

**Fourth Year MBBS 2025**

**Community Medicine**

**Study Guide**

**Renal Module II Block XII**

**Community medicine Large Group Interactive Session (LGIS)**

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| TOPIC | Contents Outlines (Major Topics & Sub- Topics) | Learning objectives  After The Session Students Will Be Able To: | Learning domain | Teaching strategy | Assessment tool |
| Entomology I  Introduction & Classification of Arthropods of Public Health Importance | Medical Entomology; Transmission of arthropod borne diseases | * Define Medical entomology. Define vector along with examples. Enlist and classify arthropods of medical importance. * Identify, differentiate and explain features of various classes of arthropods. * Explain with examples modes of transmission of arthropods borne diseases. * Draw and explain life cycle of plasmodium along with various mosquito control measures * Describe importance of entomology from public health aspect. | C1  C1  C2  C2 | LGIS | MCQ,  SEQ |
| Entomology II  Transmission of Arthropod Infections Diseases transmitted by Arthropods integrated vector management | Medical Entomology. Principles Of Arthropods Control | * Enlist diseases caused by house fly. Describe life cycle of house fly and its habitat along with various methods to control fly. * Identify and describe sand-fly, Tsetse fly, and black fly along with diseases caused by them. * Describe integrated approach towards control of class insect. | C1  C2  C2 | LGIS | MCQ,  SEQ |
| Vector Born Diseases-I  Epidemiology of Viral Hemorrhagic fever & Malaria | Vector borne diseases; Epidemiological determinants | * Define a vector and enlist various vector borne diseases. * Explain modes of transmission and propagation of parasites. * Define host and its types with examples. * Enlist and explain mosquito borne diseases * Explain life cycle of malarial parasites and integrated approach towards control of malaria. * Name various causes of viral hemorrhagic fever along with their clinical features.   Enlist causes of relapsing fever and various methods towards control of vector borne diseases. | C1&C2  C1&C2  C1, C2&C3  C1, C2 | LGIS | MCQ,  SEQ |
| Vector Born Disease-II  Prevention of Leishmaniasis & Scabies & Modes of Transmission of Filariasis | Vector borne diseases; Prevention & control | * Define and explain filariasis and life cycle of filarial parasites, Describe modes of transmission of filariasis and assessment of various mosquito control programs. * Explain Leishmaniasis, life cycle of sand-fly and integrated measures towards fly control.   Explain scabies, its mode of spread along with curative and preventive measures. | C1  C1  C2 | LGIS | MCQ,  SEQ |
| Snake Bite | Epidemiology  Prevention of snake bite | * Describe importance of snake bite, the epidemiology of snake bite * Differentiate between clinical manifestations of different types of snakes, Enumerate ways of prevention from snakebite   Management of snakebite, Enlist people more at risk | C1  C1 | LGIS  LGIS | MCQ,  SEQ |
| Disaster Management | Types of disaster  Disaster management  triage | * Define disaster * Differentiate between natural and man made disaster * Classify different types of disaster * Assess the magnitude of disaster * Describe all the disaster management steps   Understand triage and its importance in disaster management | C1&C2  C1&C2 | LGIS | MCQ, SEQ |
| Zoonotic diseases I | Introduction  Viral Zoonotic Disease  Rabies | * Explain introduction of zoonosis, Discuss rabies disease, its origin and pathophysiology. * Identify the preventive aspects of rabies.   Enlist vaccination schedule discussion in detail. | C1  C2  C3  C1  C1  C2 | LGIS | MCQ, SEQ  MCQ, SEQ |
| Viral & Bacterial Zoonotic Disease II | Chikungunya, Japanese encephalitis, bacterial zoonotic anthrax | * Understand chikungunya, its pathophysiology. * Discuss the preventive and health education aspects relevant to it. * Explain Japanese encephalitis, clinical features and pathophysiology * Strategize its prevention. * Explain Anthrax and classify its types * Identify clinical features , diagnose the disease * Categorize the prevention under different levels of prevention | C1  C2  C3  C1  C1  C2 | LGIS | MCQ, SEQ  MCQ, SEQ |
| Zoonotic Disease III | Plague  Brucellosis | * Define plague, its history and epidemiology * Demonstrate epidemiological triad of plague, types of plague with its prevention and treatment * Define brucellosis * Demonstrate epidemiological triad * Concept of control in humans, prevention and treatment | C1  C2  C3  C1  C1  C2 | LGIS | MCQ, SEQ  MCQ, SEQ |
| Zoonotic Disease IV | Tetanus, Human Salmonellosis | * Identify The causative agent, pathophysiology of tetanus, Enlist types of tetanus. * Understand Vaccination schedule of tetanus.   Explain Preventive approach to be adopted in tetanus.   * Define human salmonellosis’, its epidemiology * Demonstrate its epidemiological triad, with its types   Prevention and treatment of salmonellosis | C1  C2  C2  C1  C2  C2 | LGIS | MCQ, SEQ  MCQ, SEQ |

**Learning objectives of Bioethics LGIS**

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| MAJOR TOPIC | SUB TOPICS | LOS at the end of session students will be able to | COGNITIVE DOMAINS | MODE OF ASSESMENT |
| Functions of ethical review board | Discussion will cover;  • Ethics Review Committee (ERC) why is it needed, historical importance, composition and working (process of review)  • Review of mock research proposals | * Conceptualize the need of ERC * Elaborate the composition and function of ERC * Review the mock research proposals from ethical perspective | C1  C2 | MCQS |

**SELF DIRECTED LEARNING COMMUNITY MEDICINE**

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| S. No. | Topic | Learning Objectives  At the end of session student will be able to: | Reference | Assessment |
|  | Antimicrobial resistance, | * Define Antimicrobial resistance. * Causes of antimicrobial resistance * Describe major examples of antimicrobial resistance and possible preventive measures. | K Park Ed. 27th (378-81) | 2-3MCQ  LMS |
|  | Hospital acquired infections | * Define HAIs. infections and its types. * Surveillance, Sources, & rout of speared of HAI. * Explain standard precautions and other measures to prevent HAIs | K Park Ed. 27th (359-61) | 2-3MCQ  LMS |
|  | Rickettsial zoonosis | * Classify Rickettsial Diseases * Discuss epidemiological features and control of Rickettsial Diseases | K Park Ed. 27th | 2-3MCQ  LMS |
|  | Emerging and Re-emerging health problems /Neglected tropical diseases | * Define emerging and re-emerging diseases * Identify different factors in causation of emerging/re emerging diseases * List diseases included, and ways to control | K Park Ed. 27th | 2-3MCQ  LMS |
|  | Genetics | * Recognize genetics * Identify positive and negative eugenics * Define euthenics * Understand genetic counselling | K Park Ed. 27th  page 858,863,865 | 2-3MCQ  LMS |

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| **Category A\*** | **Category B\*\*** | **Category C\*\*\*** | |
| **LGIS** | LGIS | SDGS | SDL |
| Entomology  Introduction & Classification of Arthropods of Public Health Importance | Viral Zoonotic Disease  Bacterial Zoonotic Disease | Parasitic Disease  Introduction and Classification of Parasites Helminthology I,II | Antimicrobial resistance – a major public health problem.  Hospital acquired infections / Nosocomial infections |
| Vector Born Diseases-I  Epidemiology of Viral Hemorrhagic fever & Malaria, Vector Born Disease-II  Bioethics | Rickettsial Zoonotic Disease  Parasitic Zoonotic Diseases |  |
| Disaster management, snake bite |  |  | Genetics |

**Categorization of Modular Content of Community Medicine**

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| **Sr. #** | **Designation Of Teaching Staff / Human Resource** | **Total Number Of Teaching Staff** |
| 1**.** | Professor of community medicine | 01 |
| **2.** | Associate Professor of community medicine | **02** |
| 3. | Assistant Professor of community medicine | 04 |
| 4. | Demonstrators of community medicine | 05 |
| **5.** | PGTs | 06 |

**Teaching Staff / Human Resource of Department of Community Medicine**

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| **Sr. #** | **Hours Calculation for Various Type of Teaching Strategies** | **Total Hours** |
| 1. | Large Group Interactive Session (LGIS) | 10 |
| 2. | Small Group Discussions (SGD) | 2 |
|  | Case Based Learning (CBL) | - |
| 4. | Practical / Skill Lab | - |
| 5. | Self-Directed Learning (SDL) | 3 |

**Type of Assessment ------Community Medicine**

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| **S.**  **No** | **Mode of Assessment** | **Type of Assessment** | **Schedule of Assessment** | **Venue** | **Frequency** |
| 1. | End of wk. MCQ based Test | summative | Weekly | LMS | 01 x no. of weeks |
| 2. | Theory (MCQ+SEQ+ SAQs + EMQ) | Summative | End of module | On campus | 01 |
| 3. | End of module MCQs test | formative | End of module | LMS | 01 |
| 4. | End of clerkship Exam MCQs, OSCE | summative | end of clerkship batch | On campus | 01 x 2 wks |

**Table of Specification for end of block Assessment (TOS)**

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| **Block Name& Order** | **Modules Names & Numbers** | **Subject** | **Theory** | | | **Scheme of Integration** | | | | | | **Total marks Theory** | **Practical Assessment** | | | | | | | | **Total Block marks** | **End of block LMS MCQs** |
| 25  **MCQs**  (1  mark each) | **5+1**  **SAQ**  **+EMQ**  (5  marks each) | **5 SEQs**  **(9marks each)** | **Core Subject. 70%** | | **Hori- & Verti- Integ. 20%** | | **\*Spiral Integ. 10%** | | **OSVE** | | | | **OSPE (05 marks each)** | | | **Total marks Practical** |
| **Module I** | | **Module 2** | | **Observed** | **Unobserved** | **Video assisted** |
|  |  | Community medicine | 25 | 25+5 | 45 | 19 | 46 | 4 | 12 | 2 | 7 | 100 | - | | | | | | | | | |
| Pharmacology | 25 | 25+5 | 45 | 19a | 46 | 4 | 12 | 2 | 7 | 100 |  | | | | | | | | | |
| Pathology | 25 | 25+5 | 45 | 19 | 46 | 4 | 12 | 2 | 7 | 100 |  | | | | | | | | | |
|  | Community medicine | 25 | 25+5 | 45 | 19 | 46 | 4 | 12 | 2 | 7 | 100 | Viva marks | Book marks | Viva marks | Book marks | 10  stations | 10  stations | 20 stations |  | 400 | 30 |
| 45 | 5 | 45 | 5 | 50 | 50 | 100 | 300 |
| Pharmacology | 25 | 25+5 | 45 | 19 | 46 | 4 | 12 | 2 | 7 | 100 | 45 | 5 | 45 | 5 | 50 | 50a | 100 | 300 | 400 | 30 |
| Pathology | 25 | 25+5 | 45 | 19 | 46 | 4 | 12 | 2 | 7 | 100 | 45 | 5 | 45 | 5 | 50 | 50 | 100 | 300 | 400 | 30 |