

3rd Year MBBS 2024 Study Guide

Integrated Modular Curriculum

MICROBES AND ANTI-MICROBIAL MODULE 2024



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Director Medical Education, Asst. Director Medical Education,	Curriculum Committee	Vice Chancellor

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Prof Naeem Akhtar, Dr Mobina Dhoody, Dr			Developed for Second Year MBBS.
Syeda Fatima Rizwi	2019-2020	2^{nd}	Horizontally and vertically integrated
			Learning objectives updated
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			Research curriculum incorporated
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	2023-2024		Learning objectives updated,
			Research curriculum revamped Bioethics,
			Family Medicine curriculum incorporated along
			with Professionalism.
			Entrepreneurship curriculum incorporated



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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 center 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.

Third Year MBBS 2024

Study Guide

Microbe and Anti-Microbe Module

Integration of Disciplines in Microbe and Anti-Microbe Module

HORIZONTAL INTEGRATION VERTICAL INTEGRATION Pharmacology Medicine Pathology Gynecology Forensic Medicine Pead Family Medicine Community Medicine Surgery

LONGITUDINAL INTEGRATION

Medical Ethics Behaviour Science

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Week 1	Error! Bookmark not defined.
Week 2	Error! Bookmark not defined.
Week 3	Error! Bookmark not defined.
Week 4	Error! Bookmark not defined.
Week 5	Error! Bookmark not defined.
Week 6	Error! Bookmark not defined.
Week 7	Error! Bookmark not defined.
REFERENCE BOOKS	Error! Bookmark not defined.

Microbes & Anti-Microbial Module Team

Module Name	:	Microbes and Antimicrobial Module
Duration of module	:	06 Weeks
Coordinator	:	Dr. Kiran Fatima
Co-coordinator	:	Dr. Nida Fatima
Reviewed by	:	Module Committee

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Module – Microbes and Anti-Microbial Module

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

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

Module Outcomes

Each student will be able to:

Knowledge

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

Appreciate concepts & importance of

- Research
- Biomedical Ethics
- Family Medicine
- Use technology based medical education including Artificial Intelligence.

Skills

Interpret and analyze various practical of Pre-clinical Sciences

Attitude

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

This module will run in 7 weeks duration. The content will be covered through introduction of topics. Instructional strategies are given in the time table and learning objectives are given in the study guides. Study guides will be uploaded on the university website. Good luck!

Section I - Terms & Abbreviations

Contents

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

Tables & Figures

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

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

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TableT	Domain	соглея	rning :	accorang		SIOOMS	гахопог	nv.
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Teaching and Learning Methodologies / Strategies

Large Group Interactive Session (LGIS)

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



Figure 1. Prof Umar's Model of Integrated Lecture

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7

Small Group Discussion (SGD)

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

Table 3

Steps of taking Small Group Discussions

Step 1	Sharing of Learning objectives by using	First 5
	students Study guides	minutes
Step 2	Asking students pre-planned questions from	5minutes
	previous teaching session to develop co-relation	
	(these questions will be standardized)	
Step 3	Students divided into groups of three and	5minutes
	allocation of learning objectives	
Step 4	ACTIVITY: Students will discuss the learning	15 minutes
	objectives among themselves	
Step 5	Each group of students will present its learning	20 min
	objectives	
Step 6	Discussion of learning content in the main group	30min
Step 7	Clarification of concept by the facilitator by	15 min
Sup /	asking structured questions from learning	15 1111
	content	
Stop 8	Questions on core concents	
Step 0	Questions on horizontal integration	
Step 9	Questions on nonzontal integration	
Step 10	Questions on vertical integration	
Stop 11	Questions on related research article	
Step 11	Questions on related research article	
Step 12	Questions on related ethics content	
		<i>~</i> ·
Step 13	Students Assessment on online MS teams (5	5 min
Gt 14	MCQs)	~ ·
Step 14	Summarization of main points by the facilitator	5 min
Step 15	Students feedback on the SGD and entry into log	5 min
	book	
Step 16	Ending remarks	

Standardization of teaching content in Small Group Discussions					
No	Topics	Approximate %			
	Title Of SGD				
	Learning Objectives from Study Guides				
	Horizontal Integration	5%+5%=10%			

60%

20%

3%

2%

Core Concepts of the

Vertical Integration

Related Advance

Research points **Related Ethical points**

topic

Table 2

Self-Directed Learning (SDL)

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

Case Based Learning (CBL)

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

Section II-Learning Objectives, Teaching Strategies & Assessments

Contents

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

Vertical Integrated Basic Sciences (Medicine, Gynecology, Pead, Community Medicine)

Medicine Large Group Interactive Session (LGIS)

Tonio	At the End of the Session Student Should De Able Te		Teaching	Assessment
горіс	At the End of the Session Student Should be Able to	C/P/A	Strategy	ΤοοΙ
Inter desting having any form	•Discuss clinical examination of patients with infectious disease.	C2, A3		
analysis and investigations			LGIS	SEQS, MCQS,
analysis and investigations	•Describe presenting problems in infectious disease in relation to different symptoms	C2		OSPE
	•Discuss microbial investigations of infectious diseases.	C2, C3	-	
	•Define P.U.O.	C1		SEOS MCOS
Fever of unknown origin	•Enumerate causes/etiology of P.U.O.	C2, A3	LGIS	OSPE
	Describe investigations and management plan of P.U.O.	C1, C3		OSIL
	•Recognize epidemiology of infection.	C1		SEOS MCOS
Brucellosis	Describe clinical findings of brucellosis.	C2, C3	LGIS	SEQS, MCQS,
	•Recognize epidemiology of infection.	C2		USIL
	Recall epidemiology of influenza.	C2, A3		
Influenze	Describe clinical findings. Describe abnormal lab investigations.	C2, A3	LCIS	SEQS, MCQS,
Innuenza	Recognize complications of influenza.	C2, A3		OSPE
	Describe management/treatment of infection	C2, A3		
	•Recall epidemiology of infection.	C1, A3		
Dolio Dobios Vinus	•Describe clinical findings of infections.	C2, A3	LCIS	SEQS, MCQS,
r ono, Kables, vii us	•Describe investigations, differential diagnosis, complications and management plan for infections.	C2, A3		OSPE
	•Recognize preventive aspects of infection.	C2, A3		
	Describe natural history and classification of HIV.	C2, A3		SEOS MCOS
HIV and Immunodeficiency	Describe clinical examination of patient with HIV infection.	C2, A3	LGIS	SEQS, MCQS,
	Discuss presenting problems in HIV infection	C3, A3		USIE
Dengue fever, sign, symptoms	Describe pathophysiology of dengue infection.	C3	LCIS	MCOS VIVA
and treatment	•Recognize signs and symptoms of dengue fever.	C3		

•Differentiate between DF, DHF, DSS on basis of symptoms, signs and lab parameters.	C3	
•Discuss investigations and management of dengue fever.	C2, C3	

PEADS Large Group Interactive Session (LGIS)

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
			Strategy	Tool
	Define Neonatal tetanus	C1		
	Describe clinical features	C1		
	Discuss Differential diagnosis	C2		
Neonatal Tetanus	•Discuss treatment and management plan	C2	LGIS	SEQS, OSPE
	•Discuss Role of immunoglobulins.	C2		
	•Discuss about maternal and neonatal immunization for tetanus	C2		
	•Enlist preventive measures	C2		
	•Define the disease	C1		
	Describe clinical features	C1		
	Discuss Differential diagnosis	C2		SEOS OSDE
Measles, Mumps, Rubella	•Identify complications	C2	LGIS	MCQS
	Manage disease and its complications	C2	-	
	Discuss immunization against measles/Mumps/Rubella	C3		
	•Enlist preventive measures	C2		

Gynecology Large Group Interactive Session (LGIS)

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching Strategy	Assessment Tool
	Classify infections in pregnancy	C2		
Infection In Pregnancy	Enlist the organism of infection	C2	LGIS	seqs, ospe
	Identify lab diagnosis and treatment	C2		

Community Medicine Large Group Interactive Session (LGIS)

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
			Strategy	Tool
	Demonstrate the concept of natural &artificial lighting	C2		
	Explain the effects of noise exposure	C2		
	Describe approaches for the control of noise pollution	C2		
	Explain sources of noise.	C2		
	Describe heat stress indices.	C2		
Disposal of waste and healthful	Identify heat hyperpyrexia and heat exhaustion.	C1	LGIS	MCQS, SEQS
housing	Demonstrate preventive measures for heat	C2		
	Describe heat stress along with its indices	C2		
	Summarize the effects of heat stress & cold stress along with its prevention Discuss the elements of meteorology.	C2	•	
	Demonstrate the acute mountain sickness.	C1		
	Explain high altitude pulmonary edema. Describe the Caisson disease	C1		
	Define solid waste.	C1		
	Demonstrate sources of waste.	C3		
	Explain ways of collection of waste.	C2		
Public nearin importance of	Describe methods of disposal of waste	C2	I CIS	MCOS SEOS
ngni, noise and meteorological	Describe health hazards of improper disposal.	C2	LOIS	MCQS, SEQS
environment	Describe sanitation barrier.	C2	1	
	Elaborate methods of excreta disposal.	C3		
	Describe criteria for healthful housing	C1		

Describe the housing standards	C2	
Explain effects of housing on health	C2	
Define overcrowding	C2	
Enlist indicators of housing.	C2	
Define septic tank and its working.	C2	
Describe its maintenance.	C2	
Explain ways for disposal of sewage	C2	

Horizontal Integration LGIS (Pharmacology, Forensic Medicine, Pathology, Family Medicine, Surgery)

Pharmacology Large Group Interactive Session (LGIS)

Torio	At the Final of The Cossien Student Chevild De Alde Te		Teaching	Assessment
ropic	Al me End of me session student should be Able to	C/F/A	Strategy	Tool
	Classify anti-bacterial drugs based on mechanism of Action, anti-microbial spectrum & type of anti- microbial activity	C1		
	Explain bacteriostatic & bactericidal activity of antibacterial drugs with examples	C2		
	Describe Dose-dependent & time-dependent killing based on MIC	C2		
Introduction to Chemotherapy	Explain post-antibiotic effect with examples	C2	LGIS	SEQS, MCQS
	Describe briefly the steps and factors affecting selection of an antimicrobial for different types of therapy	C2		
	Enumerate the problems associated with anti-microbial use	C2		
	Briefly discuss anti-microbial resistance and its mechanism	C2		
Doneilling I	Enumerate groups of Cell Wall Inhibitors	C1		
(Classification and	Classify Penicillin	C1		SEOS MCOS
(Classification and Dharmacokinetic)	Describe mechanism of action of Penicillin	C2	1013	3EQ3, MCQ3
Phannacokinetic)	Describe anti-bacterial spectrum of Penicillin	C2		
Pencillins II [®]	Enumerate uses & adverse effects of Penicillin	C1	+	
(Pharmacodynamics with	Describe mechanisms of resistance to Penicillin	C2	LGIS	SEQS, MCQS
interaction)				
	-Classify Cephalosporins	C1		SEQS, MCQS
Conholognoring	-Describe mechanism of action of Cephalosporins	C2		
Cephalosporms	-Discuss anti-bacterial spectrum of different generations of Cephalosporins	C2	1013	
	-Discuss uses and adverse effect of Cephalosporins based on their spectrum	C2		
	Grasp the properties and mechanisms of action of these antibiotic classes.	C2		
Carbapenems and	Understand the types of bacteria susceptible to Carbapenems and Monobactams.	C2 LG	LGIS	SEQS. MCQS
Monobactam	Recognize appropriate use cases for Carbapenems and Monobactams in treatment.	C2		02Q0, MCQ0
	Describe mechanism of action and clinical uses of Vancomycin	C2		
v ancomycin and cell wall synthesis inhibitors	Enumerate adverse effects of vancomycin	C2	LGIS	MCQS, SEQS
Synthesis minorens	Explain in detail Red Man Syndrome and its management	C2		

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	Classify fluoroquinolones	C1		
Eluoroquinolonog	Describe mechanism of action of Fluoroquinolones	C2		MCOS SEOS
Fiuor oquinoiones	Discuss spectrum of Fluoroquinolones	C2	1013	MCQ3, JEQ3
Sulnhonamides	Discuss uses of Fluoroquinolones based upon their Spectrum	C2	-	
Sulphonamides		C2	LCIS	
&Trimethoprim	Describe the mechanism of action of Co-Trimoxazole		LGIS	MCQ3, JEQ3
	Enumerate groups of Protein synthesis inhibitors	C2		
	-Classify tetracyclines	C2		
Tetracyclines	-Describe the mechanism of action of Tetracyclines	C3	LGIS	MCQS, SEQS
	-Describe the anti-bacterial spectrum of Tetracyclines	C2	-	
	-Enumerate uses and adverse effects of Tetracyclines	C1		
	Enumerate Macrolides	C1		
Macrolides	Discuss mechanism of action of Macrolides	C2		MCQS, SEQS
	Discuss spectrum of antibacterial activity of Macrolides	C2	LGIS	
	Discuss adverse effects of macrolides	C2		
	Describe mechanism of action of clindamycin and chloramphenicol	C2	LGIS	MCQS, SEQS
Clindamycin and other Protein	Discuss antibacterial activity of clindamycin and chloramphenicol	C2		
Synthesis Innotors	Discuss adverse effects of both agents	C2		
	Classify aminoglycosides	C2		1
	Examine Pharmacokinetics of Aminoglycosides	C2		
Aminoglycosides	Describe spectrum of Aminoglycosides	C2	LGIS	MCQS, SEQS
	-Describe Clinical uses of Aminoglycosides	C2		
	-Describe adverse effects and contraindication Aminoglycosides	C2		
	Classify anti-viral drugs based on the viral disease	C1		
Anuvirai Agents I	Classify anti-viral drugs based on mechanism of action of drugs	C2	LGIS	MCQ3, JEQ3
Antivinal Aganta II	-Outline the salient pharmacokinetic & pharmacodynamic features of antiviral drugs used to treat HSV,	C2		
Antiviral Agents fr	VZV, CMV and influenza		1913	MCQ3, JEQ3
Antiviral Agents III	Define HAART Describe the mechanism of action and adverse effects of major drug groups used in AIDS	C2	LGIS	MCQS, SEQS
Antifungel Agents I	Enumerate various antifungal agents	C1		MCOS SEOS
Antifungal Agents I	-Describe mechanism of action and antimicrobial spectrum of amphotericin	C2	LGI2	MCQ3, SEQS

	-Discuss pharmacokinetics and unwanted effects of Amphotiricin B	C2		
Antifungal Agents II	Describe mechanism of action of Azoles, Echinocandinsandother antifungal drugs	C2	IGIS	MCQS, SEQS
	Discuss clinical uses and adverse effects of various antifungal drugs C2	C2	1013	
	Classify anti-cancer drugs	C1		
Anticancer Agents I	-Explain the term cell-cycle specific and cell cycle non-specific	C2	LGIS	MCQS, SEQS
	-Enumerate cell-cycle specific and cell cycle non-specific drugs	C1		
	Describe the log kill hypothesis	C2		
Anticancer Agents II	Describe advantages of combination anticancer therapy	C2	LGIS	MCQS, SEQS
	Describe adverse effects common to anti-cancer drugs (shared toxicities)	C2		

Forensic Medicine Large Group Interactive Session (LGIS)

Tonio	At The End of The Session Student Should Be Able Te	C/P/A	Teaching	Assessment
Topic			Strategy	Tool
Inebriants (Alcohol)	Classify the types of Alcohol	C2	LGIS	SEQS, MCQS,
	Describe the clinical presentation of alcohol intoxication both acute and chronic	C1		OSPE
	Briefly explain the clinical tests for examination and the collection of blood, urine and vomitus and their necessary sampling .	C2		
	State the Medicolegal importance of alcoholic intoxication.	C2		
	Describe the management of acute and chronic alcohol intoxication in general.	C2		
Agricultural Poisons	Enlist the physical properties of Organoposphours compounds.	C1	LGIS	MCQS, OSPE
(OCP)	Briefly describe the mechanism of action in humans and clinical features of Organoposphours compounds poisoning and its management.	C2		
	State the Medico-legal importance of Organoposphours compounds poisoning.	C2		
	Enumerate the autopsy findings of Organoposphours compounds poison	C2		
	Enlist the physical properties of Organoposphours compounds.	C3		
Inorganic Irritant Metallic	Classify the types of Inorganic Irritants (Arsenic).	C1	LGIS	SEQS, MCQS,
Poisons (Arsenic)	Describe mechanism of action of in Inorganic irritants and clinical features of a poisoning with Arsenic \cdot	C2		VIVA
	Mention the fatal dose, management, medico-legal importance of each type of inorganic poisoning.	C2		
	Briefly explain the autopsy findings of a victim of inorganic metallic poisoning.	C2		
Inorganic Irritant Metallic	•Classify the types of Inorganic Irritants (Lead).	C1	LGIS	SEQS, MCQS,
Poisons (Lead)	•Describe mechanism of action of in Inorganic irritants and clinical features of a poisoning with lead.	C2		OSPE

INTEGRATED MODULAR CURRICULUM

Microbes and Antimicrobial MODULE

	Mention the fatal dose, management, medicolegal importance of each type of inorganic poisoning. Briefly explain the autopsy findings of a victim of inorganic metallic poisoning	C2 C2		
Non-Metallic Poisons	Classify the types of Inorganic non-metallic Irritants (Phosphorus & Iodine)	C1	LGIS	SEQS, MCQS,
(Phosphorus and Iodina)	Mention the fatal dose, management, medico-legal importance of each type of inorganic poisoning.	C2		VIVA
	Describe mechanism of action of in Inorganic irritants and clinical features of a poisoning with (Phosphorus & Iodine) ·	C2		
Spinal Poisons Strychnine	Briefly state the mechanism of action of spinal poison.	C1	LGIS	SEQS, MCQS,
(Itux Volinca)	Mention the fatal dose, management & medico-legal importance of spinal poison.	C1		OSPE
	Briefly explain the autopsy findings of a victim of spinal poison. \cdot State the medicolegal importance of spinal poisons \cdot	C2		
	Differentiate between symptoms of spinal poisons and tetanus	C2		

Pathology Large Group Interactive Session (LGIS)

Topic	At The End of The Service Student Should Be Able To	he Session Student Should Be Able To	Teaching	Assessment
ropic	AT the Lind of the session stodent should be Able to	C/F/A	Strategy	Tool
	Define different types of mutations	C1		
	Describe bacterial components for genetic transformation	C2		SEOS MCOS
Bacterial Genetics	Discuss high frequency recombination	C1	LGIS	SEQS, MCQS,
	Define fertility plasmid and sex pilus	C2		0012
	Discuss transduction	C2		
Antimianahial Dung Desistance	Explain mechanism of resistance to antibiotics in bacteria	C1		
Antimicrobial Drug Resistance	Describe vaccines	C2	LGIS	SEQS, MCQS,
and vacune	Discuss diseases against which vaccines are used	C2		
	-Explain Important properties, epidemiology	C1		
	-Describe transmission, pathogenesis	C2		SEQS, MCQS,
Staphylococci	Signs, symptoms, laboratory diagnosis and treatment of Staphylococcus aureus	C2	1013	OSPE
	Staphylococcus epidermidis and Staphylococcus saprophyticus	C2		
St	Enumerate different types of streptococci according to their groups.	C1		
	-Explain important diseases and laboratory diagnosis of β-hemolytic streptococcus.	C2		SEQS, MCQS,
Sueptococci	-Explain important diseases and laboratory diagnosis of Streptococcus viridians	C2	1913	OSPE
	-Discuss different properties and diseases caused by strep. Pneumonia	C2		

INTEGRATED MODULAR CURRICULUM

	-Discuss diseases and laboratory diagnosis of enterococci and streptococcus pneumoniae	C2		
	Enumerate different types of gram-negative cocci	C1		SEQS, MCQS,
Gram Negative Cocci	-Discuss different types of gram-negative cocci in detail along with their laboratory diagnosis -	C2	LGIS	OSPE
	Describe unique traits of Gram-positive rods and how they differ from other bacteria.	C1		
Gram Positive Rods	Identify key genera of Gram-positive rods.	C2	LGIS	SEQS, MCQS,
	Understand the role of Gram-positive rods in health and disease.	C2		OSPE
	Describe Important properties of Enterobacteria	C2		
	-Describe transmission, pathogenesis, signs and symptoms, laboratory diagnosis of Enterobacteria	C2		
Introduction to Enterobacteria,	Describe different strains of E. coli	C1		SEQS, MCQS,
E coli	Explain laboratory diagnosis and treatment of E. coli infection		LGIS	OSPE
		C2		
	Discuss Important properties & epidemiology	C2		
	- Explain transmission, pathogenesis, signs and symptoms	C2		
	-Identify laboratory diagnosis and treatment of Salmonella	C2		SEQS MCQS
Salmonella classification,	Discuss classification of salmonella	C3	LGIS	OSPE
pathogenicity, properties and	-Explain important properties and pathogenesis of Salmonella	C2		
lab diagnostics	-Discuss chronological order of diagnostic tests for typhoid fever	C2		
	Describe Important properties & epidemiology of Gram-Negative rods related to RTI.C2	C2		
	-Discuss transmission, pathogenesis, signs and symptoms, laboratory diagnosis of HaemophillusC2.	C2		
Gram Negative Rods Related to	-Discuss important properties C2	C2		SEQS. MCQS.
Respiratory Tract	-Discuss pathogenesis, laboratory diagnosis of bacteria of respiratory tract.C2	C2	LGIS	OSPE
	Explain pathogenesis of Bordetella, - C2	C2		
	Discuss legionnaire's disease and important properties of organism	C2		
	Enlist types of Rickettsia, Chlamydia	C2		
Rickettsiae, Chlamydia	Describe Dethogenesis Clinical features treatment of disasses agused by Diskettsia Chlamydia	02	LGIS	VIVA, MCQS,
	Describe ramogenesis, Chinical leatures, treatment of diseases caused by Rickettsia, Chiamydia	C2		USPE
	Explain the important properties	C2		SEQS, MCQS.
Measles, Mumps, Rubella	Describe Replicative cycle	C2	LGIS	OSPE
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2		-

	•Explain the interaction of pathogenesis of viruses & immunity of individuals	C2		
	•Explain clinical findings and its laboratory identification	C2		
	•Describe the treatment & Prevention	C2		
	Explain the important properties of respiratory viruses	C2		
	Describe Replicative cycle	C2		
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2		5505 MC05
Respiratory Virus	•Explain the interaction of pathogenesis of viruses & immunity of individuals	C3	LGIS	SEQS, MCQS,
	•Explain clinical findings and its laboratory identification	C2	-	OSPE
	•Describe the treatment & Prevention	C2	-	
HIV/ AIDS Diseases	Explain the important properties	C2		
	Describe Replicative cycle	C2	LGIS	
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2		SEQS, MCQS,
	•Explain the interaction of pathogenesis of viruses & immunity of individuals	C2		OSPE, VIVA
	•Explain clinical findings and its laboratory identification	C2		
	•Describe the treatment & Prevention	C2		
	Identify the morphology of fungi	C1	LGIS	SEQS, MCQS,
	•Describe the important features of systemic fungal diseases	C1		
Systemic Mycosis and	Describe laboratory diagnosis of systemic fungi	C1		
Antifungai	Classify antifungal	C1	-	OSFE
	Discuss their mechanism of action	C2		
Dongue fever Pathological	Identify the morphology of fungi	C2		
aspects and Lab Diagnosis	•Describe the important features of systemic fungal diseases	C2	LGIS	SEQS, MCQS,
aspects and Lab Diagnosis	Describe laboratory diagnosis of systemic fungi	C2		
	Explain the transmission and pathogenesis	C2		
Varicalla zostar and	Relate the interaction of pathogenesis of viruses with immunity of individual	C3		
Cytomegalovirus	-Explain clinical findings, Lab diagnosis	C2	LGIS	SEQS, MCQS,
Cytomegato in us	-Describe treatment and prevention.	C2	1	
	-discuss the reactivation of disease.	C2		

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
			Strategy	Tool
Ethical Consideration of	Weigh ethical challenges in controlling outbreaks and balancing individual rights with public health measures.	C2	LGIS	SEQS, MCQS
infectious diseases	Analyze ethical issues in allocating resources during outbreaks, focusing on equity and access.	C2		
	Grasp ethical principles in infectious disease research, like consent and data privacy.	C2		
Sexually transmitted diseases	classify STDs	C1	LGIS	SEQS, MCQS
	Describe the management approach to a patient with STD in family practice	C2		
	Identify at risk patients and offer them screening	C2		
	Describe prevention of STDs	C2		
An approach to patient with	Identify causes, and conduct a targeted patient examination.	C2	LGIS	SEQS, MCQS
fever	Understand proper treatment plans for different fevers.	C2		
	Recognize when to refer patients with fever to specialists.	C2		

Family Medicine Large Group Interactive Session (LGIS)

Surgery Large Group Interactive Session (LGIS)

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
			Strategy	ΤοοΙ
Microbiology of Surgical	Enlist and common surgical pathogens	C1	lgis	seqs, mcqs,
infection	-Define wound infection. C1	C1		OSPE
	-Describe decisive period and role prophylactic antibiotic in this period.	C3		
	-Describe sources of wound infection and risk factors of wound infection	C2		
Presentation of surgical	Describe surgical site infection and its types.	C3	LGIS	seqs, mcqs,
infections	-Describe management of SSI.	C3		OSPE
	-Briefly Describe management of local infections like thrombophlebitis, lymphangitis, abscess.	C2		
	-Describe management of systemic infections SIRS, septicemia in surgical patient. C3	C3		
	-Briefly describe requirement of Surgery in patients with HIV, COVID and precautions needed. C 3	C3		
Critical Surgical infections and	describe management of gas gangrene, necrotizing fasciitis	C3	lgis	seqs, mcqs,
their treatment				OSPE
Prevention of surgical infection	Understand importance of aseptic technique in surgery for prevention of surgical infection.	C2	LGIS	seqs, mcqs,
	-Understand role of pre –operative patient optimization and preparation in prevention of surgical infection.	C3		

	-Describe role of prophylactic antibiotics	C3		OSPE
Antimicrobial treatment in	Understand principles of antimicrobial treatment in surgical infections.	C2	lgis	SEQS, MCQS,
surgical infections	-Describe rational empirical antibiotics use according to flora.	C3		OSPE

Horizontal Integration SGD (Pathology)

Pathology Small Group Discussion (SGD)

Topio	At The End of The Session Student Should Be Able Te	C/P/A	Teaching	Assessment
ropic	Al the End of the Session Student Should be Able to	C/P/A	Strategy	ΤοοΙ
	Differentiate between structure of gram positive and gram-negative bacterial cell wall	C3		
Structure of Bacterial cell	Correlate structural components of bacteria with their pathogenicity	C3	SGD	OSPE Viva
	Define plasmid, transposon, mesosome, glycocalyx.	C1		
	Define each phase of growth cycle	C1		
Bactorial motabolism and	Differentiate between aerobic and anaerobic growth	C3	-	MCOs SEOs
Growth curve	Explain fermentation of sugars	C2	SGD	OSPE
Growth curve	Discuss iron metabolism	C2		USIL
	Define each phase of growth cycle	C2		
	Define different terminologies	C1	- SGD	MCQs, SEQs, OSPE
	Explain modes of transmission and adherence and entry in host cell	C2		
	Explain mechanism of action of important toxins	C2		
Pathogenesis of Infectious	Differentiate between exotoxin and endotoxin	C2		
agent in Microbiology	Explain Koch's postulates	C2		
	Identify different lab test	C1		
	Describe principle of different lab test	C2		
	Interpret various lab tests for different diseases	C3		
	Define Chemical disinfectants	C1		
Sterilization and Disinfection	Categorize chemical disinfectants	C2	SGD	MCQs, SEQs,
	Explain physical methods of disinfection and sterilization	C2		OSPE
Klebsiella, shigella, vibrio	Describe Important properties, epidemiology of vibrio cholerae and shigella	C2		MCQs, SEQs,
cholera	-Describe transmission, pathogenesis, signs and symptoms, laboratory diagnosis and treatment of Shigella and Vibrio Cholerae	C2	SGD	OSPE

	-Enumerate different types of vibrion	C1		
	-Discuss pathogenesis of cholera and shigellosis.	C2		
	-Identify diagnostic tests available for vibrio cholera and its treatment	C3		
	-Discuss interpretation of TSI	C2		
	Describe Important properties, epidemiology of vibrio cholerae and shigella	C2		
Helicobacter and	-Discuss related diseases of Helicobacter and Campylobacter C2,	C2	SGD	MCQs, SEQs,
Campylobacter	Discuss pathogenesis and laboratory diagnosis of Campylobacter and Helicobacter C2,	C2		OSPE

Vertical Integration SDL (Pathology)

Pathology Self-Directed Learning (SDL)

Торіс	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
			Strategy	1001
	Differentiate between structure of gram positive and gram-negative bacterial cell wall	C3		MCOs SEOs
Structure of Bacterial cell	Correlate structural components of bacteria with their pathogenicity	C3	SDL	OSPE Viva
	Define plasmid, transposon, mesosome, glycocalyx.	C1		0012, 114
	Define each phase of growth cycle	C1		
Posterial metabolism and	Differentiate between aerobic and anaerobic growth	C3		MCOs SEOs
Crowth curvo	Explain fermentation of sugars	C2	SDL	OSPE
Growin curve	Discuss iron metabolism	C2		OSIL
	Define each phase of growth cycle	C2		
	Define different terminologies	C1		
	Explain modes of transmission and adherence and entry in host cell	C2		
	Explain mechanism of action of important toxins	C2		
Pathogenesis of Infectious	Differentiate between exotoxin and endotoxin	C2	SDI	MCQs, SEQs,
agent in Microbiology	Explain Koch's postulates	C2	SDL	OSPE
	Identify different lab test	C1		
	Describe principle of different lab test	C2		
	Interpret various lab tests for different diseases	C3		
Starilization and Disinfection	Define Chemical disinfectants	C1	SDI	MCQs, SEQs,
Stermization and Disinfection	Categorize chemical disinfectants	C2	SDL	OSPE

INTEGRATED MODULAR CURRICULUM

	Explain physical methods of disinfection and sterilization	C2		
	Describe Important properties, epidemiology of vibrio cholerae and shigella	C2	SDL	MCQs, SEQs, OSPE
Klebsiella, shigella, vibrio cholera	-Describe transmission, pathogenesis, signs and symptoms, laboratory diagnosis and treatment of Shigella and Vibrio Cholerae	C2		
	-Enumerate different types of vibrion	C1		
	-Discuss pathogenesis of cholera and shigellosis.	C2		
	-Identify diagnostic tests available for vibrio cholera and its treatment	C3		
	-Discuss interpretation of TSI	C2	-	
	Describe Important properties, epidemiology of vibrio cholerae and shigella	C2		
Helicobacter and	-Discuss related diseases of Helicobacter and Campylobacter C2,	C2	SDI	MCQs, SEQs,
Campylobacter	Discuss pathogenesis and laboratory diagnosis of Campylobacter and Helicobacter C2,	C2		OSPE

3RD **YEAR WEEKLY SELF-DIRECTED LEARNING (SDL)**

WEEK	TOPIC	TEACHER
WEEK-1	Introduction to Microbiology	Dr. Unaiza
WEEK-2	Normal Flora and classification of bacteria	Dr. Faiza Zafar
WEEK-3	Actinomycosis	Dr. Syed Iqbal Haider
WEEK-4	Minor Bacterial Pathogen	Dr. Syeda Aisha
WEEK-5	Introduction to Medical Virology and Anti-Viral Drugs	Dr. Nida Fatima
WEEK-6	Introduction to Basic Mycology	Dr. Abid Hassan

Horizontal Integration CBL (Pathology, Pharmacology, Forensic Medicine)

Pathology Case Based Learning (CBL)

Торіс	At The End of The Session Student Should Be Able To		Teaching	Assessment
		C/P/A	Strategy	Tool
	Discuss pathogenesis and laboratory diagnosis of brucella	C2		
Crom Nogotivo Dod Dolotod	-Discuss important properties	C2		MCOS SEOS
	-Discuss pathogenesis and laboratory diagnosis of Yersinia pestis	C2	CBL	OSPE
Zoonotic Disease	-Explain pathogenesis and laboratory diagnosis of infections caused by Francisella and Pasteurella	C2		
	Discuss pathogenesis and laboratory diagnosis of brucella	C2		
	Explain different stages of syphilis,	C2		
	Describe different serological techniques used for diagnosis of syphilis,	C2		MCOS SEOS
Spirochetes	Discuss treatment and prevention of syphilis,	C2	CBL	OSPE
	Explain Lyme's Disease,	C2		
	Explain transmission of leptospira	C2		
	Explain the important properties	C2		
	Describe Replicative cycle	C2		
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2	CBL	MCQS, SEQS, OSPE
Diarrheal viruses	•Explain the interaction of pathogenesis of viruses & immunity of individuals	C2		
	•Explain clinical findings and its laboratory identification	C2		
	•Describe the treatment & Prevention	C2		
	Explain the important properties	C1		
	Explain the important properties	C2		
	Describe Replicative cycle	C2		MCQS, SEQS, OSPE
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2		
Polio and Rabies virus	•Explain the interaction of pathogenesis of viruses & immunity of individuals	C2	CBL	
	•Explain clinical findings and its laboratory identification	C2		
	•Describe the treatment & Prevention	C2		
	Explain the important properties of Herpes virus	C2		MCOS SEOS
Herpes Virus and HSV	Describe Replicative cycle	C2	CBL	OSPE
	•Explain the transmission and pathogenesis of the diseases caused by these viruses	C2	1	OSPE

INTEGRATED MODULAR CURRICULUM

	•Explain the interaction of pathogenesis of viruses with immunity of individuals	C2		
	•Explain clinical findings and its laboratory identification	C2		
	•Describe the treatment & Prevention	C2		
Cutaneous and Subcutaneous	• identify of most common fungal pathogens associated with cutaneous and sub cutaneous mycoses	C1	CBL	MCQS, SEQS,
mycosis	•Compare the major characteristics of specific fungal diseases affecting the skin	C2		OSPE
Condida	Explain Important properties of Candida	C1		
	-Describe its reproduction	C2		
	-Explain transmission, Pathogenesis and diseases caused by this organism	C2	CBL	MCQS, SEQS,
Canulua	-Relate the interaction of pathogenesis of this organism with immunity of individuals.	C2	CDL	OSPE
	-Explain clinical findings and its laboratory identification	C1		
	- Describe treatment and prevention of Candida	C2		
	Identify the morphology of fungi	C1		
Opportunistic mycosis	•Describe the important features of opportunistic fungal diseases	C1	CBL	MCQS, SEQS,
	•Explain co-morbidities	C2	CDL	OSPE
	Describe laboratory diagnosis	C2		

Pharmacology Case Based Learning (CBL)

Tonic	Tapic At The End of The Session Student Should Be Able Te		Teaching	Assessment
Tohic	Al the Life of the session student should be Able to		Strategy	Tool
	Grasp the cause, symptoms, and potential complications of rheumatic fever.	C2		MCOG GEOG
Rheumatic fever	Understand diagnostic tools and treatment strategies for rheumatic fever.	C2	CBL	MCQS, SEQS, OSPE
	Learn how to prevent rheumatic fever through proper management of infections.	C2		
	Grasp the definition, causes, and types of meningitis.	C2		
Meningitis	Identify common symptoms and understand diagnostic methods for meningitis.	C2	CBL	MCQS, SEQS,
	Learn treatment options and effective preventive measures for meningitis.	C2		OSPE
VRSA endocarditis	Understand the challenges of VRSA (Vancomycin-Resistant Staphylococcus Aureus) in endocarditis treatment.	C2	CBL	MCQS, SEQS,
	Explore alternative antibiotic regimens for VRSA endocarditis.	C2		
	Analyze the pharmacological properties and potential side effects of VRSA endocarditis treatments.	C2		OSTE

INTEGRATED MODULAR CURRICULUM

Microbes and Antimicrobial MODULE

Shingles	Understand the link between shingles reactivation and the medications used to treat it. Identify antiviral medications used for shingles and their mechanisms of action.	C2 C3	CBL	MCQS, SEQS,
	Learn about pharmacological approaches to managing pain associated with shingles.	C2		OSFE
AMG Use in Sepsis	Explore the use of AMG (anti-vascular endothelial growth factor monoclonal antibody) therapy in treating sepsis.	C2	CBL	MCQS, SEQS,
	Understand the mechanism of action of AMG therapy and its potential benefits for sepsis patients.	C2		OSPE
	Analyze current research and evidence on the use of AMG therapy for sepsis.	C3		

Forensic Medicine Case Based Learning (CBL)

Tonio	Tonic At the End of the Session Student Should Be Able Te	C/D/A	Teaching	Assessment
Topic	Al the tha of the session student should be Able to	C/F/A	Strategy	Tool
	Enlist physical properties of castor, croton, capsicum, ergot, Arbus	C1		
Vegetable Poisons (castor	Briefly explain their mechanisms of action in humans	C2		
croton considum orgat Arbus)	Describe clinical features of organic irritant poisoning and its management	C2	CBL	MCQS, SEQS
croton, capsicum, crgot, Arbus)	State the medicolegal importance of organic irritant poisoning	C2		
	Briefly explain the autopsy findings of organic irritant poisoning	C2		
Corrosives (sulfuric acid, nitric acid, hydrochloric acid)	Identify specimen of corrosives	C1		
	Classify Corrosives and state its mechanism of actions.	C2		
	•Briefly explain the clinical effects of corrosives on human body.	C2		
	-State the fatal dose and management of corrosives burns.	C1	CBL	MCQS, VIVA
	-Define Vitriolize	C2		
	-Briefly describe the medico-legal importance of throwing of corrosives and their autopsy findings.	C2	-	
	-The student will be able to manage case of a CORROSIVES burns	C2		
Торіс	At The End of The Session Student Should Be Able To		Teaching	Assessment
----------------	---	-------	----------	------------
	Al file Life of file Session Stodelit Shoold be Able to	C/I/A	Strategy	Tool
Medical Errors	Perform the pharmacovigilance in clinical setting with special focus on performing pharmacovigilance and filling following forms a. Error reporting form b. Error analysis form c. WHO guidelines for surgical procedure safety d. Guidelines for prevention of medication error e. Guidelines for prevention of diagnostic error	C2	LGIS	MCQS

Bioethics Case Based Learning (CBL)

Pharmacology Practical Skill Laboratory (SKL)

Topic	Learning Domain	Venue	Assessment Tool
P- Drug prescription of community and nosocomial pneumonia	Р	Skill Lab	OSPE
P drug & Prescription writing of gonorrhea and pseudomembranous colitis	Р	Skill Lab	OSPE
P drug & Prescription writing of atypical pneumonia and enteric fever	Р	Skill Lab	OSPE
Pharmacy Visit	Р	Skill Lab	OSPE
P drug & Prescription writing of oral candidiasis and HSV encephalitis	Р	Skill Lab	OSPE

Topic	Learning Domain	Venue	Assessment Tool
Inebriant (methyl alcohol poisoning)	Р	Toxicology Lab/ Lecture Hall 4	OSPE
Insecticide wheat pill poisoning	Р	Toxicology Lab/ Lecture Hall 4	OSPE
Irritants, Metallic poisons	Р	Toxicology Lab/ Lecture Hall 4	OSPE
Autopsy Visits/Postmortem& Medicolegal Work/Research	Р	DHQ Mortuary	OSPE
Autopsy	Р	DHQ Mortuary	OSPE

Forensic Medicine Practical Skill Laboratory (SKL)

Pathology Practical Skill Laboratory (SKL)

Торіс	Learning Domain	Venue	Assessment Tool
Microscope, Bacterial morphology	Р	Skill Lab	OSPE
Culture media	Ρ	Skill Lab	OSPE
Gram staining and Zn staining	Р	Skill Lab	OSPE
Biochemical Test, Catalase, Coagulase, Urease, oxidase, indole test, citrate	Р	Skill Lab	OSPE
Lab Diagnosis of fungal infection	Р	Skill Lab	OSPE

Spiral Integrated Basic Sciences (Biochemistry)

Biochemistry Large Group Interactive Session (LGIS)

Торіс	At The End of The Service Student Should Re. Able Te		Teaching	Assessment
	Al the End of the Session Student Should be Able to		Strategy	Tool
Revisit Lecture	Kreb cycle, pyruvic acid cycle, bacterial metabolism	C2	LGIS	MCQS

Longitudinal Integrated Basic Sciences (Medical Ethics, Behavior Science, Quran)

Medical Ethics Large Group Interactive Session (LGIS)

Topic	At The End of The Session Student Should Be Able To	C/P/A	Teaching	Assessment
ropic	Al file Lind of file Session Stodelit Shoold be Able to	C/I/A	Strategy	Tool
	Understand Medical Errors	C2		MCQS
	Explain the background of medical errors	C2	LGIS	
Medical Errors	Elaborate why medicine susceptible to error	C2		
	Delineate the reasons of reluctance to report	C2		
	Classify the medical errors	C2		

Behavior Science Large Group Interactive Session (LGIS)

Tonia	At The End of The Service Student Should Be Able Te		Teaching	Assessment
ropic	Al file fild of the Session Student Should be Able to	C/F/A	Strategy	Tool
Crisis Intervention, Conflict	Master effective communication skills for calming patients in crisis and resolving conflicts.			
Desolution amonthy	Develop the ability to understand and respond to patients' emotions with empathy.		LGIS	MCQS
Resolution, empathy	Learn methods for crisis intervention, including risk assessment and appropriate referrals.			
Anxiety and Stress Related	Identify common types of anxiety and stress-related disorders.			
Disordor	Understand methods for assessing and diagnosing anxiety disorders.		LGIS	MCQS
Disoruer	Learn evidence-based treatment options for anxiety and stress-related disorders.			

Quran Large Group Interactive Session (LGIS)

Torrio	Teaching
Topic	Strategy
Quran Class	LGIS
Quran Class	
(Taleemwa	LGIS
Taalum)	

REFRENCE BOOKS

PHARMACOLOGY:

- 1. Katzong's Basic and Clinical Pharmacology, 13th edition
- 2. Essentials of Medical Pharmacology(KDTripathi), 7th edition
- 3. Liponcotty Illustrated Review, 7th edition
- 4. Katzong and Trevor's Pharmacology, 12th edition

FORENSIC MEDICINE:

TEXT BOOK

Parikh's Textbook of Medical Jurisprudence, Forensic Medicine & Toxicology

REFERENCE BOOKS

- 1. Principles & Practice of Forensic Medicine by Nasib R Awan
- 2. Principles of Forensic Medicine & Toxicology by Rajesh Bardale

PATHOLOGY:

Warren and levinsonReview of medical Microbiology and Immunology 14th Edition JawetzMelnick&Adelbergs Medical Microbiology 28 Edition

MEDICINE:

Davidson Textbook Of Medicine

SURGERY:

Balley& Love Textbook Of Surgery

Medical Ethics: Medical Errors: The Scope of the Problem. Fact sheet, Publication No. AHRQ 00-P037. Agency for Healthcare Research and Quality, Rockville, MD. http://www.ahrq.gov/qual/errba

http://nbcpakistan.org.pk/assets/may-16-bioethics-facilitator-book---may-16%2c-2017.pdf (page 195)

NBC Guidelines for Healthcare Professionals* Interaction with Pharmaceutical Trade and Industry

http://nbcpakistan.org.pk/assets/may-16-bioethics-facilitator-book---may-16%2c-2017.pdf (page 276)

nbcpakistan.org.pk/assets/ppi_guidelines_may_2011-1-final-copy-on-PHRC-wbesite.pdf Open source document

http://karachibioethicsgroup.org/PDFs/Karachi_Bioethics_Group_Ethical_Guidelines.pdf Karachi Bioethics Group Institutional Ethical Guidelines for Physician Pharmaceutical Industry Interaction

Medical Ethics:

http://nbcpakistan.org.pk/assets/may-16-bioethics-facilitator-book---may-16%2c-2017.pdf (page 194)

Peads:

INTEGRATED MODULAR CURRICULUM MICROBES AND ANTIMICROBIALS MODULE



3rd YEAR MBBS

TIME TABLE 2024 RAWALPINDI MEDICAL UNIVERSITY

DURATION OF MODULE:O6 WEEKSModule Coordinators:DR.KIRAN FATIMAModule Co-Coordinator :DR.NIDA FATIMA

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Chairperson Forensic Medicine	Dr Filza							
Focal Person Pharmacology	Dr Atya							
Focal Person Pathology	Dr. Kiran Fatima							
Focal Person Forensic Medicine	Dr. Gulzeb							
Focal Person Medicine	Dr. SaimaAmbreen							
Focal Person of Gynaecology	Dr. Sobia Nawaz							
Focal Person Community Medicine	Dr. Afifa Kulsoom							
Focal Person Quran Translation Lectures	Mufti Abdul Wahid							
Focal Person Family Medicine	Dr. Sadia Khan							
Focal Person Bioethics Department	Prof. Dr. AkramRandhawa							
Focal Person Surgery	Dr Rahat Hassan							

Reviewed by: Module committee Approved by: CURRICULUM COMMITTEE RMU

Prepared By: DR. Kiran Fatima

Pathology Department, Rawalpindi Medical University, Rawalpindi TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE 2024 (1stWeek)

Monday 10-6-24 Tuesday 11-6-24 Wednesday															
12-6-24					BIO	CHEMIS	STRY L-1		РАТНО	LOGY			PHARM/	ACOLOGYL	-3
Thursday					Kreb cy ba	11:00-12:0 ccle, pyruv cterial met Revisit Le LGIS	00 PM vic acid cycle, tabolism ecture S	12:00 P	SDL PM – 12:30 PM	SGI 12:30-) 1:00		01:00 P!	M – 02:00 PM	
13-6-24					EVEN		ODD		Structure of l	Bacterial cel		Iı	itroductior	to chemothe	rapy
								GRO UP	FACILITATO	R	VENUE	E	VEN	(ODD
					Dr. Anee Lecture ha	la ill 1	Dr. Kashif Lecture hall 2	A B C	Dr. Kiran Fati Dr. Mehreen Fa Dr. Shabih Hai	ma Leo tima Leo der Pha	eture hall 1 eture hall 2 urma Lab 6	Dr. Lectu	Zunera re hall 2	Dr Lectu	Arsheen are hall 1
	08:00am - 08:45am 08:45am – 09:30am			– 09:30am	SDL 09:30am 9:50am	_	SGD 9:50-10:15 am	D 10:1	Dr. Sarah Ra 5am - 11:00am	fi Tox 11:00am	icology Lab – 12:00pm				
	PHARMACOLOGY L-4 PHARMACOLOGY L-5		OLOGY L-5	PATHOLOGY		MEDICINE L-7 SURGERY L-8									
Friday	Pencillins I (Classification and Pharmacokinetics) LGIS			llins II	Bacterial Meta c		Bacterial Metabolism and growth curve		Introduction, basic symptoms analysis and investigations		Microbiology of Surgical infection				
14-6-24	EVEN	ODD	EVEN	ODD	GROUP	FACIL ATOF	R VENUE	EVEN	ODD	EVEN	ODD				
	Dr.Zunera Lecture hall 1	Dr. Uzma Lecture hall 2	Dr. Zunera Lecture hall 2	Dr.Uzma Lecture hall 1	A B C	Dr. Mudassi Zahid Dr. Kira Fatima Dr. Shab Haider	ira Lecture hall 1 an Lecture a hall 2 bih Pharma r Lab 6	Dr. Nid Lectur hall 1	a Prof. M. e Khuram Lecture hall 2	Dr Rahat Lecture hall 1	Dr. Ramla Lecture hall 2				
					D	Dr. Sara Rafi	ah Toxicolog y Lab								
	08:00am	- 08:45am	08:45am -	- 09:30am	SDL 09:30am 10:00an		<u>SGD</u> 10:00-10:30am	10:30	10:30 AM – 11:00 am		– 12:00pm	12:00 01:0	:pm – Opm	01:00pn	n – 02:pm
Saturday	PATHOL	.OGY L-9	Quran C	lass L-10	:	PATHOL	LOGY		DDEAK	Family m	edicine L-12	SURGE	RY L-13	MEDIC	INE L-14
15-6-24	Bacterial	Genetics	EVEN	ODD	Pathogenesis and Lab diagnosis of infectious agents in microbiology			DREAK		Ethical considerations of infectious diseases		ation of nfections	Fever of un	known origin	
	EVEN	ODD			GROUP	FACIL ATO	R VENUE		2440-5164 (cr) + 4079199(7	l Dr.	BY: Sadia	EVEN	ODD	EVEN	ODD
	Prof	Dr. Kiran	Qari Abd	ul Hadeeb	Α	Dr.	Lecture			Lectu	re hall 1	Dr	Dr.	Dr. Nida	Prof . M.

Microbes and Antimicrobial MODULE

Naeer Akhta	n Fatima ar Lecture		Fatima tuz Zohra	hall1	Rahat Lecture	Huma Lecture	Lecture hall 1	Khuram Lecture
Lectur hall 2	re hall 1 2	В	Dr. Mehreen Ftaima	Lecture hall 2	hall 1	hall 2		hall 2
		С	Dr. Kiran Ftaima	Pharma Lab 6				
		D	Dr. Shabih Haider	Toxicolog y Lab				

Rawalpindi Medical University Rawalpindi

TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE 2024



DATE / DAY	8:00 AM 11:00 AM	11:00 am	– 12:00pm			12:00 PM - 0	2:00 PM	
	Clinical Clerkship		nedicine L-15	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
Monday 22-7-24		Disposal of was hou	ste and healthful sing	A	Pharmacology	P- Drug prescription of community and nosocomial pneumonia	Supervised by: Dr Attiya Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	PHARMA LAB
		EVEN	ODD	В	Forensic Medicine	Inebriant (methyl alcohol poisoning)	Dr Shahrukh Dr Roheena PG observation Dr Pervaiz Dr AAqib	Toxicology Lab/ Lecture Hall 4
		Dr Nargis APWMO Lecture Hall 1	,Dr Asif Demonstrator Lecture Hall 2	С	Pathology	Microscope, Bacterial morphology	Prof .Mobina Dodhy Dr. Syeda Aisha Dr.Iqbal Haider Dr. Unaiza Aslam Dr. Nida Fatima	Pathology Lab NTB
		PHARMAC	OLOGY L-16	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
Tuesday 23.7.24	VIVA	Cephalospo LGIS		В	Pharmacology	P- Drug prescription of community and nosocomial pneumonia	Supervised by: Dr Attiya Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	PHARMA LAB
23-7-24		EVEN	ODD	С	Forensic Medicine	Inebriant (methyl alcohol poisoning)	Dr Shahrukh Dr Roheena PG observation Dr Pervaiz Dr AAqib	Toxicology Lab/ Lecture Hall 4
		DR. UZMA	DR. ZUNERA	А	Pathology	Microscope, Bacterial morphology	Prof .Mobina Dodhy Dr. Syeda Aisha Dr.Igbal Haider Dr. Unaiza Aslam Dr. Nida Fatima	Pathology Lab NTB
		Pharm L-	acology 17	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
Wednesday 24-7-24		Carbapenems a	nd monobactams	С	Pharmacology	P- Drug prescription of community and nosocomial pneumonia	Supervised by: Dr Attiya Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	PHARMA LAB
		EVEN	ODD	А	Forensic Medicine	Inebriant (methyl alcohol poisoning)	Dr Shahrukh Dr Roheena PG observation Dr Pervaiz Dr AAqib	Toxicology Lab/ Lecture Hall 4

Microbes and Antimicrobial MODULE

							DR.ZAHEER Lecture Hall 1	DR. MEMUNA Lecture Hall 2	В	Pathology	Micros	scope, Bacteri orphology	al Prof. Dr. Dr. Dr. Dr.	Mobina Dodhy . Syeda Aisha .Iqbal Haider Unaiza Aslam . Nida Fatima	Patholo	gy Lab NTB
							Pharmaco	ology L-18		PATHOL	OGY L-19			FORENSIC	MEDICINE L-20	
							Vancomyoin and	coll wall cupthosis		12:00 PM	- 01:00 PM			01:00 PM	<u>1 – 02:00 PM</u>	
Thursday							inhib	pitors	Anti-m	Nicrobial Dru Vaco	gs Resistai cines	nce and	Inebriant	Mobina Dodhy Syeda Aisha Iqbal Haider Unaiza Aslam Nida Fatima FORENSIC ME 01:00 PM - ; (Alcohol), /EN FILZA logy Lab FILZA logy Lab PILZA logy Lab Coppm RY L-29 of surgical ction DR. ASIFA DIYAN Lecture Hall 1		
25-7-24							EVEN	ODD	E	EVEN	O	DD	E	VEN	0	DD
							DR. ZUNERA Lecture Hall 2	DR. ZOEFISHAN Lecture Hall 1	Dr. Fo Z Lect	atima tuz Zahra ture Hall 1	Dr. Mu Za Lectur	dassira hid e Hall 2	DR. Toxico	FILZA ology Lab	DR. R Lectur	OMANA re hall 4
	08:	00am -	08	8:25am -	08:45am	- 09:30am	09:30am -	- 10:15am	10:15a	am - 11:00am	11:00am	- 12:00pm				
	08 PAT	:25am	08 PAT	8:45am												
	Y	SDL	N	Y SGD	Medic	ine L-22	PAED	S L-23	SUR	GERY L-24	PHARMAC	DLOGY L-25				
		Sterilizat disinfo	tion a ectior	and n	Bru	cellosis			Critio infecti tr	cal Surgical ons and their reatment LGIS	Fluoroqu	inolones				
Friday 26-7-24	A	Prof. Mobin Ahsar Dohdy	ia n y	Lecture Hall 1	EVEN	ODD	Neonatal LG	Tetanus EIS,	Even	Odd	EVEN	ODD				
	В	Dr. Mudass a Zahi	sir d	Lecture Hall 2	PROF.				DR	DR.RAML		DR				
	С	Dr. Shabil Haide	h r	Lecture Hall 6	M.KHUR AM Lecture Hall 1	DR.NIDA Lecture Hall 2	Even	Odd	RAHAT Lecture Hall 1	GAZANF AR Lecture	DR.UZMA Lecture Hall 2	ATTIYA Lecture Hall 1				
	D	Dr. Sar Rafi	ah	Pharma Lab			Dr. Bushra Lecture Hall 2	Dr.Huma Lecture Hall 1		Hall 2					I	
		08:00am -	08:45	am	08:45am	- 09:30am	09:30am -	- 10:30am	10:30 A	AM – 11:00 am	11:00am	– 12:00pm	12:00:pm	– 01:00pm	01:00pm -	– 02:00pm
		PATHOLO)GY L	.GIS	FOREINSI	C MEDICINE 27	PHARMACO	DLOGY CBL			PEAD	S L-28	SURGE	RY L-29	Patho	logy L
		Stanhy	lococci	:	Agricultu (C	ral poisons PPC)	Rheuma	tic fever					Prevention infe	of surgical		
Saturday 27-7-24		Staphy	lococci	1	EVEN	ODD	LECTURE HALL 1	Dr. Memuna	1	BREAK	Diphtheria chick	, pertussis, en pox	EVEN	ODD	Strepto	ococci
<i>21-1-24</i>	E	VEN	(ODD			HALL 2	Dr. Aisna	(
	Prof.	Mobina		Dr.	DR. FILZA	DR. ROMANA	LECTURE HALL 6	Dr. Zaheer		extrosted core = 422359527	Even	Odd	DR.	DR. ASIFA	even	Odd
	Ahsa Lect	n Dohdy ure Hall 1	MU Z Lect	Jaassira Zahid ture Hall 2	Lecture Hall 4	Toxicology Lab	PHARMA LAB	Dr. Zoefeshan			Dr. Muneeba Lecture Hall 1	Dr. Jawad Lecture Hall 2	RAHAT Lecture Hall 2	DIYAN Lecture Hall 1	Dr. Fatima tuz Zahra Lecture Hall 1	Dr. Mehreen Fatima Lecture Hall 2

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(3rdWeek)

TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE 2024

DATE / DAY	8:00 AM 11:00 AM	11:00 am	– 12:00pm			12:00 PM - 02:0	0 PM	
	Clinical Clerkship	Pharm Cl	acology BL	Batc h	Discipline	Topic of Practical	Teacher Name	Venue
Monday		Meni	ingitis	A	Pharmacology P- 1	P drug & Prescription writing of gonorrhea and pseudomembranous colitis	Teacher Name Supervised by: Dr Zunera Hakim Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Aisha	PHARMACOLOGY LAB
29-7-24		Lecture Hall 01 Lecture Hall 02	Dr Zaheer Dr Uzma Dr Zoefishan	В	Forensic Medicine P- 2	Insecticide wheat pill poisoning	Dr Gulzaib Dr Fatima PG observation Dr Saif Dr Yasir	Toxicology Lab/ Lecture Hall 4
		Lecture Hall 06 Pharmacy Lab	Dr Arsheen Dr Aisha Dr Saba	С	Pathology P- 3	Culture Media	Prof .Mobina Dodhy Dr. Abid Hassan Dr.Iqbal Haider Dr. Unaiza Aslam Dr. Nida Fatima	Pathology Lab NTB
		Pharm Cl	acology BL	Batc h	Discipline	Topic of Practical	TEACHER NAME	VENUE
Tuesday 30-07-24		VRSA en Lecture Hall 01 Lecture Hall 02 Lecture Hall 06 Pharmacy Lab	docarditis Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	В	Pharmacology	P drug & Prescription writing of gonorrhea and pseudomembranous colitis	Teacher Name Supervised by: Dr Zunera Hakim Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	PHARMACOLOGY LAB
				С	Forensic Medicine	Insecticide wheat pill poisoning	Dr Gulzaib	Toxicology Lab/ Lecture Hall 4

						Dr Fatima	
						PG observation	
						Dr Saif	
						Dr Vooir	
						Prof .Mobina Dodhy	
						Dr. Abid Hassan	
						DI. Abiu Hassan	
			A	Pathology	Culture Media	Dr.Iqbal Haider	Pathology Lab NTB
						Dr. Unaiza Aslam	
						Dr. Nida Fatima	
	Patholo	gy L-31	Batc h	Discipline	Topic of Practical	Teacher Name	Venue
					P drug & Prescription writing of gonorrhea	Teacher Name Supervised by: Dr Zunera Hakim Conducted by: Dr Zaheer	
					and	Dr Uzma	
	Gram neg	ative cocci	С	Pharmacology	pseudomembranous	Dr Zoefishan	PHARMACOLOGY LAB
					contis	Dr Arsheen	
						Dr Aisha	
Wednesday						Dr Saba	
31-7-24						Dr Gulzaib	
						Dr Fatima	
	Even	Odd	А	Forensic Medicine	Insecticide wheat pill	PG observation	Toxicology Lab/ Lecture Hall 4
					poisoning	Dr Saif	
						Dr Vasir	
						Prof .Mobina Dodhy	
	Dr Fatima	Dr Mehroon				Dr. Abid Hassan	
	tuz Zahra	Fatima	В	Pathology	Culture Media	Dr.Iqbal Haider	Pathology Lab NTB
	Hall 1	Hall 2				Dr. Unaiza Aslam	
						Dr. Nida Fatima	
	PATHOLOG	PATHOLOG		Family Me	dicine	Pharma	cology L-34
	11:00-11:30	11:30-12:00		12:00 PM - 0	01:00 PM		_
Thursday	Gram pos	sitive rods		Sexually transmit	ted infections	01:00 PM	– 02:00 PM
1-8-24	A Dr Mudass	sira Lecture Hall 1 In Lecture		BY: DR. S	SADIA Hall 1	Sulfonamides	and trimethoprim
	C Dr.,Shab	ih Lecture		Lecture		EVEN	ODD

Microbes and Antimicrobial MODULE

								Haider	Hall 6									
							D	Dr. Mehreen	Pharma	l					DR. AR	SHEEN	DR. A	ISHA
								Fatima	Lab						Lectur	e Hall 1	Lectur	e Hall 2
	08:00am PATHOL	– 8:45 am OGY L-35		8: PI	45-9:3 EADS	30am L-38		9 1	:30am – 1 PATHOL	.0:15am OGY L	РНА	10:15 - 1 RMACO	l1:00am DLOGY l	L-40	FOR	11:00-12 ENSIC MED	:00 ICINE L-41	
	Introduction to e E.	nterobacteriacae coli	^{2,} E	nteric Feve	er/ Ac	ute Diarrho	rea		Salmor	iella		Tetrac	yclines		Inorganic Irr	itants metalli	ic poisons (A	rsenic)
Friday	Even	Odd		Even		Odd		Even		Odd	SVE	2 N	0	DD	EVEN		ODI	D
2-8-24	Dr. Mudassira Zahid Lecture Hall 1	Prof. Mobina Ahsan Dohd Lecture Ha 2	a l y L	Dr.Maryan ecture Ha 2	n all	Dr. Naila Ahsan Lecture H 1	a [all	Prof. Naeem A	khta l 1r	Dr. Fatima tuz Zahra Lecture Hall 2	DR. AT Lecture 2	TIYA e Hall	DR. ZA Lectu	AHEER re Hall 1	DR.FILZA Toxicology l	A Lab	DR. ROM Lecture	/IANA Hall 4
	08:00am - 0)8:45am	08:4 08:	15am – 05am	9: 9	9:05am- 9:30am		09:30am – 10:30	am	10:30 AM - 11:00	0 am	1	1:00am -	- 12:00pm	12:00:pm	– 01:00pm	01:00pm	u – 02:pm
	Gynaeco	ology	Patl S	hology SDL	Pa	athology SGD	FA	MILY MEDICIN	E L-44			РН	ARMAC	OLOGY L-	Med	icine	Surger	ry L-47
Saturday	Infections in p	pregnancy	Kle	bsiella, vib	. Shi rio	igella,	An	approach to j with fever	patient	BREAK			macre	olides	Influ	enza	Antimi treatn surgical i	crobial nent in infections
3-8-24			А	Dr Mudass	ira	Lecture Hall 1						EV	ΈN	ODD	EVEN	ODD	EVEN	ODD
			В	Dr. Kir Ftima	an 1	Lecture Hall 2				24460-500 (100 + 4273950)7							DR.	DR. FAIZA
	BY : DR.S Lecture	SOBIA Hall 1	С	DrSha Haide	bih r	Lecture Hall 6		BY: DR. SAD Lecture Hall	DIA 1			D ATT	R. TYA	DR. MEMUNA	Dr. Unaiza	DR. NIDA	RAHAT	(SR HFH)
			D	Dr. Sa Rafi	ra	Pharma Lab						Lec Ha	ture III 1	Lecture Hall 2	Lecture Hall 2	Lecture Hall 1	Lecture Hall 1	Lecture Hall 2

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TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE 2024



DATE / DAY	8:00 AM 11:00 AM		11:00a	m – 12:00pm			12:00 P	M – 02:00 PM		
	Clinical Clerkship		Patholog 11:30-1	y SDL 2:00	Patho logy SGD 11:30 - 12:00	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
			H. py Comp	/lori and ylobacter		А	Pharmacology P-4	P drug & Prescriptio n writing Of atypical pneumonia and enteric fever	Supervised by: Dr. Attiya Munir Conducted by: Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	PHARMACOLOG Y LAB
Monday 5-8-24		A B	DR.FATIM A TUZ ZAHRA DR. KIRAN FATIMA	LECTURE HA	ALL2	В	Forensic Medicine P-5	Irritants / Metallic Poisons	Dr Shahida Dr. Urooj PG observation Dr Innayat Dr Wasim	Toxicology Lab/ Lecture Hall 4
		С	DR. SHABIH HAIDER	LECTURE H	ALL6	С	Pathology P-6	Gram staining and Zn staining	Prof .Mobina Dodhy Dr. Abid Hassan Dr.Syeda Aisha Dr. Unaiza	Pathology Lab NTB

Microbes and Antimicrobial MODULE

							Aslam Dr. Nida	
	D	DR. SARAH	PHARMA LAB				Fatima	
		RAFI						
		Behavio	oraal sciences	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
							Supervised by: Dr. Attiya Munir	
		Crisis I	ntervention.		Pharmacology	P drug & Prescriptio n writing	Conducted by: Dr Zaheer	PHARMACOLOG
	С	Conflict Res	olution, Empathy	В	P-4	Of atypical pneumonia and enteric	Dr Uzma Dr Zoefishan	Y LAB
						Iever	Dr Arsheen Dr Aisha	
			-				Dr Saba Dr Shahida	
Tuesday 6-8-24				С	Forensic Medicine P-5	Irritants / Metallic Poisons	Dr. Urooj PG observation	Toxicology Lab/ Lecture Hall 4
							Dr Innayat Dr Wasim Prof .Mobina	
		BY:D Lectu	R.SADIA ure Hall 1			Gram	Dodhy Dr. Abid Hassan	
				А	Pathology P-6	staining and Zn staining	Dr.Syeda Aisha Dr. Unaiza	Pathology Lab NTB
							Asiam Dr. Nida Fatima	
		Path	ology L-50	Batch	Discipline	Topic of Practical	TEACHER NAME	VENUE
Wdnesda y 7-8-24	Gra	ım negat to respir	ive rods related ratory tract	С	Pharmacology P-4	P drug & Prescriptio n writing Of atypical	Supervised by: Dr. Attiya Munir	PHARMACOLOG Y LAB

								pneumonia	Conducted by: Dr Zaheer	
								fever	Dr Uzma	
									Dr Zoefishan	
									Dr Arsheen	
									Dr Aisha	
									Dr Saba	
									Dr Shahida	
			Even	00	bb				Dr. Urooj	
			Prof.			А	Forensic Medicine P-5	Irritants / Metallic	PG observation	Toxicology Lab/ Lecture Hall 4
			Mobina					Poisons	Dr Innayat	
			Ansan Dohdy Lecture Hall 1						Dr Wasim	
				Dr K	iran				Prof .Mobina Dodhy	
				Fati	MO Hall 2			Gram	Dr. Abid Hassan	
						В	Pathology P-6	staining and Zn	Dr.Syeda Aisha	Pathology Lab NTB
								staining	Dr. Unaiza Aslam	
									Dr. Nida Fatima	
			Path	ology CBL					1:00-2:00 pm	1
			Gram Ne	gative I	Rods					
			Related	to Zoon	ofic	Pharmacology	L-52	FO	DRENSIC MEDIC	INE L-53
Thursday				DrShabi	Lecture	Clindamycin and other p	rotein synthesis	Inorg	anic Irritants Meta	allic Poisons
0-0-24			B	h Haider Dr. Faiza	Hall 1 Lecture	inhibitors			(Lead)	
			C	Zatar DrNida	Hall 2 Lecture	EVEN	ODD	EV	EN	ODD
			D	r auma Dr. Unaiza Aslam	Pharma Lab	DR AISHA Lecture Hall 1	DR. SABA Lecture Hall 2	DR. I Lectur	FILZA re Hall 4	DR. ROMANA Toxicology Lab
Friday	8:00-8:45 am PHARMACOLOGY L 54	8:45-9:30am Pathology L	9:30 FORENSIC	-10:15am MEDICINE L	-48L	10:15-11:00am PATHOLOGY CBL	11:00-12:00 PM MEDICAL ETHICS L			
9-8-24	Aminoglycoside	Rickettsia, Chlamydia	Non-metallic Po	isons (phospho odine)	orus and	Spirochetes	Medical errors			

Microbes and Antimicrobial MODULE

	EVEN	ODD	Even	Odd	F	EVEN	ODD	A B	Dr.Abid Hassan Dr. Mahjabee n	Lectur e Hall 1 Lectur e Hall 2					
	DR ATTIY A	DR. ZOEFISHA	Dr. Mehree	Dr Mudassir	DR	.FILZA	DR. ROMANA	С	Dr.Syeda Iqbal Haida	Lectur e Hall 6	PROF.AKRAM Lecture Hall 1				
	Lectur e Hall 1	Lecture Hall 2	n Fatima Lecture Hall 2	a Zahid Lecture Hall 1	Lectu	ıre Hall 4	Toxicology Lab		Dr. Syeda Aisha	Pharm a Lab					
	8:00- Medical	-8:45 am Ethics CBL	8:45-9 QURAN	9:30 am N CLASS		9:30 PATHO	0-10:15 am OLOGY CBL		10:15-11:00	am	Behavioral sciences	12:00- Communi	1:00 pm ty medicine	1:00-2: MEDIC	:00 pm CINE L-
-	Medie	cal errors	Taleem w	a Taaalum		Poliomyeli	itis, Rabies Virus				Anxiety And Stress Related Disorder	Public health light, n meteorologic	importance of oise and al environment	Polio, Ra	bies virus
					А	DrSha bih Haider	Lecture Hall 1								
Saturday 10-8-24					В	Dr. Faiza Zafar	Lecture Hall 2					EVEN	ODD	EVEN	ODD
	PROF Lectu	AKRAM Are Hall 1	Qari Abd Lectur	lul Hadeeb e Hall 1	С	DrNida Fatima	Lecture Hall 6				BY:DR.SADI A Lecture Hall 1				
					D	Dr. Unaiza Aslam	Pharma Lab					Dr Mehwish Lecture Hall 2	Dr Abdulquddoo s Lecture Hall 1	Dr. Unaiza Lectur e Hall 1	DR. NIDA Lectur e Hall 2

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TIME TABLE 3rdYEAR MBBS –MICROBES AND ANTI MICROBIAL MODULE 2024



DATE / DAY	8:00 AM 11:00 AM	11:00 am	– 12:00pm			12:00 PM - 02:00 PM	1	
	Clinical Clerkship	-Pharm	acology	Batch	Discipline	Topic of Practical	Teacher Name	Venue
		Anti-	viral I	A	Pharmacology P-7	Pharmacy visit	Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	HFH DHQ BBH
Monday 12-8-24		EVEN	ODD	В	Forensic MedicineP-8	Autopsy Visits/Postmortem&Medicole galWork/Research	Dr Gulzaib Dr Fatima PG observation Dr Saif Dr Yasir	DHQ Hospital
		DR. ZUNERA Lecture Hall 1	DR. ATTIYA Lecture Hall 2	с	Pathology P-9	Biochemical Tests (Catalase, Coagulase, Urease, oxidase, indole test, citrate) and molecular tests (ELISA,PCR,ICT)	Prof .Mobina Dodhy Dr. Abid Hassan Dr.Syeda Aisha Dr.Iqbal Haider Dr. Nida Fatima	Pathology Lab NTB
		Pharma	cology L	Batch	Discipline	Topic of Practical	Teacher Name	Venue
Tuesday 13-8-24		Antiv	iral II	В	Pharmacology P-7	Pharmacy visit	Dr Zaheer Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Saba	HFH DHQ BBH
		EVEN	ODD	С	Forensic MedicineP-8	Autopsy Visits/Postmortem&Medicole galWork/Research	Dr Gulzaib Dr Fatima PG observation Dr Saif Dr Yasir	DHQ Hospital
		DR. ZUNERA Lecture Hall 1	DR. ATTIYA Lecture Hall 2	А	Pathology P-9	Biochemical Tests (Catalase, Coagulase, Urease, oxidase, indole test, citrate) and	Prof .Mobina Dodhy Dr. Abid Hassan	Pathology Lab NTB

										molecula (ELISA,PC	r tests CR,ICT)	Dr.Syeda Aisha Dr.Iqbal Haider	
												Dr. Nida Fatima	
Wednesday 14-8-24										HOLIDAY			
						Dothol	loov T				12.00 2.00DM		
						I athor	logy L-	BATCH	DISCIPLINE	TOPIC OF PR	ACTICAL	TEACHER NAME	VENUE
												Dr Zaheer	
						Mogelos	Mumos					Dr Uzma	
						Rub	, momps, Della	C	Pharmacology	Pharmac	y visit	Dr Zoefishan	HFH
								C	P-7			Dr Arsheen	DHQBBH
												Dr Aisha	
							1					Dr Saba	
Thursday												Dr Gaizaib	
15-8-24						Even	Odd	А	Forensic	Autop Visits/Postmorte	osy m&Medicole	PG observation	DHO Hospital
									MedicineP-8	galWork/R	esearch	Dr Saif	2114 1105prm
												Dr Yasir	
							Dr					Prof .Mobina Dodhy	
						Dr. Kiran Fatima	Mehreen			Biochemical Tes Coagulase, Urea	sts (Catalase, use, oxidase,	Dr. Abid Hassan	
						Locturo	Fatima	В	Pathology P-9	indole test, ci	trate) and	Dr.Syeda Aisha	Pathology Lab NTB
						Hall 2	Lecture Hall 1			molecula (ELISA,PC	r tests CR,ICT)	Dr.Iqbal Haider	
		08.00	450m	08.45om	00.20am	00+200m	10:15am	10.1	5am 11:00am	11:00om	12.00	Dr. Nida Fatima	
	P	ATHOLOGY	CB63.	PHARMAC	COLOGY L-	Forensic me	edicine CBL	Forens	sic medicine CBL	PATHO	- 12.00pm		
		<u>CBL-</u>	oal										
		viruse	s S	Antiv	iral III	Vegetable castor, croto	e poisons(Vege castor. c	table poisons(roton, capsicum	Respirato	ry viruses		
Friday 16-8-24	А	Dr.Abid Hassan	Lecture Hall 1	EVEN	ODD	ergot,	abrus)	er	got, abrus)	Even	Odd		
						TEACHE	R NAMES	TEAC	CHER NAMES			1	
	В	Dr. Mahjabe en	Lecture Hall 2	DR. ZUNER Lecture Hall 1	DR. ATTIYA Lecture Hall 2	Dr N Dr Ro	Vaila heena		Dr Naila	Dr. Fatima tuz Zahra Lecture Hall 1	Dr. Kiran Fatima Lecture Hall 2		

Microbes and Antimicrobial MODULE

	C D	Dr.Syeda Iqbal Haider Dr. Syeda Aisha-	Lecture Hall 6 Pharma Lab			PG obso Dr Pe Dr A Lecture Hall La	ervation ervaiz Aqib 4/Toxicology ab	Dr Roheena PG observation Dr Pervaiz Dr AAqib Lecture Hall 4/Toxicology Lab						
		08:00am - 08:	:45am	08:45am -	– 09:30am	09:30am -	- 10:30am	10:30 AM – 11:00 am	11:00am -	- 12:00pm	12:00:pm	– 01:00pm	01:00p	m – 02:pm
	ł	PATHOLOGY	CBL-	PHARMACO	DLOGY CBL-	PATHO	LOGY L		PEA	DS L-	Pharm	acology	Med	licine L-
	He	erpes Vi	ruses,	Shir	ngles						AMG use	e in sepsis	HI immuno	V and odefficienc y
		HSV											EVEN	ODD
					Dr Zaheer	HIV/AID	S diseases	BREAK	Measles/Mu	mps/ Rubella		Dr Zaheer		
Saturday 17-8-24	А	DrShabi h Haider	Lecture Hall 1	Lecture Hall 01	Dr Uzma			.			Lecture Hall 01	Dr Uzma	DB	
	В	Dr. Faiza Zafar	Lecture Hall 2	02 Lecture Hall	Dr Zoefishan Dr Arsheen		1	4000-03200-032000(2			Hall 02 Lecture	Zoefishan Dr Arsheen	NIDA Lectu re Hall 1	Dr .Unaiza Lecture Hall 2
	С	DrNida Fatima	Lecture Hall 6	Pharmacy Lab	Dr Aisha Dr Saba	EVEN	ODD		Even	Odd	Pharmacy Lab	Dr Aisha		
	D	Dr. Unaiza Aslam	Pharma Lab			Prof. Naeem Akhtar Lecture Hall 1	Dr. Kiran Fatima Lecture Hall 2		Dr. Sumbal Lecture Hall 2	Dr. Syrah Lecture Hall 1		Di Saua		

Rawalpindi Medical University Rawalpindi

TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE – 2024 (6thWeek)

DATE / DAY	8:00 AM 11:00 AM	11:00 am	– 12:00pm			12:00 PM -	02:00 PM	
	Clinical Clerkship	Patho	logy L	Batch	Discipline	Topic of Practical	Teacher Name	Venue
							Supervised by: Dr Zunera Hakim	
						P drug & Prescription	Conducted by: Dr Zaheer	
		Systemic M Anti-f	Aycosis and ungals	А	Pharmacology P-10	writing of oral candidiasis and HSV	Dr Uzma	PHARMACOLOGY LAB
			C			encephalitis	Dr Zoefishan	
							Dr Aisha	
Monday							Dr Saba	
19-8-24							Dr Shahida	
							Dr Naila	
		EVEN	ODD	В	Forensic Medicine P-11	Autopsy	PG observation	DHQ Hospital
							Dr Pervaiz	
							Dr AAqib Prof Mohina Dodhy	
		Prof. Mobina	Dr. Kiran				Dr. Abid Hassan	
		Ahsan DOhdy	Fatima Lecture	С	Pathology P-12	Lab Diagnosis of Fungal Infections	Dr.Syeda Aisha	Pathology Lab NTB
		Lecture Hall 1	Hall 2				Dr.Iqbal Haider	
							Dr. Unaiza Aslam	
		Patholo	gy CBL	Batc h	Discipline	Topic of Practical	Teacher Names	Venue
							Supervised by:	
							Dr Zunera Hakim	
Tuesday						P drug & Prescription	Conducted by: Dr Zaheer	
20-8-24		Cutane subcutaneo	ous and us Mycosis	В	Pharmacology P-10	writing of oral candidiasis and HSV	Dr Uzma	PHARMACOLOGY LAB
		- ac catalloo				encephalitis	Dr Zoefishan	
							Dr Arsheen	
							Dr Aisha	
							Dr Saba	

Microbes and Antimicrobial MODULE

		A Dr.Abid Hassan 1	Lectur e Hall 1	С	Forensic	Autonsy	Dr Shahida Dr Naila PG observation	DHQ Hospital	
			Dr. Mahjabee n	Lectur e Hall 2		Medicine P-11		Dr Pervaiz Dr AAqib	
		С	Dr.Syeda Iqbal Haider	Lectur e Hall 6				Prof .Mobina Dodhy Dr. Abid Hassan	
		D	Dr. Syeda Aisha-	Pharm a Lab	Α	Pathology P-12	Lab Diagnosis of Fungal Infections	Dr.Syeda Aisha Dr.Iqbal Haider	Pathology Lab NTB
]	Pharmacolo	gy L	Batc			Dr. Unaiza Aslam	
					h	Discipline	Topic of Practical	Teachers Name	Venue
Wednesday 21-8-24		Antifungal Age		gents I	С	Pharmacology P-10	P drug & Prescription writing of oral candidiasis and HSV encephalitis	Dr Zunera Hakim Conducted by: Dr Zaheer Dr Uzma Dr Uzma Dr Zoefishan Dr Arsheen Dr Aisha Dr Aisha	PHARMACOLOGY LAB
21-8-24		E	VEN	ODD	А	Forensic Medicine P-11	Autopsy	Dr Shahida Dr Naila PG observation Dr Pervaiz Dr AAqib	DHQ Hospital
		DR. Le H	UZMA Z cture I (all 2	DR. AHEER Lecture Hall 1	В	Pathology P-12	Lab Diagnosis of Fungal Infections	Prof .Mobina Dodhy Dr. Abid Hassan Dr.Syeda Aisha Dr.Iqbal Haider Dr. Unaiza Aslam	Pathology Lab NTB
Thursday 22-8-24		Pharmacology L				12:00-2:00 PM			

	Antifungal Ag		l Agents II	Forensic medicine CBL												
					EVEN	ODD		CORF	ROSI	VES (sulfur	ic acid, N	Vitric acid, Hy	/drochloric ac	cid)		
											FEACHER	NAMES				
										Dr Sha	hrukh					
				DD UZMA	DR.					Dr. U	rooj					
			Lecture	ZAHEER Lecture					PG obse	rvation						
					Hall 2	Hall 1					Dr Inn	avat				
										Dr W/r						
	00.00	00.00	00.00	10.00	10.00	11.00	11.00	12.00			DI Wa					
		- 09:00am logy L	09:00am Medi	– 10:00am	10:00am	– 11:00am ID	11:00am Pa	- 12:00am eds								
Friday	Dengu ,Pathologica Lab Diagr	e fever l aspects and losis LGIS	Dengue fa symptoms a	ever, Sign nd Treatment	Preventive and spread	e measures l of dengue ver	Pediatric p of Deng	resentation gue fever								
SEMINAR DAY	EVEN	ODD	EVEN	ODD			Even	Odd								
23-8-24	Dr. Fatima tuz Zahra Lecture Hall 1	Dr. Kiran Fatima Lecture Hall 2	Dr.Unaiza Lecture Hall 2	DR. NIDA Lecture Hall 1	By : Prof. Mujeeb(Head of DID) Lecture Hall 1		Dr. Verda Imtiyaz Lecture Hall 2	Dr. Maria Lecture Hall 1								
	08:00am	- 08:45am	08:45am	– 09:30am	09:30am	– 10:30am	10:30 AM	– 11:00 am	1	11:00am – 12:0)0pm	12:00:pm	– 01:00pm	01	:00pm – 02	:pm
	Pharma	acology	Pharm	acology	Patho	logy L			F	PATHOLOGY	CBL	FORENSIC N	MEDICINE L-	PAT	THOLOGY	CBL
	Anti-canc	er drugs I	Anti0canc	er drugs II	Varicella cytomeg	zoster and galovirus				Candida		Spi Pois Stryc (Nux V	inal sons hnine /omica)	С	pportuni	stic
	EVEN	ODD	EVEN	ODD	EVEN	ODD						EVEN	ODD		Mycosis	5
Saturday							BRI	EAK	A	DrShabi h Haider	Lectu re Hall 1					-
Saturday 24-8-24	DR. ZUNERA	DR. DR. DR. DR. ATTIYA ZUNERA ATTIYA ZUNERA Lecture Lecture Hall 1 Lecture Hall 1 Lecture Lecture Hall 2 Lecture	Prof. Mobina Ahsan	Prof. Dr. Mobina Mudassir			в	Dr. Faiza Zafar DrNida Fatima	Lectu re Hall 2	DR. FILZA	DR. ROMANA	A	Dr.Abi d Hassan Dr.	Lect ure Hall 1 Lect ure		
	Lecture Hall 1		Lecture Hall 1	Hall 2	Dohdy Lecture	a Zahid Lecture						Hall 4	Toxicology Lab	В	Mahja been	Hall 2
		11411 2		Le	Hall 2	Hall 1			с	Dr. Unaiza Aslam	Lectu re Hall 6			С	Dr.Sye da Iqbal Haider	Lect ure Hall 6
									D	DrShabi h Haider	Phar ma Lab			D	Dr. Syeda Aisha-	Phar ma Lab

TIME TABLE 3rdYEARMBBS –MICROBES AND ANTI MICROBIAL MODULE – 2024



DATE / DAY	8:00 AM 11:00 AM			12:00 - 02:00 PM
26-8-23				
Tuesday 27-8-23		End Block Th	eory Exam	
Wednesday 28-8-23		End Block OSPF	/VIVA Exam	
Thursday 29-8-23		End Block OSPE	/VIVA Exam	
Friday 30-8-23		End Block OSPE	/VIVA Exam	
Saturday 31-8-23		New M	odule	

SR	Disciplines	LGIS	SGD	CBL	SDL	Hours
N0.						
1.	Pharmacology	18	0	05	0	23
2.	Pathology	15	04.5	08	04.5	34
3.	Forensic Medicine	06	0	03	0	9
4.	Community Medicine	02	0	0	0	02
5.	Surgery	05	0	0	0	05
6.	-Medicine	07				
	-Department of Infectious		0	0	0	08
	diseases (DID)	01				
7.	Peads	05	0	0	0	05
8.	Behavioral Sciences	02	0	0	0	02
9.	Quran Class	02	0	0	0	02
10.	Family Medicine	03	0	0	0	03
11.	Medical Ethics	01	0	01	0	02
12.	Biochemistry	01	0	0	0	01
13.	Gynecology	01	0	0	0	01
	Total Hours = 97					

Teaching Hours

Practical and Clinical Clerkship hours

Disciplines	Practical hours	Disciplines	Clerkship hours
Pharmacology	2x5 = 10 hrs	Surgery	3 x 4 x5= 60 hrs
Pathology	2x5 = 10hrs	Medicine	3 x 4 x5= 60 hrs
Forensic Medicine	2x5 = 10 hrs	Sub Specialty	3 x 4 x5= 60hrs

≻ LGIS (L) *

➤ SGD (S) **

➢ CBL (C) ***

> SDL (SL) ****

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

Batch: A = Lecture hall 1(starting from clinical batch A1 to A4)

Batch: C = Lecture Hall 06 (starting from clinical batch B4, B5, C1,C2)

Batch: B = Lecture Hall 02 (starting from clinical batch A5, B1,B2,B3)

Batch: D = Pharma Lab (starting from clinical batch C3,C4

&C5)

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

Lectures & Practical distribution of All subjects

Microbes and Antimicrobial Module 2024

Subject	No Of	lecturer	No of	No. of lectures per
	Lectures		Lectures	Facilitator
		Dr Zunera	10	
		Dr Arsheen	02	02 LGIS, 04 CBL
		Dr Uzma	06	06 LGIS, 04 CBL
		Dr Zoefishan	02	02 LGIS, 05 CBL
	15 LGIS	Dr Memuna	02	02 LGIS, 01 CBL
Pharmacology		Dr Attiya	08	08 LGIS
	05 CBL	Dr Sara	01	01 LGIS
	05 CDL	Dr Zaheer	04	04 LGIS, 05 CBL
		Dr Aisha	01	01 LGIS, 05 CBL
		Dr Saba	00	04 CBL
		Dr Attiya	02	Practical
	05	Dr Zaheer	05	Practical
		Dr Uzma	05	Practical
Pharmacology		Dr Zoefishan	05	Practical
Practical		Dr Arsheen	05	Practical
		Dr Aisha	05	Practical
		Dr Saba	05	Practical
		Dr Zunera	02	Practical
		Dr. Filza	06	LGIS
		Dr. Romana	06	LGIS
		Dr Nadia	02	CBL
	O6 LGIS	Dr Roobina	02	CBL
Forensic	002010	Dr Pervaiz	02	CBL
Medicine		Dr Aaqib	02	CBL
	03 CBL	Dr Sharukh	01	CBL
		Dr Urooj	01	CBL
		Dr Innayat	01	CBL
		Dr. Wasim	01	CBL
Forensic		Dr. Sharuk	01	Practical
Madicino	05	Dr. Robeena	01	Practical
	05	Dr. Pervaiz	02	Practical
Practical		Dr.Aaqib	02	Practical

		Dr Gulzaib	02	Practical
		Dr Fatima	02	Practical
		Dr Saif	02	Practical
		Dr Yasir	02	Practical
		Dr Shahida	02	Practical
		Dr Urroj	01	Practical
		Dr Wasim	01	Practical
		Dr Innayat	01	Practical
		Dr Naila	01	Practical
		Prof. Naeem Akhter	03	LGIS
		Dr. Kiran Fatima	07	LGIS
D 1 1	1.5	Dr. Mudassira Zahid	05	LGIS
Pathology	15	Dr. Fatima tuz Zahra	06	LGIS
		Prof. Mobina Ahsan Dodhy	05	LGIS
		Dr. Mehreen Fatima	04	LGIS
		Dr. Kiran Fatima	05	05 SGD, 05SDL
	07	Dr. Mudassira Zahid	04	04 SGD, 04 SDL
Dethology		Dr. Fatima tuz Zahra	02	02 SGD, 02 SDL
Pathology		Prof. Mobina Ahsan Dodhy	01	01 SGD, 01 SDL
SDL/SGD		Dr. Mehreen Fatima	03	03 SGD, 03 SDL
		Dr. Sara Rafi	06	06 SGD, 06 SDL
		Dr. Shabih Haider	07	07 SGD, 07 SDL
		Prof. Mobina Ahsan Dodhy (supervisor)	02	CBL
		Dr. Kiran Fatima (supervisor)	02	CBL
		Dr. Mudassira Zahid (supervisor)	02	CBL
		Dr. Fatima tuz Zahra(supervisor)	02	CBL
		Dr. Shabih Haider	04	CBL
Pathology	00	Dr. Faiza Zafar	04	CBL
CBL	08	Dr. Nida Fatima	04	CBL
_		Dr. Unaiza Aslam	04	CBL
		Dr. Mahjabeen	04	CBL
		Dr. Syeda Aisha	04	CBL
		Dr. Syed Iqbal Haider	04	CBL
		Dr.Abid Hassan	04	CBL
		Prof. Mobina Dodhy	05	Practical
Dethology		Dr. Abid Hassan	04	Practical
Pathology	05	Dr.Syeda Aisha	04	Practical
Fractical		Dr.Iqbal Haider	04	Practical
		Dr. Nida Fatima	04	Practical

		Dr. Unaiza Aslam	04	Practical
		Dr. Rahat	05	LGIS
		Dr. Ramla	02	LGIS
Surgery	05	Dr. Huma	01	LGIS
		Dr. Asifa	01	LGIS
		Dr. Faiza (SR HFH)	01	LGIS
		Dr. Bushra	01	LGIS
		DrHuma	01	LGIS
		Dr Jawad	01	LGIS
		Dr Muneeba	01	LGIS
	05	Dr Maryam	01	LGIS
Peads	05	Dr Naila Ahsan	01	LGIS
		Dr Sunbal	01	LGIS
		Dr Syrah	01	LGIS
		Dr Maria	01	LGIS
		Dr Verda Imtiaz	01	LGIS
		Dr. Khuram	03	LGIS
Medicine	07	Dr.Unaiza	04	LGIS
		Dr. Nida	07	LGIS
DID	01	Prof. Mujeeb	01	01 LGIS
Behavioral		Dr. Sadia	02	02 LGIS
Sciences				
	02			
Family Medicine	03	Dr. Sadia	03	03 LGIS
Medical Ethics	02	Prof. Akram	02	01 LGIS, 01 CBL
Quran Class	02	Qari Abdul Hadeeb	02	2 LGIS
Gynecology	01	Dr. Sobia	01	01 LGIS
Biochemistry	01	Dr. Aneela	01	01 LGIS
Dioenennistry	01	Dr. Kashif	01	01 LGIS
		Dr. Nargis APWMO	01	01 LGIS
Community	02	Dr. Asif Demonstrator	01	01 LGIS
Medicine	02	Dr. Mehwish	01	01 LGIS
		Dr. Abdulquddoos	01	01 LGIS

Annexure I

(Sample MCQ, SAQ, SEQ Papers, AV OSPE, OSPE & Video Assisted OSPE)

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 MICROBE AND ANTI-MICROBE MODULE EXAM 3RD YEAR MBBS SAMPLE MODULE MCQS

Longitudinal c2

- 1. A small child presents to a local clinic with rash after taking penicillin for streptococcal throat infection. Which antibiotic should the physician prescribe instead of penicillin?
 - a. Amoxicillin
 - b. Azithromycin
 - c. Cephalexin
 - d. Doxycyline
 - e. Clindamycin

Core c2

- 2. A 65 years man is admitted to emergency with fever, chills and confusion. His blood pressure is 90/60 mmHg, heart rate is 110 beats/min. blood cultures show gram positive cocci in clusters. What is the organism causing his sepsis?
 - a. Candida albicans
 - b. Stahylococcus aureus
 - c. E. coli
 - d. Streptococcus pneumoniae
 - e. Bacteroides

Core c3

- 3. A 45 years HIV positive lady presents with sore throat and difficulty in swallowing. On examination she has white plaques on the buccal mucosa, throat and tongue. What is the causative organism?
 - A. Trichophyton rubrum
 - B. Candida albicans
 - C. Malassezia furfur 1
 - D. Sporothrix schenckii
 - E. Epidermophyton floccosum

RAWALPINDI MEDICAL UNIVERSITY MICROBE AND ANTI-MICROBE MODULE EXAM 3RD YEAR MBBS SAMPLE MODULE SEQS

1. A 23 years girl develops severe watery diarrohea with crampy abdominal pain after ingesting refrigerated rice.

- a. Name the bacteria causing diarrohea in this case? 2
- b. What is the mechanism of action of development of this diarrhoea? 2
- C. Name any 3 normal flora which do not allow growth of this bacteria? 1

2.A laboratory technician is having concerns regarding sterility of culture media before use.

- a. Which instrument is best for sterilization of culture media? 2
- b. What is the principal of sterilization through this instrument? 1
- c. What are the conditions required for its standard operation? 2

3. A 43 years male presents with high grade fever and low blood pressure. He has an abscess on his foot. His pus microscopy reveals Gram positive cocci.

- a. Which structure present in cell wall of Gram positive bacteria is responsible for its toxin mediated activity? 1
- b. Describe structure of cell wall of Gram positive bacteria? 2
- c. Name any 2 other virulent factors of Gram positive bacteria? 2

RAWALPINDI MEDICAL UNIVERSITY MICROBE AND ANTI-MICROBE MODULE EXAM 3RD YEAR MBBS BLOCK MCQS SAMPLE

Core c3

1. In a laboratory a technician needs to sterilize heat sensitive plastic petri dishes. Which method should he use?

A. Ethylene oxide gas

- B. dry heat
- C. moist heat
- D. radiation
- E. Chemicals

Core c3

2. A 22 years male presents with severe headache, high fever, neck stiffness and photophobia. His CSF analysis shows high neutrophils count. Gram staining of the CSF sample shows gram negative cocci in pairs. Which of the following is the most likely pathogen?

- A. Streptococcus pyogenes
- B. Streptococcus agalactiae
- C. Streptococcus pneumoniae
- D. Enterococcus faecalis
- E. Streptococcus viridans

Core c3

3. A 30-years pregnant woman presents for routine prenatal screening. She has no complaints, but screening for sexually transmitted infections (STIs) is recommended. Which of the following tests is the most appropriate for detecting Chlamydia trachomatis infection in pregnant women?

A. Culture of cervical swab

B. Nucleic acid amplification test (NAAT) of cervical swab

- C. Gram stain of vaginal discharge
- D. Serologic testing for chlamydia antibodies
- E. Dark Field Microscopy of swab

RAWALPINDI MEDICAL UNIVERSITY MICROBE AND ANTI-MICROBE MODULE EXAM 3RD YEAR MBBS LAB OSPE (OBSERVED) SAMPLE

STATION NO: 1

Total Marks:	05 Marks
Time Allowed:	05 Minutes
Requirement:	Pen/Pencil, Rubber
OBJECTIVE:	Based on the scenario provided, discuss the potential role of AI algorithms in the diagnosis of sexually transmitted diseases.

A practitioner attends a seminar on latest diagnostic modalities and comes to know about application of artificial intelligence and machine learning in medical field. How can artificial intelligence going to help him in diagnosis of sexually transmitted diseases?

STATION NO: 2

Fotal Marks: 05 Marks					
Time Allowed:	05 Minutes				
Requirement:	Pen/Pencil, Rubber				
OBJECTIVE:	To know if a student is able to communicate with patient regarding his disease in an effective way				

A 21 years boy is diagnosed with hepatitis C virus. How are you going to counsel him regarding his disease management?

STATION NO: 3

Total Marks: 05 MarksTime Allowed:05 MinutesRequirement:Pen/Pencil, RubberOBJECTIVE:It assesses student's ability to perform oxidase test

Perform oxidase test and give your interpretation?

STATION NO:4

Total Marks: 05 Marks

Time Allowed: 05 Minutes

Requirement: Pen/Pencil, Rubber

OBJECTIVE: This question assesses the student's ability to effectively diagnose complex medical conditions in a sensitive and empathetic manner, providing support and education regarding the diagnosis and management of a potentially life-threatening condition

A newborn brought in by the parents with complaints of maculopapular rash, yellowish sclera and yellow urine, pale sking, and protruding tummy. Your task is to assess the patient and determine whether the diagnosis of congenital syphillis is appropriate.

RAWALPINDI MEDICAL UNIVERSITY MICROBE AND ANTI-MICROBE MODULE EXAM 3RD YEAR MBBS UNOBSERVED OSPE- SAMPLE

SAMPLE NO: 01

Total Marks:05 MarksTime Allowed:05 MinutesRequirement:Pen/Pencil, RubberOB LECTIVE:To assass student's lim

OBJECTIVE: To assess student's knowledge of interpretation of biochemical tests

A 21 years lady complains of vaginal discharge and pelvic pain. A swab from her vagina is taken. Its microscopy reveals gram negative rods. The following test reveals positive result.



TASK:

- A. What is likely causative agent (1)
- B. What is this test called (1)
- C. Name any two organisms which give same result. (2)
- D. What is the principle of this test? (1)

SAMPLE NO 02:

Total Marks:05 MarksTime Allowed:05 MinutesRequirement:Pen/Pencil, RubberOBJECTIVE:To assess student's knowledge of serological testing

A 29 years lady presents with dysuria and frequent micturition. Her urine culture reveals gram negative rods which show the following phenomenon on blood agar.



Task:

- A. What is the name of the phenomenon which is shown in the following pictogram? (1)
- B. Name the organism which shows this phenomenon? (2)
- C. Name 2 complications associated with urinary tract infection caused by this organism? (2)

SAMPLE NO 03:

Total Marks: 05 Marks Time Allowed: 05 Minutes Requirement: Pen/Pencil, Rubber OBJECTIVE: To assess student's knowledge of microbes

A 32 years lady presents with boil in her nose. Identify the bacterial pathogen shown in the slide. (1)

- a. Identify the organism. (1)
- b. What is the Gram stain reaction? (!)
- c. Which infections are commonly associated with this microbe? (2)
- d. Which medium is commonly used to culture it? (1)
Clinical Clerkship

In medical education, a **clerkship**, or **rotation**, refers to the practice of medicine by medical students. Students are required to undergo a pre-clerkship course, which include introduction to clinical medicine, clinical skills, and clinical reasoning. A performance assessment such as the Objective Structured Clinical Examination (OSCE) is conducted at the end of this period. During the clerkship training, students are required to rotate through different medical specialties and treat patients under the supervision of physicians. Students elicit patient histories, complete physical examinations, write progress notes, and assist in surgeries and medical procedures. They are also actively involved in the diagnoses and treatment of patients under the supervision of a resident or faculty.

In 3rd year MBBS students are exposed to wards and patients after getting 2 years of basic science training. A class is divided into 15 batches which are rotated in different wards of Medicine & Allied, Surgery & Allied and Sub Specialties. (Annexure 2 a)

Rawalpindi Medical University has structured these rotations so that each students gets to gain knowledge equally in which ever ward he or she may be placed. (Annexure 2 b)

Learning objectives of the topics taught during the bedside studies and rotations are also given to the students in the form of study guide so that they are well aware what they have to study according to Knowledge, Skill & Attitude. (Annexure 2 c)

Students during their rotations in Medicine & Allied and Surgery & Allied are required to fill the log books which is dually signed by the facilitator. Each student is required to take 10 histories and fill the log book with short cases and long cases discussed which is then again signed by Head of the department. Also during their practical classes of Preclinical sciences they are fill their log books & pracital copies. (Annexure 2 d)

Annexure 2 B

Time Table 3rd year MBBS **Clinical Teaching and Training Posting** TT Approval / MEDICINE SURGERY + TRAUMA SUB SPECIALITIES **Revision Date** HFH Unit-BBH Unit-HFH Unit-BBH Unit-**Batches & Units** HFH Unit-1 BBH Unit-DHQ HFH Unit-1 BBH Unit-J Dates DHQ 11 11 1**I** 11 SYCHIATRY RADIOLOGY SKILL LAB PATHOLOG TOPICS TOPIC TOPIC TOPIC TOPIC MODULES WEEKS W.V В5 B4 В3 B1 A2 A3 A4 A5 B2 A1 General Introduction to ER General General General General introduction & introduction & introduction & introduction & introduction & Introductory History Taking Chest x ray Use of Injections I/M, I/V, Intradermal, troduction bed side bed side bed side bed side ed side ound of ervices regarding troduction t ntroduction troduction Allotment of anatomy subcutaneous, I/V Cannulation, Arterial the field of anners anners anners anners anners boratory & riage system. Cases and History taking benches. Working nedicine. medicine. medicine. medicine. medicine. Тар Monitoring of vitals Medical ethics Medical ethics Medical ethics Medical ethics Medical ethics of Autoclave. & Groups MONDAY Guidelines of Microbiological specimen ollection & ransport Art of History, Art of History, art of history Introduction to Art of History. Art of History art of history art of history Nasogastric Intubation Art of History, art of history art of history Culture media Demonstration Chest x ray Faking, Faking, Faking, Faking, aking taking aking taking taking (Inoculated & nedicolegal cases and aking, of History pathology aintenance of mportance of mportance of mportance o mportance of Importance of . Uninoculated). taking and MSE ecord. history, Conten history, Content history. history. history. Antibiotic Observation of IV ensitivity testing of history, of history, Contents of Contents of ontents of annulas TUSEDAY resenting resenting istory, story, istory, Orientation to IM injections Complaint History of Complaint Presenting Presenting Presenting Serology & PCR listory of Complaint Complaint Complaint resent illness resent illness History of . listory of History of WEEK 1 Present illne Present illnes Present illnes Setting of IV drips Systemic Systemic Systemic Systemic Systemic vstemic history systemic history systemic history systemic history systemic history Performance & Interview with Bones & ioints Male & Female Inquiry, Past Inquiry, Past Inquiry, Past Inquiry, Past Inquiry, Past interpretation of catheterization(urine) with fractures the patient MODULE ledical Histor Medical Histor Medical Histo Medical Histo Medical Histo Gram & ZN Theoretical staining. Catalase WEDNESDAY aspect of Coagulase & Oxidase Tests. depression 2 GPE GPE GPE GPE GPE Urine & Stool ø Family History Family History. Family History Family History Family History Endotracheal Interview with Plain x ray Occupational Occupational Occupational Occupational Occupationa Examination, intubation & FOUNDATION 1 the patient abdomen & istory listory listory listory, Examination of tracheostomy KUB Theoretical CSF & Body Personal Histor Personal Histor Personal Personal Hist Personal Histo aspect of Developmenta Developmenta History , Fluids THURSDAY bstetrics bstetrics evelopi elopm elopmental Dissociation Obstetrics istory. History. Obstetrics Obstetrics listory. Insertion of folleys listory. History. atheter Nasogastric tube systemic examination General physica General physic: General physic General physic General physic systemi systemic systemic systemic examination Reception Fluoroscopic Breast Examination counsel a examination xamination xamination. xamination. examination. xamination. xamination xamination Sampling procedures & patient with Pulse, BP, Temp. Pulse, BP, Temp Pulse, BP, Pulse, BP, Techniques & Pulse, BP, C1 C5 Interview with C4 Ba studies. C3 febrile illness esp Rate Resp Rate Temp. Resp Temp. Resp Temp. Resp hlebotomy, the patient Routine MONDAY Hematology. Preparation of Theoretical Blood Smear and aspect of Retics, Quality Control schezopherenia

	WEEK 2	TUSEDAY WEDNESDAY	GIT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Ocdema Budomen, Superficial Palpation of Abdomen	GIT System Systemic Inquir; Vomiting, aundice, pain bdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Inspection of Abdomen	GIT System Systemic Inquiry omiting, jundice, pain abdomen, acute diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Inspection of Abdomen Abdomen	GIT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Ocdema Examination of Inspection of Abdomen	GIT System Systemic Inquiry Vomiting, laundice, pain hodomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Inspection of Abdomen	local examination basic physical signs in detail		Congulation Condiss, Bone Marrow, Hb Studies, Coomb's Test. Grouping, Cross Matching		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use Presentation of cases histories of Dellrium/deme ntia/ organicity by medical students & Theoretical aspects		CT scan brain: basics Basics of ultrasound and observation		Protate Examination	counsel a patient with stroke counsel a patient with upper GI blee	d				
		THURSDAY	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	history & examination of lump		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test	counsel a patient with obstructive lu disease	ng				
-		MONDAY	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	history & examination of lump		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections IAA, IV, Intradermal, Subcutaneous, IV Cannulation, Arterial Tap	Introduction to l services regarding triage system. History taking Monitoring of vi	R tals				
2 MODULE	WEEK 3	TUSEDAY	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	history & examination of ulcer		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation	Introduction to medicolegal cases a maintenance of record. Observation of IV cannulas IM injections	nd				
JNDATION 1 &	WEEKS	WEDNESDAY	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	history & examination of Sinus/fistula	history & examination of Sinus/Tistula	history & examination of Sinus/fistula	history & examination of Sinus/fistula	history & examination of Sinus/fistula		Performance & interpretation of Gram & ZN staining, Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)	• Setting of IV drij Nebulization	is
FOL		THURSDAY	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	history & examination of skin		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy	Insertion of folley catheter Nasogastric tube	5				
		MONDAY	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	history & examination of Neck Swelling	C2	Reception, Sampling Techniques & 'hiebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	C1	Interview with the patient Theoretical aspect of schezopherenia	C5	Fluoroscopic procedures & Ba studies.	C4	Breast Examination	• counsel a patient with febrile illness					

WEEK 4	TUSEDAY	GPE; Cyanosis, Clubbing, Pulsus paradosus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradosus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	history & examination of Neck Swelling	history & examination of Neck Swelling	history & examination of Neck Swelling	history & examination of Neck Swelling	history & examination of Neck Swelling		Coagulation Studies, Bone Marrow, Hb Studies, Coomb's Test.	Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination	• counsel a patient with stroke
	WEDNESDAY	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	history & xxamination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid		Grouping, Cross Matching	Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision	• counsel a patient with upper GI bleed				
	THURSDAY	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid		Ward test	Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test	• counsel a patient with obstructive lung disease				
	MONDAY	Resp., System (Even Roll Numbers)	history & examination of , Mouth & tongue Salivary Gland	history & examination of Mouth & tongue, Salivary Gland	history & examination of Mouth & tongue Salivary Gland	history & examination of Mouth & tongue Salivary Gland t	history & examination of Mouth & ongue, Salivary Gland		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport	History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections L/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap	Introduction to ER services regarding triage system. History taking Monitoring of vitals				
	TUSEDAY	Resp. System (Odd Roll Numbers)	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.	Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation	Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections				
WEEK 5	WEDNESDAY	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.	Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)	• Setting of IV drips Nebulization
	THURSDAY	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages.	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages.	CVS Examination GPE, JVP, Ocdema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages.	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages.	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages.	history & examination of Acute Abdomen	history & examination of Acute Abdomen	history & examination of Acute Abdomen	history & examination of Acute Abdomen	history & examination of Acute Abdomen		Urine & Stool Examination, Examination of CSF & Body Fluids	Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy	Insertion of folleys catheter Nasogastric tube
	MONDAY	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal neave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal neave, palpation of base of heart, epigastric pulsations	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	C3	Reception, Sampling Techniques & Philebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	C2 Interview with the patient Theoretical aspect of schezopherenia	C1	Fluoroscopic procedures & Ba studies.	C5	Breast Examination	• counsel a patient with febrile illness

FOUNDATION 1 & 2 MODULE

	WEEK 6	TUSEDAY	Examination of Pulse	Examination of Pulse	Examination of Pulse	Examination of Pulse	Examination of Pulse	history & examination of Abdomenal Mass		Cogulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics	Prostate Examination	F	• counsel a patient with stroke				
		WEDNESDAY	JVP	JVP	JVP	JVP	JVP	history & examination of bleeding per rectum		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation	revision	4 F (• counsel a patient with upper GI bleed				
5		THURSDAY	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I. Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	1. Auscultation of heart 1. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	history & examination of hernia		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)	Test	, R	 counsel a patient with obstructive lung disease 				
ION 1 & 2 MODU		MONDAY	CVS Test Even Roll Number	CVS Test Even Roll Number	history & examination of hernia		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy	Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap	• 5 •	 Introduction to ER services regarding triage system. History taking Monitoring of vitals 							
FOUNDAT	WFEK 7	TUSEDAY	CVS Test Odd Roll Number	CVS Test Odd Roll Number	history & examination of inguino-scrotal swelling		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology	Nasogastric Intubation	n n C i	Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections							
		WEDNESDAY	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	urinogenital system	urinogenital system	urinogenital system	urinogenital system	urinogenital system		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures	Male & Female catheterization(urine)		- Setting of IV drips Nebulization
		THURSDAY	Headaches ,Numbness, Paresthesias, weakness patterns	Headaches ,Numbness, Paresthesias, weakness patterns	Headaches ,Numbness, Paresthesias, weakness patterns	Headaches ,Numbness, Paresthesias, weakness patterns	Headaches ,Numbness, Paresthesias, weakness patterns	Peripheral vascular system	C4	Urine & Stool Examination, Examination of CSF & Body Fluids	СЗ	Interview with the patient Theoretical aspect of Dissociation	С2	Plain x ray abdomen & KUB	Endotracheal intubation & tracheostomy	l e N	Insertion of folleys catheter Nasogastric tube				
RY		MONDAY TUSEDAY	Cranial nerves. Cranial nerves. 7 to 12	Cranial nerves. Cranial nerves. 7 to 12	Cranial nerves. Cranial nerves. 7 to 12	Cranial nerves. Cranial nerves. 7 to 12	Cranial nerves. Cranial nerves. 7 to 12	Venous lymphatic system	Venous lymphatic system	Venous lymphatic system	Venous lymphatic system	Venous lymphatic system		Reception, Coagulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		the patient Presentation of cases histories of Substance use Interview with		Fluoroscopic CT scan brain: basics	Breast Examination Prostate Examination	r S	 counsel a counsel a patient with stroke
PATOBILIA																the patient Theoretical aspect of Substance use					

GIT & HE	WEEK 8	WEDNESDAY	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, ower/ Reflexes.	Examination of notor system (bulk, tone, ower/ Reflexes.	peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves		Grouping, Cross Matching	Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision	• counsel a patient with upper GI bleed
		THURSDAY	Examination of sensory system	Examination of sensory system	Examination of sensory system	Examination of sensory system	Examination of sensory system	patient with head injuries		Ward test	Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test	 counsel a patient with obstructive lung disease 				
		MONDAY	Examination of Cerebellar System/Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	bone lesions & injuries		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport	History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections L/M, UV, Intradermal, subcutaneous, L/V Cannulation, Arterial Tap	 Introduction to ER services regarding triage system. History taking Monitoring of vitals 				
	WEEK 9	TUSEDAY	CNS Test ODD Roll Numbers	CNS Test ODD Roll Numbers	CNS Test ODD Roll Numbers	CNS Test ODD (Roll Numbers – I	CNS Test ODD	loint problems 8 injuries	Joint problems & injuries	Joint problems & injuries	Joint problems & injuries	Joint problems & injuries		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.	Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation	Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections
		WEDNESDAY	CNS Test Even Roll Numbers	CNS Test Even Roll Numbers	CNS Test Even Røll Numbers	CNS Test Even C Roll Numbers I	INS Test Even in toll Numbers	ndivisual joints i	divisual joints in	divisual joints ii	divisual joints in	divisual joints		Performance & interpretation of Gram & ZN staining, Catalase, Coagulase & Oxidase Tests.	Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)	• Setting of IV drips Nebulization
ATOBILIARY		THURSDAY	Revision	Revision	Revision	Revision	Revision	Management of pneumothorax		Urine & Stool Examination, Examination of CSF & Body Fluids	Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy	Insertion of folleys catheter Nasogastric tube				
GIT & HEP/		MONDAY	Revision	Revision	Revision	Revision	Revision	trauma primary care	trauma primary care	trauma primary care	trauma primary care	rauma primary care	C5	Reception, Sampling Techniques & Phlebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	C4 Interview with the patient Theoretical aspect of schezopherenia	C3	Fluoroscopic procedures & Ba studies.	C2	Breast Examination	• counsel a patient with febrile illness
	WEEK 10	TUSEDAY	Final Test ODD Roll Numbers	Final Test ODD Roll Numbers	Final Test ODD Roll Numbers	Final Test ODD Roll Numbers	Final Test ODD Roll Numbers	trauma secondary care		Coggulation Studies, Bone Marrow, Hb Studies, Coomb's Test.	Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination	• counsel a patient with stroke				

		WEDNESDAY	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even Roll Numbers	managemnet of limb fracture		Grouping, Cross Matching	Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed				
		THURSDAY	MCQs	MCQs	MCQs	MCQs	MCQs	TEST	TEST	TEST	TEST	TEST		Ward test	Evaluation		Ward		Test		 counsel a
		21-01-2019 TO 7/4/2019 SPW	C1	C2	C3	C4	C5	A5	A4	A3	A2	Al		_							
		MONDAY	General introduction to the field of	General introduction to the field of	General introduction to the field of	General introduction to the field of	General introduction to the field of	introduction & bed side manners		Introductory round of Isborstory &	History Taking Allotment of		Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V		 Introduction to ER services regarding triage system. 				
ILIARY		TUSEDAY	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness	art of history taking		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.	Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicologal cases and maintenance of record. Observation of IV cannulas IM injections				
т & нератов	WEEK 11	WEDNESDAY	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	systemic history	systemic history	systemic history	systemic history	systemic history		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.	Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization
Ū		THURSDAY	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	Family History, Occupational History, Personal History, Developmental+ Obstetrics History.	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	GPE	GPE	GPE	GPE	GPE		Urine & Stool Examination, Examination of CSF & Body Fluids	Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys
																					catheter Nasogastric tube
		MONDAY	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	systemic examination	systemic examination	systemic examination	systemic examination	systemic examination	81	Reception, Sampling Techniques & Phlebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality B5	Interview with the patient Theoretical aspect of	Β4	Fluoroscopic procedures & Ba studies.	В3	Breast Examination	B2	counsel a patient with febrile illness
	WEEK 12	TUSEDAY	GIT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Oral Cavity	GIT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acute diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Pallor, Leuconychia, Ocedema Examination of Oral Cavity	GIT System Systemic Inquiry Vomiting, Jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Oral Cavity	GIT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acute diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Pallor, Leuconychia, Ocedema Examination of Oral Cavity	GIT System Systemic Inquity Yomiting, jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Ocedema Examination of Oral Cavity	local examination	local examination	local examination	local examination	local examination		Control Congulation Studies, Bone Marrow, Hb Studies, Coomb's Test.	Schezopherenia Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination		• counsel a patient with stroke

	WEDNESDAY	Inspection of abdomen, Superficial Palpation of Abdomen	basic physical signs in detail		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed				
	THURSDAY	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	history & examination of lump		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		• counsel a patient with obstructive lung disease				
	MONDAY	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	history & examination of lump		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutanceous, I/V Cannulation, Arterial Tap		 Introduction to ER services regarding triage system. History taking Monitoring of vitals 				
WEEK 13	TUSEDAY	GIT System Test ODD Roll Numbers	GIT System Tes ODD Roll Numbers	t GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	history & examination of ulcer		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections
	WEDNESDAY	GIT SystemS Test Even Roll Numbers	history & examination of Sinus/fistula		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization				
	THURSDAY	Respiratory System Examination Systemic Inquiry. Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. , Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	history & examination of skin		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter
	MONDAY	Hemoptysis, wheezing, pleuritic chest pain.	history & examination of Neck Swelling	В2	Reception, Sampling Techniques & Phebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	B1	Interview with the patient Theoretical aspect of schezopherenia	В5	Fluoroscopic procedures & Ba studies.	В4	Breast Examination	В3	counsel a patient with febrile illness				

WEEK 14	TUSEDAY	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Trachealtug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE: Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	history & examination of Neck Swelling	history & examination of Neck Swelling		Coagulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination		• counsel a patient with stroke			
	WEDNESDAY	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed
	THURSDAY	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid	history & examination of Thyroid		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease
	MONDAY	Percussion and auscultation of back of chest	Percussion and auscultation of back of chest	Percussion and auscultation of back of chest	Percussion and auscultation of back of chest	Percussion and auscultation of back of chest	history & examination of , Mouth & tongue Salivary Gland	history & examination of , Mouth & tongue Salivary Gland	history & examination of , Mouth & tongue Salivary Gland	history & examination of , Mouth & tongue ! Salivary Gland	history & xamination of , 4outh & tongue Salivary Gland		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections IJA, IVV, Intradermal, subcutaneous, IV Cannulation, Arterial Tap		Introduction to ER services regarding triage system. History taking Monitoring of vitals
WEEK 15	TUSEDAY	Resp., System (Even Roll Numbers)	Resp., System (Even Roll Numbers)	Resp., System (Even Roll Numbers)	Resp., System (Even Roll Numbers)	Resp., System (Even Roll Numbers)	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections			
	WEDNESDAY	Resp. System (Odd Roll Numbers)	Resp. System (Odd Roll Numbers)	Resp. System (Odd Roll Numbers)	Resp. System (Odd Roll Numbers)	Resp. System (Odd Roll Numbers)	history & examination of Breast & Axillary lymph nodes	history & examination of Breast & Axillary lymph nodes		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization			
	THURSDAY	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur	history & examination of Acute Abdomen	history & examination of Acute Abdomen		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter Nasogastric tube			
	MONDAY	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages	CVS Examination GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter harmorrhages	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	history & examination of Chronic Abdomen	В3	Reception, Sampling Techniques & Phlebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	B2	Interview with the patient Theoretical aspect of schezopherenia	B1	Fluoroscopic procedures & Ba studies.	B5	Breast Examination	В4	counsel a patient with febrile illness

MICROBES & ANTI MICROBIALS (MYCOCOLOGY, BATERIOLOGY, VIROLOGY)

WEEK 16	TUSEDAY	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal teave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal acave, palpation of base of heart, epigastric pulsations	history & examination of Abdomenal Mass		Coagulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination		counsel a patient with stroke				
	WEDNESDAY	Examination of Pulse	history & examination of bleeding per rectum		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed								
	THURSDAY	JVP	JVP	JVP	JVP	JVP	history & examination of hernia		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease 				
	MONDAY	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I. Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	1.Auscultation of heart 1. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	history & examination of hernia		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections 10AI, IVA, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap		Introduction to ER services regarding triage system. History taking Monitoring of vitals				
WEEK 17	TUSEDAY	CVS Test Even Roll Number	CVS 1est Even Roll Number	CVS Test Even Roll Number	CVS 1est Even Roll Number	CVS 1est Even Roll Number	history & examination of inguino-scrotal swelling		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections				
	WEDNESDAY	CVS Test Odd Roll Number	CVS Test Odd Roll Number	CVS Test Odd Roll Number	CVS TestOdd Roll Number	CVS Test Odd Roll Number	urinogenitäi system	urinogenitai system	urinogenitai system	urinogenitai system	urinogentai system		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		Setting of IV drips Nebulization
	THURSDAY	NERVOUS SYSTEM : Conscious level,	NERVOUS SYSTEM : Conscious level,	NERVOUS SYSTEM : Conscious	NERVOUS SYSTEM : Conscious	NERVOUS SYSTEM : Conscious	Peripheral vascular system		Urine & Stool Examination, Examination of		Interview with the patient Theoretical		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter Nasogastric tube				
	TUSEDAY	Headaches ,Numbness, Craniai nerves. 1 to 6	Headaches,Num bness, Crantat nerves, 1 to 6	Headacnes Numbness, Craniai nerves. 1 to 6	Headaches ,Numbness, Crantar nerves. 1 to 6	Headaches "Numbness, Craniai nerves. 1 to 6	veñous Problems lymphatic system	v eñous Problems lymphatic system	venous Problems lymphatic system	veñous Problems lymphatic system	venõus Problems lymphatic system	В4	Reception, Sampling Cosgulation Studies, Bone Marrow, Hb Studies, Coomb's Test.	B3	Presentation of cases histories of Substance use Interview with the natient	B2	Fluoroscopic procedures & CT scan brain: basics	B1	Breast Examination Prostate Examination	B5	 counsel a patient with counsel a patient with stroke
															Theoretical aspect of Substance use						

WEEK 18		Cranial nerves. 7 to 12	7 Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	7 peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves	Grouping, (Matching	ross	Presentation of cases histories of Delirium/deme	Basics ultrasi observ	of ound and ation		revision	• counsel a patient with upper GI bleed
	WEDNESDAY													ntia/ organicity by medical students & Theoretical aspects					
	THURSDAY	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of notor system (bulk, tone, ower/ Reflexes.	patient with head injuries	Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback	Ward assess based	nent(film		Test	• counsel a patient with obstructive lung disease							
	MONDAY	Examination of sensory system	Examination of sensory system	Examination of sensory system	Examination of sensory system	Examination of sensory system	bone lesions & injuries	Introductor round of laboratory benches. We of Autocla Guidelines Microbiolog specimen collection & transport	y & rking /e. & of ical	History Taking Allotment of Cases and Groups	Chest anato	(ray ny		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap	 Introduction to ER vervices regarding triage system. History taking Monitoring of vitals 				
WEEK 19	TUSEDAY	Examination of Cerebellar System/Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	Examination of Cerebellar System/ Gait	Joint problems & injuries	Culture me (Inoculated Uninoculated Antibiotic sensitivity t Orientation Serology &	dia & d). esting. to PCR.	Demonstration of History taking and MSE	Chest patho	cray Dgy		Nasogastric Intubation	Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections				
	WEDNESDAY	CNS Test ODD Roll Numbers	CNS Test ODD i Roll Numbers	ndivisual joints i	irdivisual joints – i	ir divisual joints	indivisual joints	idivisual joints	Performan interpretat Gram & Z! staining. Ca Coagulase o Oxidase Te	ee & on of i talase, i sts.	Interview with the patient Theoretical aspect of depression	Bones with fi	& joints actures		Male & Female catheterization(urine)	• Setting of IV drips Nebulization			
	THURSDAY	CNS Test Even Roll Numbers	CNS Test Even Roll Numbers	Management of pneumothorax	Urine & Ste Examinatio Examinatio CSF & Bod Fluids	ol n, tof y	Interview with the patient Theoretical aspect of Dissociation	Plain) abdon KUB	ray ien &		Endotracheal intubation & tracheostomy	Insertion of folleys							
	MONDAY	Revision	Revision	Revision	Revision	Revision	trauma primary care	y trauma primary care	trauma primary care	trauma primary care	rauma primary care	B5 Reception, Sampling Techniques Phlebotomy Routine Hematology Preparatio Blood Smea Retics, Qua Control	& , , of r and lity	4 Interview with the patient Theoretical aspect of schezopherenia	B3 Fluoro procee Bastu	scopic lures & dies.	B2	Breast Examination	Nasogastric tube • counsel a patient with febrile illness
НАЕМА	TUSEDAY	Final Test ODD Roll Numbers	Final Test ODD Roll Numbers	trauma secondary care	Coagulation Studies, Bo Marrow, H Studies, Coo Test.	ie b mb's	Presentation of cases histories of Substance use Interview with the patient	CT sc basics	an brain:		Prostate Examination	• counsel a patient with stroke							
WEEK 20	TUSEDAY													use Interview with the patient Theoretical aspect of Substance use					

	WEDNESDAY	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even Roll Numbers	Final Test Even	nanagemnet of limb fracture	nanagemnet of limb fracture	nanagemnet of limb fracture	managemnet of limb fracture	managemnet of limb fracture		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		counsel a patient with upper GI bleed
	THURSDAY	MCQs	MCQs	MCQs	MCQs	MCQs	TEST	TEST	TEST	TEST	TEST		Ward test		Evaluation		Ward		Test		• counsel a
	4/8/2019 TO 10/8/2019 S.V	Bl	B2	B3	B4	B5	C5	C4	C3	C2	C1				(OCSE+case		assessment(film				patient with
	MONDAY	General introduction to the field of medicine. Medical ethics	General introduction to the field of medicine. Medical ethics	General introduction to the field of medicine. Medical ethics	General introduction to the field of medicine. Medical ethics	General introduction to the field of medicine. Medical ethics	introduction & bed side manners		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap		Introduction to ER services regarding triage system. History taking Monitoring of vitals				
WEEK 21	TUSEDAY	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness.	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness.	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness.	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness.	Art of History, Taking, Importance of history, Contents of history, Presenting Complaint History of Present illness.	art of history taking		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolgal cases and maintenance of record. Observation of IV cannulas IM injections				
	WEDNESDAY	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	Systemic Inquiry, Past Medical History	systemic history	systemic history	systemic history	systemic history	systemic history		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization
	THURSDAY	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	Family History, Occupational C History, Personal History , Developmental+ Obstetrics History.	Family History, ccupational History, Personal History, Developmental+ Obstetrics History.	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	Family History, Occupational History, Personal History , Developmental+ Obstetrics History.	GPE	GPE	GPE	GPE	GPE		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys
	MONDAY	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	General physical examination. Pulse, BP, Temp. Resp Rate	systemic examination	systemic examination	systemic examination	systemic examination	systemic examination	A1	Reception, Sampling Techniques & Phlebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	A5	Interview with the patient Theoretical aspect of schezopherenia	Α4	Fluoroscopic procedures & Ba studies.	A3	Breast Examination	A2	Auster • counsel a patient with febrile illness

WEEK 22	TUSEDAY	GIT System Systemic Inquir, Yomiting, jaundice, pain abdomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Oral Cavit	GT System Systemic Inquir Vomiting, aundice, pain isdomen, active diarrhea GPE, Jaundice, Clubbing, Kotionychia, Pallor, Leuconychia, Oedema Examination of Oral Cavit	GT System y Systemic Inquiry Yomiting, juundice, pain abdomen, acute diarrhea diarrhea GFE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Ocdema Examination of Oral Cavit	GT System Systemic Inquiry Vomiting, jaundice, pain abdomen, acuta and chronic diarrhea GPE, Jaundice, Clubbing, Kotionychia, Pallor, Leuconychia, Oedema Examination of Dral Cavit	GIT System Systemic Inquiry Vomiting, aundice, pain bidomen, acute and chronic diarrhea GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Oral Cavit	local examination	local examination	local examination	local examination	local examination		Cogulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination		counsel a patient with stroke
	WEDNESDAY	Inspection of abdomen, Superficial Palpation of Abdomen	Inspection of abdomen, Superficial Palpation of Abdomen	Inspection of abdomen, Superficial Palpation of Abdomen	Inspection of abdomen, Superficial Palpation of Abdomen	Inspection of abdomen, Superficial Palpation of Abdomen	basic physical signs in detail	-	Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed				
	THURSDAY	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Faipation of Liver, Spleen, Kidneys, Pelvic Masses	Faipation of Liver, Spleen, Kidneys, Pelvic Masses	Faipacion of Liver, Spleen, Kidneys, Pelvic Masses	Falpation of Liver, Spleen, Kidneys, Pelvic Masses	history & examination of lump	-	Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease 				
	MONDAY	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	history & examination of lump		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections LM, IV, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap		 Introduction to ER services regarding triage system. History taking Monitoring of vitals 				
WEEK 23	TUSEDAY	GIT System Fes ODD Roll Numbers	t GIT System Tes ODD Roll Numbers	t GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	GIT System Test ODD Roll Numbers	history & examination of ulcer	-	Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections				
	WEDNESDAY	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	GIT SystemS Test Even Roll Numbers	history & examination of Sinus/fistula		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization				
	THURSDAY	Respiratory System Examination Systemic Inquiry. Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. , Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. , Cough, Sputum, Dyspnea + Cyanosis	Respiratory System Examination Systemic Inquiry. Cough, Sputum, Dyspnea + Cyanosis	history & examination of skin		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter Nasogastric tube				
	MONDAY	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	Hemoptysis, wheezing, pleuritic chest pain.	history & examination of Neck Swelling	A2	Reception, Sampling Techniques & Phebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	A1	Interview with the patient Theoretical aspect of schezopherenia	A5	Fluoroscopic procedures & Ba studies.	A4	Breast Examination	A3	• counsel a patient with febrile illness				

WEEK 24	TUSEDAY	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	GPE; Cyanosis, Clubbing, Palsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	history & examination of Neck Swelling		Coguidión Studies, Bone Marrow, Hb Studies, Coomb's Test.	Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use	CT scan brain: basics		Prostate Examination	:	counsel a patient with stroke			
	WEDNESDAY	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	history & examination of Thyroid		Grouping, Cross Matching	Presentation of cases histories of Delirium/deme ntia/organicity by medical students & Theoretical aspects	Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed				
	THURSDAY	Inspection of back of chest. Chest movements Percussion of back of chest and Auscultation	history & examination of Thyroid		Ward test	Evaluation (OCSE + case histories + attendance & Signatures on Iogbook) & Feedback	Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease 				
	MONDAY	Percussion and auscultation of back of chest.	history & examination of , Mouth & tongue Salivary Gland		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport	History Taking Allotment of Cases and Groups	Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap	, 1 ,	Introduction to ER services regarding triage system. History taking Monitoring of vitals				
WIEFK 25	TUSEDAY	Resp., System (Even Roll Numbers)	history & examination of Breast & Axillary lymph nodes		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.	Demonstration of History taking and MSE	Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections				
WERES	WEDNESDAY	Resp. System (Odd Roll Numbers)	history & examination of Breast & Axillary lymph nodes		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.	Interview with the patient Theoretical aspect of depression	Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization				
	THURSDAY	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	CVS Examination Systemic Inquiry Precordial Chest Pain, Palpitation, Patient with murmur.	history & examination of Acute Abdomen		Urine & Stool Examination, Examination of CSF & Body Fluids	Interview with the patient Theoretical aspect of Dissociation	Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter Nasogastric tube
		CVS Examination GPE, JVP, Oedema, Clubbing	history & examination of Chronic Abdomen	A3	Reception, Sampling Techniques & Phlebotomy, A Routine Hematology,	2 Interview with the patient A1	Fluoroscopic procedures & Ba studies.	A5	Breast Examination	A4	 counsel a patient with febrile illness 				

CVS & RESPIRATION	WEEK 26	TUSEDAY	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Inspection of precordium location + palpation of apex beat. Right parasternal eave, palpation of base of heart, epigastric pulsations	history & examination of Abdomenal Mass		Coagulation Studies, Bone Marrow, Hb Studies, Coomb's Test.		Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use		CT scan brain: basics		Prostate Examination		counsel a patient with stroke				
		WEDNESDAY	Examination of Pulse	Examination of Pulse	Examination of Pulse	Examination of Pulse	Examination of Pulse	history & examination of bleeding per rectum		Grouping, Cross Matching		Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed				
		THURSDAY	JVP	JVP	JVP	JVP	JVP	history & examination of hernia		Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease 				
		MONDAY	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I.Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	I. Auscultation of heart I. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	1.Auscultation of heart 1. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	history & examination of hernia		Introductory round of laboratory & benches. Working of Autoclave. & Guidelines of Microbiological specimen collection & transport		History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap		 Introduction to ER services regarding triage system. History taking Monitoring of vitals 				
	WEEK 27	TUSEDAY	CVS Test Even Roll Number	CVS Test Even Roll Number	history & examination of inguino-scrotal swelling		Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testing. Orientation to Serology & PCR.		Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections							
		WEDNESDAY	CVS Test Odd Roll Number	CVS Test Odd Roll Number	CVS Test Odd – Roll Number	CVS Test Odd Roll Number	CVS Test Oad Roll Number	urinogenital system	urinogenital system	urinogenital system	urinogenital system	urinogenital system		Performance & interpretation of Gram & ZN staining. Catalase, Coagulase & Oxidase Tests.		Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		• Setting of IV drips Nebulization
		THURSDAY	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	NERVOUS SYSTEM : Conscious level, HMF, orientation, speech, memory, intellect, sleep	Peripheral vascular system		Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys eatheter Nasogastric tube				
		MONDAY	Headacnes ,Numbness, Paresthesias, weakness patterns	neadacnes ,Numbness, Paresthesias, weakness patterns	Numbness, Numbness, Paresthesias, weakness patterns	neudacnes ,Numbness, Paresthesias, weakness patterns	neadaches ,Numbness, Paresthesias, weakness patterns	Venous Problems	Venous Problems	Venous Problems	Venous Problems	Venous Problems	Α4	Reception, Sampling Techniques & Phiebotomy, Routine Hematology, Preparation of Blood Smear and Retics, Quality Control	A3	Interview with the patient Theoretical aspect of schezopherenia	A2	Fluoroscopic procedures & Ba studies.	A1	Breast Examination	A5	counsel a patient with febrile illness

WEEK 28	TUSEDAY	Cranial nerves. 1 to 6	Cranial nerves. I to 6	Cranial nerves. 1 to 6	Cranial nerves. 1 to 6	Cranial nerves. 1 to 6	lymphatic system	lymphatic system	lymphatic system	lymphatic system	lymphatic system	Cogulation Studies, Bone Marrow, Hb Studies, Coomb's Test.	Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of Substance use	CT scan brain: basics	Protate Examination	counsel a patient with stroke
	WEDNESDAY	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	Cranial nerves. 7 to 12	peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves	peripheral nerves	Grouping, Cross Matching	Presentation of cases histories of Delirium/deme ntia/organicity by medical students & Theoretical aspects	Basics of ultrasound and observation	revision	• counsel a patient with upper GI bleed
	THURSDAY	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, power/Reflexes.	Examination of motor system (bulk, tone, power/ Reflexes.	Examination of motor system (bulk, tone, power/ Reflexes.	patient with head injuries	Ward test	Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback	Ward assessment(film based)	Test	• counsel a patient with obstructive lung disease				

	MONDAY	Examination of sensory system	bone lesions & injuries	bonc lesions & injuries	bonc lesions & injuries	bone lesions & injuries	bone lesions & injuries	Introductory round of laboratory & benches. Workin of Autoclave. & Guidelines of Microbiological specimen collection & transport	g t	History Taking Allotment of Cases and Groups		Chest x ray anatomy		Use of Injections I/M, I/V, Intradermal, subcutaneous, I/V Cannulation, Arterial Tap		- Hart outcom Res services regarding triage system. - History taking - Monitoring of vitals				
WEEK 29	TUSEDAY	Examination of Cerebellar System/ Gait	Joint problems & injuries	Culture media (Inoculated & Uninoculated). Antibiotic sensitivity testin Orientation to Serology & PCI	ıg. R.	Demonstration of History taking and MSE		Chest x ray pathology		Nasogastric Intubation		Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas IM injections								
	WEDNESDAY	CNS Test ODD Roll Numbers	indivisual joints	Performance & interpretation o Gram & ZN staining. Catalas Coagulase & Oxidase Tests.	ıf ie,	Interview with the patient Theoretical aspect of depression		Bones & joints with fractures		Male & Female catheterization(urine)		Setting of IV drips Nebulization								
	THURSDAY	CNS Test Even Roll Numbers	Management of pneumothorax	Urine & Stool Examination, Examination of CSF & Body Fluids		Interview with the patient Theoretical aspect of Dissociation		Plain x ray abdomen & KUB		Endotracheal intubation & tracheostomy		Insertion of folleys catheter								
	MONDAY	Revision	Revision	Revision	Revision	Revision	trauma primary care	Reception, Sampling Techniques & Phiebotomy, Routine Hematology, Preparation of Blood Smear am Retics, Quality Control	A4	Interview with the patient Theoretical aspect of schezopherenia	A3	Fluoroscopic procedures & Ba studies.	A2	Breast Examination	A1	counsel a patient with febrile illness				
	TUSEDAY	Final Test ODD Roll Numbers	trauma secondary care	Coagulation Studies, Bone Marrow, Hb Studies, Coomb' Test.	's	Presentation of cases histories of Substance use Interview with the patient Theoretical aspect of		CT scan brain: basics		Prostate Examination		counsel a patient with stroke								
WEEK 30	WEDNESDAY	Final Test Even Roll Numbers	managemnet of limb fracture	Grouping, Cross Matching	s	Substance use Presentation of cases histories of Delirium/deme ntia/ organicity by medical students & Theoretical aspects		Basics of ultrasound and observation		revision		• counsel a patient with upper GI bleed								
	THURSDAY	MCQs	MCQs	MCQs	MCQs	MCQs	TEST	TEST	TEST	TEST	TEST	Ward test		Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward assessment(film based)		Test		 counsel a patient with obstructive lung disease

Note :- For Psychiatry to BBH and Radiology to HFH, Skill Lab & E.R (i) Half batch Skill Lab (ii) Half batch E.R alternative

Vice Chancellor Rawalpindi Medical University Rawalpindi

No./T-9______RMU/NTB/ Dated: _____2018.

Copy to all concerned department and official.

TIME TABLE 3rd YEAR MBBS CLASS MBBS (SESSION 2016-2017) Start w.e.f From 05-11-2018 ENDING 10-08-2019

CLASS ROLL WEDNESDA SATURDAY ACTIVITY MONDAY TUESDAY THURSDAY FRIDAY NO Y INTERACTIVE TEACHING 8:00am to 9:00 8:00am to 9:00 8:00am to 9:00 8:00am to 9:00 PROBLEM BASE LEARNING am am am am 9:00am to 11:00 am 9:00am to 11:00 am 9:00am to 11:00 am 9:00am to 11:00 am WARDS LECTURES 8:00 am to 8:45 8:00 am to 8:45 MEDICINE ODD am am 8:00 am to 8:45 8:00 am to 8:4: MEDICAL SPECIALTY EVEN am am 8:45 am to 9:30 8:45 am to 9:30 SURGERY ODD am am 8:45 am to 9:30 8:45 am to 9:30 SURGICAL SPECIATLY EVEN am am 11:00am to 12:00pm 11:00am to 12:00pm 11:00am to 12:00pm 11:00am to 12:00pm 9:30am to 10:15am 9:30am to 10:30am PHARMACOLOGY ODD 11:00am to 12:00pm 11:00am to 12:00pm 11:00am to 12:00pm 9:30am to 10:15am 9:30am to 10:30am 11:00am to 12:00pm PHARMACOLOGY EVEN Break 10:30am to 11:00am 10:15am to 11:00am 12:00 to 1:00pm FORENSIC MEDICINE ODD 10:15am to 11:00am 12:00 to 1:00pm FORENSIC MEDICINE EVEN 11:00 pm to 12:00pm 12:00 pm to 11:00am to PATHOLOGY ODD 1:00pm 12:00pm :00pm to 2p 1:00pm to 2pm 12:00 pm to 11:00 pm to 11:00am to PATHOLOGY EVEN 1:00pm 12:00pm 12:00pm 1:00pm to 2pr 1:00pm to 2pm 12:00 to 2:00pm 12:00 to 2:00pm 12:0 to 2:00pm PRACTICAL PHARMACOLOGY Batch - A Batch - B Batch -C FORENSIC MEDICINE Batch - A Batch - B Batch - C PATHOLOGY Batch - C Batch - A Batch - B

Note:

1. Interactive PBL will be held in respective wards. Department of Medical Education in RMU, NTB will coordinate.

Odd Roll <u>Monday to Thursday</u> No. Section 1 Even Roll No. Section 2

Demonstratio Demonstration Hall No. 2

Odd Roll

Friday to Saturday	No. Section 1	Even Roll No. Section 2
	Lecture Hall	Lecture Hall No. 2
	No. 1	

No T-9/ ______RMU, RWP. Dated _____/2018. Copy to all Concerned Departments Annexure 2 c

MEDICINE CLINICAL ROTATIONS THIRD YEAR MBBS 2024

	Sr #	Dav	Specialty	Торіс	S	SPECIFIC LEARNING OJECTIVES (SLO)			Cognitic	n	Pysco	motor	Atti	tude	MOT/MIT	MOA
Γ		,			Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
Γ						1st WEEK										
	1	MONDAY	INTRODUCTION	General introduction to the field of medicine. Medical ethics	Student will be able to: a)Recognize importance of clinical medicine and context for theoretical learning so that one can see how learning about body system and social sciences are applied to care of patient. b)Recognize and evaluate different ethical problems including gap block, priority setting, moral dilemma and resolving conflict.Analyse different ethical problems and knows different approaches. c) Recognize importance of	Student will be able to: Take detailed history	Student will be able to: Take Consent for History			\$		¥		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE, MINICEX, CBD
	2	TUESDAY	HISTORY TAKING	History Taking, Importance of history, Contents of history, Presenting Complaint, History of Present illness	Student will be able to: Demonstrate art of history taking including all components of history, Presenting complaint, History of presenting illness indetail and in chronological order.	Student will be able to: Take detailed history	Student will be able to: Take Consent for History			1		1		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	3	WEDNESDAY	HISTORY TAKING	Systemic Inquiry, Past Medical History	Students will be able to: Demonstrate systemic inquiry in detail and past medical history	Students will be able to: Take detailed history	Students will be able to: Take Consent for History			1		1		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD

ör#	Dav	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)			Cognitio	n	Pysco	motor	Atti	tude	MOT/MIT	MOA
				Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2	1	
4	THURSDAY	HISTORY TAKING	Family History, Occupational History, Personal History, Developmental+ Obstetrics History. General physical examination. Pulse, BP, Temp. Resp Rate	Students will be able to: a) Describe different components of history like Family History, Occupational History, Personal History, Developmental+ Obstetrics History b) Recall causes of bradycardia,tachycardia,fever,h ypothermia and tachypnea	Students will be able to: Take history and perform GPE and can pick findings and relate them with different diseases.	Students will be able to: Take Consent for History and Clinical Examination			•		•		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
					2nd WEEK										
5	MONDAY	HISTORY TAKING	EVEN ROLL NO TEST												MINICEX
6	TUESDAY	HISTORY TAKING	ODD ROLL NO TEST												MINICEX

Sr #	Dav	Specialty	Торіс	S	SPECIFIC LEARNING OJECTIVES (SLO)			Cognitic	'n	Pysco	motor	Att	itude	MOT/MIT	MOA
				Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
7	WEDNESDAY	RESPIRATORY SYSTEM	Systemic Inquiry,Cough,Sputum,D yspnea,Cyanosis	Students will be able to: a) Recall causes of cough and how to differentiate between dry and productive cough. b) Know causes of dyspnea,grading of dyspnea and how to differtentiate between dyspnea,orthopnea and PND. c) Retell causes of cyanosis and difference between central and peripheral cyanosis	Students will be able to: Take detailed history of cough,sputum,dyspnea and cyanosis and able to make differential diagnosis related to above symptoms.	Students will be able to: Take Consent for History and Clinical Examination.			•		J		~	BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
8	THURSDAY	RESPIRATORY SYSTEM	Hemoptysis, wheezing, pleuritic chest pain.	Students will be able to: Explain causes of hemoptysis, wheezing and pleuritic chest pain.	Students will be able to: Take detailed history of hemoptysis,heezing and chest pain and able to make differential diagnosis related to these symptoms.	Students will be able to: Take Consent for History and Clinical Examination			•		•		~	BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
					3rd WEEK										

s	ir#	Day	Specialty	Торіс	s	PECIFIC LEARNING OJECTIVES (SLO)		0	Cognitio	n	Pysco	motor	Atti	tude	мот/міт	MOA
L		-			Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
	9	MONDAY	RESPIRATORY SYSTEM	GPE; Cyanosis, Clubbing, Pulsus paradoxus, Intercostal in drawing, Tracheal tug Palpation of trachea	Students will be able to: a)Recall causes and types of cyanosis. b)Retell causes of clubbing and its gradinding. c)Describe pulsus paradoxus,intercostal indrawing and tracheal tug and their causes. d)Describe different methods to palpate trachea and different causes of tracheal deviation.	Students will be able to: a) Take history and perform GPE relavant to respiratory system and able to pick these signs on examination. b) perform palapation of trachea	Students will be able to: Take Consent for History and Clinical Examination			•		s		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	10	TUESDAY	RESPIRATORY SYSTEM	Inspection of chest from front Chest movements, Percussion of front of chest and Auscultation	Students will be able to: a) know types of respiration,chest deformaties,different scar marks and their significance,different types of apex beat,causese of displaced apex beat,causes of decreased chest movements,importance of accessary muscles use in resoiration and etc etc b) able to describe abormal percussion notes and their causes c) Recall types of normal and other	Students will be able to: Take history and perform Respiratory system examination including inspection,palpation,percussion and auscultation of front of chest & relevant clinical examination according to cause	Students will be able to: Take Consent for History andClinical Examination			1		*		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	11	WEDNESDAY	RESPIRATORY SYSTEM	Inspection of back of chest. Chest movements Percussion of back of chest	Students will be able to: a)know types of respiration,chest deformaties,different scar marks and their significance,causes of decreased chest movements,importance of	Take history and perform Respiratory system examination including inspection,palpation,percussion and	Students will be able to: Take Consent for History and Clinical Examination.					1			SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD

ſ	Sr #	Day	Specialty	Торіс	S	PECIFIC LEARNING OJECTIVES (SLO)		0	Cognitio	n	Pysco	motor	Atti	tude	мот/міт	MOA
			- F - ,		Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
	12	THURSDAY	RESPIRATORY SYSTEM	Auscultation of back OF chest	accessary muscles use in respiration and etc etc b) Describe abormal percussion and their causes. c) Recall types of normal and other breating patterns and causes of increased and decreased vocal resonance and corelate the findings with cause.	auscultation of back of chest & relevant clinical examination according to cause	Students will be able to: Take Consent for History and Clinical Examination.			J		J		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
						4th WEEK										
	13	MONDAY	RESPIRATORY SYSTEM	EVEN ROLL NO TEST												MINICEX

Sr #	Dav	Specialty	Τορίς	s	PECIFIC LEARNING OJECTIVES (SLO)			Cognitio	'n	Pysco	motor	Att	itude	MOT/MIT	MOA
	•			Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
	TUESDAY	RESPIRATORY SYSTEM	ODD ROLL NO TEST												MINICEX
15	WEDNESDAY	GIT	Systemic Inquiry Vomiting, jaundice, pain abdomen, acute and chronic diarrhea	Students will be able to: a) Recall different causes of vomiting b) Explain causes and types of jaundice c) Retell different causes of generalized and localized abdominal pain d) Recall different causes of acute and chronic diarrhea and differentiate between two on the basis of history	Students will be able to: can take detailed history of vomiting,jaundice,abdominal pain and diarrhea and able to make differential diagnosis related to these symptoms.	Students will be able to: Take Consent for History and Clinical Examination.			J		J			SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD

ſ	Sr #	Day	Specialty	Торіс	s	SPECIFIC LEARNING OJECTIVES (SLO)			Cognitio	n	Pysco	motor	Atti	tude	MOT/MIT	MOA
					Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2]	
	16	THURSDAY	GIT	GPE, Jaundice, Clubbing, Koilonychia, Pallor, Leuconychia, Oedema Examination of Oral CavitY	Students will be able to: a) Recall different causes of jaundice,clubbing,koilonychia,p allor,leuconychia and odema. b) retell causes of oral ulcerS,macroglossia,hypertroph y of gums	Students will be able to: a) Take history and perform GPE relavant to abdominal examination and able to pick these signs on examination. b)can perform examination of oral cavity	Students will be able to: Take Consent for History and Clinical Examination.			v		v		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
						5th WEEK										
	17	MONDAY	GIT	Inspection of abdomen, Superficial Palpation of Abdomen	Students will be able to: a) Recall different causes of distended abdomen, significance of prominent veins and scar marks, Can differentiate different shapes of umbilicus and their position. b) Retell causes of abdominal tenderness	Students will be able to: Take history and perform inspection and superficial palpation of abdomen and relavant clinical examination.	Students will be able to: Take Consent for History and Clinical Examination.			•		•		~	AMBULATORY TEACHING / SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD

Sr	# Day	Specialty	Topic		SPECIFIC LEARNING OJECTIVES (SLO)			Cognitic	on	Pysco	motor	Atti	itude	мот/міт	MOA
				Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		-
1	8 TUESDAY	GIT	Palpation of Liver, Spleen, Kidneys, Pelvic Masses	Students will be able to: a) Recall different causes of hepatomegaly,splenomegaly,ca uses of palpabale kidneys and other abdminal masses b) differentiate between kidney and spleen on examination	Students will be able to: Take history and perform abominal examination to pick visceromegaly and other masses and relavant examination.	Students will be able to: Take Consent for History and Clinical Examination .			•		1		~	AMBULATORY TEACHING / SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
1	9 WEDNESDAY	GIT	Percussion of Abdominal Viscera, Fluid Thrill, Shifting Dullness, Auscultation of abdomen	Students will be able to: a) Recall causes of abnormal percussion notes of abdomen b) Retell causes of positive fluid thrill and shifting dullness. C) Describe different causes of absent bowl sounds	Students will be able to: Take history and perform abdominal examination including percussion auscultation and relavant examination.	Students will be able to: Take Consent for History and Clinical Examination.			1		1		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
2	0 THURSDAY	GIT	EVEN ROLL TEST												MINICEX
		1			6th WEEK										
2	1 MONDAY	GIT	ODD ROLL NO TEST												MINICEX

Sr #	Day	Specialty	Торіс	S	SPECIFIC LEARNING OJECTIVES (SLO)			Cognitio	n	Pyscomotor		Pyscomotor		Pyscomotor		Pyscomoto		Atti	itude	мот/міт	MOA
				Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2	· · · · · · · · · · · · · · · · · · ·							
22	TUESDAY	CNS	Conscious level, HMF, orientation, speech, memory, intellect, sleep	Students will be able to: a) Recall higher mentel functions and Glassgow coma scale. b) differentiate between long term and short term memory c)differentiate between narcolepsy and somnolence	Students will be able to: a) Take history and perform relavant clinical examination.	Students will be able to: a) Take Consent for History and Clinical Examination			¥		1		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD						
23	WEDNESDAY	CNS	Headaches ,Numbness, Paresthesias, weakness patterns	Students will be able to: Recall causes and types of headache ,causes of numbness and paresthesias.Retell different pattern of weakness	Students will be able to: Take history and perform relavant clinical examination	Students will be able to: Take Consent for History and Clinical Examination			J		\$		*	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD						
24	THURSDAY	CNS	Cranial nerves. 1 to 6	Students will be able to: Recall anatomy and functions of cranial nerves, retell causes of lesion of cranial nerves 1 to 6	Students will be able to: Take History and perform examination of cranial nerves from 1 to 6 and able to pick abnormal findings.	Students will be able to: Take Consent for History and Clinical Examination			1		1		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD						

S	Sr #	Dav	Specialty	Торіс	SPECIFIC LEARNING OJECTIVES (SLO)			Cognitic	n	Pysco	motor	Attitude		MOT/MIT	MOA	
		,			Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
						7th WEEK		_	_			_				
	25	MONDAY	CNS	Cranial nerves. 7 to 12	Students will be able to: Recall anatomy and functions of cranial nerves, can retell causes of lesion of cranial nerves 7 to 12	Students will be able to: Take History and do examination of cranial nerves from 7 to 12 and can pick abnormal findings.	Students will be able to: Take Consent for History and Clinical Examination			J		V		\$	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	26	TUESDAY	CNS	Examination of motor system (bulk, tone, power/ Reflexes.	Students will be able to: Recall motor tracts,causes of hypo and hypertrophy of muscles,grading of power,causes of hypo and hypertonia. Can differentiate between hypo and hyper reflexia and clonus	Students will be able to: Take History and perform motor system examination and able to pick abnormal findings	Students will be able to: Take Consent for History and Clinical Examination			•		↓		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD

Sr #	Day	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)			Cognition		Pysco	motor	Att	itude	мот/міт	MOA
				Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2]	
27	WEDNESDAY	CNS	Examination of sensory system	Students will be able to: Recall different sensory tracts and retell causes of abnormal sensation of touch,pain,temperature,propioc eption and vibration	Students will be able to: Take History and perform sensory system examination keeping in mind etiology	Students will be able to: Take Consent for History and Clinical Examination			•		•		~	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
28	THURSDAY	CNS	Examination of Cerebellar System/ Gait	Students will be able to: a) Recall normal functions of cerebellum and causes of abnormal cerebellar signs. b) Retell different types of gaits and their cause	Students will be able to: Take History and can perform cerebellar examination keeping in mind etiology.	Students will be able to: Take Consent for History and Clinical Examination			1		1		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
					8th WEEK				_	-					
29	MONDAY	CNS	EVEN ROLL NO TEST												MINICEX
	TUESDAY	CNS	UDD ROLL NO TEST												MINICEX

s	r#	Dav	Specialty	Торіс	s	PECIFIC LEARNING OJECTIVES (SLO)		Cognition		Cognition Pysc		motor	Atti	tude	мот/міт	MOA
			,		Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
	31	WEDNESDAY	CVS Examination	Systemic Inquiry Pericardial Chest Pain, Palpitation, Patient with murmur.	Students will be able to: Recall causes of precordial chest pain palpitation and etiology of valvular heart diseases	Students will be able to: Take History and perform examination keeping in mind etiology and complications of disease	Students will be able to: Take Consent for History and Clinical Examination			1		1		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds) / LAB WORK	OSPE, MINICEX, CBD
	32	THURSDAY	CVS Examination	GPE, JVP, Oedema, Clubbing Osler's Nodes, Janeway's Lesions, Splinter haemorrhages.	Students will be able to: a) Recall causes of raised JVP, clubbing, osler's nodes, janeway's lesion and splinter haemorrhages. b) Differentiate between pitting and non pitting odema and their various causes	Students will be able to: Take History and perform GPE examination relavant to Cardiovascular system and can pick these signs.	Students will be able to: Take Consent for History and Clinical Examination			1		1		*	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds) / LAB WORK	OSPE, MINICEX, CBD
Γ						9th WEEK										

	Sr #	Day	Specialty	Торіс	S	SPECIFIC LEARNING OJECTIVES (SLO)			Cognition Pyscomoto		motor	or Attitude		Attitude MOT/MIT		
L					Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
	33	MONDAY	CARDIOLOGY	Inspection of precordium location + palpation of apex beat. Right parasternal heave, palpation of base of heart, epigastric pulsations	Students will be able to: a) Recall causes of prominent veins on chest, can pick scar marks on precordium and know their significance. b)Retell causes of displaced apex beat, right parasternal heave and epigastric pulsations. c)Describe causes of palpable heart sounds and thrills	Students will be able to: Take History and perform inspection and palpation of precordium.	Students will be able to: Take Consent for History and Clinical Examination			J		v		¥	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	34	TUESDAY	CARDIOLOGY	Examination of Pulse	Students will be able to: a) Recall causes of braycardia,tachycardia,radioradi al nd radiofemoral delay. Retell causes of low, high volume pulse and irregular pulse. Differentiate between different characters of pulse.	Students will be able to: Take History and palpate all peripheral pulses and able compare them bilaterally.	Students will be able to: Take Consent for History and Clinical Examination			1		1		\$	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds)	OSPE,MINICEX, CBD
	35	WEDNESDAY	CVS Examination	JVP	Students will be able to: a) Recall different waves and descents of JVP and their significance. b) Retell causes of raised JVP. C)Describe hepatojuglar reflex and its significance d)Differentiate berween arterial and venous pulsations in neck	Students will be able to: Take History and examine JVP and able to measure it.	Students will be able to: Take Consent for History and Clinical Examination			1		1		1	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds) / LAB WORK	OSPE,MINICEX, CBD

Sr #	Day	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)			Cognition		Cognition		Cognition		Pysco	motor	Atti	itude	мот/міт	MOA
	1			Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2						
36	THURSDAY	CVS Examination	1. Auscultation of heart 1. Normal heart sound 2. Effect of respiration on heart sound 3. Murmurs and Thrills	Students will be able to: a) Recall causes of loud and soft \$1,\$2,retell causes of \$3 and \$4. b) Describe normal and abnormal splitting of \$2. c)Differentiate between different systolic and diastolic murmers and thrills and describe their causes.	Students will be able to: Take History and perform auscultation of precardium	Students will be able to: Take Consent for History and Clinical Examination			•		•		•	SGD / BED SIDE SESSIONS (Grand Ward Rounds, Teaching Ward Rounds) / LAB WORK	OSPE,MINICEX, CBD				
		1	1	1	10th WEEK	1								1					
37	MONDAY	CVS Examination	EVEN ROLL NO TEST												MINICEX				
38	TUESDAY	CVS Examination	ODD ROLL NO TEST												MINICEX				

Sr #	Day	Specialty	Торіс	SPECIFIC LEARNING OJECTIVES (SLO)					n	Pyscomotor		Pyscomoto		Pyscomoto		Pyscomotor		Atti	tude	MOT/MIT	MOA
	,	. ,		Cognition	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2								
39	WEDNESDAY	REVISION																			
40	THURSDAY	END BOCK EXAM													MCQs,OSPE,MI NICEX						



Emergency Medicine Clerkship Programme/ Learning Objectives Of Third Year Mbbs Rmu And Allied Hospitals

A two-week clinical teaching programme that will enable students to get insight into cases that present in medical emergency, their diagnosis, management, and patient counselling.

Dr. Saima Ambreen (ASSOCIATE PROFESSOR MEDICAL UNIT-1 HOLY FAMILY HOSPITAL RWP)
Sr #	Day	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)		Cognition F		Cognition		Cognition		Cognition		Psychomotor		motor Attitude		мот/міт	MOA
				Knowledge	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2							
1.	MONDAY	EMERGENCY MEDICINE	 Introduction to ER services regarding triage system. History taking and examination. Monitoring of vitals 	 Should be able to describe the components of triaging system in ER and its importance in differentiating stable vs sick patients. Should be able to describe the importance and components of vitals. 	 Should observe how the HCW does triaging. Students should be able to; take a quick history and perform relevant clinical examination under guidance of HCW. Student should be able to check the vitals including pulse, blood pressure, temperature, and respiratory rate with proper method. 	Students will be able to Take Consent for History, Clinical Examination and Procedures								SGD / BED SIDE SESSIONS	OSPE/MCQs					
2.	TUESDAY	EMERGENCY MEDICINE	 Introduction to medicolegal cases and maintenance of record. Observation of IV cannulas and IM injections 	 Students should be able to describe the importance of record keeping and documentation. Should be able to describe indications and complications of IV and IM injections. 	 Students will be able to observe and assist HCW about record keeping and the importance of documentation. Student should observe and assist HCW in IV and IM canulation. 	Students will be able to 1. Take consent for history and examination 2. Take consent for IM and IV injections and explain procedure to the patient.								SGD / BED SIDE SESSIONS	OSPE/MCQs					

Sr	Day	Specialty	Торіс	c SPECIFIC LEARNING OJECTIVES (SLO)			Cognition Psychomoto		omotor Attitude		MOT/MIT	MOA			
#				Knowledge	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
3.	WEDNESDAY	EMERGENCY MEDICINE	1. Setting of IV drips 2. Nebulization	 Should be able to describe the indications of types of IV drips and rate of setting. Should be able to describe different types of drugs being used as nebulizer medications and their indications 	Students will be able to: 1. Observe HCW regarding setting of IV drips 2. Observe how to set up a nebulizer	Students will be able to: 1. Counsel the patient regarding use of IV drips in a particular setting and its benefits and side effects. 2. Counsel the patient for nebulization.								SGD / BED SIDE SESSIONS	OSPE/MCQ
					FIRST WEEK										
4.	THURSDAY	EMERGENCY MEDICINE	 Insertion of foley's catheter Insertion of Nasogastric tube 	 Should be able to describe the indications and contraindications of Foley Catheter, types, uses. Should be able to describe the indications and contraindications of Nasogastric tubes, types, uses. 	Student will be able to; 1. Observe and assist HCW in inserting a foley catheter. 2. Observe and assist HCW in inserting a Nasogastric tube	Students will be able to: 1. Counsel the patient regarding foley catheter insertion and guide about its pros and cons. 2. Counsel the patient regarding NG tube insertion and guide about its pros and cons.								SGD / BED SIDE SESSIONS	OSPE/MCQ

Sr	Day	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)		Cognition		Psych	omotor	Attit	ude	мот/міт	MOA	
#				Knowledge	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2		
5.	MONDAY	EMERGENCY MEDICINE	Approach to a patient with febrile illness	Should be able to describe causes of febrile illness and the importance of different steps of history taking and clinical examination in a febrile patient	SECOND WEEK Student will be able to Take History of a febrile patient and do clinical examination	Students will be able to: Counsel the patient regarding possible causes of fever and do relevant examination after informed consent.								SGD / BED SIDE SESSIONS	OSPE/MCQ
6.	TUESDAY	EMERGENCY MEDICINE	Approach to a patient with stroke	Should be able to describe types of stroke and possible risk factors	Students will be able to: Take History of a patient with stroke and do clinical examination	Students will be able to: Counsel the patient regarding stroke and its possible types and causes under guidance of HCW.								SGD / BED SIDE SESSIONS	OSPE/MCQ

Sr #	Day	Specialty	Торіс		SPECIFIC LEARNING OJECTIVES (SLO)		Cognition		Cognition		Cognition		Psychomotor		omotor Attitude		titude	MOT/MIT	MOA
				Knowledge	Skill	Attitude	C1	C2	C3	P1	P2	A1	A2						
7.	WEDNESDAY	EMERGENCY MEDICINE	Approach to a patient with chest pain	Should be able to describe causes of chest pain and different presentations of a patient with cardiac chest pain.	Student will be able to: Should be able to take History of a patient with chest pain under HCW guidance and do quick relevant examination	Students will be able to: Counsel the patient regarding chest pain and possible cause under guidance of HCW								SGD / BED SIDE SESSIONS	MCQ/SEQ				
8.	THURSDAY Clinical teaching/ WARD TEST	EMERGENCY MEDICINE	Approach to a patient with Upper GI bleed	1. Should be able to describe causes of upper GI bleed 2. Should be able to identify whether patient is in hypovolemic shock or not.	Student will be able to: 1. Take History of a patient with upper GI bleed and do clinical examination under HCW guidance. 2. Should take vitals esp. pulse, blood pressure, should look for postural drop and urine output as a marker of hypovolemic shock.	Students will be able to: Counsel the patient regarding cause of upper GI bleed under guidance of HCW								SGD / BED SIDE SESSIONS	MCQ/SEQ				

Learning Objectives Clinical Rotation of 3rd Year Pathology

At the end of session 3rd Year MBBS student will be able to

Microbiology: 04 Days

TOPIC KNOWLEDGE		SKILL	ATTITUDES	MOA	
Day 1					
Introductory round of	Students will know about different sectarians of				
laboratory & Bench's	lab. (Smear formation staining, microscopy.)				
Autoclave	Parts, Principle, & Quality. Control of Autoclave	How to operate autoclave.		EOSA/OSPE/	
	(Q/C)			Ward Test	
	Material to be sterilized in autoclave.				
Specimen collection	How to collect the specimen.	Labeling Techniques		EOSA/OSPE/	
	Timings of collection			Ward Test	
	Previous clinical notes/related to patient				
	history				
	Transportation & Handling of specimen				
Day 2					
Culture Media	Knowledge about Basic/specific culture	Media Preparation		EOSA/OSPE/	
	media.	Methods of storage		Ward Test	
	Uses & Specification	Inoculation Techniques			
Antibiotic Sensitivity	Knowledge about different groups of	Antibiotic sensitivity testing methods.		EOSA/OSPE/	
Testing	antibiotic for different organisms.	Measurement of Zone of sensitivity.		Ward Test	
Orientation of Serology	 Principle& uses of ELISA, PCR & 	Performance of all tests		EOSA/OSPE/	
	Aggintinations			Ward Test	
Day 3				1	
Microbiology	Performance of interpretation of Gram	Steps of gram staining & ZN staining & its		EOSA/OSPE/	
	Staining & ZN staining	Principles.		Ward Test	
		Perform Gram ,ZN staining , catalase, coagulase,			
		How to interpret the test			
		 Principles of catalase coagulase & Ovidase test 			
		Uses of different biochemical tests			
Day 4					
Urine & STOOL	Irine & stool Examination	• How to collect the Specimen (Lirine & stool) & CSE &	Preparation of slide	FOSA/OSPE/	
Examination		Body fluid		Ward Test	
		Pre requisites of specimen collection			
		Physical /Chemical & microscopic examination	Microscopy of urine &		
		 Identification of positive findings. 	stool slides.		
CSF Examination	CSF Examination	How to collect CSF (K)	Preparation of slide	EOSA/OSPE/	
		Pre requisites of Specimen Collection & Microscopic	Microscopy of slide	Ward Test	
		Examination	Staining techniques		
			Physical and chemical		
			examination.		

Hematology: 03 Days

TOPIC	KNOWLEDGE	SKILL	ATTITUDES	MOA	
Day 5					
 Sampling technique & phlebotomy Describe the procedure of phlebotomy Explain pre-requisites for phlebotomy Appropriate /inappropriate sample How to discard inappropriate sample timeline foe the transfer and storage of sample 		Perform phlebotomy as per SOP	Counsel patient before phlebotomy	EOSA/OSPE/ Ward Test	
2. Blood C/P ESR	 2. Blood C/P ESR Explain different anticoagulant used in hematology with their uses Minimum time required for each step Interpret end result Different methods of performing blood C/P and ESR Timeline for storage of blood C/P and ESR sample 		Counsel patient	EOSA/OSPE/ Ward Test	
 Preparation of blood smears' & reties 	 Explanation the step of blood smears preparation Quality of a good smears Different stains used for peripheral smears and retics with principle Timeline for storage of samples 	Prepare good quality blood smear		EOSA/OSPE/ Ward Test	
4. Quality control	 Explain role of quality control in laboratory Important of internal and external Q C 	Assess daily quality control of different analyzes.		EOSA/OSPE/ Ward Test	
Day 6			1		
 Coagulation studies 	 Enumerate different coagulation tests Explain principles of different coagulation studies Discuss role of different coagulation test timeline for the transfer and storage of samples 	 Perform coagulation studies Interpret the result of coagulation studies 	Counsel patient / attendant in case of diagnosis of diseases e.g. Bleeding disorder	EOSA/OSPE/ Ward Test	
2. Bone marrow studies	 enumerate uses of bone marrow aspirate and trephine biopsy explain the procedure of bone marrow biopsy explain role of bone marrow in hematological disorder 	 Identify different bone marrow aspirate and trephine needles Interpret the result of bone marrow studies 	Counsel the patient before bone marrow biopsy	EOSA/OSPE/ Ward Test	
3. Hb studies & coombs test	 explain principle of hemoglobin electrophoresis & Coombs test describe uses of hemoglobin studies and Coombs test describe procedure of Hb electrophoresis & coombs test 			EOSA/OSPE/ Ward Test	
Day 7	1				
Blood grouping and cross matching	 explain the procedure the blood grouping describe different blood groups e.g. ABO& Rh timeline for the storage of samples 	 perform forward blood grouping interpret result of blood grouping and cross matching 		EOSA/OSPE/ Ward Test	

S. No.	o. Day Radiology					
1	Monday	Chest x ray anatomy				
2 Tuesday		Chest x ray pathology				
3	Wednesday Bones & joints with fractures					
4 Thursday		Plain x ray abdomen & KUB				
5 Monday		Fluoroscopic procedures & Ba studies.				
6	Tuesday	CT scan brain: basics				
7 Wednesday		Basics of ultrasound and observation				
8	Thursday	Ward assessment(film based)				

Clerkship Model of Radiology

Dr Nasir Khan Chairperson of Radiology Department RMU & Allied Hospitals

Clinical Teaching Program for Third Year Psychiatry Ward Duration: 2 Weeks

	Day	8:30-9:00	9:00-10:30	2:00-5:00 pm (Evening rotation)	Facilitator
Day 1	Monday	Introduction of the Institute Introduction to the clinical attachment Distribution of the history books	History Taking Allotment of Cases and Groups	Clinical work History taking of Allotted cases	Dr. Mohammad Kashif
Day 2	Tuesday	History taking Mental State Examination	Demonstration of History taking and MSE	Clinical work	Dr. Mohammad Kashif
Day 3	Wednesday	Presentation of cases histories of depression by medical students	Interview with the patient Theoretical aspect of depression	Clinical work	Dr. Mohammad Kashif
Day 4	Thursday	Presentation of cases histories of dissociative disorder by medical students	Interview with the patient Theoretical aspect of Dissociation	Clinical work	Dr. Mohammad Kashif
Day5	Monday	Presentation of cases histories of Schizophrenia by medical students	Interview with the patient Theoretical aspect of	Clinical work	Dr. Mohammad Kashif
Day 6	Tuesday	Presentation of cases histories of Su Interview with the patient Theoretical aspect of Substance use	bstance use	Clinical work	Dr. Mohammad Kashif
Day7	Wednesday	Presentation of cases histories of Delirium/dementia/ organicity by medical students & Theoretical aspects		Clinical work	Dr. Mohammad Kashif
Day8	Thursday	Ward Test: OSCE(conducted by	Evaluation (OCSE + case histories + attendance & Signatures on logbook) & Feedback		Ward Test