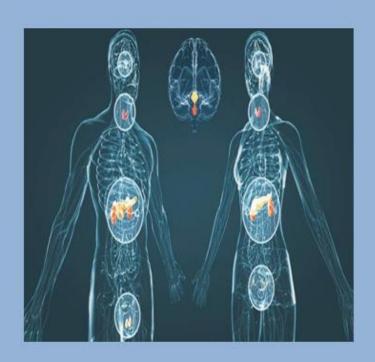


## Rawalpindi Medical University Department of Medical Education (DME)

## **Endocrinology Module**





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Prepared By	Reviewed By	Approved By
Director Medical Education, Asst. Director Medical Education,	Curriculum Committee	Vice Chancellor



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Dr Tehzeeb, Dr Samia Sarwar, Dr Ifra Saeed, Dr. Ayesha Yousaf, Dr Tehmina Qamar, Dr Sidra Hamid	2019-2020	2 <sup>nd</sup>	Developed for Second Year MBBS. Horizontally and vertically integrated Learning objectives updated
Dr Tehzeeb, Dr Samia Sarwar, , Dr Ifra Saeed, Dr Ayesha Yousaf , Dr Tehmina Qamar, Dr Sidra Hamid	2021-2022	3 <sup>rd</sup>	Developed for Second Year MBBS. Horizontally and vertically integrated Learning objectives updated, Research curriculum incorporated
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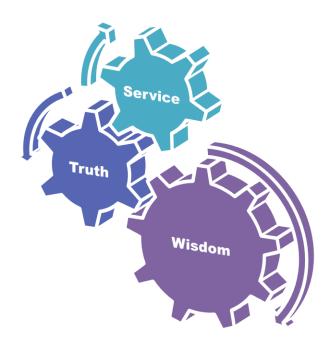
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#### **University Moto, Vision, Values & Goals**

#### **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.

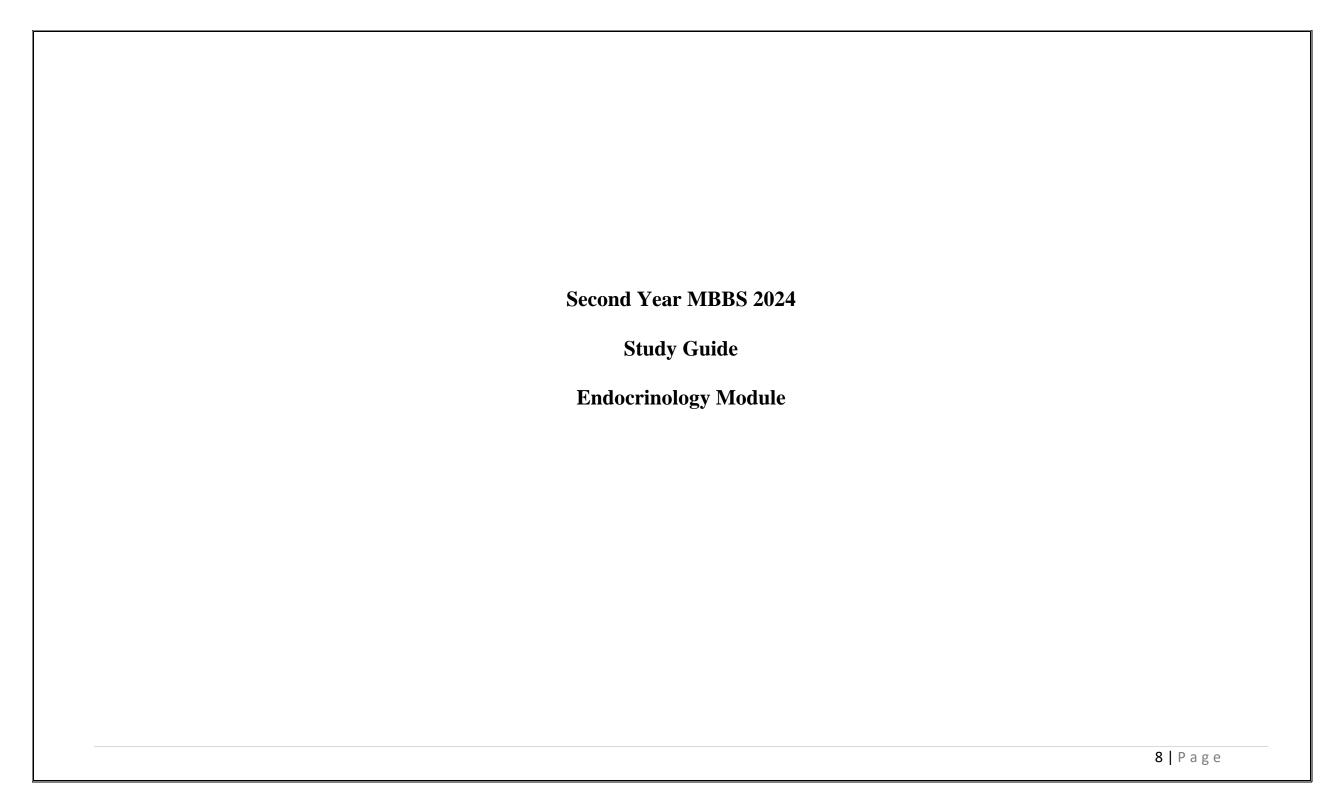
#### **Vision and Values**

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.

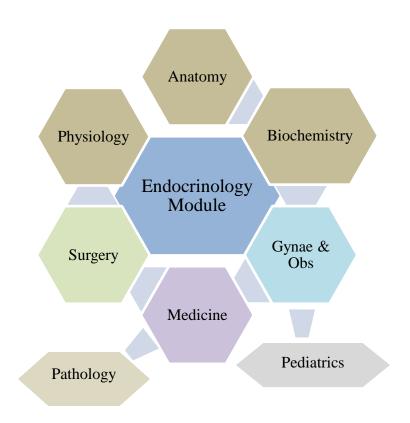
#### **Goals of the Undergraduate Integrated Modular Curriculum**

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

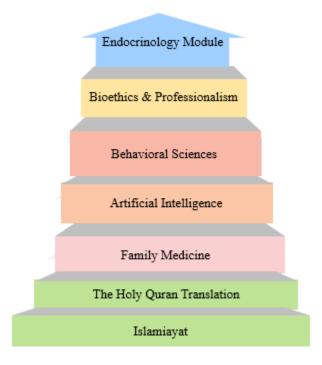
- Provide thorough grounding in the basic theoretical concepts underpinning the practice of medicine.
- Develop and polish the skills required for providing medical services at all levels of the health care delivery system.
- Help you attain and maintain the highest possible levels of ethical and professional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



## **Integration of Disciplines in Endocrinology Module**



## **Spiral / General Education Cluster Courses**



## **Discipline wise Details of Modular Contents**

Block	Subjects	Embryology Histology	Histology Practical SKL. Lab.	Gross Anatomy	CBL	SDL
III	• Anatomy	<ul> <li>Development of pituitary &amp; pineal gland</li> <li>Developmnt of thyroid &amp; parathyroid gland</li> <li>Developmnt adrenal gland and pancreas</li> </ul> <ul> <li>Pituitary &amp; pineal gland</li> <li>Thyroid &amp; parathyroid gland</li> <li>Adrenal gland and pancreas</li> </ul>	<ul> <li>Pituitary         Gland</li> <li>Thyroid &amp;         parathyroid         gland</li> <li>Adrenal gland</li> <li>Pancreas</li> </ul>	<ul> <li>Bones of neck. Hyoid Bone &amp; Cervical vertebrae</li> <li>Fascias of Neck</li> <li>Superficial structurs of neck</li> <li>Lateral-cervical region (muscles &amp; triangles)</li> <li>Latera-cervical-region (neurovascular organization)</li> <li>Interior-cervical region (vessels of neck &amp; cervical plexus)</li> <li>Submandular region</li> <li>Soft palate</li> <li>Deep structures of neck</li> <li>Root of neck</li> <li>Thyroid&amp;Parathyroid gland</li> <li>Larynx</li> <li>Pharynx</li> <li>pancreas</li> </ul>		<ul> <li>Bones of neck</li> <li>SCM region &amp; superficial &amp; deep fascia</li> <li>lateral cervical region</li> <li>Anterior Triangle of neck &amp; its subdivisions</li> <li>Thyroid and para thyroid gland</li> <li>Online SDL Evaluation</li> <li>soft palate, larynx</li> </ul>
	Physiology	Classification of hormones, Mech and glucagon, Blood glucose regulations		erent hormones Physiology of Thyron & Phosphate	oid hormo	ones, Adrenal hormones, Insulin
	Biochemistry	Classification of hormones, Thyr	oid hormones, Adrenal Spiral Courses	hormones, Insulin and glucagon, Blo	ood gluco	ose regulation, Calcium revisit
	The Holy Quran Translation	•				
	Islamiayat	•				
	Biomedical Ethics	History of Medical Ethics				
	Behavioral Sciences	Professionalism In Healthcare				
	Radiology & Artificial Intelligence	Basics of Radiology				

Family Medicine	Approach to patient diabetes mellitus			
	Vertical components			
• Peads	Growth problems due to Endocrine causes			
• Surgery	Thyroid Disorders			
<ul> <li>Pathology</li> </ul>	Hypothyroidism and hyperthyroidism			
Medicine	Diabetes Mellitus			
Obs & Gynae	Endocrine Disorders in Pregnancy (Diabetes Mellitus, Thyroid Disorders)			
	Early Clinical Exposure (ECE)			
Medicine	Thyroid disorders			
	Hyperthyroidism			
	Hypothyroidism			
	Cushing Syndrome			
• Surgery	Thyroid Nodule			
	Multi nodular Goiter			
	CA Thyroid			
	Graves Diseases			
• Eye	• Blindness			
	Visual field defect			
	Cataract			
<ul> <li>Otolaryngology</li> </ul>	• Deafness			
	Hearing tests			
	Nasal Obstruction			

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## **Endocrinology Module Team**

Module Name : Endocrinology Module

Duration of module : 04 Weeks

Coordinator : Dr. Sidra Hamid

Co-coordinator : Dr.

Reviewed by : Module Committee

Module Committee					Module Task Force Team
1.	Vice Chancellor RMU	Prof. Dr. Muhammad Umar	1.	Coordinator	Dr. Sidra Hamid (Assistant Professesor of Physiology)
2.	Director DME	Prof. Dr. Ifra Saeed	2.	DME Focal Person	Dr. Farzana Fatima
3.	Chairperson Anatomy & Dean Basic	Prof. Dr. Ayesha Yousaf	3.	Co-coordinator	Dr. Sadia Baqir (Senior Demonstrator of Anatomy)
	Sciences				
4.	Chairperson Physiology	Prof. Dr. Samia Sarwar	4.	Co-Coordinator	Dr. (Demonstrator of Biochemistry)
5.	Chairperson Biochemistry	Dr. Aneela Jamil	5.	Co-coordinator	Dr. Aneela Yasmeen (Senior Demonstrator of Physiology)
6.	Focal Person Anatomy Second Year MBBS	Dr. Maria Tasleem			
7.	Focal Person Physiology	Dr. Sidra Hamid			DME Implementation Team
			1.	Director DME	Prof. Dr. Ifra Saeed
8.	Focal Person Biochemistry	Dr. Aneela Jamil	2.	Assistant Director DME	Dr Farzana Fatima
9.	Focal Person Pharmacology	Dr. Zunera Hakim	3.	DME Implementation Team	Prof. Dr. Ifra Saeed
					Dr. Farzana Fatima
					Dr. Saira Aijaz
10.	Focal Person Pathology	Dr. Asiya Niazi	4.	Editor	Muhammad Arslan Aslam
11.	Focal Person Behavioral Sciences	Dr. Saadia Yasir			
12.	Focal Person Community Medicine	Dr. Afifa Kulsoom			
13.	Focal Person Quran Translation Lectures	Dr. Uzma Zafar			
14.	Focal Person Family Medicine	Dr. Sadia Khan			

#### Module VI – Endocrinology Module

**Rationale:** The endocrine system is one of the two control systems of the body. It consists of many small organs responsible for the release of hormones. The endocrine system regulates metabolism, growth and development, tissue function and mood of a person. This system acts by means of hormones secreted into the blood to control process that require duration rather than speed e.g, metabolic activities and water and electrolyte balance. In this module we will concentrate on the integrating functions of the endocrine system and focus our teaching on the interaction of hormones and their integration to produce homeostatic regulation.

#### **Module Outcomes**

By the end of the module, students will be able to:

#### Knowledge

- The students should know the hormones and the organs producing them. They should know the chemical nature, biosynthesis and the physiological functions on their target organs. The student should understand & apply the concepts & principles of the basic sciences in context of clinical signs & symptoms to commonly occurring diseases of the endocrine.
- Used technology based Medical Education including
  - **Artificial Intelligence**
- Appreciate concept and importance of

Family Medicine Biomedical Ethics & Professional Research

#### **Skills**

• Students should be able to recognize the histological features of all the endocrine glands under microscope.

#### **Attitude**

• Student should observe lab safety rules Should have professional Attitude

#### **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)
- Problem- Based Learning (PBL)
- Skill Labs/Practicals (SKL)

#### **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
- Figure 2. PBL 7 Jumps Model

**Table 1. Domains Of Learning According to Blooms Taxonomy** 

Sr. #	Abbreviation	Domains of learning
1.	С	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 Large Group Interactive Session (LGIS)**

The large group interactive session is structured format of Prof Umar Model of Integrated lecture. It will the followed for delivery of all LGIS. The 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.

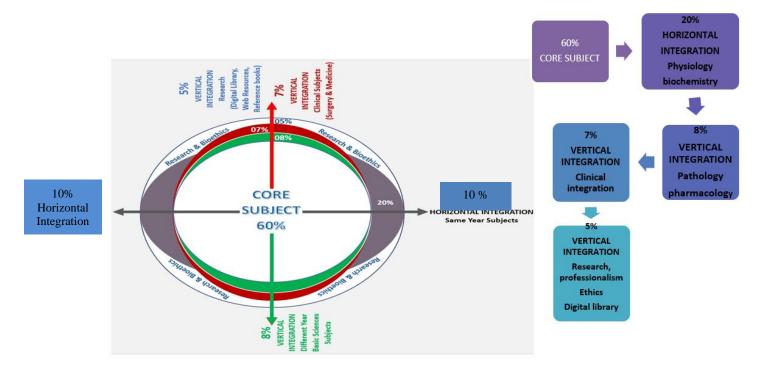


Figure 1. Prof Umar's Model of Integrated Lecture

## **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 help 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 Implementaion of 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 = Textbook (page no), web site
- Assessment:

i Will be online on LMS (Mid module/ end of Module)

ii.OSPE station

#### **Case Based Learning (CBL)**

- It's a learner centered model which engages students in discussion of specific scenarios that typically resemble 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.
  - ii. Develop analytic, communicative, and collaborative skills along with content knowledge.

#### **Problem Based Learning (PBL)**

- Problem-based learning (PBL) is a student-centered approach in which students learn about a subject by working in groups to solve an open-ended problem.
- This problem is what drives the motivation and the learning.

The 7-	Jump-Format of PBL (Masstricht Medical School)	
Step 7	Syntheise & Report	
Step 6	Collect Information from outside	Session - II
Step 5	Generate learning Issues	
Step 4	Discuss and Organise Ideas	] I_
Step 3	Brainstorming to Identify Explanations	sion
Step 2	Define the Problem	Session
Step 1	Clarify the Terms and Concepts of the Problem Scenario	1
	Problem- Scenario	•

Figure 2. PBL 7 Jumps Model

## Practical Sessions/Skill Lab (SKL)

Practical Session/ Skill Lab (SKL)						
Demonstration/ power point presentation 4-5 slide	10-15 minutes					
Practical work	25-30 minutes					
Write/ draw and get it checked by teacher	20-25 minutes					
05 mcqs at the end of the practical	10 minutes					
At the end of module practical copy will be signed by head of dep	artment					
At the end of block the practical copy will be signed by						
Head of Department						
Dean						
Medical education department						
QEC						

#### **SECTION – II**

## **Learning Objectives, Teaching Strategies & Assessments**

#### **Contents**

- Horizontally Integrated Basic Sciences (Anatomy, Physiology & Biochemistry)
- Large Group Interactive Session:
  - Anatomy (LGIS)
  - Physiology (LGIS)
  - Biochemistry (LGIS)
- Small Group Discussions
  - Anatomy (SGD)
  - Physiology (SGD)
  - Biochemistry (SGD)
- Self Directed Topic, Learning Objectives & References
  - Anatomy (SDL)
  - Physiology (SDL)
  - Biochemistry (SDL)
- Skill Laboratory
  - Anatomy
  - Physiology
  - Biochemistry

## Horizontally Integrated Basic Sciences (Anatomy, Physiology & Biochemistry) Anatomy Large Group Interactive Session (LGIS)

Topic	Learning Objectives  At the end of lecture students should be able to	Learning Domain	Teaching strategy	Assessment Tool
Histology of pituitary gland and pineal gland	<ul> <li>Describe histological structure of pituitary and pineal gland</li> <li>Enumerate different cells present in both glands</li> <li>Discuss bio-physiological aspects related to their secretions</li> <li>Discuss the related clinical</li> <li>Read relevant research article</li> <li>Use digital library</li> </ul>	C2 C1 C2 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>
Histology of thyroid and parathyroid glands	<ul> <li>Describe histological structure of thyroid and parathyroid gland</li> <li>Enumerate different cells present in both glands</li> <li>Discuss bio-physiological aspects related to their secretions</li> <li>Discuss the related clinical</li> <li>Read relevant research article</li> <li>Use digital library</li> </ul>	C2 C1 C2 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>
Histology of adrenal gland	<ul> <li>Describe histological structure of adrenal gland.</li> <li>Enumerate different cells present in gland</li> <li>Discuss bio-physiological aspects related to secretions.</li> <li>Discuss the related clinical</li> <li>Read relevant research article</li> <li>Use digital library</li> </ul>	C2 C1 C2 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>
Development of pituitary and pineal gland	<ul> <li>Describe stages of development of pituitary and pineal glands</li> <li>Enumerate structures involved in development of glands</li> <li>Discuss congenital abnormalities related to development of glands</li> <li>Read relevant research article</li> <li>Use digital library</li> </ul>	C2 C1 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>
Development of thyroid and parathyroid glands	<ul> <li>Describe a stage of development of thyroid and parathyroid glands</li> <li>Enumerate structures involved in development of glands</li> <li>Discuss congenital abnormalities associated with their development</li> </ul>	C2 C1 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>

	<ul><li>Read relevant research article</li><li>Use digital library</li></ul>			
Development of adrenal gland	<ul> <li>Describe stages of development of adrenal glands</li> <li>Enumerate structures involved in the development of gland.</li> <li>Discuss congenital abnormalities associated with its development.</li> <li>Read relevant research article</li> <li>Use digital library</li> </ul>	C2 C1 C3 C3 C3	LGIS	<ul><li>MCQS</li><li>SEQS</li><li>VIVA</li></ul>

## **Physiology Large Group Interactive Session (LGIS)**

Topic	At The End Of Lecture Students Should Be Able To	References	Learning Resources	Learning Domains	Learning Strategy	Assessment Tools
Introduction to endocrinology & Signal transduction - I	<ul> <li>Define endocrinology</li> <li>Describe several types of chemical messenger systems</li> <li>Enumerate endocrine glands in the body along with their secretions</li> <li>Compare two major control systems of the body</li> <li>Identify different locations and properties of hormone receptors</li> <li>Explain various intracellular signaling pathways after hormone receptor activation</li> <li>Describe various mechanism of actions of hormones in detail</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 16, Page 299)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 395)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 07,Page 231) (Chapter 23,Page 765)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 50,Page 817)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 75, Page 915-928)</li> </ul>	<ul> <li>https://youtu.be/Q LcxQT1fb_c</li> <li>https://www.khana cademy.org/scienc e/ap-biology/cell- communication- and-cell-cycle/cell- communication/a/i ntroduction-to- cell-signaling</li> <li>https://youtu.be/G HwMJnxaiys</li> </ul>	1. C1 2. C1 3. C1 4. C2 5.C1 6.C2 7.C1	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Hypothalamic– pituitary axis & GH	<ul> <li>Recall the physiological anatomy and parts of pituitary gland</li> <li>Enumerate various cell types in pituitary</li> </ul>	Ganong's Review of Medical     Physiology.25 <sup>TH</sup> Edition.Section 03     (Chapter 17, Page 307,313,324)	• <a href="https://www.mdpi.com/2072-6694/15/15/3820">https://www.mdpi.com/2072-6694/15/15/3820</a>	C1 C1 C2	LGIS	MCQ SEQ VIVA

	gland along with their secretion and function  • Explain connections of anterior and posterior pituitary gland with hypothalamus  • Enlist various hormones secreted from anterior & posterior pituitary gland  • Describe metabolic functions of growth hormone  • Elaborate the role of growth hormone in soft tissue and bone growth  • Discuss role of somatomedins in relation with growth hormone  • Explain regulation of secretion	<ul> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 407,411)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 07,Page 241) (Chapter 23,Page 775)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 51,Page 837)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 76, Page 929)</li> </ul>	<ul> <li>https://youtu.be/fq z4WOwfz4Q</li> <li>https://resources.w fsahq.org/atotw/th e-hypothalamic- pituitary-axis-part- 1-anatomy- physiology/</li> </ul>	C1 C1 C2 C2 C2		VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Introduction to endocrinology & Signal transduction- II	<ul> <li>Classify hormones according to solubility and chemical nature</li> <li>Describe the nature&amp; synthesis of hormones</li> <li>Differentiate different classes of hormones</li> <li>Describe the secretion, transport, feedback control&amp; clearance of hormones</li> <li>Differentiate different classes of hormones</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 16, Page 301,304)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 395)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 07,Page 235,250)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 50,Page 817-831)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 75, Page 915-928)</li> </ul>	<ul> <li>https://youtu.be/Q         LcxQT1fb_c</li> <li>https://www.khana         cademy.org/scienc         e/ap-biology/cell-         communication-         and-cell-cycle/cell-         communication/a/i         ntroduction-to-         cell-signaling</li> <li>https://youtu.be/G         HwMJnxaiys</li> </ul>	C2 C1 C2 C1 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Abnormalities of	<ul> <li>Enlist abnormalities of GH secretion</li> <li>Describe pan hypopituitarism</li> <li>Discuss in detail dwarfism &amp; its treatment</li> </ul>	Ganong's Review of Medical     Physiology.25 <sup>TH</sup> Edition.Section 03     (Chapter 18, Page 321-334)	1. <a href="https://youtu.be/0">https://youtu.be/0</a> GuRf5YPGiA 2. <a href="https://www.ncbi.n">https://www.ncbi.n</a>	C1 C1 C2	LGIS	MCQ SEQ VIVA

growth hormone secretion	<ul> <li>Explain gigantism &amp; acromegaly</li> <li>Differentiate gigantism &amp; acromegaly</li> </ul>	<ul> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 412)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 775)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 76, Page 936)</li> </ul>	lm.nih.gov/books/ NBK278971/	C2 C2		VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Insulin and glucagon:  Structure and metabolic functions	<ul> <li>Describe physiological anatomy of pancreas</li> <li>Describe chemistry, synthesis and transport of insulin</li> <li>Describe the factors which affect secretion of insulin</li> <li>Discuss mechanism of action of insulin</li> <li>Describe the physiological actions of insulin</li> <li>Explain mechanism of insulin secretion</li> <li>Describe mechanism of action of glucagon</li> <li>Discuss regulation of secretion of glucagon</li> <li>Explain the functions of glucagon</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 24, Page 429,445)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 440,446)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 22,Page 743)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 56,Page 902)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 79, Page 973,982)</li> </ul>	1. https://youtu.be/1c6a0 BNsyek 2. https://www.britannica .com/science/insulin 3. https://www.medicaln ewstoday.com/articles/ 316427#overview	C1 C1 C2 C1 C2 C1 C2 C2 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Hormones of posterior pituitary gland (oxytocin and ADH)	<ul> <li>Recall site of synthesis and secretion of posterior pituitary hormones</li> <li>Describe mechanism of action, stimuli for secretion, functions and regulation of ADH</li> <li>Discuss functions of oxytocin</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 17, Page 311)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 415)</li> </ul>	<ol> <li>https://youtu.be/E Gl1Oeetxpg</li> <li>https://teachmephy siology.com/endoc rine- system/hypothala</li> </ol>	C1 C1 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based

		<ul> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 07,Page 241)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 51,Page 849)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 76, Page 938)</li> </ul>	mus- pituitary/posterior- pituitary/posterior- pituitary-gland/  3. https://www.scienc edirect.com/topics/ agricultural-and- biological- sciences/posterior- pituitary-hormones			Aseessment, MST based Assessment) OSPE
Regulation of blood Glucose & Diabetes mellitus	<ul> <li>Describe various factors regulating blood glucose concentration</li> <li>Discuss the importance of blood glucose regulation</li> <li>Discuss the pathophysiology of diabetes mellitus</li> <li>Explain the physiology of diagnosis of diabetes mellitus</li> <li>Explain the treatment of diabetes mellitus</li> <li>Differentiate between type I &amp; type II diabetes mellitus</li> <li>Differentiate between diabetes mellitus &amp; diabetes insipidus</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 24, Page 435-438,446-448)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 445)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 22,Page 743)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 56,Page 915)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 79, Page 983)</li> </ul>	1.  https://youtu.be/K Y85BUcQZew  2. https://www.phar maguideline.com/ 2022/01/hormona l-regulation-of- blood-glucose- level.html  3. https://www.medi calnewstoday.co m/articles/316427	C1 C2 C2 C2 C2 C2 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Aldosterone and cortisol	<ul> <li>Describe physiological anatomy of adrenal gland</li> <li>Enumerate its various hormones</li> <li>Describe synthesis, transport &amp; metabolism of adrenocortical hormones</li> <li>Describe mechanism, physiological actions</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 20, Page 351-364)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 427)</li> </ul>	<ol> <li>https://youtube/2- Z3Q6BZuBY</li> <li>https://journals.ph ysiology.org/doi/a bs/10.1152/ajplega</li> </ol>	C1 C1 C1 C1 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS

	of aldosterone  • Explain the phenomenon of aldosterone escape  • Describe regulation of aldosterone secretion  • Enlist abnormalities of aldosterone secretion  • Describe mechanism, physiological actions of cortisol  Discuss anti stress and anti-inflammatory actions of cortisol  • Describe regulation of cortisol secretion  • Discuss functions of adrenal androgens  • Describe the chemistry, secretion regulation of secretion of ACTH  • Discuss the actions of ACTH	<ul> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 765)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 53,Page 866)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 78,Page 955)</li> </ul>	cy.1964.207.1.109 3. https://www.britan nica.com/science/a ldosterone	C1 C1 C2 C2 C1 C2 C1 C2		based Aseessment, MST based Assessment) OSPE
Thyroid hormone: Production, storage and release	<ul> <li>Recall physiological anatomy of thyroid gland</li> <li>Briefly explain secretions of thyroid gland</li> <li>Compare the features of tri iodothyronine with thyroxine</li> <li>Describe the steps of synthesis of thyroid hormone</li> <li>Discuss in detail half-life, release, and transport of thyroid hormones</li> <li>Explain regulation of secretion of thyroid hormone</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 19, Page 337)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 419)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 770)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 52,Page 855)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 77, Page 941)</li> </ul>	1.  https://youtu.be/af VX3mlNB80  2. https://www.scienc edirect.com/topics/ biochemistry- genetics-and- molecular- biology/thyroid- hormone-release  3. https://byjus.com/b iology/thyroid- hormone/	C1 C2 C2 C1 C2 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

Abnormalities of adrenocortical hormone	<ul> <li>Discuss in detail Cushing's syndrome</li> <li>Differentiate between Cushing disease and Cushing's syndrome</li> <li>Discuss adrenogenital syndrome</li> <li>Discuss the physiological anatomy of adrenal medulla</li> <li>Enumerate various hormones secreted by adrenal medulla</li> <li>Describe the steps involved in synthesis of catecholamines</li> <li>Explain the function of catecholamines</li> <li>Discuss stress response</li> <li>Describe pheochromocytoma</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 20, Page 364-373)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 431,434,437)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 765)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 53,Page 874,875)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 78, Page 969)</li> </ul>	1.  https://journals.ph ysiology.org/doi/a bs/10.1152/ajplega cy.1964.207.1.109 2. https://youtu.be/pS eU9Ei-3u4 3. https://medlineplus .gov/adrenalglandd isorders.html	C2 C2 C2 C1 C1 C2 C2 C1	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Physiological role of thyroid hormone	<ul> <li>Describe mechanism of action of thyroid hormone</li> <li>Explain physiological functions of thyroid hormone</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 19, Page 343,345)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 423)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 770)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 52,Page 855)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 77, Page 944)</li> </ul>	1. <a href="https://www.scienc">https://www.scienc</a> edirect.com/topics/ biochemistry- genetics-and- molecular- biology/thyroid- hormone-release  2. <a href="https://youtu.be/IXjRsX50JB4">https://youtu.be/IXjRsX50JB4</a> 3. <a href="https://journals.physiology.org/doi/full/10.1152/physrev2001.81.3.1097">https://journals.physiology.org/doi/full/10.1152/physrev2001.81.3.1097</a>	C1 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin)	<ul> <li>Discuss normal levels and metabolism of calcium and phosphate</li> <li>Describe the effects of hypocalcemia &amp; hypercalcemia</li> <li>Explain the absorption and excretion of calcium and phosphate</li> <li>Discuss in detail bone physiology</li> <li>Describe the steps involved the activation of Vitamin D</li> <li>Discuss the actions of vitamin D</li> <li>Describe the physiological anatomy of parathyroid glands</li> <li>Describe the chemistry &amp; regulation of secretion of parathyroid hormone</li> <li>Explain the actions of parathyroid hormones</li> <li>Describe functions and regulation of calcitonin</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 21, Page 375-386)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 448)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 777,779)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 54,Page 881,890)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 80, Page 991)</li> </ul>	1.  https://youtu.be/JY     QL7JEsF_4 2. https://teachmephy     siology.com/bioch     emistry/electrolyte     s/calcium-     regulation	C2 C1 C2 C2 C1 C2 C1 C1 C2 C1	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Abnormalities of thyroid hormone (Goiter, hypothyroidism and hyperthyroidism)	<ul> <li>Enlist disorders of thyroid gland</li> <li>Discuss in detail causes, symptoms, diagnosis and treatment of hyperthyroidism</li> <li>Discuss in detail causes, symptoms, diagnosis and treatment of hypothyroidism</li> <li>Compare hypothyroidism with hyperthyroidism</li> <li>Differentiate between pituitary dwarfism and cretinism</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 19, Page 344,345)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 425)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 773)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 52,Page 861)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection</li> </ul>	1. <a href="https://www.hopkinsmedicine.org/he">https://www.hopkinsmedicine.org/he</a> <a href="https://www.hopkinsmedicine.org/he">alth/conditions-and-diseases/disorders-of-the-thyroid</a> <a href="https://youtu.be/0vnpmaSI57c">2. <a href="https://youtu.be/0vnpmaSI57c">https://youtu.be/0vnpmaSI57c</a></a>	C1 C2 C2 C2 C2	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

		14. (Chapter 77, Page 950)				
Bone pathophysiology (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroidism)	Discuss in detail hypoparathyroidism     Describe hyperparathyroidism     Describe osteoporosis	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 21, Page 378,380,381,385,387)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 453)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 779)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 54, Page 881,890)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 80, Page 1003,1006)</li> </ul>	1. https://www.ortho bullets.com/basic- science/9031/ricke ts 2. https://youtu.be/Sr m2GH1dusg 3. https://www.webm d.com/osteoporosi s/what-is- osteomalacia	C2 C1 C1	LGIS	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

## **Biochemistry Large Group Interactive Session (LGIS)**

Topic	Learning Objectives	Learning	Teaching	Assessment
	At The End Of Lecture Students Should Be Able To	Domain	Strategy	Tool
Classification and mechanism of action of hormones	Classify hormones Explain the mechanism of action of hormones	C2 C2	LGIS	MCQs, SAQs & Viva
Thyroxin	Describe nature, formation and mechanism of action of thyroxin Discuss related clinical disorders	C2 C3	LGIS	MCQs, SAQs & Viva
Parathyroid and Calcitonin	Discuss role of various hormones acting on calcium and phosphate metabolism Discuss related clinical disorders	C2 C3	LGIS	MCQs, SAQs & Viva
Adrenal cortical hormones	Describe synthesis, mechanism of action and functions of aldosterone, cortisol and adrenal androgens Discuss related clinical disorders	C2 C3	LGIS	MCQs, SAQs & Viva
Adrenal medullary hormones	Describe mechanism of action and role of adrenal medullary hormones Discuss related diseases	C2 C3	LGIS	MCQs, SAQs & Viva
Insulin and glucagon	Explain formation, mechanism of action and role of insulin and glucagon Discuss related diseases	C2 C3	LGIS	MCQs, SAQs & Viva
Blood glucose regulation	Describe regulation of normal plasma glucose level Explain hypoglycemia	C2 C3	LGIS	MCQs, SAQs & Viva

## **Anatomy Small Group Discussion (SGDs)**

Topic	Learning Objectives	Learning	Teaching	Assessment
	At the end of lecture students should be able to	Domain	Strategy	Tool
Bones of neck Hyoid Bone	Describe the borders and surfaces of body and the two cornuas of hyoid bone.	C2		MCQS SEQS VIVA OSPE
	Discuss the attachments on the hyoid bone.	C2		
	Discuss the related applied of hyoid.	C2	- Skill lab	
Cervical vertebrae	Describe anatomical features of cervical typical & atypical vertebrae .	C2		
Cervical vertebrae	• Discuss the intervertebral joints& movements of cervical region of vertebral column.	C2		
	• Discuss the anatomical basis of cervical pain & injuries of cervical vertebral column	C2		
	Read relevant research article	C3		
	• Use digital library.	C3		
	• Understand cervical subcutaneous tissue & platysma.	C2		
	• Discuss the deep cervical fascia and the formation of layers due to its condensation.	C2	Skill lab	MCQS SEQS VIVA OSPE
	• Discuss the attachments and special features of the investing layer.	C2		
	• Describe the attachments and special features of prevertebral fascia.	C2		
Fascias of Neck.	• Describe the attachments and special features of pretracheal fascia.	C2		
	• Discuss the carotid sheath formation, contents and relations.	C2		
	• Differentiate between the buccopharyngeal fascia and pharyngobasilar fascia.	C2		
	Discuss related clinicals	C3		
	Read relevant research article	C3		
	• Use digital library.	C3		
	• Discuss the location, attachments & actions of SCM & trapezius.	C2	2 2 3 Skill lab	MCQS SEQS VIVA OSPE
	Describe boundaries & location of posterior cervical region .	C2		
Superficial structures of the	• Discuss suboccipital triangle of neck & its contents.	C2		
	Discuss related clinicals	C3		
neck	• Discuss the location, attachments & actions of SCM & trapezius.	C2		
	Describe boundaries & location of posterior cervical region .	C2		
	Discuss related clinicals	C2		
	Read relevant research article	C3		
	• Use digital library.	C3		
lateral cervical	Describe boundaries of posterior triangle.	C2	Skill lab	MCQS

region-(Muscles &	• Discuss the muscles in lateral cervical region.( splenius capitus ,levator scapulae	C2		SEQS
triangles)	,middle scalene &posterior scalene.		_	VIVA
	Describe boundaries and contents of occipital triangle	C2		OSPE
	Discuss boundaries and contents of subclavian triangle	C2		
	Discuss related clinicals	C3		
	Read relevant research article	C3		
	• Use digital library.	C3		
	• Discuss arteries in lateral cervical region (supra scapular artery, 3rd part of subclavian artery,	C2		
lateral cervical	• Discuss veins of lateral cervical region (EJV&subclavian vein )	C2		MCQS SEQS VIVA OSPE
region-(Neuro	Discuss nerve supply of lateral cervical region	C2		
vascular	Discuss lymphatic drainage in lateral cervical region.	C2	Skill lab	
organization)	Discuss related clinicals	C3	7	
	Read relevant research article	C3		
	Use digital library	C3	-	
Anterior cervical	• Discuss the Muscles in anterior cervical region (suprahyoid muscle group & infrahyoid muscle group)	C2	Skill lab	MCQS SEQS VIVA OSPE
region-(Muscles)	Discuss the anatomical basis of torticollis	C3		
1081011 (111000100)	Discuss related clinicals.	C3		
	Read relevant research article	C3		
	Use digital library	C3	-	
	• Discuss arterial supply in anterior cervical region (carotid system of arteries )	C2	Skill lab	MCQS SEQS VIVA OSPE
Anterior Cervical	Discuss venous drainage in anterior cervical region	C2		
Region-(Vessels of	Discuss formation of cervical plexus	C2		
neck & Cervical	Enumerate branches of cervical plexus	C2		
plexus)	Discuss area of distribution	C2		
	Describe clinical and applied anatomy	C3		
	Read relevant research article	C3		
	Use digital library	C3		
Submandibular Region	Discuss the relations of digastric, mylohyoid and hyoglossus muscles.	C2		MCQS SEQS
	• Describe the gross features, relations, blood supply, lymphatic drainage and nerve supply of submandibular salivary gland.	C2	Skill lab	
	Describe the details of Wharton's duct, its opening and related clinicopathological	C2	1	

	conditions			VIVA
	• Describe the gross features, relations, blood supply, lymphatic drainage and nerve	C2		OSPE
	supply of sublingual salivary gland.			
	• Tabulate the comparison of three salivary glands.	C2		
	• Describe the connections and branches with area of supply by the sub-mandibular	C2		
	ganglion.			
	Read relevant research article	C3	_	
	Use digital library	C3		
	• Discuss the anatomy of soft palate along with attachment of muscles and their	C2		
	actions.		_	MCOG
Soft Palate	• Describe boundaries of tonsillar fossa.	C2		MCQS
	Discuss related clinicals	C3	Skill lab	SEQS VIVA
	Read relevant research article	C3		OSPE
	• Use digital library	C3		OSLE
	• Discuss prevertebral muscles (ant.vertebral muscles & lateral vertebral muscles)	C2		MCQS SEQS
Deep structures of	• Discuss related clinicals.	C3	Skill lab	
neck	Read relevant research article	C3		
	Use digital library	C3		VIVA OSPE
	• Discuss arteries & veins in root of neck.	C2		0512
	• Discuss nerve supply in root of neck.	C2		
	• Discuss related clinicals.	C3		MCQS
Root of Neck	Read a relevant research article	C3	Skill lab	SEQS
	Use digital library	C3	-	VIVA OSPE
	Discuss anatomy & functions of thyroid & parathyroid gland	C2		0212
	Discuss blood supply of thyroid gland	C2		
Thyroid and para	Discuss lymphatic drainage & nerve supply of thyroid gland	C2		
thyroid glands	• Discuss related clinicals.	C3		MCQS
	Read a relevant research article	C3	Skill lab	SEQS VIVA
	• Use digital library	C3		OSPE
larynx	Discuss larynx in detail with its cartilages and muscles.	C2		
•	Discuss blood supply of larynx	C2	-	

	<ul><li>Discuss functions of larynx</li><li>Discuss trachea (revisit).</li></ul>	C2	Skill lab	MCQS
	Discuss related clinicals	C3		SEQS
	Read a relevant research article	C3		VIVA OSPE
	• Use digital library	C3		OSFE
	Tabulate muscles of pharynx with origin, insertion, nerve supply and actions	C2		
	Discuss nerve supply of Pharynx	C2		
	Discuss blood supply of larynx	C2	Skill lab	MCQS SEQS
Pharynx	• Discuss esophagus (revisit)	C2		
	Discuss related clinicals	C3		VIVA
	Read a relevant research article	C3		OSPE
	Use digital library	C3		
	Describe location of pancreas & Adrenal gland	C2		
	Enlist different parts of pancreas	C2		
	Describe relations of pancreas	C2		MCOG
Pancreas & Adrenal	Discuss blood supply of pancreas	C2	01.11.1.1	MCQS
gland	Discuss the clinical Anatomy of pancreas	C3	Skill lab	SEQS VIVA
	Discuss related clinicals	C3		OSPE
	Read a relevant research article	C3		
	• Use digital library	C3		

## **Physiology Small Group Discussion (SGDs)**

Topic	At The End Of Lecture Students Should Be Able To	References	Learning Resources	Learning Domains	Learning Strategy	Assessment Tools
Signal transduction & Growth hormone.	<ul> <li>Define endocrinology</li> <li>Describe several types of chemical messenger systems</li> <li>Enumerate endocrine glands in the body along with their secretions</li> <li>Compare two major control systems of the body</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 16, Page 299)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 395)</li> <li>Human Physiology by Dee</li> </ul>	<ul> <li>https://youtu.be/QLcxQ T1fb c</li> <li>https://www.khanacade my.org/science/ap- biology/cell- communication-and- cell-cycle/cell- communication/a/intro</li> </ul>	1. C1 2. C1 3. C1 4. C2 5.C1 6.C2 7.C1	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based

	<ul> <li>Identify different locations and properties of hormone receptors</li> <li>Explain various intracellular signaling pathways after hormone receptor activation</li> <li>Describe various mechanism of actions of hormones in detail</li> </ul>	Unglaub Silver thorn. 8 <sup>TH</sup> Edition. (Chapter 07,Page 231) (Chapter 23,Page 765)  • Physiological Basis of Medical Practice by Best & Taylor's.13 <sup>th</sup> Edition. Section 07(Chapter 50,Page 817)  • Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> EditionSection 14. (Chapter 75, Page 915-928)	duction-to-cell- signaling https://youtu.be/GHwM Jnxaiys			Aseessment, MST based Assessment) OSPE
Thyroid Hormones	<ul> <li>Recall physiological anatomy of thyroid gland</li> <li>Briefly explain secretions of thyroid gland</li> <li>Compare the features of tri iodothyronine with thyroxine</li> <li>Describe the steps of synthesis of thyroid hormone</li> <li>Discuss in detail half-life, release, and transport of thyroid hormones</li> <li>Explain regulation of secretion of thyroid hormone</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 19, Page 337)</li> <li>Physiology by Linda S.         Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 419)     </li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 770)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 52,Page 855)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 77, Page 941)</li> </ul>	1.  https://youtu.be/afV X3mlNB80 2. https://www.scienc edirect.com/topics/ biochemistry- genetics-and- molecular- biology/thyroid- hormone-release 3. https://byjus.com/bi ology/thyroid- hormone/	C1 C2 C2 C1 C2 C2	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

Insulin and Glucose Metabolism	<ul> <li>Describe physiological anatomy of pancreas</li> <li>Describe chemistry, synthesis and transport of insulin</li> <li>Describe the factors which affect secretion of insulin</li> <li>Discuss mechanism of action of insulin</li> <li>Describe the physiological actions of insulin</li> <li>Explain mechanism of insulin secretion</li> <li>Describe mechanism of action of glucagon</li> <li>Discuss regulation of secretion of glucagon</li> <li>Explain the functions of glucagon</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 24, Page 429,445)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 440,446)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 22,Page 743)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 56,Page 902)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 79, Page 973,982)</li> </ul>	1. https://youtu.be/1c6a0BNs yek 2. https://www.britannica.co m/science/insulin 3. https://www.medicalnewstoda y.com/articles/316427#overvie w	C1 C1 C2 C1 C2 C1 C2 C2 C2	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Bone pathophysiology (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroid ism	<ul> <li>Discuss in detail hypoparathyroidism</li> <li>Describe hyperparathyroidism Describe osteoporosis</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 21, Page 378,380,381,385,387)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 453)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 779)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 54, Page 881,890)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 80, Page 1003,1006)</li> </ul>	<ol> <li>https://www.orthobullet s.com/basic- science/9031/rickets</li> <li>https://youtu.be/Srm2G H1dusg</li> <li>https://www.webmd.co m/osteoporosis/what- is-osteomalacia</li> </ol>	C2 C1 C1	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

Insulin and Glucagon:Struct ure and metabolic functions (Second week)	<ul> <li>Describe physiological anatomy of pancreas</li> <li>Describe chemistry, synthesis and transport of insulin</li> <li>Describe the factors which affect secretion of insulin</li> <li>Discuss mechanism of action of insulin</li> <li>Describe the physiological actions of insulin</li> <li>Explain mechanism of insulin secretion</li> <li>Describe mechanism of action of glucagon</li> <li>Discuss regulation of secretion of glucagon</li> <li>Explain the functions of glucagon</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 24, Page 429,445)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 440,446)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 22,Page 743)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 56,Page 902)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 79, Page 973,982)</li> </ul>	1. https://youtu.be/1c6a0BNs yek 2. https://www.britannica.co m/science/insulin 3. https://www.medicalnewstoda y.com/articles/316427#overvie w	C1 C1 C2 C1 C2 C1 C2 C2 C2	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE
Adrenal gland and its hormones (Fourth week)	<ul> <li>Describe physiological anatomy of adrenal gland</li> <li>Enumerate its various hormones</li> <li>Describe synthesis, transport &amp; metabolism of adrenocortical hormones</li> <li>Describe mechanism, physiological actions of aldosterone</li> <li>Explain the phenomenon of aldosterone escape</li> <li>Describe regulation of aldosterone secretion</li> <li>Enlist abnormalities of aldosterone secretion</li> <li>Describe mechanism, physiological actions of cortisol Discuss anti stress and anti-</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 20, Page 351-364)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 427)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 765)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 53,Page 866)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 78,Page 955)</li> </ul>	<ol> <li>https://youtube/2- Z3Q6BZuBY</li> <li>https://journals.phy siology.org/doi/abs/ 10.1152/ajplegacy. 1964.207.1.109</li> <li>https://www.britann ica.com/science/ald osterone</li> </ol>	C1 C1 C1 C2 C1 C1 C2 C2 C1 C2 C1 C2	SGD	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment, MST based Assessment) OSPE

		ı	
inflammatory actions of cortisol			
• Describe regulation of cortisol			
secretion			
• Discuss functions of adrenal			
androgens			
• Describe the chemistry, secretion			
regulation of secretion of ACTH			
Discuss the actions of ACTH			

## **Biochemistry Small Group Discussion (SGDs)**

Topic	At The End Of Tutorial Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Classification	Classify Endocrine hormones	C1	SGD	MCQs
of endocrine hormones,	Disscus the mechanism of action of endocrine hormones	C2		SAQs Viva
Adrenocortical Hormones	• Elaborate formation, functions & related disorders of adrenocortical hormones	C2	SGD	MCQs SAQs Viva

# **Anatomy Self Directed Learning (SDL)**

Topics	Learning objectives	Learning Resources	
	Describe the borders and surfaces of body and the two cornuas of hyoid bone.	Clinical Oriented Anatomy by Keith L.	
	Discuss the attachments on the hyoid bone.	Moore.6TH Edition. (Chapter 8, Page 982-	
Bones of neck	Discuss the related applied of hyoid.	985).	
Hyoid Bone, Cervical	Describe anatomical features of cervical typical & atypical vertebrae .	• https://youtu.be/Mrtt9s72a7I?si=-	
vertebrae	• Discuss the intervertebral joints& movements of cervical region of vertebral column.	ICPt14ihH7g0tKE	
	• Discuss the anatomical basis of cervical pain & injuries of cervical vertebral column	https://youtu.be/4Q244XGveyQ?si=TH6I     MAJC42P, GP, 2	
	Read relevant research article	M2Jf43P_SBv3	
	Use digital library.		
	• Discuss the location, attachments & actions of SCM & trapezius.	Clinical Oriented Anatomy by Keith L.	
	• Describe boundaries & location of posterior cervical region.	Moore.6TH Edition. (Chapter 8, P 989-	
0. 1:1 .:1	• Discuss suboccipital triangle of neck & its contents.	992).	
Sternocleidomastoid	Discuss related clinicals		
region & superficial & deep fascias of neck	Discuss the location, attachments & actions of SCM & trapezius.	- harmy//www.ha/aCaaWDaC471-9ai-Maifey	
ucep fascias of ficek	Describe boundaries & location of posterior cervical region .	https://youtu.be/nSaaWPzG4Zk?si=Muj6x     MLX8fYkPOie	
	Discuss related clinicals	https://youtu.be/dEpCSJajCew?si=OM4W	
	Read relevant research article	bKbS7Eodte4	
	Use digital library.		
	Describe boundaries of posterior triangle.	Clinical Oriented Anatomy by Keith L.	
	Discuss the muscles in lateral cervical region .	Moore.6TH Edition. (Chapter 8, Page 992-	
Lateral cervical region	• (splenius capitus ,levator scapulae ,middle scalene &posterior scalene.	999).	
	Describe boundaries and contents of occipital triangle	https://youtu.be/bk9KA2nR7PA?si=jBEzE	
	Discuss boundaries and contents of subclavian triangle	d-MWZ83ne6a	
	Discuss related clinicals	• https://youtu.be/kPUwVJE_j0I?si=	
	Read relevant research article	Ozn5s_bZLuoq-a	
	Use digital library.		

	Discuss the Muscles in anterior cervical region (suprahyoid muscle group	Clinical Oriented Anatomy by Keith L.
	& infrahyoid muscle group)	Moore.6TH Edition. (Chapter 8, Page,999-
	Discuss the anatomical basis of torticollis	1005).
Anterior Triangle	Discuss related clinicals.	https://youtu.be/hnLtAYvAMkw?si=EWZCqci
of neck & its subdivisions	Discuss arteries in anterior cervical region (carotid system of arteries)	SD2K91uo4
SUDUIVISIONS	Discuss veins in anterior cervical region	• https://youtu.be/YOgE2pmXfZg?si=7hU- ZAw7wcaomUyI
	Discuss formation of cervical plexus	ZAW/wcaomeyi
	Enumerate branches of cervical plexus	
	Discuss area of distribution	
	Read relevant research article	
	Use digital library	
	Discuss anatomy & functions of thyroid& parathyroid gland	Clinical Oriented Anatomy by Keith L.
	Discuss blood supply of thyroid gland	Moore.6TH Edition. (Chapter 8, Page
Thyroid and para	■ Discuss lymphatic drainage of thyroid gland	1018-1021).
thyroid gland	Discuss nerve supply of thyroid gland  Discuss nerve supply of thyroid gland	• https://youtu.be/7_Rd7IIEZPI?si=mhoplC
		BjHSUL6pwI
	Discuss related clinicals.	https://youtu.be/ruOirrIc6oY?si=frzfEV7L
	Read a relevant research article	qb52Pp6Q
	Use digital library	
	Discuss the anatomy of soft palate.	Clinical Oriented Anatomy by Keith L.
	Along with attachment of muscles and their actions.	Moore.6TH Edition. (Chapter 8, Page
Soft poloto larvay	Describe boundaries of tonsillar fossa.	1021-1032).
Soft palate, larynx	Discuss larynx in detail with its cartilages and muscles.	https://youtu.be/eBn3PMX0tfk?si=h Cg37nm5DsR6T1_s
	Discuss blood supply of larynx	https://youtu.be/4SDETzvJCVI?si_zWS
	• Discuss functions of larynx	HGf-prTqR1kqi
	Discuss trachea (revisit).      Discuss trachea (revisit).	
	Discuss related clinicals	
	Read a relevant research article     Use digital library	
_	• Use digital library	

# Physiology Self Directed Learning (SDL)

Topic	At The End Of Lecture Students Should Be Able To	References	Learning Resources	Learning Domains	Learning Strategy	Assessment Tools
(ON CAMPUS) Regulation of blood Glucose & Diabetes mellitus	<ul> <li>Describe various factors regulating blood glucose concentration</li> <li>Discuss the importance of blood glucose regulation</li> <li>Discuss the pathophysiology of diabetes mellitus</li> <li>Explain the physiology of diagnosis of diabetes mellitus</li> <li>Explain the treatment of diabetes mellitus</li> <li>Differentiate between type I &amp; type II diabetes mellitus</li> <li>Differentiate between diabetes mellitus &amp; diabetes insipidus</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 24, Page 435-438,446-448)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 445)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 22,Page 743)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 56,Page 915)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 79, Page 983)</li> </ul>	1. https://youtu.be/KY85 BUcQZew 2,https://www.pharma guideline.com/202 2/01/hormonal- regulation-of- blood-glucose- level.html 3.https://www.med icalnewstoday.com /articles/316427	C1 C2 C2 C2 C2 C2 C2 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation
Abnormalities of adrenocortical hormone	<ul> <li>Discuss in detail Cushing's syndrome</li> <li>Differentiate between Cushing disease and Cushing's syndrome</li> <li>Discuss adrenogenital syndrome</li> <li>Discuss the physiological anatomy of adrenal medulla</li> <li>Enumerate various hormones secreted by adrenal medulla</li> <li>Describe the steps involved in synthesis of catecholamines</li> <li>Explain the function of catecholamines</li> <li>Discuss stress response</li> <li>Describe pheochromocytoma</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 20, Page 364-373)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 431,434,437)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 765)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup></li> </ul>	https://journals .physiology.or g/doi/abs/10.11 52/ajplegacy.1 964.207.1.109 https://youtu.b e/pSeU9Ei-3u4 https://medline plus.gov/adren alglanddisorder s.html	C2 C2 C2 C1 C1 C2 C2 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation

Bone pathophysiolog y (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroi dism)	<ul> <li>Discuss in detail hypoparathyroidism</li> <li>Describe hyperparathyroidism</li> <li>Describe osteoporosis</li> </ul>	Edition. Section 07(Chapter 53,Page 874,875)  Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> EditionSection 14. (Chapter 78, Page 969)  Ganong's Review of Medical Physiology.25 <sup>TH</sup> Edition.Section 03 (Chapter 21, Page 378,380,381,385,387)  Physiology by Linda S. Costanzo 6 <sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 453)  Human Physiology by Dee Unglaub Silver thorn. 8 <sup>TH</sup> Edition.(Chapter 23,Page 779)  Physiological Basis of Medical Practice by Best & Taylor's.13 <sup>th</sup> Edition. Section 07(Chapter 54, Page 881,890)  Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> EditionSection 14. (Chapter 80, Page 1003,1006)	1. <a href="https://www.orthobullets.com/basic-science/9031/rickets">https://www.orthobullets.com/basic-science/9031/rickets</a> 2. <a href="https://youtu.be/srm2GH1dusgg">https://youtu.be/srm2GH1dusgg</a> 3. <a href="https://www.webmd.com/osteoporosis/what-is-osteomalacia">https://www.webmd.com/osteoporosis/what-is-osteomalacia</a>	C2 C1 C1	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation
(OFF CAMPUS) Hypothalamic– pituitary axis & GH	<ul> <li>Recall the physiological anatomy and parts of pituitary gland</li> <li>Enumerate various cell types in pituitary gland along with their secretion and function</li> <li>Explain connections of anterior and posterior pituitary gland with hypothalamus</li> <li>Enlist various hormones secreted from anterior &amp; posterior pituitary gland</li> <li>Describe metabolic functions of</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup>         Edition.Section 03 (Chapter 17, Page 307,313,324)</li> <li>Physiology by Linda S.         Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 407,411)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup>         Edition. (Chapter 07,Page 241)</li> </ul>	https://www.m dpi.com/2072- 6694/15/15/38 20 https://youtu.b e/fqz4WOwfz4 Q https://resources.wfsah q.org/atotw/the- hypothalamic-	<ol> <li>C1</li> <li>C1</li> <li>C1</li> <li>C2</li> <li>C1</li> <li>C1</li> <li>C2</li> <li>C1</li> <li>C2</li> <li>C2</li> <li>C2</li> <li>C2</li> <li>C2</li> <li>C2</li> </ol>	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE

	growth hormone  • Elaborate the role of growth hormone in soft tissue and bone growth  • Discuss role of somatomedins in relation with growth hormone  • Explain regulation of secretion	<ul> <li>(Chapter 23,Page 775)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 51,Page 837)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 76, Page 929)</li> </ul>	pituitary-axis-part- 1-anatomy- physiology/			SDL Evaluation
Introduction to endocrinology & Signal transduction	<ul> <li>Classify hormones according to solubility and chemical nature</li> <li>Describe the nature&amp; synthesis of hormones</li> <li>Differentiate different classes of hormones</li> <li>Describe the secretion, transport, feedback control&amp; clearance of hormones</li> <li>Differentiate different classes of hormones</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 16, Page 301,304)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition.Endocrine Physiology (chapter 09, page 395)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition. (Chapter 07,Page 235,250)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 50,Page 817-831)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> EditionSection 14. (Chapter 75, Page 915-928)</li> </ul>	https://youtu.b     e/QLcxQT1fb     c     https://www.kh     anacademy.org     /science/ap-     biology/cell-     communication     -and-cell-     cycle/cell-     communication     /a/introduction-     to-cell-     signaling     https://youtu.be/GHw     MJnxaiys	C2 C1 C2 C1 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation
Insulin and glucagon:	<ul> <li>Describe physiological anatomy of pancreas</li> <li>Describe chemistry, synthesis and transport of insulin</li> <li>Describe the factors which affect secretion of insulin</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup>         Edition.Section 03 (Chapter 24, Page 429,445)</li> <li>Physiology by Linda S.         Costanzo 6<sup>th</sup> Edition.Endocrine</li> </ul>	1. https://youtu.be/1c 6a0BNsyek 2. https://www.britan nica.com/science/i	C1 C1 C1 C2 C1 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS

<ul> <li>Describe the prinsulin</li> <li>Explain mechasecretion</li> <li>Describe mechasecribe m</li></ul>	hanism of action of action of action of secretion of actions of glucagon	•	Physiology (chapter 09, page 440,446) Human Physiology by Dee Unglaub Silver thorn. 8 <sup>TH</sup> Edition. (Chapter 22,Page 743) Physiological Basis of Medical Practice by Best & Taylor's.13 <sup>th</sup> Edition. Section 07(Chapter 56,Page 902) Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> EditionSection 14. (Chapter 79, Page 973,982)	nsulin 3. https://www.medicaln ewstoday.com/articles/ 316427#overview	C1 C2 C2		T based Assessment) OSPE SDL Evaluation
adrenal gland  Enumerate its  Describe synth metabolism of hormones  Describe mechactions of aldot explain the phaldosterone es  Describe regulated secretion  Enlist abnorm secretion  Enlist abnorm secretion  Describe mechactions of cort Discuss anti streinflammatory actions of cort Discuss function  Discuss function	nenomenon of scape lation of aldosterone alities of aldosterone chanism, physiological tisol	•	Ganong's Review of Medical Physiology.25 <sup>TH</sup> Edition.Section 03 (Chapter 20, Page 351-364) Physiology by Linda S. Costanzo 6 <sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 427) Human Physiology by Dee Unglaub Silver thorn. 8 <sup>TH</sup> Edition.(Chapter 23,Page 765) Physiological Basis of Medical Practice by Best & Taylor's.13 <sup>th</sup> Edition. Section 07(Chapter 53,Page 866) Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> EditionSection 14. (Chapter 78,Page 955)	1. https://youtube/2-Z3Q6BZuBY  1. https://journals.physiology.org/doi/abs/10.1152/ajplegacy.1964.207.1.109  2. https://www.britannica.com/science/aldosterone	C1 C1 C1 C2 C1 C2 C2 C1 C2 C2 C1 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation

Thyroid hormone:	regulation of secretion of ACTH  Discuss the actions of ACTH  Recall physiological anatomy of thyroid gland  Briefly explain secretions of thyroid gland  Compare the features of tri iodothyronine with thyroxine  Describe the steps of synthesis of thyroid hormone  Discuss in detail half-life, release, and transport of thyroid hormones  Explain regulation of secretion of thyroid hormone	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup> Edition.Section 03 (Chapter 19, Page 337)</li> <li>Physiology by Linda S. Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 419)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup> Edition.(Chapter 23,Page 770)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup> Edition. Section 07(Chapter 52,Page 855)</li> <li>Textbook of Medical Physiology by Guyton &amp; Hall.14<sup>th</sup> Edition Section 14. (Chapter 77, Page 941)</li> </ul>	1.  https://youtu.b e/afVX3mlNB 80 2. https://www.sc iencedirect.co m/topics/bioch emistry- genetics-and- molecular- biology/thyroid -hormone- release 3. https://byjus.co m/biology/thyr oid-hormone/	C1 C2 C2 C1 C2 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation
Abnormalities of thyroid hormone (Goiter, hypothyroidism and hyperthyroidis m)	<ul> <li>Enlist disorders of thyroid gland</li> <li>Discuss in detail causes, symptoms, diagnosis and treatment of hyperthyroidism</li> <li>Discuss in detail causes, symptoms, diagnosis and treatment of hypothyroidism</li> <li>Compare hypothyroidism with hyperthyroidism</li> <li>Differentiate between pituitary dwarfism and cretinism</li> </ul>	<ul> <li>Ganong's Review of Medical Physiology.25<sup>TH</sup>         Edition.Section 03 (Chapter 19, Page 344,345)</li> <li>Physiology by Linda S.         Costanzo 6<sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 425)</li> <li>Human Physiology by Dee Unglaub Silver thorn. 8<sup>TH</sup>         Edition.(Chapter 23,Page 773)</li> <li>Physiological Basis of Medical Practice by Best &amp; Taylor's.13<sup>th</sup>         Edition. Section 07(Chapter 52,Page 861)</li> </ul>	<ol> <li>https://www.hopkinsmedicine.org/health/conditions-and-diseases/disorders-of-the-thyroid</li> <li>https://youtu.be/0vnpmaSI57</li> </ol>	C1 C2 C2 C2 C2 C2	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation

	Discuss normal levels and metabolism	<ul> <li>Textbook of Medical         Physiology by Guyton &amp;         Hall.14<sup>th</sup> EditionSection 14.         (Chapter 77, Page 950)     </li> <li>Ganong's Review of Medical</li> </ul>	1.	C2		
Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin)	<ul> <li>of calcium and phosphate</li> <li>Describe the effects of hypocalcemia &amp; hypercalcemia</li> <li>Explain the absorption and excretion of calcium and phosphate</li> <li>Discuss in detail bone physiology</li> <li>Describe the steps involved the activation of Vitamin D</li> <li>Discuss the actions of vitamin D</li> <li>Describe the physiological anatomy of parathyroid glands</li> <li>Describe the chemistry &amp; regulation of secretion of parathyroid hormone</li> <li>Explain the actions of parathyroid hormones</li> <li>Describe functions and regulation of calcitonin</li> </ul>	Physiology.25 <sup>TH</sup> Edition.Section 03 (Chapter 21, Page 375-386)  • Physiology by Linda S. Costanzo 6 <sup>th</sup> Edition. Endocrine Physiology (chapter 09, page 448)  • Human Physiology by Dee Unglaub Silver thorn. 8 <sup>TH</sup> Edition.(Chapter 23,Page 777,779)  • Physiological Basis of Medical Practice by Best & Taylor's.13 <sup>th</sup> Edition. Section 07(Chapter 54,Page 881,890)  Textbook of Medical Physiology by Guyton & Hall.14 <sup>th</sup> Edition Section 14. (Chapter 80, Page 991)	https://youtu.be/JY QL7JEsF_4  2.https://teach mephysiolo gy.com/bio chemistry/e lectrolytes/ calcium- regulation	C1 C2 C2 C1 C2 C1 C1 C2 C1	SDL	MCQ SEQ VIVA VOCE MCQ (LMS based Aseessment,MS T based Assessment) OSPE SDL Evaluation

# **Biochemistry Self Directed Learning (SDL)**

Topic		At The End Of SDL Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool	Learning Resources
Classification & Mechanism of action of Endocrine Hormones	•	Classify Endocrine Hormones Discuss the Mechanism of action of various Endocrine Hormones	C1 C2	SDL	MCQs SAQs Viva	1. Harper's Illustrated Biochemistry 32nd edition, chapter 41, pages 482-484  2. Lippincott Illustrated Reviews, Biochemistry, 8th Edition, chapter 18, pages 265-266  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC67618  96/ https://www.youtube.com/watch?v=KSclrkk_Ako
Formation & Mechanism of action of Thyroid Hormone	•	Elaborate the nature, formation, mechanism of action and related diseases of Thyroxin	C2	SDL	MCQs SAQs Viva	1. Harper's Illustrated Biochemistry 32nd edition, chapter 41, pages 492-493 and 498 2. Lippincott Illustrated Reviews, Biochemistry, 8th Edition, chapter 29, pages 452-454 https://www.nature.com/articles/boneres201311 https://www.youtube.com/watch?v=cDGmsR2ZILE
Synthesis & Mechanism of Action of Adrenocortical Hormones	•	Describe synthesis, mechanism of action and functions of Aldosterone, Cortisol and Adrenal androgens Discuss related clinical disorders  Describe mechanism of action and role of Adrenal Medullary Hormones Discuss related diseases	C2	SDL	MCQs SAQs Viva	1. Harper's Illustrated Biochemistry 32nd edition, chapter 41, pages 485-488, 491- 492, and 495-496, 498-499  2. Lippincott Illustrated Reviews, Biochemistry, 8th Edition, chapter 18, pages 262-266 https://www.ncbi.nlm.nih.gov/books/NBK470339/https://www.youtube.com/watch?v=JII5N2N4d-khttps://www.sciencedirect.com/topics/medicine-and-dentistry/adrenal-medullahttps://www.youtube.com/watch?v=afzWLmd72Rk
Synthesis & Mechanism of Action of Insulin & Glucagon	•	Explain formation, mechanism of action and role of Insulin and Glucagon Discuss related diseases	C2	SDL	MCQs SAQs Viva	1. Harper's Illustrated Biochemistry 32nd edition, chapter pages 493-494  2. Lippincott Illustrated Reviews, Biochemistry, 8 <sup>th</sup> Edition, chapter 23, pages 341-354 <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155</a> 1. Harper's Illustrated Biochemistry 32nd edition, chapter pages 493-494  2. Lippincott Illustrated Reviews, Biochemistry, 8 <sup>th</sup> Edition, chapter 23, pages 341-354 <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155</a> 1. Harper's Illustrated Biochemistry 32nd edition, chapter pages 493-494  2. Lippincott Illustrated Reviews, Biochemistry, 8 <sup>th</sup> Edition, chapter 23, pages 341-354 <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC65155</a> 1. https://www.youtube.com/watch?v=1c6a0BNsyek https://www.youtube.com/watch?v=-3J6QRMerQE

Glucose Tolerance Test Curves Hypoglycemia Diabetic Ketoacidosis & Hyperosmolar Hyperglycemic State Online Clinical Evaluation	<ul> <li>Normal &amp; abnormal curves of glucose tolerance test and factors effecting it. Interpretation of GTT curves for Diabetes Mellitus</li> <li>Hypoglycemia, Hyperglycemia &amp; Diabetic ketoacidosis</li> </ul>	C2	SDL	MCQs SAQs Viva	1. Harper's Illustrated Biochemistry 32nd edition, chapter pages 719-720, 136-138 & 469-470  2. Lippincott Illustrated Reviews, Biochemistry, 8th Edition, chapters 23 & 25, pages 350-354 & 375-387  https://www.ncbi.nlm.nih.gov/books/NBK532915/https://www.ncbi.nlm.nih.gov/books/NBK532915/https://www.ncbi.nlm.nih.gov/books/NBK279052/https://www.youtube.com/watch?v=jCf7W1U4JKEhttps://www.ncbi.nlm.nih.gov/books/NBK534841/
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# **Histology Practicals Skill Laboratory (SKL)**

Topic	Learning Objectives At the end of practical students should be able to		Teaching Strategy	Assessment Tool
	Identify the histological slide of the pituitary gland	P		
Histology of pituitary gland	Illustrate the histological structure of the pituitary gland	C2	Skill lab	OSPE
	Enlist two points of identification	C1		VIVA
	Identify the histological slide of the adrenal gland	P		
Histology of adrenal gland	Illustrate the histological structure of the adrenal gland	C2	Skill Lab	OSPE
	Enlist two points of identification	C1	]	VIVA
	• Identify the histological slide of the thyroid and parathyroid gland	P		
Histology of thyroid and parathyroid gland	• Illustrate the histological structure of the thyroid and parathyroid gland	C2	Skill lab	OSPE VIVA
	Enlist two points of identification	C1		
	Identify the histological slide of the pancreas	P		
Histology of pancreas	Illustrate the histological structure of the pancreas	C2	Skill lab	OSPE
	Enlist two points of identification	C1		VIVA

## **Physiology Practicals Skill Laboratory (SKL)**

Topic	At The End Of Lecture Students Should Be Able To	References	Learning Resources	Learning Domains	Learning Strategy
	Principle	Practical Notebook of Physiology First year			Viva Voce
Examination of pupillary	Procedure	MBBS by Dr Saqib Sohail	A3/P3/C1	Practicals	Ospe
reaction	Precautions			/skill lab	Video Assissted
	Clinical correlation OF Pupillary				Assessment
	Reactions				
	Apparatus identification	Practical Notebook of Physiology First year			Viva Voce
Checking for color	Principle	MBBS by Dr Saqib Sohail	A3/P3/C1	Practicals	Ospe
vision	Procedure			/skill lab	Video Assissted
	Precautions				Assessment
	Clinical correlation for color vision				
	Revision	Practical Notebook of Physiology First year			Viva Voce
Revision of practical		MBBS by Dr Saqib Sohail	A3/P3	Practicals	Ospe
				/skill lab	Video Assissted
					Assessment

## **Biochemistry Practicals Skill Laboratory (SKL)**

Topic	At The End Of Practical Students Should Be Able To	C/P/A	Teaching Strategy	Assessment Tool
Estimation of Blood Glucose	Perform estimation of glucose by spectrophotometer	Р	Skill lab	OSPE
GTT	• Explain the procedure of practical, normal & abnormal curves of glucose and factors effecting it Interpret the result of GTT	P	Skill lab	OSPE

## **SECTION - III**

# **Basic and Clinical Sciences (Vertical Integration)**

## Content

- CBLs
- PBLs
- Vertical Integration LGIS

# **Case Based Learning Objectives (CBL)**

Subjects	Topics	At the end of the session the student should be able to	Learning
			Domains
Anatomy	Multi Nodular Goitre with Hypothyroidism	Apply basic knowledge of subject to study clinical case.	C3
	• Torticollis	Apply basic knowledge of subject to study clinical case.	C3
Physiology	Adrenocortical Hormone	Apply basic knowledge of subject to study clinical case	С3
D: 1 : .	• Thyrotoxicosis	Apply basic knowledge of subject to study clinical case.	C3
Biochemistry	Addison's Disease	Apply basic knowledge of subject to study clinical case	C3

# Vertical Integration LGIS Pathology

Topic	At the end of this LGIS students of should be able to:		Teaching Strategy	Assessment Tool
Pituitary	Discuss pathogenesis of pituitary adenomas	C2		
disorders	Causes of hypopituitarism and posterior pituitary syndromes	C2	LGIS	MCQ's
	Describe pathogenesis of Tetany	C2		
	Causes of Hypoparathyroidism and	C2		
Calcium	Hyperparathyroidism (primary and secondary)		LGIS	MCQ's
metabolism	<ul><li>Describe the pathogenesis of Rickets and</li><li>Osteomalacia</li></ul>			
disorders				
	Describe the pathological features of Osteoporosis and	C2		
	osteopetrosis			
	Define and discuss pathogenesis of	C2		
Adrenocortical	Addison's disease and Conn's syndrome	C2		
disorders	<ul> <li>Describe the pathogenesis of Cushing syndrome</li> <li>Explain dexamethasone suppression test and its role in diagnosis</li> </ul>		LGIS	MCQ's
	Define diabetes	C1		

Diabetes mellitus	s • Classify diabetes		C2	LGIS	MCQ's
	•	Discuss pathogenesis of type I and type II diabetes mellitus			
	•	Define hypothyroidism and hyperthyroidism	C1		
Diagnosis of	•	Extract lab diagnosis of hypothyroidism and hyperthyroidism	C2	LGIS	MCQ's
thyroid	•	Describe clinical features of hyper and hypothyroidism	C2		

## Medicine

Topic	At the end of this LGIS students of should be able to:	Learning Domain	Teaching Strategy	Assessment Tool
Hypothyroidism and	<ul> <li>Discuss discuss pathophysiology, clinical manifestations of hypothyroidism and hyperthyroidism</li> </ul>		LGIS	MCQ
hyperthyroidism	Workup and management	C2		
Hypocalcemia and	<ul> <li>Discuss pathophysiology, clinical manifestations of hypocalcemia and hypercalcemia</li> </ul>	C2	LGIS	MCQ
hypercalcemia	Workup and management	C2		
Diabetes mellitus	<ul> <li>Discuss pathophysiology, clinical manifestations of type I and type II diabetes mellitus</li> </ul>	C2	LGIS	MCQ
	Discuss Workup and management	C2		
	<ul> <li>Define and discuss pathophysiology</li> </ul>	C2		
Syndrome of	<ul> <li>Discuss the causes</li> </ul>	C2	LGIS	MCQs
inappropriate ADH	Describe clinical features	C2		
secretion (SIADH).	Describe the management	C2		
	<ul> <li>Define and discuss pathophysiology</li> </ul>	C1		
	Discuss the causes	C2	LGIS	MCQs
Cushing syndrome	Describe clinical features	C2		
	Describe the management	C2		

## Surgery

Topic	At the end of this LGIS students of should be able to:	Learning Domain	Teaching Strategy	Assessment Tool
	<ul> <li>Enlist swellings infront of neck</li> </ul>	C1		
	<ul> <li>How to differentiate swellings in neck</li> </ul>	C2		
	<ul> <li>Explain What is Hyperthyroidism</li> </ul>	C2	LGIS	MCQ
	<ul> <li>What is Hypothyroidism</li> </ul>	C2		
Thyroid	Appreciate MNG	C2		
Thyroid	Appreciate Solitary Nodule	C2		
	Appreciate Toxic Nodule	C2	]	
	<ul> <li>Outline the investigations for Thyroid pathologies</li> </ul>	C2		
	Outline the Management of different thyroid Pathologies	C2		
	Enlist hormones secreted by Adrenal Gland	C2		
Adrenal Tumours	Describe Clinical Manifestations of different adrenal disease	C2	LGIS	MCQ
	Outline the management plan	C2	]	
	Describe Diabetic Foot	C2		
Diabetic foot	Classify Diabetic foot	C1	LGIS	MCQ
	Describe Pathophysiology of Diabetic foot	C2		
	Outline Management of Diabetic foot	C2		

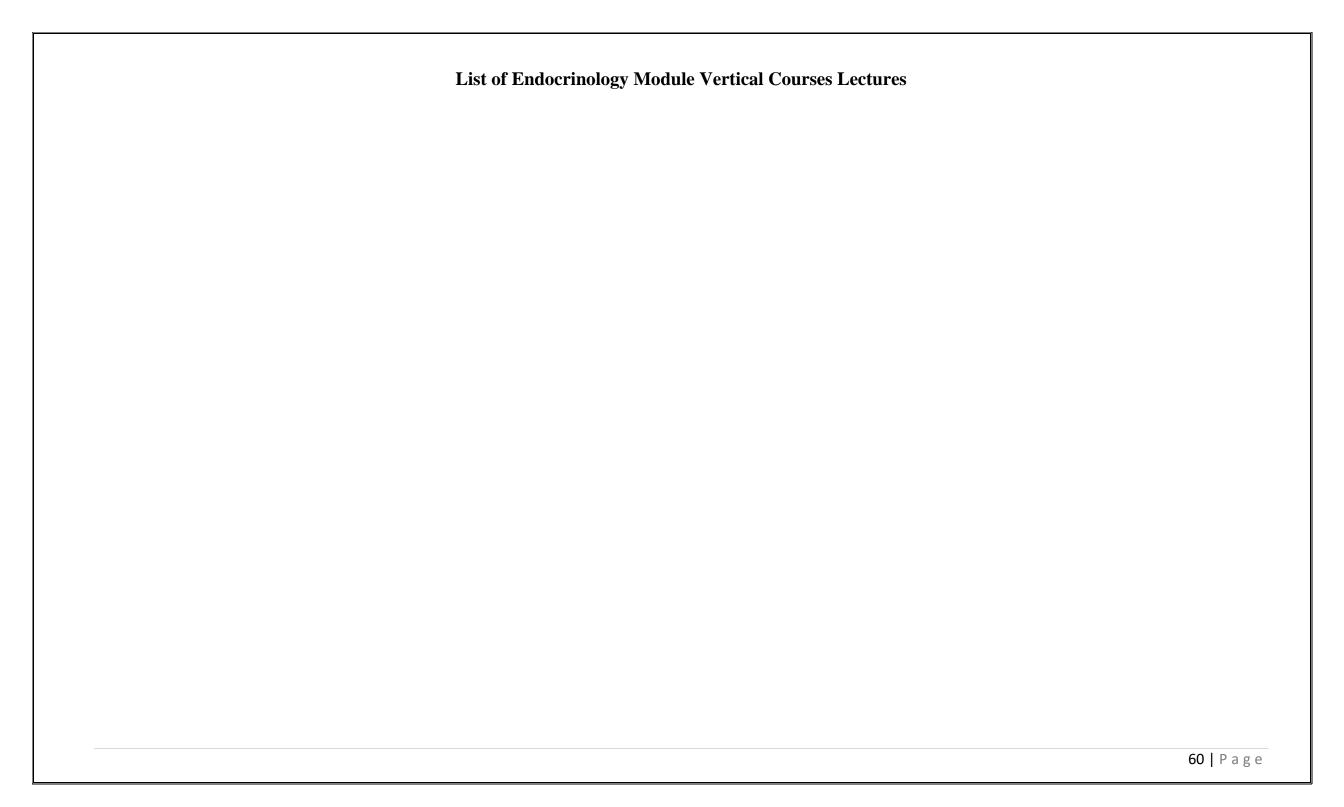
## **Gynaecology & Obstetrics**

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
	Diabetes Mellitus:	C2		
Endocrine	<ul> <li>Know why pregnancy is a diabetogenic state</li> </ul>			
disorders in pregnancy	<ul> <li>Define gestational diabetes mellitus (GDM)</li> </ul>	C1	LGIS	MCQs
(diabetes	<ul> <li>Correlate clinical features with pathophysiology of GDM</li> </ul>	C2		
mellitus,thyroid disorders)	Outline brief management plan for these conditions	C2		
uisorders)	Know the methods for screening of diabetes in pregnancy	C2		

	Thyroid disorders:	C1		
	<ul> <li>Know pathophysiology of common thyroid disorders during pregnancy</li> </ul>	C2		
	<ul> <li>Understand clinical presentation of thyroid disorders in pregnancy</li> </ul>	C2		
	Comprehend effects of thyroid disorders on mother and fetus	C2		
	Define primary amenorrhea, secondary amenorrhea and oligomenorrhoea.	C1		
Primary amenorrhoea/ delayed puberty	<ul> <li>Enumerate the causes of amenorrhea:</li> <li>Hypothalamic</li> <li>Pituitary</li> <li>Ovarian</li> <li>Endometrial</li> <li>Structural</li> </ul>	C1	LGIS	MCQs
	<ul> <li>Understand physical and hormonal changes at puberty / secondary sexual characteristics</li> </ul>	C2		
	<ul> <li>Know basic pathophysiology of disorders of puberty</li> <li>Precocious puberty</li> <li>Delayed puberty</li> </ul>	C2		
	Identify clinical features of precocious puberty	C1		

## **Peadiatrics**

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Endocrine	Differentiate between the clinical features of hypothyroidism	C2	LGIS	MCQs
Problems	Interpret the investigations required for diagnosis of hypothyroidism	C2	LGIS	MCQs



#### SECTION – IV

# **Spiral Courses**

#### **Content**

- Longitudinal Themes
  - o The Holy Quran Translation
  - o Pak Studies/Islamiyat
  - o Behavioral Sciences
  - o Biomedical Ethics
  - $\circ \quad \textbf{Early Clinical Exposure (ECE)}$

# Radiology & Artificial Inteligence

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Basics of	• Categorize different tissues from most to least opaque on x-ray including: bone, soft tissue, air, metal, and fat	C2	LGIS	MCQs
Radiology	• Distinguish between the different types of contrast used in imaging exams and the potential diagnostic benefits of each	C2	LGIS	MCQs

## **Behaveioural Sciences**

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessment Tool
Psychosocial Assessment	• To be able to do a detailed interview keeping in mind the psychological and social aspects in predisposing, precipitating and maintaining diseases.	C2	LGIS	MCQs
Psychosocial Assessment	To be able to do a detailed interview keeping in mind the psychological and social aspects in predisposing, precipitating and maintaining diseases.	C2	LGIS	MCQs

## **Biomedical Ethics & Professionalism**

Topic	At The End Of Lecture Students Should Be Able To	Learning Domain	Teaching Strategy	Assessi	ment Tool
History of Medical Ethics	Discussion on Health Research ethics focusing;  •Historical perspective of Tuskegee studies, Willow brook Experiment  •Codes of medical ethics: traditional foundations and contemporary practice  •Nuremburg code, Belmont report, Declaration of Helsinki and importance of historical background of ethics in current research trends  • General ethical principles including explanation of 04 basic principles of Beneficence, non-maleficence, respect and justice.  - Interpretation research ethics for;  - Informed consent and confidentiality in research HR	At the end of the session students should be able to;  • Explain the meaning of the term "ethics".C1  • Describe the historical perspective of global development of medical ethics. C1  • Describe the codes of medical ethics and their implications.C1  • Recognize ethical issues relevant to the case situation and apply the ethical codes as appropriate. C2  • Discuss the development of indigenous ethical codes in the South-East Asian Region. C2.  • Demonstrate sensitivity to cultural diversity in medical care.C3	LGIS 1hr contact session in 2-4 parallel classes, Conducted by Senior faculty.	1 MCQs of level C1 to C3 will cover this session teachings in relevant block examination in pool of total 04 MCQs.  Result / marks obtained will contribute towards Internal assessment (IA) in 1st Prof.  MBBS exam.	Guidelines and Teachers Handbook for Introducing Bioethics to Medical and Dental Students http://nbcpakistan.org.pk/assets/ may-16-bioethics-facilitator- bookmay-16%2C-2017.pdf The Nuremberg Code: http://www.hhs.gov/ohrp/archiv e/nurcode.html 10 WMA Declaration of Helsinki: http://www.wma.net/en/30publi cations/10policies/b3/ CIOMS Guidelines: http://www.cioms.ch/publicatio ns/layout_guide2002.pdf Nuffield Council on Bioethics Guidelines: http://www.sirc.org/news/nuffie ld.shtml

#### **Introduction to Spiral Courses**

#### The Holy Quran Translation

A course of Islamic Studies provides students with a comprehensive overview of the fundamental aspects of Islam, its history, beliefs, practices, and influence on society and familiarize students with a solid foundation in understanding the religion of Islam from an academic and cultural perspective. Ethics, in integrated form will shape the core of the course to foster among students the universal ethical values promoted by Islam.

#### **Bioethics**

Biomedical ethics, also known as bioethics, is a field of study that addresses the ethical, social, and legal issues arising from medicine and the life sciences. It applies moral principles and decision-making frameworks to the practice of clinical medicine, biomedical research, and health policy. Biomedical ethics seeks to navigate the complex ethical dilemmas posed by advances in medical technology, research methodologies, and healthcare practices. Key areas of focus include patient rights and autonomy, confidentiality, informed consent, end-of-life care, resource allocation, and the ethics of genetic engineering, among others.

Biomedical ethics within medical universities plays a pivotal role in shaping the moral framework through which future healthcare professionals navigate the complex and often challenging decisions they will face in their careers. This critical discipline integrates ethical theories and principles with clinical practice, research, and healthcare policy, fostering a deep understanding of the ethical dimensions of medicine. By embedding biomedical ethics into the curriculum, Rawalpindi medical university equips students with the tools to critically analyze and address ethical dilemmas, ranging from patient confidentiality and informed consent to end-of-life care and the equitable distribution of healthcare resources.

This education goes beyond theoretical knowledge, encouraging students to apply ethical reasoning in practical scenarios, thus preparing them for the moral complexities of the medical field. Biomedical ethics also promotes a culture of empathy, respect, and integrity, ensuring that future medical practitioners not only excel in their technical skills but also uphold the highest ethical standards in patient care and research. Through seminars, case studies, and interdisciplinary collaborations, students are encouraged to engage in ethical discourse, reflecting on the societal impact of medical advancements and the responsibility of medical professionals to society. This foundational aspect of medical education cultivates a generation of healthcare professionals committed to ethical excellence, patient advocacy, and the pursuit of equitable healthcare for all.

#### Professionalism

Professionalism in medicine refers to the set of values, behaviors, and relationships that underpin the trust the public has in doctors and other healthcare professionals. It encompasses a commitment to competence, integrity, ethical conduct, accountability, and putting the interests of patients above one's own. Professionalism involves adhering to high standards of practice, including maintaining patient confidentiality, communicating effectively and respectfully with patients and colleagues, and continually engaging in self-improvement and professional development. It also includes a responsibility to improve access to high-quality healthcare and to contribute to the welfare of the community and the betterment of public health. In essence, professionalism in medicine is foundational to the quality of care provided to patients and is critical for maintaining the trust that is essential for the doctor-patient relationship.

Rawalpindi Medical University emphasizes the importance of professionalism in medicine, integrating it throughout its curriculum to ensure that students embody the core values of respect, accountability, and compassion in their interactions with patients, colleagues, and the community. This focus on professionalism is designed to prepare students for the complexities of the healthcare environment, instilling in them a deep sense of responsibility to their patients, adherence to ethical principles, and a commitment to continuous learning and improvement. Through a combination of theoretical learning, practical training, and mentorship, RMU encourages its students to exemplify professionalism in every aspect of their medical practice. Workshops, seminars, and clinical rotations further reinforce these values, providing students with real-world experiences that highlight the importance of maintaining professional conduct in challenging situations. RMU's approach to professionalism not only shapes competent and ethical medical professionals but also contributes to the broader mission of improving healthcare standards and patient outcomes. By prioritizing professionalism, Rawalpindi Medical University plays a crucial role in advancing the medical profession and ensuring that its graduates are well-equipped to meet the demands of a rapidly evolving healthcare landscape with honor and integrity.

#### **Communication Skills**

Communication skill for health professionals involves the ability to effectively convey and receive information, thoughts, and feelings with patients, their families, and other healthcare professionals. It encompasses a range of competencies including active listening, clear and compassionate verbal and non-verbal expression, empathy, the ability to explain medical conditions and treatments in an understandable way, and the skill to negotiate and resolve conflicts. Effective communication is essential for establishing trust, ensuring patient understanding and compliance with treatment plans, making informed decisions, and providing holistic care. It directly impacts patient satisfaction, health outcomes, and the overall efficiency of healthcare delivery

At Rawalpindi Medical University (RMU), the development of communication skills is regarded as a fundamental aspect of medical education, recognizing its critical importance in enhancing patient care, teamwork, and interdisciplinary collaboration. RMU is dedicated to equipping its students with exceptional communication abilities, enabling them to effectively interact with patients, their families, and healthcare colleagues. The curriculum is thoughtfully designed to incorporate various interactive and experiential learning opportunities, such as role-playing, patient interviews, and group discussions, which allow students to practice and refine their communication skills in a supportive environment.

By integrating communication skills training throughout its programs, RMU not only enhances the interpersonal competencies of its future healthcare professionals but also contributes to improving the overall quality of healthcare delivery. Graduates from RMU are distinguished not just by their clinical expertise but also by their ability to connect with patients and colleagues, making them highly effective and compassionate practitioners.

#### **Behavioral Sceinces**

Behavioral sciences in medicine focus on understanding and addressing the psychological and social aspects of health and illness. This interdisciplinary field combines insights from psychology, sociology, anthropology, and other disciplines to enhance medical care and patient outcomes. It explores how behavior, emotions, and social factors influence health, disease, and medical treatment. By incorporating behavioral science principles into medical practice, healthcare professionals can better understand patients' perspectives, improve communication, and promote positive health behaviors, ultimately contributing to more comprehensive and effective patient care.

#### Family Medicine

Family medicine is a medical specialty dedicated to providing comprehensive health care for people of all ages and genders. It is characterized by a long-term, patient-centered approach, building sustained relationships with patients and offering continuous care across all stages of life. It focuses on treating the whole person within the context of the family and the community, emphasizing preventive care, disease management, and health promotion.

The Family Medicine Curriculum at Rawalpindi Medical University (RMU) marks a significant stride towards holistic healthcare education, aiming to prepare medical graduates for the comprehensive and evolving needs of family practice. This curriculum is designed to offer a broad perspective on healthcare, focusing on preventive care, chronic disease management, community health, and the treatment of acute conditions across all ages, genders, and diseases. Emphasizing a patient-centered approach, the curriculum ensures that students develop a deep understanding of the importance of continuity of care, patient advocacy, and the ability to work within diverse community settings.

RMU's Family Medicine Curriculum integrates theoretical knowledge with practical experience. Students are exposed to a variety of learning environments, including community health centers, outpatient clinics, and inpatient settings, providing them with a well-rounded understanding of the different facets of family medicine. This hands-on approach is complemented by interactive sessions, workshops, and seminars that cover a wide range of topics from behavioral health to geriatric care, ensuring students are well-equipped to address the comprehensive health needs of individuals and families.

#### Artificial Intelligence

To realize the dreams and impact of AI requires autonomous systems that learn to make good decisions. Reinforcement learning is one powerful paradigm for doing so, and it is relevant to an enormous range of tasks, including robotics, game playing, consumer modeling and healthcare. This class will provide a solid introduction to the field of reinforcement learning and students will learn about the core challenges and approaches, including generalization and exploration. Through a combination of lectures, and written and coding assignments, students will become well versed in key ideas and techniques for RL. Assignments will include the basics of reinforcement learning as well as deep reinforcement learning — an extremely promising new area that combines deep learning techniques with reinforcement learning. In addition, students will advance their understanding and the field of RL through a final project.

#### Integrated Undergraduate Research Curriculum

The integrated undergraduate research curriculum (IUGRC) of RMU occupies a definite space in schedule of each of the five years in rational and incremental way. It has horizontal harmonization as well as multidisciplinary research work potentials. In the first-year teachings are more introductory & inspirational rather than instructional. The teachings explain what & why of research and what capacities are minimally required to comprehend research & undertake research. Some research dignitaries' lecture are specifically arranged for sharing their experiences and inspiring the students. Students are specifically assessed through their individual compulsory written feedback (reflection) after the scheduled teachings end.

#### Entrepreneurship

Entrepreneurship is the process of designing, launching, and running a new business, which typically starts as a small enterprise offering a product, process, or service for sale or hire. It involves identifying a market opportunity, gathering resources, developing a business plan, and managing the business's operations, growth, and development.

Entrepreneurship in medical universities represents a burgeoning field where the innovative spirit intersects with healthcare to forge advancements that can transform patient care, medical education, and healthcare delivery. This unique amalgamation of medical expertise and entrepreneurial acumen empowers students, faculty, and alumni to develop groundbreaking medical technologies, healthcare solutions, and startups that address critical challenges in the health sector. By integrating entrepreneurship into the curriculum, Rawalpindi Medical university is not only expanding the traditional scope of medical education but also fostering a culture of innovation and problem-solving. This enables future healthcare professionals to not only excel in clinical skills but also in business strategies, leadership, and innovation management.

Such initiatives often lead to the creation of medical devices, digital health platforms, and therapeutic solutions that can significantly improve patient outcomes and make healthcare more accessible and efficient. Through incubators, accelerators, and partnerships with the industry, medical universities are becoming hotbeds for healthcare innovation, driving economic growth, and contributing to the broader ecosystem of medical research and entrepreneurial success.

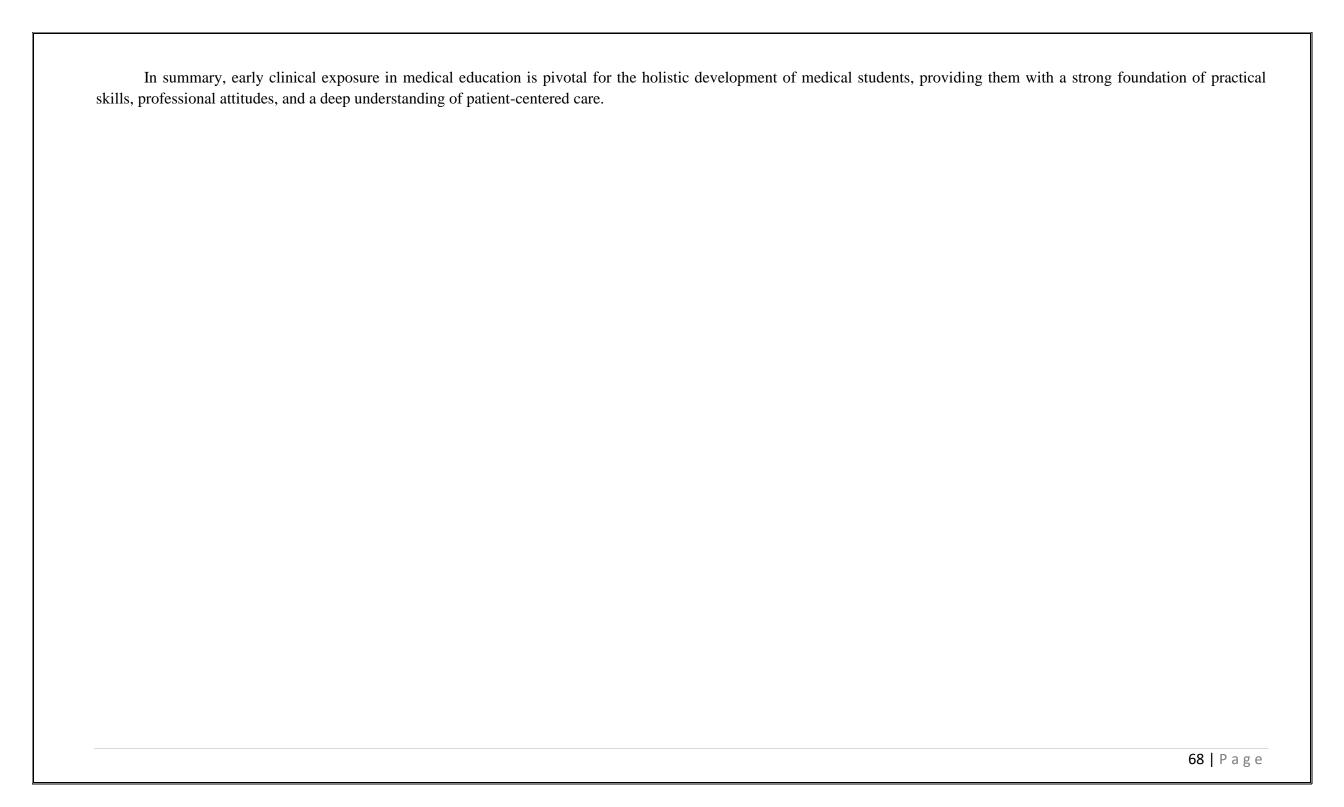
#### Digital Literacy Module

Digital literacy means having the skills one needs to live, learn, and work in a society where communication and access to information is increasingly through digital technologies like internet platforms, social media, and mobile devices.

#### Early Clinical Exposure (ECE)

Early clinical exposure helps students understand the relevance of their preclinical studies by providing real-world contexts. This can enhance motivation and engagement by showing students the practical application of their theoretical knowledge. Early exposure allows students to begin developing essential clinical skills from the start of their education. This includes not only technical skills but also crucial soft skills such as communication, empathy, and professionalism. Direct interaction with patients early in their education helps students appreciate the complexities of patient care, including the psychological and social aspects of illness. Early exposure to various specialties can aid students in making informed decisions about their future career paths within medicine.

Early clinical experiences contribute to the development of a professional identity, helping students see themselves as future physicians and understand the responsibilities and ethics associated with the profession. This can help reduce the anxiety associated with clinical work by familiarizing students with the clinical environment. It can build confidence in their abilities to interact with patients and healthcare professionals. Engaging with real-life clinical situations early on encourages the development of critical thinking and problem-solving skills, which are essential for medical practice. It helps bridge the gap between theoretical knowledge and practical application, leading to a more integrated and holistic approach to medical education. It allows students to observe and understand how healthcare systems operate, including the challenges and limitations faced in different settings.: Early patient interaction emphasizes the importance of patient-centered care from the outset, underscoring the importance of treating patients as individuals with unique needs and backgrounds. Practical experiences can enhance long-term retention of knowledge as students are able to connect theoretical learning with clinical experiences.: Early clinical experiences often involve working in multidisciplinary teams, which fosters a sense of collaboration and understanding of different roles within healthcare.

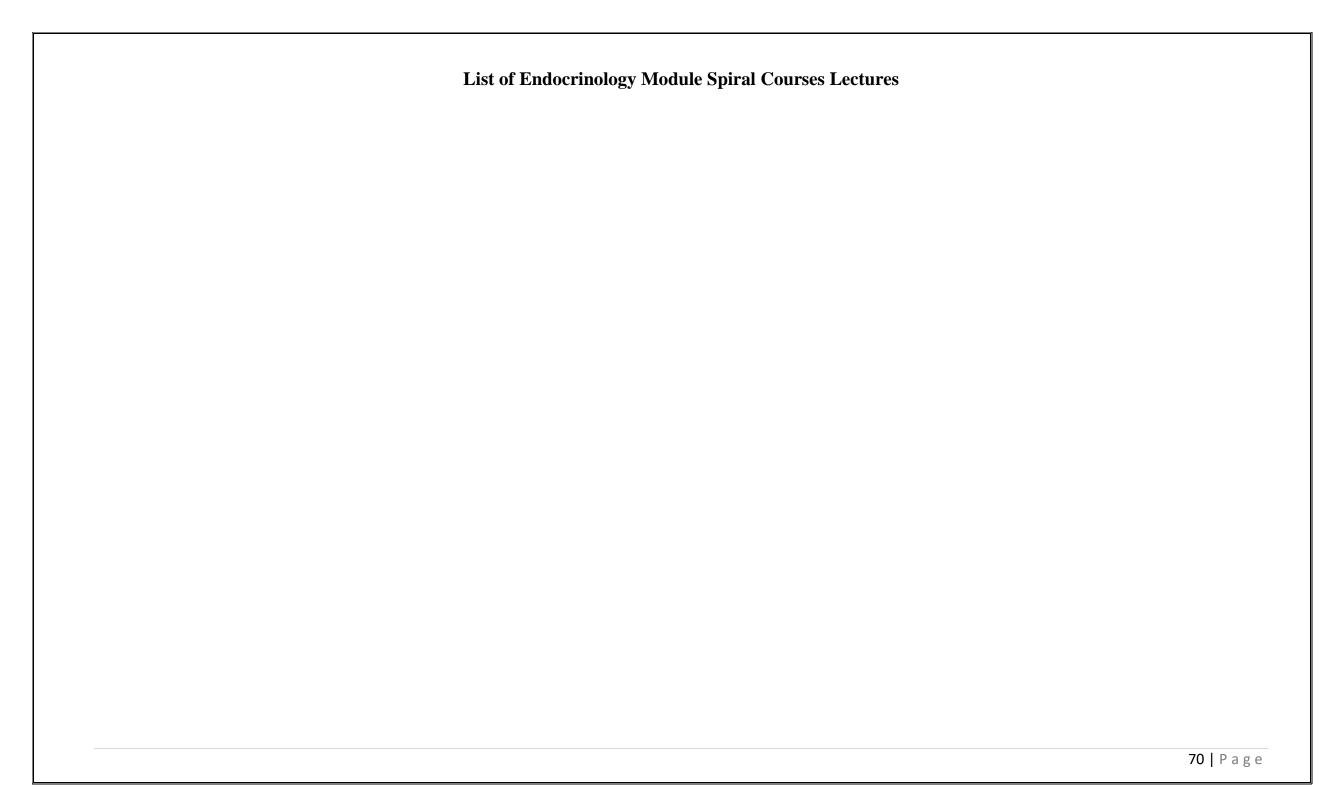


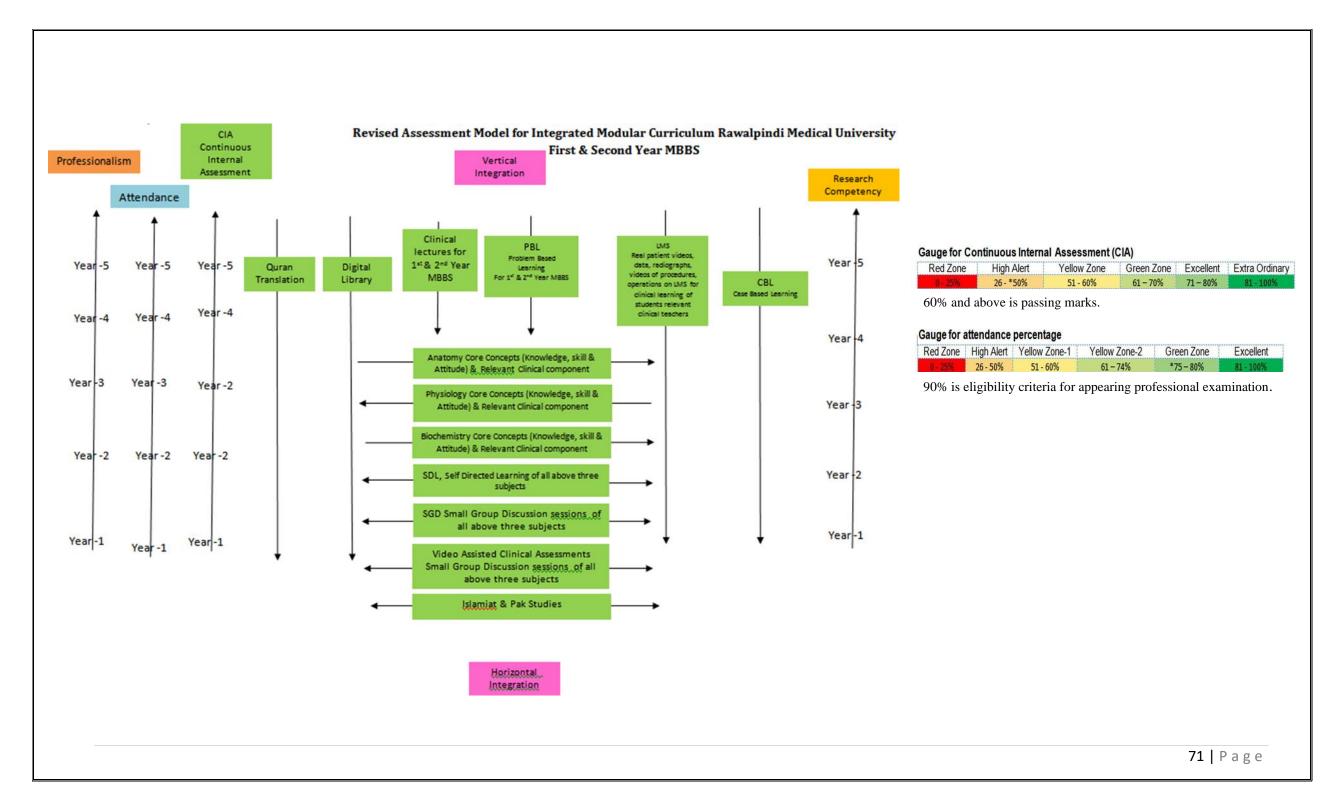
#### **SECTION - V**

## **Assessment Policies**

#### **Contents**

- Assessment plan
- Types of Assessment:
- Modular Examinations
- Block Examination
- Table 4: Assessment Frequency & Time in Endocrinology Module





## 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	Summative Assessment
Formative assessment is taken at modular (2/3 <sup>rd</sup> of the module is complete)	Summative assessment is taken at the mid modular (LMS Based),modular
level through MS Teams. Tool for this assessment is best choice questions	and block levels.
and all subjects are given theshare according to their hour percentage.	

#### **Modular Assessment**

Theory Paper	Viva Voce
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.	Structured table viva voce is conducted including the practical content of the module.
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)	

#### **Block Assessement**

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	Block OSPE
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.	This covers the practical content of the whole block.

### **Table 4-Assessment Frequency & Time in Endocirnology Module**

		Module – 1	Type of		Total Assessments Time		No. of Assessments	
Block	Sr#	Endocrinology Module Components	Assessments	Assessment Time	Summative Assessment Time	Formative Assessment Time		
	1	Weekly LMS Based Assessments (Anatomy, Physiology & Biochemistry)	Formative	2 Hours			2 Formative 6 Summative	
	2	End Module Examinations (SEQ, SAQ, EMQ & MCQs Based)	Summative	2 Hours	3 Hours 45	3 Hours		6 Summative
Block-	3	Audio Visual (AV) OSPE (10 slides) 5 minutes per slide	Summative	50 Minutes	Minutes			
	4	Anatomy Structured and Clinically Oriented Viva	Summative	10 Minutes				
	5	Physiology Structured & Clinically oriented Viva voce	Summative	10 Minutes				
	6	Assessment of Clinical Lectures & Spiral Curriculums	Formative	60 Minutes				

### **Learning Resources**

Subject	Resources
	A. Gross Anatomy
	1. Gray's Anatomy by Prof. Susan Standring 42th edition, Elsevier.
	2. Clinical Anatomy for Medical Students by Richard S. Snell 10 <sup>th</sup> edition.
	3. Clinically Oriented Anatomy by Keith Moore 9 <sup>th</sup> edition.
	4. Cunningham's Manual of Practical Anatomy by G.J. Romanes, 16th edition, Vol-I, II and III
	B. Histology
	1. B. Young J. W. Health Wheather's Functional Histology 6 <sup>th</sup> edition.
	2. Medical Histology by Prof. Laiq Hussain 7 <sup>th</sup> edition.
	C. Embryology
	1. Keith L. Moore. The Developing Human 11 <sup>th</sup> edition.
Anatomy	2. Langman's Medical Embryology 14 <sup>th</sup> edition.
	D. Website
	1. <a href="https://my.clevelandclinic.org/health/articles/9117-male-reproductive-system">https://my.clevelandclinic.org/health/articles/9117-male-reproductive-system</a>
	2. <a href="https://teachmeanatomy.info/pelvis/female-reproductive-tract/">https://teachmeanatomy.info/pelvis/female-reproductive-tract/</a>
	3. <a href="https://www.kenhub.com/en/start/pelvis-and-perineum">https://www.kenhub.com/en/start/pelvis-and-perineum</a>
	E. Youtube
	1. <a href="https://www.youtube.com/watch?v=G0ZuCilCu3E">https://www.youtube.com/watch?v=G0ZuCilCu3E</a>
	2. <a href="https://www.youtube.com/watch?v=50iuBgTQCrQ">https://www.youtube.com/watch?v=50iuBgTQCrQ</a>
	F. HEC Digital Library
	1. <a href="https://www.sciencedirect.com/science/article/pii/S0015028220304350">https://www.sciencedirect.com/science/article/pii/S0015028220304350</a>
	2. <a href="https://link.springer.com/article/10.1007/s11356-021-16581-9">https://link.springer.com/article/10.1007/s11356-021-16581-9</a>
	3. https://link.springer.com/chapter/10.1007/978-3-030-30766-0_25
	4. https://onlinelibrary.wiley.com/doi/abs/10.1111/and.13712
	A. Textbooks
	1. Textbook of Medical Physiology by Guyton and Hall 14 <sup>th</sup> edition.
	2. Ganong 'S Review of Medical Physiology 26 <sup>th</sup> edition.
DI ' 1	B. Reference Books
Physiology	1. Human Physiology by Lauralee Sherwood 10 <sup>th</sup> edition.
	2. Berne & Levy Physiology 7 <sup>th</sup> edition.
	3. Best & Taylor Physiological Basis of Medical Practice 13 <sup>th</sup> edition.
	4. Guyton & Hall Physiological Review 3 <sup>rd</sup> edition.
	C. Website
	1. <a href="https://teachmephysiology.com/reproductive-system/">https://teachmephysiology.com/reproductive-system/</a> (Reproductive physiology)

2. https://courses.lumenlearning.com/wm-biology2/chapter/the-ovarian-cycle-the-menstrual-cycle-andmenopause/ **3.** https://zerotofinals.com/obgyn/reproductivesystem/physiologyinpregnancy/ https://www.ibbiotech.com/en/info/sperm-capacitation/ D. Youtube 1. https://youtu.be/2 owp8kNMus (Female Reproductive system) 2. https://youtu.be/V9a2AQSJIMc (Dr Najeeb Lectures) https://youtu.be/rYVGjbzmAtg (Dr Najeeb lectures) E. HEC Digital Library 1. https://www.sciencedirect.com/science/article/abs/pii/S1532045621000296 2. https://www.sciencedirect.com/science/article/abs/pii/S001502822200485X F. Physiology Journals 1. https://rupress.org/jgp/article/5/4/441/30794/THE-RATE-OF-DECLINE-OF-MILK-SECRETION-WITH-THE 2. https://www.annualreviews.org/doi/abs/10.1146/annurev.ph.36.030174.001515?journalCode=physiol **3.** https://zerotofinals.com/obgyn/reproductivesystem/physiologyinpregnancy/ https://www.msdmanuals.com/home/women-s-health-issues/normal-pregnancy/stages-of-development-ofthe-fetus **Textbooks** 1. Harper's Illustrated Biochemistry 32th edition. 2. Lipponcott biochemistry 8<sup>th</sup> edition **B.** Reference Books 1.Lehninger Principle of Biochemistry 8<sup>th</sup> edition. 2. Biochemistry by Devlin 7<sup>th</sup> edition. C. Website https://www.sciencedirect.com/topics/biochemistry-genetics-and-molecular-biology/gonad-function https://www.sciencedirect.com/topics/biochemistry-genetics-and-molecular-biology/gonad-functionn **Biochemistry** https://www.sciencedirect.com/topics/biochemistry-genetics-and-molecular-biology/purine-synthesis https://www.sciencedirect.com/topics/medicine-and-dentistry/purine-metabolism-disorder https://www.cliffsnotes.com/study-guides/biology/biochemistry-ii/purines-andhttps://www.healio.com/hematology-oncology/learn-genomics/genomics-primer/regulation-of-geneexpression-in-eukaryote D. Youtube https://www.voutube.com/watch?v=A5u TY1A0t8 https://www.youtube.com/watch?v=A5u TY1A0t8

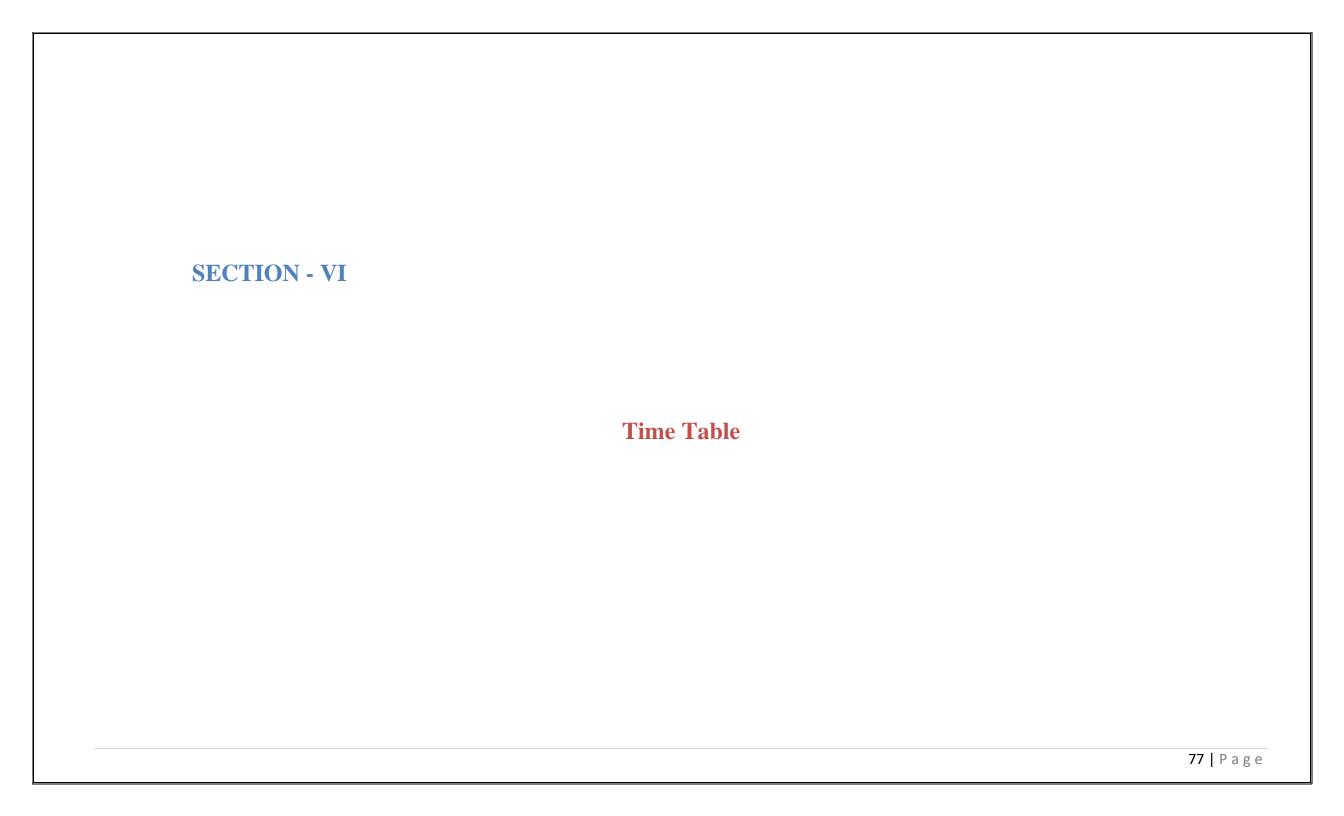
- https://www.youtube.com/watch?v=VXWyWzbigrg
- https://www.youtube.com/watch?v=e2KFVvI8Akk
- <a href="https://www.youtube.com/watch?v=n7Uec8Jtr4E">https://www.youtube.com/watch?v=n7Uec8Jtr4E</a>
- <a href="https://www.youtube.com/watch?v=J9jhg90A7Lw">https://www.youtube.com/watch?v=J9jhg90A7Lw</a>

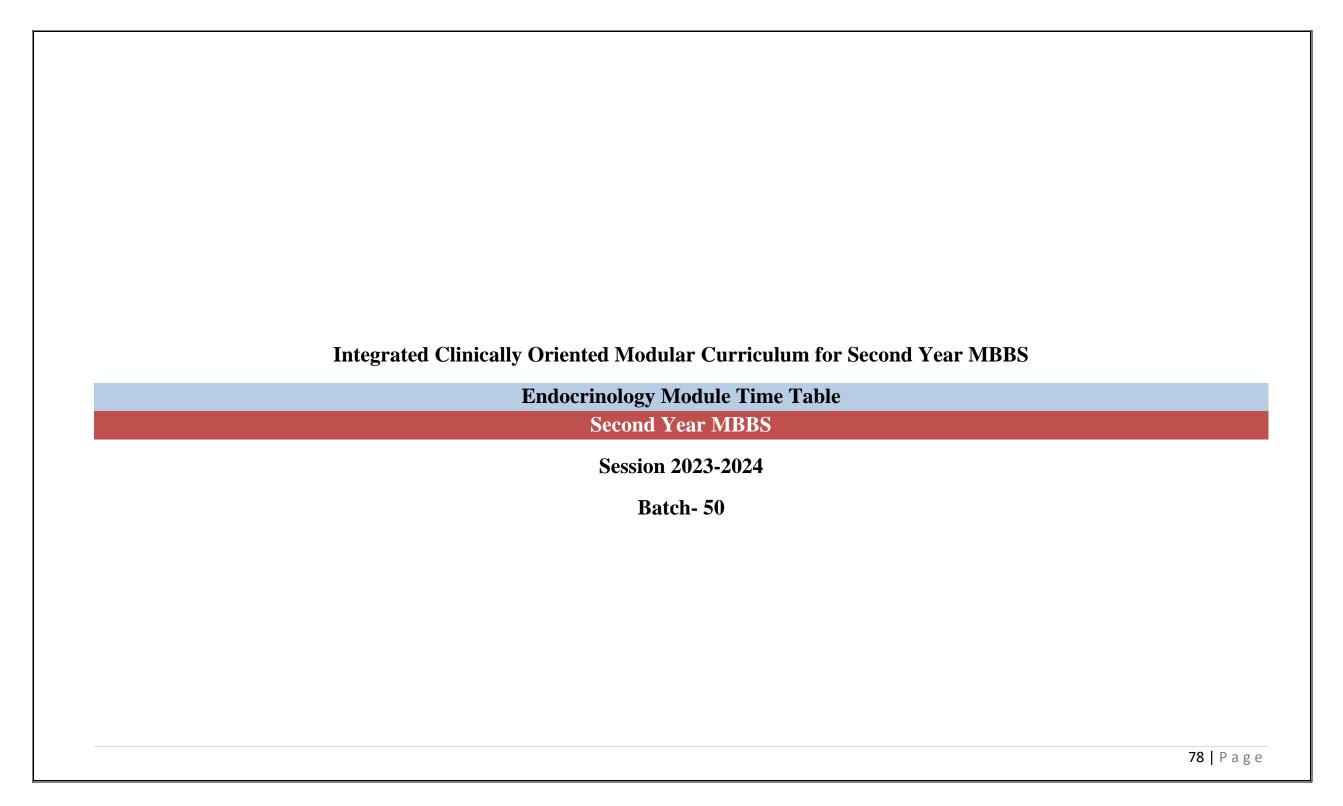
### E. HEC Digital Library

- <a href="https://www.ncbi.nlm.nih.gov/books/NBK29/">https://www.ncbi.nlm.nih.gov/books/NBK29/</a>
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3243375/
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4215161/
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC378357/
- https://www.nature.com/scitable/topicpage/regulation-of-transcription-and-gene-expression-in-1086/

### F. Biochemistry Journals

- https://academic.oup.com/bmb/article/11/2/126/256755
- https://www.sciencedirect.com/topics/medicine-and-dentistry/gonadal-hormone





### **Endocrinology Module Team**

Module Name : Endocrinology Module

Duration of module : 04 Weeks

Coordinator : Dr. Sidra Hamid

Co-coordinator : Dr.

27. Focal Person Quran Translation Lectures

28. Focal Person Family Medicine

Reviewed by : Module Committee

Dr. Uzma Zafar

Dr. Sadia Khan

Module Committee				Module Task Force Team	
15. Vice Chancellor RMU	Prof. Dr. Muhammad Umar	6.	Coordinator	Dr. Sidra Hamid (Assistant Professesor of Physiology)	
16. Director DME	Prof. Dr. Ifra Saeed	7.	DME Focal Person	Dr. Farzana Fatima	
17. Chairperson Anatomy & Dean Basic	Prof. Dr. Ayesha Yousaf	8.	Co-coordinator	Dr. Sadia Baqir (Senior Demonstrator of Anatomy)	
Sciences					
18. Chairperson Physiology	Prof. Dr. Samia Sarwar	9.	Co-Coordinator	Dr. (Demonstrator of Biochemistry)	
19. Chairperson Biochemistry	Dr. Aneela Jamil	10	. Co-coordinator	Dr. Aneela Yasmeen (Senior Demonstrator of Physiology)	
20. Focal Person Anatomy Second Year MBB	Dr. Maria Tasleem				
21. Focal Person Physiology	Dr. Sidra Hamid		DME Implementation Team		
		5.	Director DME	Prof. Dr. Ifra Saeed	
22. Focal Person Biochemistry	Dr. Aneela Jamil	6.	Assistant Director DME	Dr Farzana Fatima	
23. Focal Person Pharmacology	Dr. Zunera Hakim	7.	DME Implementation Team	Prof. Dr. Ifra Saeed	
				Dr. Farzana Fatima	
				Dr. Saira Aijaz	
24. Focal Person Pathology	Dr. Asiya Niazi	8.	Editor	Muhammad Arslan Aslam	
25. Focal Person Behavioral Sciences	Dr. Saadia Yasir				
26. Focal Person Community Medicine	Dr. Afifa Kulsoom				

### **Discipline wise Details of Modular Contents**

Block	Subjects	Embryology Histology	Histology Practical SKL. Lab.	Gross Anatomy	CBL	SDL	
III	• Anatomy	<ul> <li>Development of pituitary &amp; pineal gland gland</li> <li>Developmnt of thyroid &amp; parathyroid gland</li> <li>Developmnt adrenal gland and pancreas</li> </ul> <ul> <li>Pituitary &amp; pineal gland</li> <li>Adrenal gland pancreas</li> </ul>	<ul> <li>Pituitary         Gland</li> <li>Thyroid &amp;         parathyroid         gland</li> <li>Adrenal gland</li> <li>Pancreas</li> </ul>	<ul> <li>Bones of neck. Hyoid Bone &amp; Cervical vertebrae</li> <li>Fascias of Neck</li> <li>Superficial structurs of neck</li> <li>Lateral-cervical region (muscles &amp; triangles)</li> <li>Latera-cervical-region (neurovascular organization)</li> <li>Interior-cervical region (vessels of neck &amp; cervical plexus)</li> <li>Submandular region</li> <li>Soft palate</li> <li>Deep structures of neck</li> <li>Root of neck</li> <li>Thyroid&amp;Parathyroid gland</li> <li>Larynx</li> <li>Pharynx</li> <li>pancreas</li> </ul>		<ul> <li>Bones of neck</li> <li>SCM region &amp; superficial &amp; deep fascia</li> <li>lateral cervical region</li> <li>Anterior Triangle of neck &amp; its subdivisions</li> <li>Thyroid and para thyroid gland</li> <li>Online SDL Evaluation</li> <li>soft palate, larynx</li> </ul>	
	Physiology						
	Biochemistry	<u> </u>		hormones, Insulin and glucagon, Blo	ood gluco	ose regulation, Calcium revisit	
	The Holy Quran Translation	•					
	Islamiayat	•					
	Biomedical Ethics	History of Medical Ethics					
	Behavioral Sciences	Professionalism In Healthcare					
	Radiology & Artificial     Intelligence	Basics of Radiology					

Family Medicine	Approach to patient diabetes mellitus
	Vertical components
• Peads	Growth problems due to Endocrine causes
• Surgery	Thyroid Disorders
<ul> <li>Pathology</li> </ul>	Hypothyroidism and hyperthyroidism
<ul> <li>Medicine</li> </ul>	Diabetes Mellitus
• Obs & Gynae	Endocrine Disorders in Pregnancy (Diabetes Mellitus, Thyroid Disorders)
	Early Clinical Exposure (ECE)
Medicine	Thyroid disorders
	Hyperthyroidism
	Hypothyroidism
	Cushing Syndrome
• Surgery	Thyroid Nodule
	Multi nodular Goiter
	CA Thyroid
	Graves Diseases
• Eye	• Blindness
	Visual field defect
	Cataract
<ul> <li>Otolaryngology</li> </ul>	• Deafness
	Hearing tests
	Nasal Obstruction

### Categorization of Modular Contents Anatomy

Category A*	Category B**		Category (	<u>]</u> ***	
		Demonstrations / SGD	CBL	SKL/Practical's	Self-Directed Learning (SDL)
• Special Embryology	• Special Histology	<ul> <li>Bones of neck</li> <li>Hyoid Bone &amp;</li> <li>Cervical vertebrae</li> <li>Fascias of Neck</li> <li>Superficial structures of neck</li> <li>Lateral-cervical region (Muscles &amp; triangles)</li> <li>Lateral-cervical-region (Neurovascular organization)</li> <li>Anterior-cervical region (Muscles)</li> <li>Anterior-cervical region (Vessels of neck &amp; cervical plexus)</li> <li>Submandibular region</li> <li>Soft palate</li> <li>Deep structures of neck</li> <li>Root of neck</li> <li>Thyroid &amp; Parathyroid gland</li> <li>Larynx</li> <li>Pharynx</li> <li>Pancreas</li> </ul>	<ul> <li>Multi Nodular         Goitre with         Hypothyroidism</li> <li>Torticollis</li> </ul>	<ul> <li>pituitary gland</li> <li>Thyroid &amp; parathyroid gland</li> <li>Adrenal gland</li> <li>pancreas</li> </ul>	<ul> <li>Bones of neck</li> <li>SCM region &amp; superficial &amp; deep fascia</li> <li>lateral cervical region</li> <li>Anterior Triangle of neck &amp; its subdivisions</li> <li>Thyroid and para thyroid gland</li> <li>Online SDL Evaluation</li> <li>SDL Anatomysoft palate, larynx</li> </ul>

Category A\*: By Professors

Category B\*\*: By Associate & Assistant Professors

Category C\*\*\*: By Senior Demonstrators & Demonstrator

### **Teaching Staff / Human Resources of Department of Anatomy**

Sr .#	Designation of Teaching Staff / Human Resource	Total number of teaching staff
1.	Professor of Anatomy department	01
2.	Assistant professor of Anatomy department (AP)	01
3.	Demonstrators of Anatomy department	04

### **Contact Hours (Faculty)**

Sr. #	Hours Calculation for Various Type of Teaching Strategies	Total Hours
1.	Large Group Interactive Session (LGIS)	6*2=12
2.	Small Group Discussions (SGD)	15*2+2*1=32
3.	Practical / Skill Lab	20*1.5=30

### **Contact Hours (Students)**

Sr. #	Hours Calculation for Various Type of Teaching Strategies	Total Hours
1.	Large Group Interactive Session (LGIS)	1 * 6 = 06 hours
2.	Small Group Discussions (SGD)	2*15 = 32 hours
3.	Practical / Skill Lab	1.5 * 4 = 06 hours
4.	Self-Directed Learning (SDL)	2 * 4 = 08  hours

### Physiology

Category A	Category B	Category C
Thyroid hormone: Production, storage and release ( <b>By Prof.</b>	Hypothalamic–pituitary axis& GH (By Dr. Kamil)	CBL:
Dr.Samia Sarwar / Dr. Iqra)		Adrenocortical Hormone
Physiology of accommodation and clinical abnormalities ( <b>By Prof. Dr. Samia Sarwar / Dr. Uzma</b> )	Abnormalities of growth hormone secretion ( <b>By Dr. Kamil</b> )	PBL:
Physiological role of thyroid hormone ( <b>By Prof. Dr.Samia</b> Sarwar / <b>Dr. Iqra</b> )	Structure and metabolic functions (By Dr. Fareed)	Practical:  1. Examination of pupillary reaction  2. Checking for color vision  3. Revision of practica  SGD:
Abnormalities of thyroid hormone (Goiter, hypothyroidism and hyperthyroidism) (By Prof. Dr.Samia Sarwar / Dr. Iqra)	Hormones of posterior pituitary gland (oxytocin and ADH) (By Dr. Kamil)	<ol> <li>Signal transduction &amp; Growth hormone.</li> <li>Thyroid Hormones</li> <li>Insulin and Glucose Metabolism</li> <li>Bone pathophysiology (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroidism</li> <li>Insulin and Glucagon:Structure and metabolic functions (Second week)</li> <li>Adrenal gland and its hormones (Fourth week)</li> </ol>
`Introduction to endocrinology & Signal transduction -I (By Dr. Shmyla)	Regulation of blood Glucose & Diabetes mellitus (By Dr.Fareed)  Aldosterone and cortisol (By Dr.Sheena)  Abnormalities of adrenocortical hormone (By Dr.Sheena)	<ol> <li>SDL: (ON CAMPUS)</li> <li>Regulation of blood Glucose &amp; Diabetes mellitus</li> <li>Abnormalities of adrenocortical hormone</li> <li>Bone pathophysiology (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroidism)</li> </ol>
Introduction to endocrinology & Signal transduction- II ( <b>By Dr. Shmyla</b> )	Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin) (By Dr.Fahad)	(OFF CAMPUS)  1. Hypothalamic–pituitary axis & GH  2. Introduction to endocrinology & Signal transduction  3. Insulin and glucagon  4. Aldosterone and cortisol  5. Thyroid hormone  6. Abnormalities of thyroid hormone (Goiter, hypothyroidism and hyperthyroidism)  7. Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin

Category A\*: By Professors
Category B\*\*: By Associate & Assistant Professors

Category C\*\*\*: By Senior Demonstrators & Demonstrators

### **Teaching Staff / Human Resources of Department of Physiology**

Sr .#	Designation of Teaching Staff / Human Resource	Total Number Of Teaching Staff
1.	Professor of Physiology department	01
2.	Assistant professor of Physiology department (AP)	01
3.	Associate professor of Physiology department	01 (DME)
4.	Demonstrators of Anatomy department	07
5.	Residents of physiology department (PGTs)	08

### **Contact Hours (Faculty) & Contact Hours (Students)**

Sr .#	Hours Calculation for Various Type of Teaching Strategies	Total Hours
1.	Large Group Interactive Session (LGIS)	1. 14 * 1= 14 hours
2.	Small Group Discussions (SGD) Case based learning (CBL)	1.5 * 4 = 6  hours + 2  hrs = 8  hours
3.	Problem based learning (PBL)	
4.	Practical / Skill Lab	1.5 * 3 = 4.5 hours
5.	Self- Directed Learning	3x1=3hours (on campus) + $7x1=7$ hours (off campus) = $10$ hours

### **Biochemistry**

Category A*	Category B**		Catogery C***									
LGIS	LGIS	PBL	CBL	Practical's	SGD							
• Insulin & Glucagon	<ul> <li>Classification &amp; mechanism of action of hormones, Calcium metabolism (Revisit)</li> <li>Thyroid Hormones</li> <li>Adrenocortical Hormones</li> <li>Blood Glucose Regulation</li> </ul>		<ul> <li>Thyrotoxicosis</li> <li>Addison's Disease</li> </ul>	<ul> <li>Blood Glucose</li></ul>	<ul> <li>Classification &amp; mechanism of action of Endocrine Hormones</li> <li>Adrenocortical Hormones</li> </ul>							

Category A\*: By HOD and Assistant Professor

Category B\*\*: By All (HOD, Assistant Professors, Senior Demonstrators)

Category C\*\*\*: (By All Demonstrators)

### **Teaching Staff / Human Resource of Department of Biochemistry**

Sr. #	Designation of Teaching Staff / Human Resource	Total number of teaching staff
1	Assistant professor of biochemistry department (AP)	01
2	Demonstrators of biochemistry department	07

### **Contact Hours (Faculty) & Contact Hours (Students)**

Sr. #	Hours Calculation for Various Type of Teaching Strategies	Total Hours (Faculty)	Total Hours (student)
1.	Large Group Interactive Session (LECTURES)	2 * 8= 16hours	08
2.	Small Group Discussions (SGD)	1.5 * 5 = 7.5*4=30 hrs	6
3.	Problem Based Learning (PBL)	Zero	zero
4.	Practical / Skill Lab	1.5 * 5 = 7.5*4=30 hrs	6
5.	Self-Directed Learning (SDL)		07

### Endocrinology Module (First Week) (10-10-2024 To 16-10-2024)

$(10^{-1}0^{-2}024 \ 10 \ 10^{-1}0^{-2}024)$												
Date / Day	8:00a	m-9:20am	9:20am -	– 10:10am	10:10am- 10:30am	10:30am	-11:20am	11:20am-1	2:10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments(2HRS)
10-10-2024 Thursday		& CBL/SGD tioned at the end	PHYSIOL  Introduction to endocrinology & Signal transduction I	Hypothalamic–pituitary axis& GH	reak	Development of pituitary&. pineal gland	Histology of pituitary& pineal gland	PAKSTU Tareek e Khatn Muslim Milat l	e Naboat /	reak	Bones of neck Hyoid bone& Cervical	SDL Anatomy lateral cervical region
			Dr. Shmyla (Even)	Dr. Kamil (Odd)	B	Asst Prof Dr. Maria Tasleem (Even)	Prof. Dr Ifra Saeed (Odd)	Qari Aman	Ullah	B	Vertebrae	
	8:00 AM	M – 9:00 AM	9:00 AM -	- 10:00 AM		10:00 - 11:00A	M	11:00AM - 1	2:00PM			
	BEHAVIOURA	L SCIENCES LGIS	PHYSIOL	LOGY LGIS		ANATOMY LO	GIS	BIOCHEMIS	TRY LGIS			
11-10-2024 Friday	Professionalism in healthcare		Hypothalamic– pituitary axis& GH	Introduction to endocrinology & Signal transduction I		of pituitary & pineal gland	Development of pituitary&. pineal gland	Classification & Mechanism of action of Endocrine Hormone,  Thyroid Hormone			SDL Biochemist Classification of endocrine	
	Dr. Zarnain Umar	Dr. SadiaYasir (odd)	Dr Kamil	Dr. Shmyla	Asst Prof	Dr. Maria Tasleem	Prof. Dr Ifra Saeed	Dr. Isma	Dr. Almas			
	(even)		(Even)	(Odd)		(Even)	(Odd)	(Even)	(Odd)			
12-10-2024	10-2024 aturday Practical & CBL/SGD Topic mentioned at the end		Introduction to endocrinology & Signal transduction-II	Abnormalities of growth hormone secretion			CUDIES  Iashi Nizam	RADIOLOGY  Basics of Radiology			CBL/DISSECTION Superficial structures of neck (Stnocleido mastoid region of neck,	SDL physiology Hypothalamic–
Saturday			Dr. Shmyla (Even)	Dr. Kamil (Odd)		Qari An	an Ullah	Dr Fiza (even)	Dr Zeenat (odd)		posteripor cervical region suboccipital trangle)	pituitary axis& GH
		PHYSIOLOGY LGI		LOGY LGIS		PAKSTUDIES		PBL 1 (SES	SION-I)		SGD/DISECTION	
14-10-2024 Monday		& CBL/SGD ioned at the end	Abnormalities of growth hormone secretion  Dr. Kamil (Even)	Abnormalities of growth hormone secretion  Dr. Shmyla (Odd)	ak	2 Qoumi Nazria / Islami Mumliqat Qiyam Oari Aman Ullah		PBL Team		a k	Lateral cervical region (Muscles)	SDL Physiology Introduction to endocrinology & Signal transduction
			( , , , ,	OGY (LGIS)	r e		SGD/DISEC"	TION		r e	SGD/DISECTION	
15-10-2024 Tuesday			Insulin and Glucagon: Structure and metabolic functions	Hormones of posterior pituitary gland (Oxytocin and ADH)	B		Lateral cervical	al region		B	Superficial and deep fascias of the neck	SDL Anatomy SCM region & superficial & deep fascia
			Dr. Fareed (Even)	Dr. Kamil (Odd)								lusciu
			PE	ADS		ANAT	TOMY	PBL 1 (SESS	SION-II)		SGD/DISECTION	
16-10-2024 Wednesday		Practical & CBL/SGD Topic mentioned at the end		ue to Endocrine causes		Development of thyroid and parathyroid gland	Histology of thyroid and para thyroid gland	PBL Te	ıL Team		Anterior cervical region (Anterior Triangles of	SDL Biochemistry Mechanism of Action of Hormones
	Topic mentioned at the end		Dr. Hina Sattar			Dr. Prof. Ifra Saeed (Even)	Asst Prof Dr. Maria Tasleem (Odd)				neck)	

				Т	able No. 1	(Time: 12:20	0pm – 02	:00pm)								
Batch D	istribution	for Practical	Topics for Skill Lab with Venue					Schedule fo	r Practica	al / Small	Group Discus	sion				
Skills (a	ll subjects)		Day Histology Practical			Biochemistry			Physiology Practical			Physiology SGD		Bioche	mistry SGD	
		Discussion	• Pituitary gland (Anatomy, Histology Practical)				F	ractical								
(Biocher	mistry and	Physiology)	Blood glucose estimation		Batch	Teacher	Batch	Teacher	HOD	Batch	Teacher	Batch	Teacher Name	ΘĮ	Batch	Teacher
			(Biochemistry practical)			Name		Name	y F		Name			y F		Name
Sr. No	Batch	Roll No.	Examination of pupillary reaction	Monday	C	by	В	Dr. Rahat	d b	Е	Dr. Kamil	A	Dr. Aneela	q p	D	Dr. Uzma
1.	A	01-70	(Physiology practical)	Tuesday	D	p	С	Dr. Nayab	ise	A	Dr. Aneela	В	Dr. Shazia	ised	Е	Dr. Almas
2.	В	71-140		Wednesday	Е	ervise HOD	D	Dr. Uzma	erv	В	Dr. Shazia	C	Dr. Nayab	erv	A	Dr.
						er H(			dn					dn		Romessa
3.	C	141-210		Thursday	В	Sup	A	Dr. Almas	$\sim$	D	Dr. Iqra	Е	Dr. Iqra	$\mathcal{S}_{2}$	C	Dr. Nayab
4.	D	211-280		Saturday	A	<b>3</b> 1	Е	Dr. Romessa		C	Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat
5.	Е	281-onwards	Topics for SGDs / CBL with Venue		T	able No. 2 E	Batch Dist	ribution and Ve	nues for	Anatomy	Small Group	Discussio	on SGDs / Dissection	ons		
			Anatomy CBL: Torticollis	Batches	Rol	l No	Anato	my Teacher	Venue							
			<ul> <li>Physiology SGD: Signal transduction</li> </ul>	A	01	-90	Dr. Gai	ti Ara			1 Complex # 0					
	& Growth hormone.		В	91-	-180	Dr. Mir	iahil Haq	New Le	ecture Hal	1 Complex # 0	4	Supervised by Pro	of. D	r. Ayesh	a Yousaf	
	Biochemistry SGD: Classification of		C	C 181-270		Dr. Tar	iq Furqan	Anatomy Lecture Hall 04								
	Endocrines Hormone & Adrenocortical			D	271 o	nwards	Dr. Sad	ia Baqir	Anaton	ny Lecture	e Hall 03					
			Hormone													

			Table No. 3 E	atch Distribution with Venues a	and Teach	ers Name f	or Problem Based	Learning (PBL) Sessions	
Sr No.	Batches	Roll No	Venue	Teachers	Sr No.	Batches	Roll No	Venue	Teachers
1.	A1	(01-35)	Lecture Hall no.05 Physiology	Dr. Sana Latif (Demonstrator	6.	C2	(176-210)	Lecture Hall no.04	Dr. Nayab Zonish (PGT Physiology)
				Biochemistry)				(Basement)	
2.	A2	(36-70)	Lecture Hall #.04 (1st Floor	Dr. Farah	7.	D1	(210-245)	Lecture Hall no.02	Dr. Iqra Ayub (PGT Physiology)
			Anatomy)	(Demonstrator of				(Basement)	
				Physiology)					
3.	B1	(71-105)	Anatomy Museum (First Floor	Dr. Rohina Khalid	8.	D2	(246-280)	Conference Room	Dr. Muhammad Usman
			Anatomy)	(Demonstrator Biochemistry)				(Basement)	(PGT Physiology)
4.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Tariq Furrqan	9.	E1	(281-315)	New Lecture Hall no.01	Dr. Ramsha (PGT Physiology)
				(Senior Demonstrator of					
				Anatomy)					
5.	C1	(141-175)	Lecture Hall no.05 (Basement)	Dr. Ali Zain (PGT	10	E2	(315 onwards)	Lecture Hall no.04	Dr. Jawad Hassan
				Physiology)					(Demonstrator Physiology)

Table No. 6 Venues for Large Group Interactive Session (LGIS)									
Odd Roll Numbers	New Lecture Hall Complex Lecture Theater # 01								
Even Roll Number	New Lecture Hall Complex Lecture Theater # 04								

### Endocrinology Module (Second Week) (17-10-2024 To 23-10-2024)

Date / Day	8:00am-9:20an	n	9:20am	– 10:10am	10:10am- 10:30am	10:30am-11:20am	,	11:20am-12:	10pm	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments(2HRS)
17-10-2024 Thursday		& CBL/SGD oned at the end	Hormones of posterior pituitary gland (Oxytocin and ADH)	Insulin and Glucagon:Structure and metabolic functions	reak	ANAT  Histology of thyroid parathyroid gland	Development of thyroid &parathyroid gland	Thyroid Hormone	MISTRY LGIS  Classification &  Mechanism of  action of  Endocrine  Hormone,	reak	Anterior cervical region (Vessels of Neck)	SDL Anatomy lateral cervical region
			Dr. Kamil (Even)	Dr. Fareed (Odd)	Asst Prof Dr. Maria Tasleem (Even)		Prof. Dr Ifra Saeed (Odd)	Dr. Almas (Even) Dr. Isma (Odd)		В	(vessels of Neck)	
		- 9:00 AM		- 10:00 AM		10:00 - 11:0			M – 12:00PM			
18-10-2024 Friday		Tedical Ethics	Regulation of blood Glucose & Diabetes mellitus	Aldosterone and Cortisol	Insulir	BIOCHEMISTE n & Glucagon - I	Parathyroid Hormone & Calcitonin	PBL 2 (SESSION-I)  PBL Team		Ant	SDL Anatomy erior Triangle of neck & i	ts subdivisions
	Dr. Arsalan Even	Dr. Maria Odd	Dr.Fareed (Even)	Dr. Sheena (Odd)	]	Dr. Aneela (Even)	Dr. Isma (Odd)					
			PHYSIO	LOGY LGIS		ISL	AMIAYT	SGD/D	ISSECTION		SGD/DISSETION	
19-10-2024 Saturday	Practical & CBL/SGD Topic mentioned at the end		Aldosterone and Cortisol	Regulation of blood Glucose & Diabetes mellitus		Rasalat			k (arteries, veins & nerves)		Submandibular region	SDL Physiology Insulin and
Saturday			Dr. Sheena (Even)	Dr.Fareed (Odd)	a k	Mufti Naeem Shirazi		norves)		a k		Glucagon
				LOGY LGIS	e	ISLAMIAYT		PBL 2 (SESSION-II)		r e	SGD/DISSECTION	
21-10-2024		& CBL/SGD oned at the end	Thyroid hormone: Production, storage and release	Abnormalities of adrenocortical hormone	Br	Itiha	Itihad e Umat		PBL Team		Deep structures of neck, prevertebral	SDL Physiology Aldosterone and
Monday			Prof. Dr.Samia Sarwar/ Dr. Iqra (Even)			Jaeem Shirazi				muscles	Cortisol	
22-10-2024 Tuesday		& CBL/SGD oned at the end				]	Early Clinical Expo	sure (ECE	<b>(1)</b>			
			PATH	IOLOGY			OLGY (LGIS)	SGD/D	ISSECTION		CBL/DISECTION	SDL Biochemistry
23-10-2024 Tuesday		& CBL/SGD	Hypothyroidism	and hyperthyroidism	reak	Abnormalities of Thyroid hormone: Adrenocortical Production, storage and release		Soft palate		e a k	Thyriod &	Type I & II Diabetes Mellitus Glucose Tolerance
2 dosday			Dr. Nida Fatima (even)	Dr. Faiza Zafar (Odd (odd)	Br	Dr. Sheena (Even)	Prof. Dr.Samia Sarwar/ Dr. Iqra (Odd)	30	ore parace	Br	Parathyroid glands	Test Curves Online clinical Evaluation

	Table No. 1 (Time: 12:20pm – 02:00pm)															
Batch D	istribution	or Practical	Topics for Skill Lab with Venue					Schedule fo	r Practica	al / Small	Group Discuss	sion				
Skills (a	Skills (all subjects)  • Thyroid & Parathyroid gland				Day Histology Practical		Biochemistry		Physiology Practical		Phy	Physiology SGD		Biochemistry SGD		
	CBL / Small Group Discussion		(Anatomy, Histology)					Practical								
(Biocher	mistry and	Physiology)	<ul> <li>Practical G.T.T (Biochemistry</li> </ul>		Batch	Teacher	Batch	Teacher	НОБ	Batch	Teacher	Batch	Teacher Name	101	Batch	Teacher
			practical)			Name		Name			Name			Y		Name
Sr. No	Batch	Roll No.	Checking for color vision (Physiology	Monday	C	by	В	Dr. Rahat	d by	E	Dr. Kamil	A	Dr. Aneela	d b	D	Dr. Uzma
6.	A	01-70	practical) (Physiology practical)	Tuesday	D	p	C	Dr. Nayab	vise	A	Dr. Aneela	В	Dr. Shazia	ise	E	Dr. Almas
7.	В	71-140		Wednesday	Е	ervise HOD	D	Dr. Uzma	Ale	В	Dr. Shazia	C	Dr. Nayab	erv	A	Dr.
						erv H(			uper					dn		Romessa
8.	C	141-210		Thursday	В	dnS	A	Dr. Almas	S	D	Dr. Iqra	Е	Dr. Iqra	$\infty$	C	Dr. Nayab
9.	D	211-280		Saturday	A	51	Е	Dr. Romessa		C	Dr. Nayab	D	Dr. Kamil		В	Dr. Rahat
10.	Е	281-onwards	Topics for SGDs / CBL with Venue		Т	able No. 2 F	Batch Dis	ribution and Ve	nues for	Anatomy	Small Group	Discussio	on SGDs / Dissection	ons		
			Anatomy CBL: Multi Nodular Goitre	Batches	Rol	l No	Anato	my Teacher		Ve	nue					
	with Hypothyroidism		with Hypothyroidism	A	01	-90	Dr. Gai	ti Ara	New Le	ecture Hal	l Complex # 0	1				
			Physiology SGD: Thyroid Hormones	В	B 91-180		Dr. Mii	ahil Haq	New Le	ecture Hal	l Complex # 0	)4	Supervised by Prof. Dr. Ayesha Yousaf			a Yousaf
			Biochemistry CBL: Addison's	С	181-270		Dr. Tar	iq Furqan	Anatomy Lecture Hall 04							
			Disease	D	271 o	nwards	Dr. Sad	Dr. Sadia Baqir Anatomy Lecture Hall 03			Hall 03					

			Table No. 3 B	Satch Distribution with Venues a	and Teach	ners Name f	or Problem Based	Learning (PBL) Sessions	
Sr No.	Batches	Roll No	Venue	Teachers	Sr No.	Batches	Roll No	Venue	Teachers
6.	A1	(01-35)	Lecture Hall no.05 Physiology	Dr. Sana Latif (Demonstrator	6.	C2	(176-210)	Lecture Hall no.04	Dr. Nayab Zonish (PGT Physiology)
				Biochemistry)				(Basement)	
7.	A2	(36-70)	Lecture Hall #.04 (1st Floor	Dr. Farah	7.	D1	(210-245)	Lecture Hall no.02	Dr. Iqra Ayub (PGT Physiology)
			Anatomy)	(Demonstrator of				(Basement)	
				Physiology)					
8.	B1	(71-105)	Anatomy Museum (First Floor	Dr. Rohina Khalid	8.	D2	(246-280)	Conference Room	Dr. Muhammad Usman
			Anatomy)	(Demonstrator Biochemistry)				(Basement)	(PGT Physiology)
9.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Tariq Furrqan	9.	E1	(281-315)	New Lecture Hall no.01	Dr. Ramsha (PGT Physiology)
				(Senior Demonstrator of					
				Anatomy)					
10.	C1	(141-175)	Lecture Hall no.05 (Basement)	Dr. Ali Zain (PGT	10	E2	(315 onwards)	Lecture Hall no.04	Dr. Jawad Hassan
				Physiology)					(Demonstrator Physiology)

Table No. 6 Venues for Large Group Interactive Session (LGIS)									
Odd Roll Numbers	New Lecture Hall Complex Lecture Theater # 01								
Even Roll Number	New Lecture Hall Complex Lecture Theater # 04								

### Endocrinology Module (Third Week) (24-10-2024 To 30-10-2024)

				_	-202 <b>4</b> 10 30	10 2021)					
Date / Day	8:00am-9:20am	9:20am	– 10:10am	10:10am- 10:30am	10:30am-11:20am		11:20am-12:10pm	1	12:10pm- 12:30pm	12:30pm – 2:00pm	Home Assignments(2HRS)
24-10-2024 Thursday	Practical & CBL/SGD Topic mentioned at the end	Physiological role of thyroid hormone  Prof. Dr.Samia Sarwar/ Dr.	Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin)  Dr. Fahad (Odd)	Break	Development of adrenal gland and pancreas  Prof. Dr Ifra Saeed	Histology of adrenal gland & pancreas  Asst Prof Dr. MariaTasleem	Endo disorders in (diabetes me	E & OBS  ocrine n pregnancy ellitus,thyroid rders)  Dr. Saba Yusaf	Break	SGD/DISSECTION  Larynx & trachea	SDL Physiology Thyroid Hormones
	8:00 AM – 9:00 AM	Igra(Even)	– 10:00 AM		(Even) 10:00 – 11:00A	(Odd)	1	(Odd) - 12:00PM			
	ISLAMIAYAT		LOGY LGIS		BIOCHEMISTRY		FAMILY I			SDL Biochemis	try
25-10-2024 Friday	Amal Bin Maroof	Calcium homeostasis (Vitamin D, parathyroid hormone and calcitonin)	Physiological role of thyroid hormone		hyroid Hormone & Insulin & Glucagon - I		Approach to P	Approach to Patient Diabetes mellitus		Hypoglycemia Ketoacidosis & Hyperosr State	
	Mufti Naeem Sherazi	Dr. Fahad (Even)	Prof. Dr.Samia Sarwar/ Dr. Iqra (Odd)	Dr	. Isma(Even)	Dr. Aneela (Odd)	Dr. Sad	ia Khan			
			LOGY LGIS		ANATOM	IY LGIS	BIOCHEM	STRY LGIS		SGD/DISSECTION	A ( CDI
26-10-2024 Saturday	Practical & CBL/SGD Topic mentioned at the end	Abnormalities of thyroid hormone (Goiter, hypothyroidism and hyperthyroidism)	Bone pathophysiology (rickets, osteomalacia, osteoporosis, hypo and hyperparathyroidism)		Histology of adrenal gland and pancreas	Development of adrenal gland and pancreas	Adrenocortical Hormones - I	Insulin & Glucagon - II		Dissection	Anatomy SDL Temporal and Infra temporal region, Pterygopalatine fossa
		Prof. Dr.Samia Sarwar Dr. Iqra (Even)	Dr. Fahad (Odd)		Assist. Prof. Dr. Maria (Even)	Prof. Dr. Ifra Saeed (Odd)	Dr. Isma (Even)	Dr. Aneela (Odd)			Online clinical Evaluation
		PHYSIOLOGY (LGIS)			BIOCHEMISTRY LGIS		BIOCHEMISTRY LGIS			SGD/DISSECTION	
28-10-2024 Monday	Practical & CBL/SGD Topic mentioned at the end	Bone pathophysiology (rickets, osteomalacia osteoporosis, hypo and hyperparathyroidism)	(Goiter,	reak	Insulin & Glucagon - II	Adrenocortical Hormones - I	Blood Glucose Regulation	Adrenocortical Hormones - II	reak	Pancrease	SDL Anatomy Thyroid and para thyroid gland
		Dr. Fahad (Even)	Prof. Dr.Samia Sarwar/ Dr. Iqra (Odd)	В	Dr. Aneela (Even)	Dr. Isma (Odd)	Dr. Uzma Zafar (Even)	Dr. Isma (Odd)	B		
		BIOCHEM	ISTRY LGIS			SGD/DISE	CTION			SGD/DISSECTION	
29-10-2024 Tuesday	Practical & CBL/SGD Topic mentioned at the end	Adrenocortical Blood Glucose Hormones - II Regulation  Dr. Isma (Even) Dr. Uzma Zafar (Odd)			Adrenal gland (revisit)					Alimentary layer Pharynx, esophagus	SDL Physiology Abnormalities of
20.10.205			GY SDL No.0I	-		SGD/DISE	CCTION			SGD/DISSECTION	
30-10-2024 Wednesday	Practical & CBL/SGD Topic mentioned at the end	Regulation of blood	d Glucose & Diabetes ellitus Dr Maryam (Odd)		SGD/DIS Disection					Disection/ Spooting	SDL Anatomysoft palate ,larynx

				Т	able No. 1	(Time: 12:2	0pm – 02	:00pm)								
Batch Di	istribution	or Practical	Topics for Skill Lab with Venue					Schedule for	r Practic	al / Small	Group Discus	sion				
Skills (al	ll subjects)		Endocrinology, Adrenal gland &	Day	Histolog	y Practical	Bio	chemistry		Physiole	ogy Practical	Phy	ysiology SGD		Bioche	mistry SGD
		Discussion	Pancrease (Anatomy, Histology				I	Practical								
(Biocher	mistry and	Physiology)	Practical)		Batch	Teacher	Batch	Teacher	НОД	Batch	Teacher	Batch	Teacher Name	10D	Batch	Teacher
	_		G.T.T / Revision (Biochemistry)			Name		Name	by F		Name			J Y		Name
Sr. No	Batch	Roll No.	practical)	Monday	С	by	В	Dr. Rahat	ਚ	Е	Dr. Kamil	A	Dr. Aneela	d b	D	Dr. Uzma
11.	A	01-70	CBL: Adrenocortical hormones	Tuesday	D	70	C	Dr. Nayab	vise	Α	Dr. Aneela	В	Dr. Shazia	ise	Е	Dr. Almas
12.	В	71-140	(Practical batch) student's	Wednesday	E	ervise HOD	D	Dr. Uzma	erv	В	Dr. Shazia	C	Dr. Nayab	erv	A	Dr.
			presentations Lab			er H(			Super					_ d		Romessa
13.	C	141-210		Thursday	В	dnS	A	Dr. Almas	<i>O</i> <sub>2</sub>	D	Dr. Iqra	Е	Dr. Iqra	S	C	Dr. Nayab
14.	D	211-280		Saturday	A		Е	Dr. Romessa		C	Dr. Nayab	D	Dr. Kamil	Щ.	В	Dr. Rahat
15.	Е	281-onwards	Topics for SGDs / CBL with Venue		T	able No. 2 E	Batch Dis	tribution and Ve	nues for	Anatomy	Small Group l	Discussion	on SGDs / Dissection	ons		
			Physiology SGD: Insulin and	Batches	Ro	l No	Anato	my Teacher			nue					
			Glucose Metabolism	A	01	-90	Dr. Gai	ti Ara			l Complex # 0					
			Biochemistry CBL: Thyrotoxicosis	В	91-	-180		nahil Haq	New Le	ecture Hal	l Complex # 0	)4	Supervised by Pr	of. D	or. Ayesh	a Yousaf
				C	181	-270		iq Furqan	Anaton	ny Lecture	Hall 04					
				D	271 o	nwards	Dr. Sad	ia Baqir	Anaton	ny Lecture	Hall 03					

			Table No. 3 B	atch Distribution with Venues a	and Teach	ers Name f	or Problem Based	Learning (PBL) Sessions	
Sr No.	Batches	Roll No	Venue	Teachers	Sr No.	Batches	Roll No	Venue	Teachers
11.	A1	(01-35)	Lecture Hall no.05 Physiology	Dr. Sana Latif (Demonstrator	6.	C2	(176-210)	Lecture Hall no.04	Dr. Nayab Zonish (PGT Physiology)
				Biochemistry)				(Basement)	
12.	A2	(36-70)	Lecture Hall #.04 (1st Floor	Dr. Farah	7.	D1	(210-245)	Lecture Hall no.02	Dr. Iqra Ayub (PGT Physiology)
			Anatomy)	(Demonstrator of				(Basement)	
				Physiology)					
13.	B1	(71-105)	Anatomy Museum (First Floor	Dr. Rohina Khalid	8.	D2	(246-280)	Conference Room	Dr. Muhammad Usman
			Anatomy)	(Demonstrator Biochemistry)				(Basement)	(PGT Physiology)
14.	B2	(106-140)	Lecture Hall no.03 (First Floor)	Dr. Tariq Furrqan	9.	E1	(281-315)	New Lecture Hall no.01	Dr. Ramsha (PGT Physiology)
				(Senior Demonstrator of					
				Anatomy)					
15.	C1	(141-175)	Lecture Hall no.05 (Basement)	Dr. Ali Zain (PGT	10	E2	(315 onwards)	Lecture Hall no.04	Dr. Jawad Hassan
				Physiology)					(Demonstrator Physiology)

Table No. 6 Venu	es for Large Group Interactive Session (LGIS)								
Odd Roll Numbers New Lecture Hall Complex Lecture Theater #									
Even Roll Number	New Lecture Hall Complex Lecture Theater # 04								

### Tentative Schedule for LMS Based Weekly Online Assessments for Second Year MBBS (Endocrinology Module) Batch 50

The online assessment for Endocrinology Module for Second Year MBBS will be as per following schedule:

Class	Module	Day & Date	Time of Assessment	Focal person	Department Responsible
		Monday 14 <sup>th</sup> October,2024	9:00 pm-9:30pm	Prof. Dr Ayesha Yousaf	Anatomy
		Tuesday 15 <sup>th</sup> October,2024	9:00 pm-9:30pm	Prof. Dr Samia Sarwar	Physiology
Second Year	Endocrinology Module	Wednesday 16 <sup>th</sup> October,2024	9:00 pm-9:30pm	Dr Aneela Jamil	Biochemistry
MBBS	Wiodule	Monday 21st October ,2024	9:00 pm-9:30pm	Prof. Dr Ayesha Yousaf	Anatomy
		Tuesday 22 <sup>nd</sup> October ,2024	9:00 pm-9:30pm	Prof. Dr Samia Sarwar	Physiology
		Wednesday 23 <sup>rd</sup> October ,2024	9:00 pm-9:30pm	Dr Aneela Jamil	Biochemistry

Note: All dates are subject to date.

## Endocrinology Module (Fourth Week) (31-10-2024 To 06-11-2024)

Date / Days	Tentative Schedule for Endocrinology Sesnes Module Assessment	Time
31-10-2024		08:00am - 02:00pm
Wednesday		
01-11-2024		08:00am - 02:00pm
Thursday		
02-11-2024		08:15am - 09:15am
Friday	Assessment week	
03-11-2024	Assessment week	08:15am - 09:15am
Saturday		
05-11-2024		08:15am - 09:15am
Monday		
06-11-2024		
Tuesday		

**Note:** Timetable Subject to Change According to The Current Circumstances.

### **SECTION-VII**

### Table of Specification (TOS) For Endocrinology Module Examination Blue Print of Assessment for First Year & Second Year MBBS

Table of Specification

Tools of Asssessment: Cognitive: MCQ- Multiple Choice Questions, EMQs- Extended Matching Questions, SAQ- Short Essay Questions Psychomotor: AvOSPE- Audio Visual Assisted Objective Structured Pactical Examination, labOSPE- Laboratory Based Objective Structured Practical Examination, IOSPE- Integrated Objective Structured Practical Examination, COSPE- Clinically Oriented Objective Structured Practical Examination Affect: AED Reflective Writing- Artificial Intelligence, Entraprenureship, Digital Literacy based reflective writing, OSVE- Objective Structured Viva Assessment

Domains: C-Core Subject (70%) Levels C1-C2, HV- Horizontal & Vertical Integration (20%) Levels C2-C3, S- Spiral Integration (10%) Levels C2-C3

											Th	eory	(Cog	nitive	) Asse	ssment													Practical (	Skill & Attitu	ide) Assess	ment				
End of Module Assessment	Subject			М	CQs				EMQ	ls			SA	lQs				SEC	ls		Mar	Total s Marks	Tota Tim	- 1		А	V OSPE		Time	AED Reflective Writing		OSVE		Total Practical Marks	Grand Total	Total Time of Module Assessment
		С	HV	S	Total	Mark	s (	C Tot	al	Marks	С	Н	٧	S	Total	Marks	С	HV	S	Tota	I	meony			C	IV S	Total	Mark	5		Viva	Сору	Total	Williams		
	Anatomy	19	4	2	25	25	1	1 1		5	3	- 1	1	1	5	25	3	1	1	5	45	100	2 HF	RS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
First Module	Physiology	19	4	2	25	25	1	1 1		5	3	- 1	1	1	5	25	3	1	1	5	45	100	2 HF	RS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
	Biochemistry	19	4	2	25	25	1	1 1	П	5	3	- 1	1	1	5	25	3	1	1	5	45	100	2 HF	RS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS

Formative- Weekly LMS Based Assessment of 30 MCQs (10 MCQs per Subject)

																																			<u> </u>
												The	ory (	Cogniti	ve) Asse	ssment												Practical (	Skill & Attitu	de) Assessn	nent				Total Time of
	nd of Module Assessment	Subject									SEC	ls .		Marks	Total Marks	Total		,	AV OSPE		Time	AED Reflective		OSVE		Total Practical	Grand Total	Module							
			C	ΗV	S	Total	Mai	rks	С	Total	Marks	С	HV	S	Total	Marks	С	HV	S	Total		Theory	lime	C	HV S	Tota	Mark	5	Writing	Viva	Сору	Total	Marks		Assessment
	Cacand	Anatomy	19	4	2	25	25	5	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	. 10	50	50 min	15 min	45	5	50	100	200	6 HRS
П	Second	Physiology	19	4	2	25	25	5	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS
Ш	Module	Biochemistry	19	4	2	25	25	5	1	1	5	3	1	1	5	25	3	1	1	5	45	100	2 HRS	7	2 1	10	50	50 min	15 min	45	5	50	100	200	6 HRS

Formative- Weekly LMS Based Assessmen tof 30 MCQs (10 MCQs per Subject)

	Plask	Subjects	- 1	LMS E	Base	d Assess	sment			OSPE				Gran	Total Block
ı	Block	Subjects			N	1CQs		LabOSPE	IOSPE	COSPE	Total	Marke	Time	d Total	Time
L			С	HV	S	Total	Time	С	HV	S	TOtal	IVIGINS	IIIIe	Total	
Γ		Anatomy	21	6	3	30	30 min	14	4	2	20	60	6 HRS	90	6.5 HRS
ı	BLOCK	Physiology	21	6	3	30	30 min	14	4	2	20	60	6 HRS	90	6.5 HRS
1		Biochemistry	21	6	3	30	30 min	14	4	2	20	60	6 HRS	90	6.5 HRS

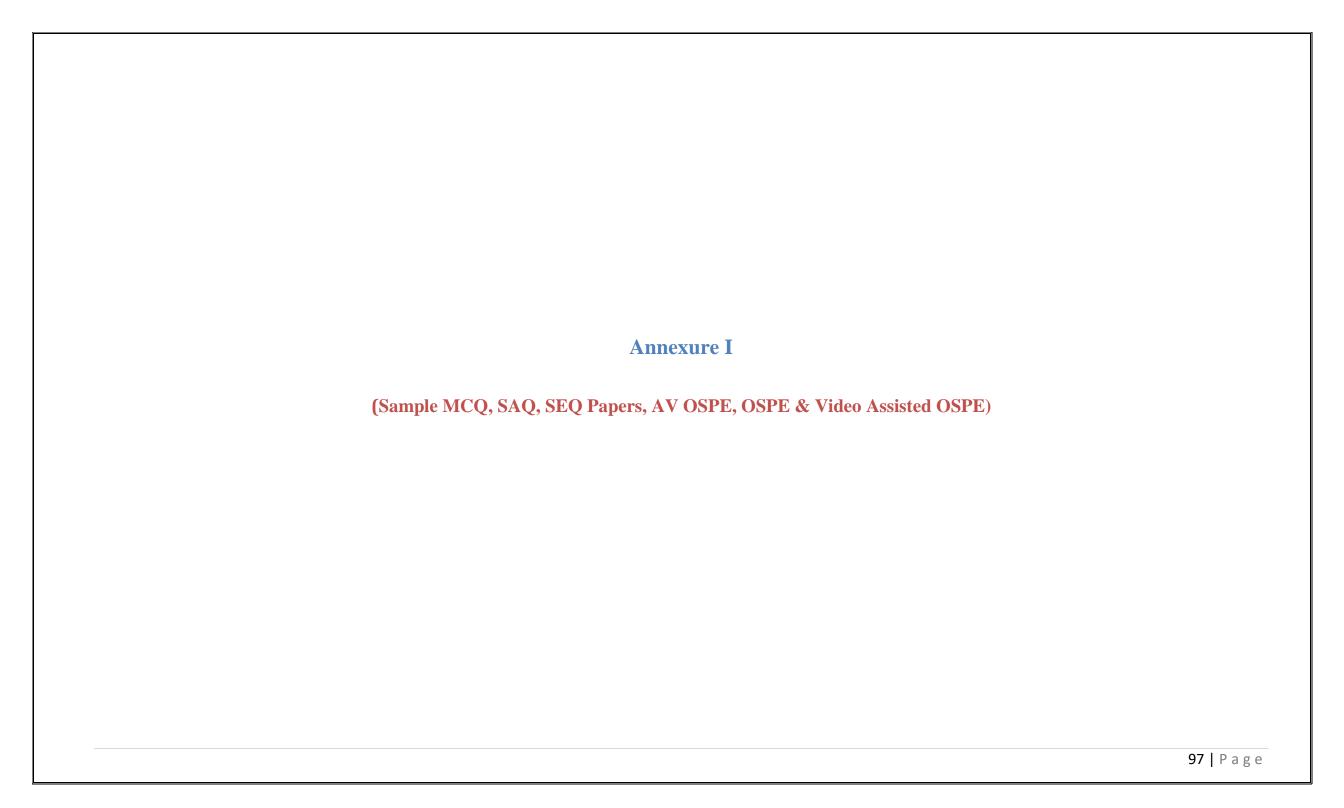
50% Questions/OSPE Stations/Viva Stations will be from Foundation Module and 50% Questions will be from MSK-1 Module

For Each assessment student will have to individually pass Theory and Practical components

Marks per

ILEIII												
MCQ=1	EMQ=5	SAQ= 5	SEQ= 9	AVOSPE= 5	OSPE= 3							
OSPE Time=	1 Round of 40 S	Students =80 min										
	3 Round of 40 Students = 240 min											
OSVE	=Time per stud	ent=5mins										

w	eekly LMS	Assessment									
Subjects Anatomy Physiology											
No of MCQs*	No of MCQs* 30 30 30										
Marks/MCQ 30 30 30											
*MCQ=1 Mark each, 1 min each											



Note: These sample papers aim to facilitate comprehension. However, it's important to note that the content and format of actual assessment papers may differ.

### Rawalpindi Medical University Department of Anatomy MCQs 2<sup>nd</sup> Year MBBS Endocrinology Module

- 1. A patient presents with hoarseness of voice. On indirect laryngoscopy, he is unable to abduct the vocal cords. The muscle paralysed is
  - a. posterior cricoarytenoid
  - b. vocalis
  - c. cricothyroid
  - d. aryepiglotticus
  - e. thyroepiglottic
- 3. The only muscle of the soft palatethat is supplied by the 5<sup>th</sup> cranial nerve is
  - a. musculus uvulae
  - b. platoglossus
  - c. tensor vali palati
  - d. palatopharyngeus
  - e. levatorpalati
- 5. A dengue patient presented with epistaxis. The doctor found that it was an anterior bleed from
  - a. pterygoid plexus
  - b. woodruff's plexus
  - c. pharyngeal plexus
  - d. kiessel back's plexus
  - e. palatal plexus

- 2. During dissection of the pharynx a medical student observes a structure passing through the gap between superior and middle constrictors of pharynx. This structure is
  - a. auditory tube
  - b. glossopharyngeal nerve
  - c. recurrent laryngeal nerve
  - d. levatorveli palatini
  - e. internal laryngeal nerve
- 4. Muscles are important in opening the Eustachian tube for maintenance of barometric pressure. The nasopharyngeal opening of the auditory tube contains
  - a. Salpingopharyngeus
  - b. levator vali palatini
  - c. Palato glossus
  - d. Palato pharyngeus
  - e. musculus uvulae

### Rawalpindi Medical University Department of Anatomy SEQs 2<sup>nd</sup> Year MBBS Endocrinology Module

Q.1 A surgeon is performing total thyroidectomy for a patient of Thyroid carcinoma.

a.	What is the vascular supply of thyroid and parathyroid glands?	(3)
b.	How can damage to right recurrent laryngeal nerve be avoided?	(1)

c. What are the features of recurrent laryngeal nerve damage? (1)

Q.3 A patient has been diagnosed with pituitary adenoma.

a.	Des	cribe t	he deve	elopment o	of pituitary	glan	d.		(2.5)
	_			-					

b. Draw the structures that are related to the pituitary gland. (1.5)

c. Which structure can be damaged because of the tumour? (1)

### Rawalpindi Medical University Department of Physiology MCQs 2<sup>nd</sup> Year MBBS Endocrinology Module

- 1. Pituitary adenoma causes lesion of :
  - a. Optic nerve
  - b. Optic chiasm
  - c. Optic tract
  - d. Optic radiation
  - e. Visual cortex
- 3. The sour taste is caused by:
  - a. ketones
  - b. alcohol
  - c. amides
  - d. glycols
  - e. acids
- 5. A young boy was diagnosed with congenital anosmia, a rare disorder in which an individual is born without the ability to smell. Odorant receptors are:
  - a. located in the olfactory bulb
  - b. located on dendrites of tufted cells
  - c. located on neurons that project directly to the olfactory cortex
  - d. located on neurons in the olfactory epithelium
  - e. located on sustentacular cells

- 2. Following is true regarding Presbyopia:
  - a. occurs in infants
  - b. occurs because of progressive denaturation of the lens proteins
  - c. the lens grows & becomes far more elastic
  - d. power of accommodation increases
  - e. ability of the lens to change shape increases with age
- 4. In the utricle, tip links in hair cells are involved in:
  - a. formation of perilymph
  - b. depolarization of the stria vascularis
  - c. movements of the basement membrane
  - d. perception of sound
  - e. regulation of distortion-activated ion channels

### Rawalpindi Medical University Department of Physiology SEQs 2<sup>nd</sup> Year MBBS Endocrinology Module

- Q.1 Give a brief account of formation and functions of aqueous humor. What is glaucoma? (2,2,1)
- Q.3 Enlist factors affecting Anti-Diuretic Hormone secretion? What do you know about Diabetes insipidus? (3,2)
- Q.2 Name the hormones produced by adrenal gland. Enlist the physiological actions of epinephrine. (2,3)

# Rawalpindi Medical University Department of Biochemistry MCQs 2<sup>nd</sup> Year MBBS Endocrinology Module

- 1. Progesterone is a precursor in the formation of which one of the following:
  - a. Mineralocorticoids
  - b. Insulin
  - c. Angiotensin II
  - d. Follicle stimulating hormone (FSH)
  - e. Luteinizing hormone
- 3. Parathyroid hormone leads to:
  - a. Low calcium in urine
  - b. Low phosphate in urine
  - c. Increase calcium in urine
  - d. Both calcium and phosphate are increased in urine
  - e. Both calcium and phosphate are decreased in plasma

- 2. Adrenal steroid hormone:
  - a. Is synthesized in adrenal medulla
  - b. Precursor is tyrosine
  - c. Synthesis is not regulated
  - d. Synthesis is stimulated by ACTH
  - e. Are not synthesized from pregnenolone
- 4. Blood glucose level is decreased by the following hormone:
  - a. Glucagon
  - b. Insulin
  - c. Thyroxin
  - d. Cortisol
  - e. Growth hormone

**SEQ** 

Q. Describe role of insulin and glucagon in blood glucose regulation. 05

### EMQs 2<sup>nd</sup> Year MBBS Endocrinology Module

### **Options:**

- A. Graves' disease
- B. Hashimoto's thyroiditis
- C. Subacute thyroiditis
- D. Papillary thyroid carcinoma
- E. Follicular thyroid carcinoma
- F. Medullary thyroid carcinoma
- G. Anaplastic thyroid carcinoma
- H. Thyroid storm
- I. Myxedema coma
- J. Toxic multinodular goiter

### **Questions:**

1. A 30-year-old female presents with weight loss, heat intolerance, palpitations, and exophthalmos. Her thyroid-stimulating hormone (TSH) levels are low, and her free T4 levels are high.

What is the most likely diagnosis?

2. A 45-year-old male presents with a painless, rapidly enlarging neck mass. Fine-needle aspiration biopsy reveals malignant cells, and histopathology shows the presence of amyloid stroma.

What is the most likely diagnosis?

3. A 50-year-old female with a history of long-standing hypothyroidism presents with lethargy, hypothermia, bradycardia, and generalized edema.

What is the most likely diagnosis?

4. A 35-year-old female presents with a tender, swollen thyroid gland and symptoms of fever, malaise, and neck pain radiating to the jaw. Laboratory findings show elevated erythrocyte sedimentation rate (ESR) and low TSH levels.

What is the most likely diagnosis?

5. A 60-year-old female presents with symptoms of hyperthyroidism. She has a nodular thyroid gland on examination. Ultrasound reveals multiple autonomously functioning thyroid nodules.

What is the most likely diagnosis?

### **Answers:**

- 1. A. Graves' disease
- 2. F. Medullary thyroid carcinoma
- 3. I. Myxedema coma
- 4. C. Subacute thyroiditis
- 5. J. Toxic multinodular goiter

### Rawalpindi Medical University Department of Bioethics MCQs 2<sup>nd</sup> Year MBBS Endocrinology Module

1Includes rules of conduct that may	be used to regulate our	activities concerning the
biological world.		

- a. Bio-piracy
- b. Biosafety
- c. Bioethics
- d. Bio-patents
- e. Bio-logistic
- 3. Following is not code of ethics.
  - a. Integrity
  - b. Objectivity
  - c. Confidentiality
  - d. Behaviour
  - e. Autonomy
- 5. -----Principle requiring that physicians provide, positive benefits
  - a. Justice
  - b. Autonomy
  - c. Beneficence
  - d. Veracity

- 2. The right of patients having self-decision is called.
  - a. Justice
  - b. Autonomy
  - c. Beneficence
  - d. Veracity
  - e. Fidelity
- 4. -----in the context of medical ethics, if it's fair and balanced
  - a. Justice
  - b. Autonomy
  - c. Beneficence
  - d. Veracity
  - e. Fidelity

### e. Fidelity

# Rawalpindi Medical University Department of Anatomy OSPE 2<sup>nd</sup> Year MBBS Endocrinology Module

### **Station No. 1** Time Allowed: 1 Min 30secs

Histology sketch copy will be assessed for

a.	Complete index	(1)
b.	Complete and signed diagrams	(1)
c.	2 ID points mentioned with each diagram	(1)

### Station No. 2 Time Allowed: 1 Min 30 secs

a. Identify red and give its nerve supply.
b. Identify green and write down its action.
c. Identify yellow and write down the name of the structure opening here
(1)

# Rawalpindi Medical University Department of Physiology OSPE 2<sup>nd</sup> Year MBBS Endocrinology Module

**Station No. 1** Time Allowed: 3 Minutes

- 1. A man consulted his doctor for difficulty in hearing, his doctor decided to perform Tuning Fork test. Which tuning fork will he select; (1)
- 2. Match the audio grams for given scenarios

Normal

10

20

40

90

50

70

80

80

40

80

80

Air conduction

80

80

80

80

100

250

500

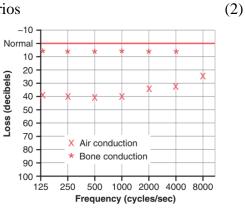
1000

2000

4000

8000

Frequency (cycles/sec)

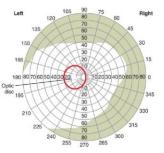


Scenario- 1: Rinnes negative in right ear Scenario- 2: Weber Lateralized in right ear

### **Station No. 2** Time Allowed: 3 Minutes

- 1. Identify the apparatus & give its use.
- **2.** Give two precautions for this test. (0.5)
- **3.** This tracing was obtained after examining a patient with visual disturbances, Interpret the graph provided. (2)

(0.5)



### OSPE 2<sup>nd</sup> Year MBBS Endocrinology Module

**Station No. 1** Time Allowed: 2 Mins

	Patient value	Reference range
Т3	1.4 nmol/L	1.2-2.8nmol/L
T4	95 nmol/L	77-155 nmol/L
TSH	10 mU/L	0.4-4 mU/L

- 1. Interpret the above laboratory report. 01
- 2. Give any two causes. 02

**Station No. 1** Time Allowed: 2 Mins

1. What are indications of Oral Glucose Tolerance Test? 03

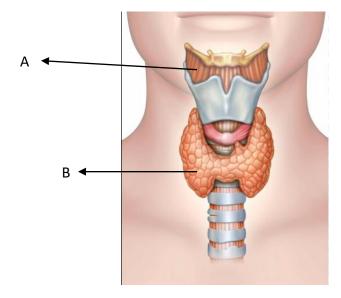
## **AV OSPE Department of Anatomy**

Q.No.1 Identify

1) A

2) B

Q.No.2 Give Blood Supply of stucture B?



## **AV OSPE Department of Anatomy**

**Cross Sectional** 

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Q.No.1 Identify 1) A 2) B 3) C 4) D 5) E **111** | Page