suitable prescription for patient with Ascariasis & EnterobiusVermicularis. 		LGIS	MCQs SEQs VIVA
L58	Vitamins and minerals	Community medicine	<ul style="list-style-type: none"> explain importance of major minerals. explain importance of trace elements. 	C2 C2	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> State different types of vitamins explain functions of vitamins. explain functions of minerals. state daily requirement of vitamins. state daily requirement of minerals . describe deficiency diseases of vitamins and minerals. 	C2 C2 C2 C1 C1		
			<ul style="list-style-type: none"> Describe morphological features of Congenital Anomalies. 	C2		
			<ul style="list-style-type: none"> Discuss etiology, pathogenesis and morphological features of acute 	C2		
C10	Pancreatic diseases	Pathology	<ul style="list-style-type: none"> Pancreatitis and chronic Pancreatitis Classify pancreatic Cysts. 	C1	LGIS	MCQs SEQs VIVA
			<ul style="list-style-type: none"> Classify pancreatic benign and malignant tumors. 	C1		
			<ul style="list-style-type: none"> Describe the lab diagnosis of pancreatitis. 	C2		
			<ul style="list-style-type: none"> Describe the types of Alcohol 	C2		
			<ul style="list-style-type: none"> Describe the clinical presentation of alcohol intoxication both acute and chronic 	C2		
L59	Alcohol	Forensic Medicine	<ul style="list-style-type: none"> Describe the clinical tests for examination of an alcoholic. Describe the collection of blood, urine and vomitus and their necessary sampling and referral to Forensic Lab for confirmation of the poisoning. 	C2 C2	LGIS	MCQs SEQs VIVA

			• Describe the Medicolegal and forensic importance of alcoholic intoxication.	C2		
			• Describe the management of acute alcohol intoxication in general.	C2		
L60	Malnutrition and balanced diet	Community medicine	<ul style="list-style-type: none"> • classify malnutrition • explain causes of malnutrition • discuss prevention of different types of malnutrition • define nutritional surveillance, food fortification, food adulteration • discuss balance diet • describe energy requirement • discuss concept of empty calories 	C1 C2 C2 C1 C2 C2 C2	LG IS	MCQs SEQs VIVA
L61	Takabur aur Gharor	Quran Class			LG IS	MCQs SEQs VIVA
L62	Laxatives	Pharmacology	<ul style="list-style-type: none"> • Classify Purgatives. • Discuss the important pharmacological features of purgatives & Laxatives. • Enumerate uses & adverse effects. • Use of lactulose in Hepatic Encephalopathy. 	C1 C2 C3 C2	LG IS	MCQs SEQs VIVA
L63	Nematodes: Tissue nematodes	Pathology	<ul style="list-style-type: none"> • Enumerate Tissue Nematodes. • Describe the morphological features of the tissue nematodes. • Enlist diseases caused by each type. • Describe life cycle of these parasites. 	C1 C2 C2 C2	LG IS	MCQs SEQs VIVA

			<ul style="list-style-type: none"> • Explain transmission, epidemiology. • and Pathogenesis of diseases caused by them. • Explain the diagnosis on the basis of clinical features and laboratory findings. • Describe treatment and prevention. 	C2 C2 C2		
S6	Teramatoes Schistoma	Pathology	<ul style="list-style-type: none"> • Enlist Diseases caused by each type with Characteristics. • Comprehend life cycle, transmission epidemiology & pathogenesis. • Interpret Laboratory diagnosis. • Plan treatment and prevention. 	C1 C2 C3 C3	LGIS	MCQs SEQs VIVA
L6 4	Feco Oral Infection	Community Medicine			LGIS	MCQs SEQs VIVA
P1 2	Prescription and P writing of Amoebic dysentery and worminfestation	pharmacology	<ul style="list-style-type: none"> • Recall the drugs used in amoebic dysentery • Describe suitable drugs for the patient with amoebic dysentery • Write a suitable prescription for patient with Ascariasis & Enterobius Vermicularis. 	C1C1	LGIS	MCQs SEQs VIVA
			Define drug Abuse, drug Addiction and Drug dependence. Enlist the WHO criteria of drug addiction .	C2		
			Briefly state their Medicolegal importance	C1		
			Enumerate different types of dangerous drugs w.r.t their affects. Describe the dangerous drug act.	C2		
C9	Drug Abuse and Dangerous Drug act	Forensic Medicine	Differentiate between drug addiction n drug habituation. Assess the level of addiction by considering WHO criteria. Identify dangerous drugs and protocol of their handling.	C3 C3 P2	LGIS	MCQs SEQs VIVA
			Assess and Manage a case of drug abuse by applying the knowledge of drug addiction, abuse, and WHO criteria.	P3		
			Follow the protocol of handling dangerous drugs	P3		
				A2		
P1 3	Laboratory diagnosis of hepatobiliary diseases	Pathology	<ul style="list-style-type: none"> • Interpret lab report of a patient with chronic viral, hepatitis, acute viral hepatitis. • Interpret lab report of a patient with jaundice. 	C3 C3	LGIS	MCQs SEQs VIVA

Curriculum (Self Directed Learning) SDL

Week-1/2		
Pharmacology		
Topic	Learning Objectives	References
ROLE OF SEROTONIN RECEPTORS IN GIT MOTILITY	<ul style="list-style-type: none"> • Revise the knowledge of receptors and neurotransmitters regarding their functional roles 	<ol style="list-style-type: none"> 1. Basic and Clinical Pharmacology by Bertram Z. Katzung 15th Edition, Chapter 6, Page 2-6, 15-24 2. Goodman and Gillmans The Pharmacological basics of Therapeutics, 13th Edition, Chapter , Pg
Pathology		
Oral inflammatory lesions	<ul style="list-style-type: none"> • Enlist cause of Aphthous Ulcers (Canker Sores) • Define pathogenesis of Herpes Simplex Virus Infections of oral cavity • Revise Pathogenesis of Oral Candidiasis (Thrush). 	Robbins & Cotran Pathologic Basis OF Disease, 10 th Edition, , Pg 552
Forensic Medicine		
. Pesticides Aluminium phosphide (Alphos poisoning) <ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • Describe the physical properties of Organophosphorus compounds. • Describe mechanism of action in humans. • Describe the clinical features of Organophosphorus compound poisoning and its management. • Describe the Medicolegal importance of Organophosphorus compounds poisoning. • Describe the autopsy findings of Organophosphorus compound poisoning • 	Parikh's text book of medical jurisprudence forensic medicine and toxicology, Edition 9 (PAGE NO 649 TO 652) Recommended: Principles of Forensic Medicine & Toxicology by Gautam Biswas

Week-3		
Pharmacology		
To pic	Learning Objectives	Referenc es
<ul style="list-style-type: none"> • Role of opioids receptors in git motilty 	<ul style="list-style-type: none"> • Classify opioids receptors • Enumerate opioidsreceptor functions • Discuss the role of opioids in git pyssiology and pathology • Enumerate drugs acting through opioid receptors 	Opioid receptors in the gastrointestinal tract Peter Holzer* https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3163293/#:~:text=Opioid%20receptors%20in%20the%20gastrointestinal%20tract
Pathology		
Odontogenic cysts and <ul style="list-style-type: none"> • Tumors 	At the end of SDL students should be able to understand <ul style="list-style-type: none"> • Pathogenesis of Dentigerous cyst • Pathogenesis of Odontogenic keratocysts • Pathogenesis of Periapical cyst • Pathogenesis of Odontogenic tumors • Pathogenesis of Ameloblastomas • Pathogenesis of Odontoma 	Robins Basic Pathology 10th Edition Page # 557-8
Forensic Medicine		
<ul style="list-style-type: none"> • Analgesic 	<ul style="list-style-type: none"> • Enlist the types of Analgesics used commonly as self harm • Briefly describe the clinical presentation of analgesicintoxication • State the Medicolegal importance of analgesic intoxication. • Explain the management of acute analgesic intoxication ingeneral 	Parikh's text book of medical jurisprudence forensic medicine and toxicology, Edition 9 PAGE NO 689 TO 691 Recommended: Principles of Forensic Medicine & Toxicology byGautamBiswas

Week-4

Pharmacology

Topic	Learning Objectives	References
PROBIOTICS AND PREBIOTICS HELPFUL IN GUT HEALTH	<ul style="list-style-type: none"> Classify opioid receptors Enumerate opioid receptor functions Discuss the role of opioids in gut physiology and pathology Enumerate drugs acting through opioid receptors 	<p>https://www.frontiersin.org/articles/10.3389/fimmu.2013.00445/full The role of probiotics and prebiotics in gut immunity</p> <p>https://www.jmb.or.kr/journal/view.html?uid=5262&vmd=Full Role of Probiotics in Human Gut Microbiome-Associated Diseases</p>

Pathology

<ul style="list-style-type: none"> Esophagitis 	<ul style="list-style-type: none"> Revision of pathology of Mallory-Weiss tears Chemical and Infectious Esophagitis, Reflux Esophagitis, Eosinophilic Esophagitis Barrett Esophagus 	Robins Basic Pathology 10th Edition Page # 559-562
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Forensic Medicine

<ul style="list-style-type: none"> Alcohol 	<ul style="list-style-type: none"> Classify the types of Alcohol Describe the clinical presentation of alcohol intoxication both acute and chronic Briefly explain the clinical tests for examination and the collection of blood, urine and vomitus and their necessary sampling . State the Medicolegal importance of alcoholic intoxication. 	<p>Essential: Parikhs' text book of forensic and toxicology PAGE NO 629 TO 642</p> <p>Recommended: Principles of Forensic Medicine & Toxicology by Gautam Biswas</p>
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Week-5		
Pharmacology		
To pic	Learning Objectives	Referenc es
Life style modification in ibs	<ul style="list-style-type: none"> • Define IBS • Discuss pathophysiology of IBS • Classify drugs used in IBS • Discuss the role of lifestyle modification in IBS 	https://www.mayoclinic.org/medical-professionals/digestive-diseases/news/the-role-of-lifestyle-related-treatments-for-ibs/mac-20431272#:~:text=Calculators-,The%20role%20of%20lifestyle%2Drelated%20treatments%20for%20IBS,-March%2028%2C%202017
Pathology		
Diarrheal disease Jaundice and Cholestasis	<ul style="list-style-type: none"> • Define Jaundice and revise LFTs • Revise physiology/Production of bilirubin and bile acids • Explain Pathogenesis of Gilbert syndrome & Dubin-Johnsonsyndrome 	<ul style="list-style-type: none"> • Robbins & COTRAN Pathologic Basis OF Disease, 10thEdition, Chapter 1, Pg 605/606
Forensic Medicine		
<ul style="list-style-type: none"> • Medicolegal Autopsy-I 	<ul style="list-style-type: none"> • Define medicolegal autopsy • Classify autopsy and narrate the objectives of medicolegalautopsy. • Briefly state the autopsy protocol and its requirements. • Describe the contents of a medicolegal autopsy report. • Describe autopsy procedure. 	<p>Essential:Parikhs”text book of forensic and toxicologyPAGE NO 94 TO 112</p> <p>Recommended: Principles of Forensic Medicine & Toxicology byGautamBiswas</p>

Time Table 2023

Integrated Modular Curriculum
GIT, Hepatobiliary & Parasitology Module - III

3rd Year MBBS

Duration Of Module: 05 WEEKS

Coordinator: Dr Aasiya Niazi
Co coordinator: Dr Nida Fatima

Reviewed by: Module committee

Members Of Module Committee

PROF. Muhammad Umar	Chairman	Vice Channellor RMU
Prof. Dr. Ayesha	Dean Of Basic Sciences \ Convener	Anatomy Department
Prof. Dr. Idrees Anwar	Dean & Member Curriculum Committee	Surgery Department
Dre. Asma Khan	Associate Dean and Implementation In charge 3 rd Year Modular Curriculums	Pharmacology Department
Dr. Omaima Asif	Overall Modular Coordinator	Pharmacology Department
Dr. Zunera Hakim	Focal Person	Pharmacology Department
Dr. Fariha Sardar	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 Kulsoom	Focal Person	Community Medicine
Dr. Asad Shabbir	Focal Person	Pediatrics
Dr. Sadia Khan	Focal Person	Family Medicine

Prepared By
Curriculum Committee, RMU
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TIME TABLE 3rd YEAR MBBS, GIT, LIVER AND PARASITOLOGY MODULE, 2023 1st Week (7&8\April \ 2023)

DATE / DAY							
Monday							
Tuesday							
Wednesday							
Thursday							
	Foundation module block Exam						
	08:00-08:45 am	08:45-09:30am	09:30-10:15am	10:15-11:00am	11:00am-12:00pm		
Friday	Anatomy L1*	Pathology L2*	Pathology C1***	Pharmacology L3*	Gynec \ Obs L4*		
07\04\2023	Revision of Anatomy of GIT Teacher Name: Dr sajjad Hussain Venue:Lecture hall 1	Oral cavity x Salivary Oland Pathology Teacher Name: Dr. Mudassira, Dr. Aasiya Venue: Lecture Hall 1 & 2	Salivary gland tumor Teacher Name: Dr. Fariha, Dr. Iqbal, Dr. Aisha, Dr. Unaiza Venue: See annexure 1	Anti-emetic Drugs Teacher Name: Dr. Asma, Dr. Attiya Venue: Lecture Hall 1 & 2	Hyperemesis Grevedarum Teacher Name: Dr. Ismat BBH, Dr. Nighat BBH Venue: Lecture Hall 1 & 2		
	08:00 to 08:50am	08:50-09:40am	09:40-10:30am		10:30am-11:20am	11:20am-12:10pm	12:10pm-01:00pm
Saturday	Quran class L5*	Surgery L6*	Medicine L7*	No break	Pharmacology C2***	Pathology S1**	Pathology L8*
08\04\2023	Tilawat Quran Teacher Name: Qari Abdul Wahid Venue:lecture hall 1	Approach to a patient with dysphagia Teacher Name: Dr Gohar (HFH), Dr Muhammad Iqbal (BBH)	Introduction, symptoms and analysis of GI investigations Teacher Name: Dr. Sadia, Dr. Aqsa		Antiemetic drugs Teacher Name: Dr. Rubina, Dr. Haseeba, Dr. Uzma	Introduction to parasitology Teachers name: Dr. Musassira, Dr. Tayyaba,	Neoplastic lesions o esophagus

		Venue: Lecture Hall 1& 2	Venue: Lecture Hall 1&2		Dr.Omaira Venue: See annexure 1	Dr. Aasiya,, Dr. Fatima Zohra Venue: See annexure 1	Teacher Name: : Dr Mudassira, Dr Aasiya Venue: Lecture Hall 1& 2
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TIME TABLE 3rd YEAR MBBS, GIT, LIVER AND PARASITOLOGY MODULE, 20203 2nd WEEK 10 to 13 April 2023

DATE / DAY	08:00 to 10:45am	Clinical Clerkship	10:45am to 11:30am	11:30am to 01:00pm		
Monday10-04-23			Medicine L9*	Batch	Practical/SGD	Topic of Practical /SGD
			Approach to a patient with dyspepsia Teacher Name: Dr. Tayyab, Dr. Anum Venue: Lecture hall 1&2	A	Pharmacology	Introduction to P drugs and prescription writing in hyperemesis gravidarum (practical) – P1Teacher Name: Dr uzma Venue: Practical lab
				B	Forensic Medicine	Organophosphorus compound-P2Teacher Name: dr shahrukh Venue: Practical lab
Tuesday11-04-23			Pathology L10*	Batch	Practical	Topic of Practical/SGD
			Types of gastritis & gastropathy Teacher Name: Dr. Aasiya, Dr. MudassiraVenue: Lecture Hall 1& 2	B	Pharmacology	Introduction to P drugs and prescription writing in hyperemesis gravidarum – P1Teacher Name: Dr uzma Venue: Practical lab
				C	Forensic Medicine	Organophosphorus compound- P2 Teacher Name: : dr shahrukhVenue: Practical lab
Wednesday12-04-23			Pathology L11*	Batch	Practical	Topic of Practical/SGD
			H.pylori gastritis and peptic ulcer Teacher Name: Prof. Naeem, Dr. Huma, Venue: Lecture Hall 1& 2	A	Pharmacology	Introduction to P drugs and prescription writing (practical) in hyperemesis gravidarum – P1 Teacher Name: Dr uzma Venue: Practical lab
				B	Pathology	Organophosphorus compound-P2Teacher Name: : dr shahrukh Venue: Practical lab
Thursday13-04-23			10:45am to 11:30am	11:30am to 12:15pm	12:15pm to 01:00pm	
			Pharmacology L12*	Pathology L13*	Forensic Medicine L14*	
			Drugs used in peptic ulcer (H2 receptor antagonists) Teacher Name: Dr. Asma khan, Dr. Attiya Munir Venue: Lecture Hall 1 & 2	Intestinal cestodes Teacher Name: Dr. Huma , Dr Rabbiya Venue: Venue: Lecture Hall 1& 2	Analgesic Teacher Name: Dr. Shahida Dr. Filza Venue: Lecture Hall 1& 2	


DATE / DAY	8:00 AM – 11:00AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM			
Monday	Holiday						
Tuesday 25-04-23							
	Drugs used in pepticulcer disorder Teachers: Dr. Asma khan, Dr. Attiya Munir Venue Lecture Hall 1 & 2	B	Pharmacology	Rabbit ileum– P4 Teacher Name: dr Arsheen Venue: Practical lab			
		C	Forensic Medicine	Vegetable poisons –C3***Teacher Name: Dr Naila Venue: Practical lab			
		A	Pathology	Acute appendicitis, Intestinal TB, Crohn’s disease, UC, CA colon – P5Teacher Name: Dr Abdid Venue: Practical lab			
Wednesday 26-04-23		Pharmacology S2**	Batch	Practical	Topic of Practical		
	Drugs used in acid peptic disorders Teachers Dr. Rubina, Dr. Haseeba, Dr. Uzma, Dr. Omaima Venue: See annexure 1	C	Pharmacology	Rabbit ileum – P4 Teacher Name: dr Arsheen Venue: Practical lab			
		A	Forensic Medicine	Vegetable poisons –C3***Teacher Name: Dr Naila Venue: Practical lab			
		B	Pathology	Acute appendicitis, Intestinal TB, Crohn’s disease, UC, CA colon – P5Teacher Name: Dr Abid Venue: Practical lab			
Thursday 27-04-23		11:10am – 12:00pm	12:00pm – 01:00pm	01:00pm – 02:00pm			
		Pathology L16*	Community Medicine L17*		Forensic medicine L18*		
	Neoplastic lesions of stomach Teachers: Prof. Mobina, Prof. Wafa Venue: Lecture Hall 1 & 2	Classification of food Teacher Name: dr Afifa dr Gul Meher Venue: Venue: Lecture hall 1&2		Pesticides Teacher Name: Dr. Filza Dr. Shahida Venue: Venue: Lecture hall 1&2			
Friday 28-04-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm	32	
	Quran class L19*	Pathology L20*	Pathology C4***	Pharmacology C5***	Pharmacology L21*		
	Taqwa Teacher Name: Qari Abdul Wahid Venue: Lecture hall 1	Small intestinal diseases Teacher: Dr. Tayyaba, Dr. Fatima Venue: Lecture Hall 1 & 2	Diarrhea Causing Protozoa: Entamoeba histiolytica, Giardia lamblia Teacher Name: Dr. Fariha, Dr. Iqbal, Dr. Aisha, Dr. Unaiza Venue: See annexure 1	Antiamoebic drugs Teachers: Dr. Rubina, Dr. Haseeba, Dr. Uzma, Dr. Omaima Venue: See annexure 1	Antiamoebic drugs Teacher Name: Dr. Zunera Hakim Dr. Sobia Javaid Venue: Lecture hall 1 & 2		
Saturday 29-04-23	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
	Medicine L22*	Surgery L23*	Pharmacology L24*	BREAK	Pathology L25*	Pharmacology L26*	Pathology L27*
	Approach to a patient with upper GI bleed Teacher Name: Dr. Javeria, Dr. Misbah. Venue: Lecture hall 1&2	Approach to a patient with acute abdomen Teacher Name: Dr Zafar(DHQ), Dr Ammara (HFH) Venue: Lecture hall 1&2	Prokinetics Teachers: Dr. Zunera, Dr. Sobia Venue: Lecture Hall 1 & 2		Types of colitis and IBD Teacher Name: Prof. Mobina, Prof. Wafa Venue: Lecture hall 1&2	Drugs used in IBD Teacher Name: Dr. Asma khan, Dr. Attiya Munir Venue: Lecture hall 1&2	Tissue cestodes Teacher Name: Dr. Rabbiya, Dr. Huma Venue: Lecture Hall 1 & 2

(sports week 2.5.23 to 7.2.23)

Time Table 3rd Year MBBS, GIT, Hepatobiliary And Parasitology Module, 20203


(8.5.2023 to 13.5.2023) 4th Week

DATE / DAY	8:00 AM – 11:00 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM				
Monday 08-05-23			Community Medicine L28*	Batch	Practical/SGD	Topic of Practical		
			Major food group Teachers: dr Afifa dr Gul Meher Venue: Lecture Hall 1 & 2	A	Pharmacology	Rabbit ileum – P6 Teacher Name: Dr Rubina Venue: Practical lab		
				B	Forensic Medicine	Autopsy Postmortem and medicolegal work- P7 Teacher Name: dr gulzaib Venue: Practical lab		
C				Pathology	Stool examination/ Parasitology (practical) – P8 Teacher Name: Dr Sara Venue:			
Pathology L29*			Batch	Practical/SGD	Topic of Practical			
Neoplastic lesions of intestine Teachers: Dr. Tayyaba, Dr Fatima Zohra Venue: Lecture Hall 1& 2			B	Pharmacology	Rabbit ileum – P6 Teacher Name: Dr Rubina Venue:			
			C	Forensic Medicine	Autopsy Postmortem and medicolegal work- P7 Teacher Name: dr gulzaib Venue: Practical lab			
			A	Pathology	Stool examination/ Parasitology (practical) – P8 Teacher Name: Dr sara Venue: Practical lab			
Wednesday 10-05-23					Pathology C6***	Batch	Practical/SGD	Topic of Practical
	Colorectal cancer Teacher Name: Dr. Abid Dr. Saeed, Dr. Fatima, Dr. Nida Venue: See annexure 1	C			Pharmacology	Rabbit ileum – P6 Teacher Name: Dr Rubina Venue: Practical lab		
		A			Forensic Medicine	Autopsy Postmortem and medicolegal work- P7 Teacher Name: dr gulzaib Venue: Practical lab		
B		Pathology			Stool examination/ Parasitology (practical) – P8 Teacher Name: Dr Sara Venue: Practical lab			
Thursday 11-05-23	11:10am – 12:00pm	12:00pm – 01:00pm			01:00pm – 02:00pm			
	Forensic medicine L30*	Pathology L31*			Community.Medicine L32*			
	Medicolegal autopsy Teacher Name: Dr. Gulzaib Dr. Filza Venue: Lecture Hall 1&2	Anal canal Appendix and peritoneum Teacher Name: Dr. Tayyaba Dr. Fatima Zohra Venue: Lecture Hall 1& 2			Feco-oral infections polio Teacher Name: Dr Imran, dr Maimona Venue: Lecture Hall 1&2			
Friday 12-05-23	08:00am - 08:45am	08:45am – 09:30am			09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm	
	Medicine L33*	Surgery L34*			Pathology S3**	Pharmacology L35*	Pharmacology L36*	
	Approach to a patient with ascites and abdominal distension Teacher Name: Dr.	Approach to a patient with intestinal obstruction, Teacher Name: Dr Huma Sabir, Dr Rahat	Trematodes liver and lung flukes	Anthelmintic drugs Teacher Name: Dr. Asma, Dr. Attiya	Anthelmintic drugs Teacher: Dr. Asma, Dr. Attiya Venue: Lecture hall 1&2			

	Msbah. N. Dr. Sadia Venue: Lecture Hall 1&2	Venue: Lecture Hall 1 &2	Teachers: : Dr. Musassira, Dr. Tayyaba, Dr. Aasiya,, Dr. Fatima Zohra Venue See annexure 1	Venue: Venue: Lecture Hall 1 &2			
Saturday13-05-23	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 L37*	Community medicine L38*	Pharmacology L39*	BREAK 	Pathology L40**	Pharmacology S4**	Pathology C7***
	Microbes causing GI infection TeacherName: Dr. Huma and Dr Rabbiya Venue: Lecture hall 1&2	Feco oral infection :Typhoid and food poisoning Teacher Name: Dr Imran dr Maimona Venue: Lecture hall 1 &2	Antidiarrheal drugs Teacher Name: Dr. Zunera, Dr. Sobia Venue:Lecture hall 1 & 2		Nematodes with disease causing larvae Teacher Name: Dr. Mudassira, , Dr. Aasiya, Venue: Lecture hall 1&2	Antidiarrheal drugs Teacher Name: Dr. Rubina, Dr. Haseeba, Dr. Uzma, Dr. Omaima Venue:See annexure 1	Hydatid disease Teacher Name:Dr. Abid Dr. Saeed, Dr. Fatima, Nida Venue: See annexure 1 See annexure 1
ODD	EVEN						

TIME TABLE 3rd YEAR MBBS, GIT, LIVER AND PARASITOLOGY MODULE, 2022-20203 (15.5.2023 to 20.5.20323) 5th WEEK

DATE / DAY	8:00 AM–11:00 AM	9:30 AM–11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM		
Monday15-05-23			Pharmacology C8***	Batch	Practical	Topic of Practical
			Anthelmintic Drugs Teacher: Dr.Rubina, Dr.Uzma, Dr. Haseeba, Dr.Arsheen Venue: See annexure 1	A	Pharmacology	Prescription and P writing on peptic ulcer– P9 Teacher Name: Dr zoofishan Venue: Practical lab
			B	Forensic Medicine	Autopsy visit /Postmortem/ Medicolegal work – P10 Teacher Name: Dr Raheel Venue: Practical lab	
Tuesday16-05-23			Pathology L41*	Batch	Practical	Topic of Practical
			Types of hepatitis and metabolic liver diseases Teachers:Dr. Mudassira,Dr. Aasiya Lecture Hall 1 & 2	B	Pharmacology	Prescription and P writing on peptic ulcer– – P9 Teacher Name: dr zoofishan Venue: Practical lab
			C	Forensic Medicine	Autopsy visit /Postmortem/ Medicolegal work – P10 Teacher Name: Dr Raheel Venue: Practical lab	
Wednesday17-05-23			Pharmacology L42*	Batch	Practical	Topic of Practical
			Drugs used in hepatitis B Teachers: Dr. Zunera, Dr.Sobia Lecture Hall 1 & 2	A	Pathology	Fatty change, Cirrhosis, CA liver – P11 Teacher Name: Dr Amna Venue: Practical lab
			C	Pharmacology	Prescription and P writing on peptic ulcer– – P9 Teacher Name: Dr zoofishan Venue: Practical lab	
Thursday18-05-23			11:10am – 12:00pm	12:00pm – 01:00pm	01:00pm – 02:00pm	
			Pathology L43*	Pathology L44*	Pathology L45*	
			Hepatitis A &E	Nematodes: Intestinal Nematodes Teachers: Dr.Tayyaba, Dr. Fatima Zohra	Jaundice and biliary diseases Teacher Name: Prof. Mobina, Prof. Wafa	

		Teacher Name: Prof. Naeem, Dr. Huma Lecture Hall 1&2	Venue: Lecture Hall 1 & 2	Venue: Lecture Hall 1 & 2		
Friday 19-05-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm	
	Quran L46*	Surgery L47*	Pathology L48*	Pathology S5**	Family Medicine L49*	
	Allah aur rasool ki Muhabbat Teacher Name: Qari Abdul Wahid Venue: Lecture hall 1	Approach to a patient with gastrointestinal carcinoma Teacher Name: Dr Aurangzeb (BBH), Dr Atif (HFH) Venue: Lecture Hall 1 & 2	Minor protozoa, toxoplasma & trichomonas Teacher name: , Dr. Tayyaba, , Dr. Fatima Lecture Hall 1 & 2	Gall bladder diseases Teacher: Dr. Mudassira, Dr. Tayyaba, Dr. Aasiya, Dr. Rabbiya Venue: see annexure 1	Acute and chronic Hepatitis Teacher: Dr. Sadia Khan Venue: Lecture Hall 1	
Saturday 20-05-23	SEMINAR DAY					
	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
	Pathology L50*	Pathology L51*	Medicine L52*	BREAK 	Surgery L53*	Community Medicine L54*
Liver cirrhosis Teacher Name: Dr. Mudassira Venue: Auditorium	Hepatitis B and C Teacher Name: Prof. naeem, Dr. Huma Venue: Auditorium	Approach to a patient with viral hepatitis and liver cirrhosis Teacher Name: Dr. Tanveer , dr Aqsa Venue: Auditorium		Approach to a patient with obstructive jaundice Teacher Name: Dr Rubina (HFH) & dr Ruqqaiya (BBH) Venue: Auditorium	Preventive measures of viral hepatitis Teacher Name: dr Imran dr Abdul Qadoos Venue: Auditorium	Pharmacology L5 Antiviral drugs focusing hepatitis Teacher Name: Dr. Zunera, Dr. Sobia Venue: Auditorium

TIME TABLE 3rd YEAR MBBS, GIT, LIVER AND PARASITOLOGY MODULE,20203 (22.5.2023 to 27.5.20323)

6th WEEK

DATE / DAY	8:00 AM – 11:00 AM	9:30 AM – 11:00 AM	11:10am – 12:00pm	12:00 PM – 02:00 PM		
Monday 22-05-23			Pathology L56*	Batch	Practical/SGD	Topic of Practical /SGD
			Neoplastic liver disease Teacher: Dr. Tayyaba, Dr. Fatima Zohra Venue:Lecture Hall 1 & 2	A	Pharmacology	P drugs and prescription writing amoebic dysentery and worm infestation(practical) – P12 Teacher Name: Dr Zaheer Venue: Practical lab
				B	Forensic medicine	Drug abuse and dangerous drug act – C9*** Teacher Name: Dr shahida Venue: Practical lab
			C	Pathology	Laboratory diagnosis of hepatobiliary diseases-P13 Teacher Name: Dr Unaiza Venue: Practical lab	
Tuesday 23-05-23			Community medicine L57*	Batch	Practical	Topic of Practical/SGD
			Amaoebiasis Ascaris Hookworm infestation. Teacher Name: r Imran dr Abdul Qadoos Venue:Lecture hall 1&2	B	Pharmacology	P drugs and prescription writing amoebic dysentery and worm infestation(practical) – P12 Teacher Name: Dr Zaheer Venue: Practical lab
				C	Forensic medicine	Drug abuse and dangerous drug act – C9*** Teacher Name: Dr shahida Venue: Practical lab
			A	Pathology	Laboratory diagnosis of hepatobiliary diseases-P13 Teacher Name: Dr unaiza Venue: Practical lab	

Wednesday 24-05-23	Community Medicine L58*	Batch	Practical	Topic of Practical/SGD
	Vitamins and Minerals Teacher Name: Dr Gul/meher dr Narjis	C	Pharmacology	P drugs and prescription writing amoebic dysentery and worm infestation(practical) – P12 Teacher Name: dr zaheer Venue: Practical lab

		Venue: Lecture hall 1&2	A	Forensic medicine	Drug abuse and dangerous drug act -- C9*** Teacher Name: Dr shahida Venue: Practical lab
			B	Pathology	Laboratory diagnosis of hepatobiliary diseases-P13 Teacher Name: Dr Unaiza Venue: Practical lab
Thursday 25-05-23		11:10am – 12:00pm	12:00pm – 01:00pm		01:00pm – 02:00pm
		Pathology C10***	Forensic medicine L59*		Community medicine L60*
	Acute pancreatitis Teacher Dr. Fariha, Dr. Iqbal, Dr. Aisha, Dr. Unaiza Name Venue: See Annexure 1	Alcohol Teacher Name: Dr. Filza Dr. Gulzaib Venue: Lecture hall 1&2	Malnutrition and balanced diet Teachers: Dr Gul/meher dr Narjis Venue: Lecture Hall 1 & 2		
Friday 26-05-23	08:00am - 08:45am	08:45am – 09:30am	09:30am – 10:15am	10:15am - 11:00am	11:00am – 12:00pm
	Quran L61*	Pharmacology L62*	Pathology L63*	Pathology S6**	Community medicine L64*
	Quran class Teacher Name: Qari Abdul Wahid Venue: Lecture hall 1	Laxatives Teacher Name: Dr. Zunera, Dr. Sobia Venue: Lecture hall 1&2	Tissue Nematodes Teacher Name: Dr. Mudassira, Dr. Aasiya Venue: Lecture hall 1&2	Teramtoles Schistosoma Teachers: : Dr. Musassira, Dr. Tayyaba, Dr. Aasiya,, Dr. Fatima Zohra Venue Venue: See annexure	Fecooral infection diarrheal diseases Teacher Name: Dr Imran dr Abdul Qadoos Venue: Lecture hall 1&2
Saturday 27-05-23	08:00am - 10:00 am			10:00am - 12:00 pm	12:00am – 02:00pm
	SDL Pathology			SDL pharmacology	SDL forensic medicine

Teaching Hours

SR No.	Disciplines	LGIS 64	SGD 6	CBL 10	SDL	Hours
1.	Pathology	22	4	5	4	35
2.	Pharmacology	12	02	03	4	21
3.	Forensic Medicine	4	0	2(4hour)	4	12
4.	Community Medicine	09	0	0	0	9
5.	Surgery	05	0	0		5
6.	Medicine	05	0	0		5
7.	Gynaecology	01				1
8.	Family medicine	01				1
9.	Quran	04				4
10.	Anatomy	01				1
Total Hours = 94						

Practical and Clinical Clerkship Hours

Disciplines	Practical Hours	Disciplines	Clerkship Hours
Pathology	10 (3x2x5=30hrs)	Surgery	2.5x4x5=50 hours
Pharmacology	10 (3x2x5=30hrs)	Medicine	2.5x4x5=50 hours
Forensic Medicine	6 (3x2x3=18hrs)	Sub-specialty	2.5x4x5=50 hours

* Forensic medicine CBL are of 2 hour.

- LGIS *
- SGD **
- CBL ***
- SDL ****

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

Batch: A = Lecture Hall 01

Batch: C = Lecture Hall 06

Batch: B = Lecture Hall 02

Batch: D = Pharmacy Lab

The batch distribution and venues for whole year are fixed with no change except for extraordinary situations.

Venues For Academic Sessions
3rd Year MBBS

- LARGE GROUP INTERACTIVE SESSIONS (LGIS)

Odd roll numbers: Lecture Hall 01

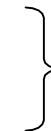
Even roll numbers: Lecture Hall 02

- 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.

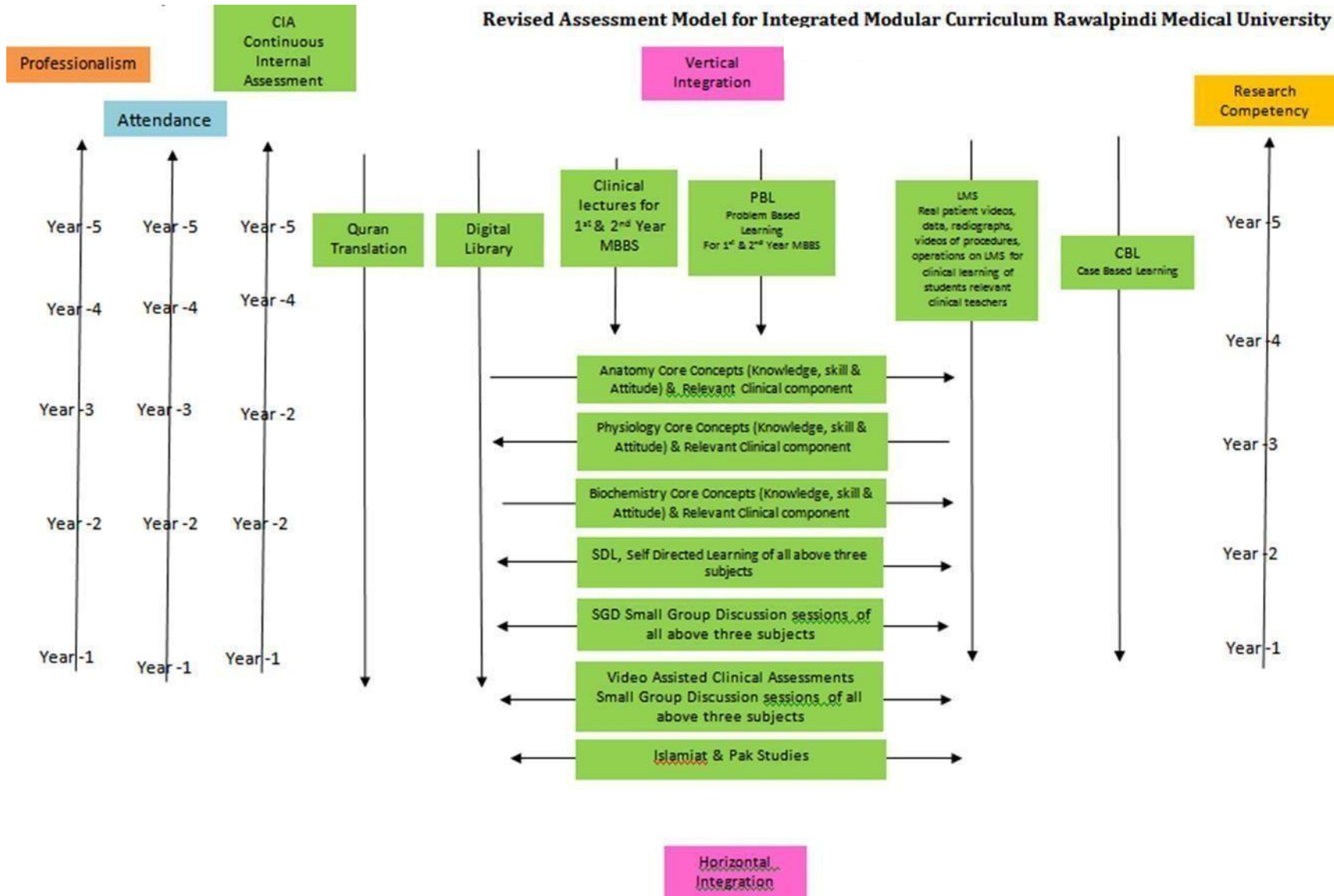


Section IV- Assessment Policies

Contents

- Assessment plan
- Types of Assessment:
 - Modular Examinations
 - Block Examination
- Table 4: Assessment Frequency & Time in GI 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 (2/3rd 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 Examinations

Theory Paper

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

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 Examination

On completion of a block which consists of two modules, there is a block examination 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 GI and parasitology Module

Block	Module – 1		Type of Assessments	Total Assessments Time			No. of Assessments	
	Sr #	GI and parasitology Module Components		Assessment Time	Summative Assessment Time	Formative Assessment Time		
Block-II	1	Mid Module Examinations LMS based (Pharmacology, Pathology, Forensic Medicine, Medicine, Surgery, community medicine gynaecology, Family Medicine,)	Summative	30 Minutes	7 hours	30 Minutes	1 Formative	5 Summative
	2	Topics of SDL Examination on MS Team	Formative	10 Minutes (Every Friday)				
	3	End Module Examinations (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	<p>TEXT BOOKS</p> <ol style="list-style-type: none"> 1. Robbins & Cotran, Pathologic Basis of Disease, 10th edition. 2. Rapid Review Pathology, 5th edition by Edward F. Goljan MD. 3. http://library.med.utah.edu/WebPath/webpath.html
Pharmacology	<p>TEXT BOOKS</p> <ol style="list-style-type: none"> 1. Basic and Clinical Pharmacology by Bertram Z. Katzung 15th Edition, Chapter 6, Page 2-6, 15-24 2. Goodman and Gillmans The Pharmacological basics of Therapeutics, 13th Edition, Chapter , Pg
Forensic Medicine	<p>TEXT BOOKS</p> <ol style="list-style-type: none"> 1. Parikh Text Book of Medical Jurisprudence Forensic Medicine & Toxicology Edition 9
Medicine	<p>TEXT BOOKS</p> <p>Davidsons Textbook of Medicine</p>
Surgery	<p>TEXT BOOKS</p> <p>Balley & Love textbook of surgery</p>
Research	Digital library

SECTION VI
GI MODULE ASSESMENT PLAN

DATE / DAY	ASSESMENT PLAN	TOTAL MARKS	ASSESMENT MODE	CONTENT
Thursday 11 05-2023	Mid module assesment	20	LMS- 20 mcq	15mcq-(pathology, pharmacology and forensic 5each) 3 mcq - community medicine 2 mcq- surgery and medicine 1each
27.4.23	Weekly assesementson SDL topics	15	15 mcq	-(pathology, pharmacology and forensic 5each)
11.5.23		15	15 mcq	
18.5.23		15	15 mcq	-(pathology, pharmacology and forensic 5each)
25.5.23		15	15 mcq	
Monday 29-05-2023	End module theoryexam (9 am to 2pm)	160	Pharmacology (9 to 10:30 am) Forensic medicine,(10: 45 am to 12 :15pm) Pathology (12:15 pm to 2pm)	Pathology- 60 marks Pharmacology-50 Forensic medicine-50 (for mcq/seq distribution see table)
30.05.23 31.05.23 1.06.2023	Viva (12pm-2pm)	90	viva of batches in respective department	Pathology- 40 marks Pharmacology-30 marks Forensic medicine -10 marks

Table of Specification (TOS) For GI End Module Examination 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	0	80
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	0	100

Annexure I

(Sample MCQ & SEQ papers with analysis)

Sample Of MCQs Paper

OPPO A54 : love ya
2023/02/18 10:45

 RAWALPINDI MEDICAL UNIVERSITY
DEPARTMENT OF PATHOLOGY
RMU & Allied Hospitals
SEND-UP EXAMINATION 2022
3rd 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

Arshad
15/11/22

Arshad

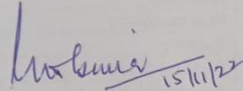
Arshad

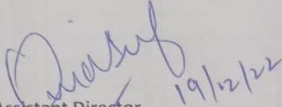
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Detailed Analysis Of Sample Of MCQs Pape

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%


 Prof. Mobina Ahsan Dodhy
 Chairperson Pathology Department
 Rawalpindi Medical University

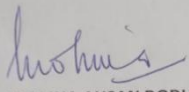

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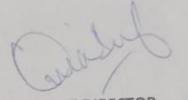

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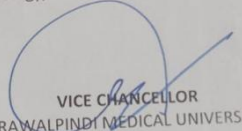
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Detailed Analysis Of SEQs Paper

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


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ANNEXURE II

Time Table 3rd 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 06-08-2023	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
Pathology	C1	C2	C3	C4	C5	B1	B2	B3	B4	B5	A1	A2	A3	A4	A5
Psychiatry	C5	C1	C2	C3	C4	B5	B1	B2	B3	B4	A5	A1	A2	A3	A4
Radiology	C4	C5	C1	C2	C3	B4	B5	B1	B2	B3	A4	A5	A1	A2	A3
Skill Lab	C3	C4	C5	C1	C2	B3	B4	B5	B1	B2	A3	A4	A5	A1	A2
E.R	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

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