Medicine & Allied Subjects

Departmental Objectives

At the end of clinical postings in Medicine, the under graduate medical students will be able to:

- acquire appropriate knowledge, attitude and skill to become an effective doctor for the society
- elicit an appropriate clinical history, and physical findings, identify the clinical problems based on these and identify the means of solving the problems
- Plan relevant investigations considering socioeconomic perspective
- outline the principles of management of various diseases considering the patient's socioeconomic circumstances
- diagnose and manage medical and pediatric emergencies
- diagnose and manage common psychiatric disorders
- recognize& provide competent initial care and refer complicated cases to secondary and tertiary care centers at appropriate time
- perform common clinical procedures
- possess knowledge to consider the ethical and social implications of his/ her decision
- demonstrate the art of medicine involving communication, empathy and reassurance with patients
- develop an interest in care for all patients and evaluate each patient as a person in society
- have an open attitude to the newer developments in medicine to keep abreast of new knowledge
- learn how to adapt new ideas in situations where necessary
- learn to keep the clinical records for future references
- make them oriented to carry out clinical research in future

List of competencies to acquire

At the end of the course of Medicine the undergraduate medical students will be able to:

- 1. Gather a history and perform a physical examination
- 2. Prioritize a differential diagnosis following a clinical encounter
- 3. Recommend and interpret common diagnosis and screening tests
- 4. Enter and discuss orders and prescriptions
- 5. Document a clinical encounter in patient record
- 6. Provide an oral presentation of clinical encounter
- 7. Form clinical questions and retrieve evidence to advance patient care
- 8. Give or receive a patient handover to transition care responsibility
- 9. Collaborate as a member of an inter-professional team
- 10. Recognize a patient requiring urgent or emergent care and initiative evaluation and management
- 11. Obtain informed consent for test and/or procedures
- 12. Perform general procedures of a physician
- 13. Understand preventive perspective of disease
- 14. Identify system failures and contribute to a culture of safety and improvement

Distribution of teaching - learning hours

	L	ecture	(in hou	rs)	Small group teaching (in hours)	Departmental integrated teaching of	Phase IV common integrated		nical/Beds teaching (in weeks)		S	ng (ination		nination	
Subject 2 nd Phase		3rd Phase	4 th Phase	Total	PBL, Practical demonstration, Instrumental demonstration, Skill lab, Tutorial & etc.	Medicine & Allied Subjects (in hours)	teaching (in hours)	2 nd Phase	3 rd Phase	4 th Phase	Total weeks	Block posting (in weeks)	Formative examination	(in days)	Summative examination	(in days)
Internal	22	25	90	137	199 hours	(10 topics $\times 2$	(42 topics	14	06+	12	34					
medicine						hours) $= 20$	\times 3 hours) =		2							
						hours	126 hours		(OPD)							
Psychiatry	02	-	18	20				-	02	03	05					
Dermatology	-	-	17	17				-	02	03	05		s		s	
Pediatrics	04	20	22	46				04	-	06	10		day		day	
Transfusion medicine	-	03	-	03				01	-	-	01	04 wks	/e-10	ays	/e-10	ays
Physical Medicine	-	-	04	04				02	-	-	02		ry leav	e-15d	ry leav	e-30d
Nuclear Medicine	-	-	02	02				-	-	-	-		Preparatory leave-10 days	Exam time-15days	Preparatory leave-10 days	Exam time-30days
Emergency	-	-	-	-				-	02	-	02		\Pr	Ex	Pr_{6}	Ex
Total	28	48	153	229	199	20	126 hours	20	14	24	59	04 wks	25 da	ays	40 da	ays
Grand Total		1	1	1	448 hours	1	126 hours		(63 we	eks			65	days	-
Tin	ie for in	tegrated	d teachin	g, exami	nation preparatory lea	ve and formative	& summative as	sessm	ent is con	imon	for all	subjects of	the pl	hase	•	
					ven due importance in te										he wor	ld.
		Relate	ed behav	vioral, p	rofessional & ethical iss	sues will be discus	sed in all clinica	al and	other tead	ching	learnin	g sessions				

Medicine & Allied Subjects: hour distribution for <u>Clinical/Bedside</u> teaching in 2nd, 3rd & 4th phases in details

		Clinical/B	edside & Ambulat	ory care teaching	(in hours)				
Subject	2 nd P	hase	3 rd Phase Indoor clinical/ bedside teaching & Ambulatory care teaching		4 th Phase Indoor clinical/ bedside teaching & Ambulatory care teaching				
	Indoor clinical/ b & Ambulatory c	:					rs ases)	Total weeks {(2 nd phase wks	
	Morning	Evening	Morning	Evening	Morning	Evening	Total hours (in three phases)	+ 3 rd phase wks + 4 th phase wks	
	Indoor/ OPD/ Emergency/ Out reached center Emergency		Indoor/ OPD/ Emergency/ Out reached center		Indoor/ OPD/ Emergency/ Out reached center Emergency		Tc (in tl	 Total three phases wks) × (6 days × 4 or 2 hours)} 	
	20 w	eeks	14 weeks		22 weeks				
Internal medicine	168 h (14w)	168 h (14w)	96 h (8w)	96 h (8w)	144 h (12w)	144 h (12w)	816 h	$\{14+(6+2)+12\}=$ 34 w × (6 days × 4 hrs)	
Psychiatry	-	-	24 h (2w)	24 h (2w)	24 h (2w)	24 h (2w)	96 h	$(0+2+2)=04 \mathbf{w} \times (6 \text{ days} \times 4 \text{ hrs})$	
Dermatology	-	-	24 h (2w)	24 h (2w)	24 h (2w)	24 h (2w)	96 h	$(0+2+2)=04 \mathbf{w} \times (6 \text{ days} \times 4 \text{ hrs})$	
Pediatrics	48 h (4w)	48 h (4w)	-	-	72 h (6w)	72 h (6w)	240 h	$(4+0+6)=10 \mathbf{w} \times (6 \text{ days} \times 4 \text{ hrs})$	
Physical Medicine	24 h (2w)	-	-	-	-	-	24 h	$(2+0+0)=02 \mathbf{w} \times (6 \text{days} \times 2 \text{hrs})$	
Emergency	-	-	24 h (2w)	24 h (2w)	-	-	48 h	$(0+2+0)=02 \mathbf{w} \times (6 \text{days} \times 4 \text{hrs})$	
Total	240 hrs	216 hrs	168 hrs	168 hrs	264 hrs	264 hrs	1320 hrs	56 weeks	

	Teaching Met	Teaching aids	In course		
Large group	Small group	Self learning	Others	-	evaluation
Lecture Integrated Teaching	Bed side clinical teaching in ward, emergency room, OPD, Clinical teaching in CCU/ ICU. Clinical case presentation. Demonstration of Xray, CTscan ,MRI ,ECG ,Instruments, Photos, Data etc. Practice in medical skill centre Practical Demonstration Writing case problem Practical Skills (Video)	Self-directed learning, assignment, self test/assessment	Integrated teaching, With other dept.	Laptop, Computer, OHP/ Multimedia presentation, Slide Projectors, Video, Slide, Dummy (Manikins), Model, Real patients, attendants, Simulation, Charts e.g. growth chart, IMCI Chart, Others e.g. ECG machine, X-ray, photographs, Black board, White board, Flow chart, X-rays, ECG Reports, Samples, Audio, Instrument, Photographs Reading materials • Modules &national guidelines on different childhood /adult illnesses • Study guide • Books, journals	Item Examination Card final (written), Term Examination Term final (written, OSPE, oral+ practical+ clinical)

Teaching-learning methods, teaching aids and evaluation

Related Equipments:

Stethoscope, BP Machine, Hammer, Fluid bags, Blood bags, I.V sets & cannula, Transfusion sets, Feeding tubes (Ryles tube, Catheter, airway, X-rays, ECG, Appliances, Water seal drainage bottle ESR tube. LP needle, BM needle, Tongue depressor etc. face mask, nonrebreather (NRB) mask, nasal cannula, pulse oxymeter, DOTs medicine strip (for TB, leprosy), glassslide, wood's lamp, ORS packet, micro burette, manikin, Thermometer, ORS packet, MUAC tap (padeatric and adult)

Final Professional Examination:

Marks distribution:

Total marks - 500 (Summative)

- Written = 200
 - \circ MCQ: MTF-20+SBA-20,
 - SAQ -105+SEQ-35(SAQ-75%, SEQ-25%)
 - \circ Formative assessment -20
- Oral and Clinical= 250
 - Oral -150
 - o Clinical=100
- OSPE = 50

Learning Objectives	Contents	Teaching Hours
 Learning Objectives Students will be able to: value Doctor-Patients relationship define, differentiate, diagnose diseases demonstrate clinical skills required for history taking, physical care and laboratory tests, care for diagnosing a disease stepwise and participate in the management plan of a patient under doctor supervision differentiate clinically (History & Physical examination) one DD from other. participate in patient education and counseling 	Introduction to Medicine (to be covered in 3 rd year classes) Overview of Medicine as a discipline and subject Learning Clinical Approach 1. Doctor- Patient Relationship, Medical Ethics, Patient's safety. 2. Communication Skills 3. Behavioural Science Approach to common symptoms of disease: • General concept of Pain, chest pain and abdominal pain • Fever • Dyspnoea • Cough, expectoration, and Haemoptysis • Anorexia, Nausea, Vomiting, Weight loss and Weight gain • Haematemesis, Melaena, Haematochezia • Diarrhea, Dysentery and Constipation • Edema and Ascites • Jaundice • Syncope and Seizures • Fainting and Palpitations • Headache and Vertigo	0
	Headache and Vertigo	
	 Common unitary symptoms increating unutat, organa, nocturia, polyuria, incontinence and enuresis Anaemia and Bleeding Enlargement of Lymphnodes, Liver and Spleen Joint pain, neck pain and back ache 	

Learning Objectives and Course Contents in Medicine

Learning Objectives	Contents	Teaching Hours
 The students will be able to : define nutrition and its importance describe normal requirement of nutrients for maintaining health at various periods of human life including healthy adult, pregnancy, infancy, childhood and adolescence classify nutritional disorders define protein energy malnutrition and explain its associated factors, precipitating factors list the clinical features, describe treatment of protein-energy malnutrition list and recognize the clinical features, provide treatment and advise for prevention and treatment of vitamin deficiency diseases list and recognize the clinical features, provide treatment and advise to be given for prevention and treatment of deficiency diseases list and recognize the clinical features, provide treatment and advise to be given for prevention of obesity apply basic principles of nutrition in clinical medicine 	 3rd phase (4th year) –Lecture-25 hrs Clinical Medicine: Nutritional Factors in diseases CORE : Energy yielding nutrients Protein energy malnutrition in adult The vitamins- deficiency Additional Nutrition of patients in hospital Obesity Lectures to be covered on Nutrients and vitamin deficiency 2.Obesity 	L - 2hrs.
 The students will be able to : list the clinical features, describe principles treatment and advise for prevention of heat hyperpyrexia, heat syncope and heat exhaustion and hypothermia list the clinical features, describe principles of treatment and advise for prevention of pollution related to : Arsenic problem Lead poisoning Environmental radiation 	 Climatic and environmental factors in disease CORE : Disorders related to temperature Disorders related to pollution Drowning, electrocution and radiation hazards Health hazards due to climate change 	L –2 hr.

Learning Objectives	Contents	Teaching Hours
Learning Objectives The students will be able to: diagnose infectious diseases. explain principles of management of infection describe general principles and rational use of antibiotics and other chemotherapy against infectious and parasitic diseases list the clinical features, describe principles of treatment and advise for prevention of common infectious and tropical diseases.	Contents Diseases due to infections CORE : • Approach to infectious diseases-diagnostic and therapeutic principles • General principles and rational use of antibiotics • Enteric fever • Acute Diarrhoeal Disorders • Cholera & food poisoning • Acute Diarrhoeal Disorders • Cholera & food poisoning • Amoebiasis, Giardiasis • Tetanus • Influenza and infectious mononucleosis • Malaria • Kala-azar • Filariasis • Helminthic diseases • Cestodes • Trematodes • Cestodes • Trematodes • HIV and infections in the immunocompromised conditions • Rabies • Herpes simplex & herpes zoster • Chickenpox • Viral haemorrhagic fever: dengue • Anthrax • Brucellosis • Covid -19,Influenza,MARS,SARS	Teaching Hours L-14 hrs.

Learning Objectives	Contents	Teaching Hours
The student will be able to define, describe prevalence, aetiologic factors, pathophysiology, pathology, investigations and principles of treatment of the common problems in haematology.	Diseases of the blood CORE: • Anemia • Leukaemia • Lymphoma • Multiple myeloma • Bleeding disorders • Coagulation disorders • Transfusion medicine Additional: • Bone marrow transplantation	L - 7hrs.
 The students will be able to: describe applied anatomy and physiology & explain lung function tests; describe prevalence, aetiologic factors, pathophysiology, pathology, investigations and principles of treatment of common respiratory diseases. 	 4th phase(5th year)- Lecture 90 hrs Diseases of the respiratory system CORE: Applied anatomy and physiology Investigations for respiratory diseases Upper respiratory tract infections Pneumonias Tuberculosis: 1(Pulmonary) Tuberculosis:2 (Extra-pulmonary) Lung abscess and bronchiectasis Diseases of the pleura: Pleurisy, Pleural effusion & empyema, Pneumothorax Chronic Obstructive lung diseases and corpulmonale Bronchial asthma & pulmonary eosinophilia Acute and chronic respiratory failure Neoplasm of the lung 	L - 10hrs.

Learning Objectives	Contents	Teaching Hours
The student will be able to :	Diseases of the cardiovascular system	
• describe applied anatomy, applied physiology and	CORE :	L - 10 hrs
investigations for the diseases of cardiovascular system	Applied anatomy and physiology and investigations	
• describe etiology, pathophysiology, clinical features,	Ischemic heart disease	
investigations and treatment of Ischemic heart disease	Angina pectoris	
• describe etiology, pathophysiology, clinical features,	Myocardial infarction	
investigations and treatment of acute rheumatic fever &	Sudden (cardiac) death	
rheumatic heart diseases	Rheumatic fever	
• describe etiology, pathophysiology, clinical features,	Valvular diseases of heart	
investigations and treatment of valvular diseases	Mitral stenosis & regurgitation	
• describe etiology, pathophysiology, clinical features,	Aortic stenosis & regurgitation	
investigations, treatment and complications of infective	Tricuspid & pulmonary valve diseases	
endocarditis	Infective endocarditis	
• describe etiology, pathophysiology, clinical features,	• Hypertension	
investigations, treatment and complications of systemic	Cardiac arrhythmias (common)	
hypertension	Sinus rhythms	
 define and describe cardiac arrhythmias 	Atrial tachyarrhythmias	
	 Ventricular tachyarrhythymias 	
	 Cardiac arrest 	
	 Anti arrhythmic drugs 	
	• Heart block and pacemakers.	
	• Heart failure – acute and chronic	
	• Acute and chronic pericarditis, pericardial effusion, & cardiac	
	tamponade	
	Additional :	
	Peripheral arterial diseases	
	Common congenital heart diseases in child and adult	
	Venous Thrombosis and Pulmonary Thromboembolism	

Learning Objectives	Contents	Teaching Hours
 describe congenital heart diseases define, describe patho-physiology, types, clinical features, investigation and treatment of heart failure define, describe patho-physiology, causes, clinical features, and treatment of acute circulatory failure describe etiology, pathophysiology, clinical features, investigations, treatment and complications of diseases of the pericardium 	Congenital heart diseases ASD VSD PDA TOF Coarctation of Aorta Acute circulatory failure Diseases of pericardium Acute pericarditis Pericardial effusion Cardiac tamponade Cardiomyopathies	
 The student will be able to define, describe the etiology, pathophysiology, investigation, complications and management. of peptic ulcer disease define, describe the etiology, pathophysiology, investigation and management. of gastrointestinal haemorrhage describe Investigations of the alimentary tract. define, describe the causes, pathophysiology, investigation and management. of gastro-oesophageal reflux disease define, describe the etiology, pathophysiology, investigation and management of dysphagia. define & describe the etiology pathophysiology, investigation and management of malabsorption disorders define & describe the etiology, pathophysiology, investigation and management of Inflammatory bowel disease - Crohn's disease, Ulcerative colitis. 	 Diseases of the Gastro-intestinal and Hepato- billiary systems CORE : Applied physiology and investigation of the alimentary tract. Stomatitis and Mouth Ulcers Peptic Ulcer disease and non-ulcer dyspepsia Malabsorbption syndrome Irritable bowel syndrome Inflammatory bowel disease Acute viral hepatitis Chronic Liver Diseases and its complications Acute and chronic Pancreatitis 	L – 10 hrs.
 define & describe the etiology, pathophysiology, investigation and management of acute pancreatitis define & describe the etiology, pathophysiology, investigation and management of functional disorders of GIT define & describe the etiology, pathophysiology, investigation, complications and management of acute and chronic liver disease 	 Dysphagia Hepatotoxicity of drugs Carcinoma of stomach/colon,Hepatocellular carcinoma 	

Learning Objectives	Contents	Teaching Hours
 The students will be able to define, diagnose, investigate and treat different nephrological diseases make differential diagnosis mention basic/ initial treatment name the conditions for referral & follow-up care describe preventive measures explain the reasons for gender differences & issues, e.g. UTI in males & females describe the special dietary modulations & Nutrition outline of RRT mention indications for RRT list the special renal medicines & their interactions with commonly used medicines describe nephrotoxicity of drugs list indication for Renal biopsy and patient preparation provide patient education about renal disorders list the common disorders with renal sequel e.g., malaria, diabetes, hypertension, pregnancy explain appropriate use of therapeutic tools use interpretation of charts & lab data orientation& care of modified anatomy & physiology, e.g. A-V Fistula, renal allograft. 	Nephrology & Urinary System CORE : • Nephritic &Nephrotic Illness • UTI/ Pyelonephritis • ARF/Acute Kidney Injury • Chronic Kidney Disease • Renal manifestations of systemic diseases Additional: • Adult polycystic kidney disease	7 hrs.

Learning Objectives	Contents	Teaching Hours
 Student should be able to: identify syndromes of CNS & PNS diseases identify signs of CNS & PNS diseases identify clinical syndromes of brain, spinal cord & peripheral nerve. disorders plan investigations in neurological disease identify Vascular neuralgic syndromes. define where? & What? is the lesion describe the risk factors for CVD's performacute management & Subsequent management. identify clinical syndrome of meningeal infection plan immediate and subsequent investigations including confirmation of diagnosis. provide give empiric therapy or clinical judgement. provide Diagnosis & exclusion identify & treats complications. able to make a D/D of coma & differentiate structural cause of diseases from others plan investigations in a suspected V. encephalitis. describe general management of patient with fever, coma & convulsion. state the specific Diagnosis of encephalitis & treatment identify acute & chronic syndromes of P.N.S. 	 Neurology Concept of neurological diagnosis including investigations Cerebrovascular diseases(I &II) Headache Meningitis: viral, bacterial and tuberculous Encephalitis Peripheral neuropathy Disorder of cranial nerves 	9 hrs.

Learning Objectives	Contents	Teaching Hours
 Student should be able to: identify a seizure & elicit history from an eyewitness. identify common clinical syndrome of Epilepsy plan management advise to the patient and attendants. identify syndrome of EP system mention etiologic agent(s) plan investigations decide for initial and subsequent treatment. provide explanation, motivation and rehabilitation advises to patient. identify common syndromes of motor system disease. plan investigations identify primary muscle diseases and differentiate from primary neurologic diseases identify clinical syndrome of Neuromascularjunctional defect. plan investigations in a suspected muscle diseases provide treatment for myasthenia gravis. advises& genetic conselling for muscular dystrophy. 	 Epilepsy Extrapyramidal diseases Common compressive and non compressive spinal cord syndromes Myasthenia gravis Myopathies and skeletal muscle disease 	

Learning Objectives	Contents	Teaching Hours
 The students will be able to : describe causes, clinical features and management of fluid and electrolyte disorders including Hyponatremia Hypernatremia Hyperkalemia Hypokalemia describe causes, clinical features and management of disorders of acid-base balance in particular relevance to vomiting, diagnoses of uremia and diabetic ketoacidois. 	 Water and electrolytes and acid-base homeostasis CORE : Disorders due to Sodium and Potassium imbalance Disorders of acid-base balance 	L – 4 hrs.
 The student will be able to : describe applied anatomy, physiology and investigations of endocrine disorders describe epidemiology, etiology, pathophysiology, clinical features, complications, investigation, treatment and management of diabetes mellitus describe epidemiology, etiology, pathophysiology, clinical features, complications, investigation, treatment and management of disorders of thyroid including Hyperthyroidism Solitary thyroid nodule Parathyroid disorders and calcium metabolism describe epidemiology, etiology, pathophysiology, clinical features, complications, investigation, treatment and management of disorders and calcium metabolism Golitary thyroid nodule Parathyroid disorders of adrenal gland including Cushing's syndrome Addison's disease describe epidemiology, etiology, pathophysiology, clinical features, complications, investigation, treatment and management disorders of adrenal gland including Cushing's syndrome Addison's disease describe epidemiology, etiology, pathophysiology, clinical features, complications, investigation, treatment and management of disorders of hypothalamus and pituitary gland including	 Endocrine and Metabolic diseases CORE : Diabetes mellitus(I & II) Thyrotoxicosis Hypothyroidism. Cushing's syndrome and Addisons disease. Hypo- and Hyperparathyroidism Calcium and Vitamin –D related disorders Additional Acromegaly and Sheehan's syndrome 	L – 8 hrs.

Learning Objectives	Contents	Teaching Hours
 The students will be able to: classify diseases of the connective tissues, joints and bones mention the epidemiology, etiology, pathology, clinical features, complications, investigation, treatment and management of Inflammatory joint diseases . mention epidemiology, etiology, pathogenesis, clinical features, investigation, diagnosis, treatment and management of osteoarthritis. mention the epidemiology, etiology, pathogenesis, clinical features, investigation, diagnosis, treatment and management of connective tissue diseases including systemic lupus erythematosus& systemic sclerosis mention the epidemiology, etiology, clinical features, investigation, diagnosis, treatment and management of gout mention the causes, clinical features, investigations, treatment and management of spondylosis 	Connective tissue Disorder CORE : • Rheumatoid arthritis • Degenerative joint diseases • Gout • Ankylosing spondylitis and other spondyloarthropathies. • The collagen vascular diseases including systemic lupus erythematosus, systemic sclerosis • Osteoporosis	L - 7 hrs.

Learning Objectives	Contents	Teaching Hours
 The students will be able to : take history of elderly patients perform physical examination perform mental status examination evaluate functional capacity of the elderly interpret the report of laboratory examinations & imaging state the general principles of treating the elderly. 	 Geriatric medicine CORE : General Principles of treating the elderly/senior citizen Health problems of the elderly/ senior citizen Four Geriatric Giants – Acute confusional State, Falls, Incontinence and Frailty. Healthy aging Rehabilitation and Physical medicine. 	L – 3 hrs.
 The students will be able to describe medical genetics including Genes and chromosomes Mutation Genes in individual Genes in families Disorders of multifactorial causation Chromosomal aberrations The student will be able to describe the techniques of Medical genetics including Cyto genetics Biochemical genetics Molecular genetics Prenatal diagnosis Neoplasia : chromosomal & DNA analysis 	 Genetic Disorders CORE : General concept of genetic diseases and management of genetic disorder Single gene disorder Clinical aspects of medical biotechnology Chromosal disorder (Down, Turner, klinefelters) 	L -2 hrs.

Learning Objectives	Contents	Teaching Hours
 The students will be able to describe basic facts of immunology including Immunoglobulins& antibodies Cellular immunity Autoimmunity The students will be able to describe aetiology, pathogenesis, pathology, clinical features, investigations and treatment of Immunologic deficiency diseases Autoimmune disease Allergic disease 	 Immunologic disorders CORE : Immunologic deficiency diseases Auto immunity, Allergy & hypersensitivity and immunogenetics& transplantation Immunosuppressive drugs 	3 hrs.
 The students will be able to describe : prevention and early detection of common cancers primary cancer treatment including Surgery and radiation Chemotherapy Adjuvent therapy evaluation of tumour response including Tumour size Tumour markers General well being and performance status role of nuclear medicine in diagnosis and treatment in Medical conditions. 	 Oncology, Principles CORE : General principles of diagnosis and management of neoplastic diseases Palliative care 	4 hr.

Learning Objectives	Contents	Teaching Hours
 The students will be able to describe : initial evaluation of the patient with poisoning or drug overdose general principles of management including Care of unconscious patient Respiratory support Cardiovascular support Special problems such as hypothermia, hypertension, arrhythmia, convulsions management of common specific poisonings including organophosphorus compound sedative and hypnotic,(benzodiazepines) detergents, kerosene, pesticides etc. datura, methylalcohol acute and chronic effects of alcohol and their management venomous stings, insect bites, poisonous snakes and insects . 	 Poisoning and drug overdose CORE : Initial evaluation of the patient with poisoning or drug overdose and general principles of management Treatment of common specific poisonings Organophosphorous compounds Sedatives and Hypnotics Household Poisons Venomous stings, insect bites, poisonous snakes and insects. Additional: Acute and chronic effects of alcohol and Methanol and their management Copper sulphate, Paracetamol, Kerosene etc 	6 hrs.
 The students will be able to describe : general principles of intensive care acute disturbances of haemodynamic function including Shock aetiology, pathogenesis, clinical features, investigations, and management in acute medical emergency 	 Emergency medicine CORE : Cardiac Arrest – ALS, BLS Acute pulmonary oedema and severe acute asthma Hypertensive emergencies Diabetic ketoacidosis and hypoglycaemia Status epileptics Acute myocardial infarction, shock and anaphylaxis Upper G.I bleeding and hepatic coma Diagnosis and management of comatose patient 	5 hrs.
	Environmental disease & heat illness Global warming & Health hazards	2 hrs

Learning Objectives	Contents	Teaching Hours
 The students should be able to : use a humane approach during history taking and performing a physical examination examine all organs/systems in adults and children including neonates arrive at a logical working diagnosis after clinical examination (General & Systemic) order appropriate investigations keeping in mind their relevance (need based) and cost effectiveness plan and institute a line of treatment which is need based, cost effective and appropriate for common ailments taking into consideration : patients disease socio-economic status institutional / government guidelines recognise situations which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment assess and manage fluid / electrolyte and acid-base balance interpret skiagram of common diseases identify irrational prescriptions and explain their irrationality interpret serological tests such as VDRL, ASO, Widal, HIV, Rheumatoid factor demonstrate interpersonal and communication skills befitting a physician in order to discuss the illness and its outcome with patient and family 	Clinical Methods in the Practice of Medicine CORE : History Taking Physical Examination Investigations Diagnosis Principles of treatment Interpersonal skills Communication skills Communication skills Doctor - Patient relationship Ethical Behaviour Patient's Safety Referral services Medical Certificate Common Clinical Procedures Injections IV infusion and transfusion FIRST AID Intubation CPR Hyperpyrexia ECG Skin Sensitivity Test	W-14 weeks (3 rd year) See Appendix-1 W - 6 weeks (4 th year) See Appendix-2 W - 12weeks (5 th year) See Appendix-3 Opd-2 weeks

Learning Objectives	Contents	Teaching Hours
 write a proper discharge summary with all relevant information write an appropriate referral note to secondary or tertiary centres or to the physicians with all necessary details assess the need for and issue proper medical certificates to patients for various purposes record and interpret an ECG and be able to identify common abnormalities like myocardial infarction, arrhythmias start I.V. line and infusion performe venous cut down give intradermal / SC / IM / IV / injections insert and manage a C.V.P. line conduct CPR (Cardiopulmonary resuscitation) and first aid in new born/children including endotracheal intubation. introduce a nasogastric tube manage hyperpyrexia 	 Procedural skill CORE Lumbar puncture Bone marrow aspiration Thoracocentesis / paracentesis Oxygen Therapy Oropharygeal suction Shock management Brochodilator inhalation technique, nebulization Urethral Catheterisation Additional Administration of Enema Postural drainage Dialysis Electro convulsive therapy 	
Attitude :		
 The student should: develop a proper attitude towards patients, colleagues and the staff. demonstrate empathy and humane approach towards patients, relatives and attendants. maintain ethical behaviour in all aspects of medical practice. develop a holistic attitude towards medicine taking in social and cultural factors in each case obtain informed consent for any examination / procedure appreciate patients right to privacy adopt universal precautions for self protection against HIV and hepatitis and counsel patients be motivated to perform skin sensitivity tests for drugs and serum 	Attitudes to be supervised by clinical teachers.	

Clinical Teaching

2 nd Phase 1 st Ro	und 14 Weeks	
Learning Objectives	Contents	Teaching Hours
 The student will be able to : narrate the role of ward duties in learning clinical medicine. develop interpersonal and communication skills befitting a phy order to discuss illness and its outcome with patient and family elicit different components of history and understand its impor particulars of the patient, the presenting symptoms, the history present illness, H/O previous illness, Family history, Personal history, Drug history, & allergy, menstrual history (in female) record and analyze symptoms of presentation 	ance -□Art of Medicineof the□Doctor patient relationship	a
 The student will be able to ask patients about : cough- nature, relation with chest pain, time of the day, any parcondition aggravates or relieves: shortness of breath- onset, duration, relation with exertion, epis not etc. haemoptysis- amount, is it rusty or fresh blood sputum- amount, colour, odour, associated with wheezing. 	□ Shortness of breath	

Learning Objectives	Contents	Teaching Hours
 The student will be able to ask patients about symptoms mentioned in contents in detail e.g. site, nature, aggravating or relieving factor of chest pain. The student will be able to elicit informations related to the symptoms of presentation e.g. frequency of bowel, nature of stool, amount, blood in stool, tenesmus etc. if complaining of diarrhoea. 	 <u>CVS</u> Palpitation Chest pain Leg oedema Shortness of breath <u>GIT</u> 	
 The student will be able to ask patients about : H/O vaccination, transfusion Chronology of development of symptoms with different parameters. 	 Abdominal pain Haematemesis and Melaena Loss of appetite Diarrhoea & Constipation Haematochezia Nausea, Vomiting Weight loss Difficulty in swallowing Hepatobiliary Jaundice Abdominal swelling Impaired consciousness Rheumatology Multiple joint pain Monoarticular joint pain 	

Learning Objectives	Contents	Teaching Hours
 The student will be able to: ask the patient about the symptoms e.g. seizure – duration, interval between attack, any injury during attack, sphincter disturbance, aura, define fit, syncope, hemiplegia, monoplegia, paraplegia etc. The student will be able to: ask the patients about the presenting symptom define – oliguria, anuria, polyuria, dysuria 	Nervous System • Loss of consciousness • Fit or convulsion • Syncope • Paralysis • Headache • Vertigo Urinary System • Puffiness of face • Oliguria & anuria, Polyuria	
 Students will be able to take relevant history, related to disorders of Haemopoetic system The student will be able to : take detail history about fever and different tropical & infection diseases, animal bite diseases, animal bite like snakebite, dog bite. 	 Dysuria Incontinence Nocturnal enuresis Loin pain Pus per urethra Endocrine System Swelling of neck Weight gain Weight loss Haemopoetic system Pallor Bleeding Other Tropical and infections diseases 	

Learning Objectives	Contents	Teaching Hours
Learning Objectives The student will be able to • perform general physical examination and observe record and interpret findings.	Contents General examination • Appearance ⇐ Facies • Built • Nutrition • Hydration status • Decubitus • Anthropometric measurement • Anaemia, Jaundice, Cyanosis • Clubbing, Koilonychia, leukonychia • Oedema, Dehydration, Pulse, BP, Temperature, Respiration • JVP • Lymph node • Thyroid, salivary gland • Skin, Hair, Nail • Skin (Petichae, purpura, echymosis, bruise, haematoma, rashes), pigmentation etc	
	 Hair distribution Nail Breast Eye – Proptosis 	

Learning Objectives	Contents	Teaching Hours
 Students will be able to : record pulse e.g. radial pulse and peripheral pulse and observe Jugular Venous Pressure record Blood Pressure inspect chest shape, symmetry, movement, type of breathing palpate apex beat, trachea, thrill percuss cardiac outline, liver dullness and areas of resonance auscultate the heart sounds, murmur, pericardial rub Students will be able to : 	Systemic examination CVS • Pulse, BP, JVP • Pericardium □ Inspection □ Palpation □ Percussion □ Auscultation of heart □ Auscultation of lung base • Related G/E of CVS e.g. clubbing, cyanosis,edema.	
 inspect the chest, palpate trachea, chest for expansion, vocal fremitus percuss the lungs. auscultate for breath sounds, rhonchi, creps, pleural rub. 	 Respiratory System Respiration rate /Type Inspection Palpation Percussion, Auscultation Examination of sputum Lung function test Pleural fluid aspiration 	

Learning Objectives	Contents	Teaching Hours
 Students will be able to: assess levels of consciousness identify the facial expression examine cranial nerves 	Nervous System • Higher mental function □ Co-operation □ Appearance □ Level of consciousness □ GCS □ Memory □ Speech □ Orientation of time, space, person □ Hallucination, Delusion, Illusion	
 Students will be able to: examine motor system examine sensory system observe different types of gait elicit signs of meningeal irritation perform SLR test observe lumbar puncture examine Fundus by ophthalmoscope 	 Cranial nerves. (1st -12th) Motor function Sensory function Gait Signs of meningeal irritation Examination of peripheral nerves Involuntary movement CSF Study Ophthalmoscopy Ophthalmoscope	

Learning Objectives	Contents	Teaching Hours
 Students will be able to: assess joints and muscles by inspection, palpation test range of movement test muscle around joints assess posture Students will be able to: inspect oral cavity, orpharynx. palpate abdomen e.g. Liver, spleen, kidney demonstrate fluid thrill, shifting dullness perform PR examination observe aspiration of peritoneal fluid Students will be able to: detect general signs of renal disease perform bimanual palpation of kidney, renal tenderness examine urine for sugar, albumin. prepare and read blood film (eg. Malarial parasite) The student will be able to do: physical examination and certain minor procedures e.g. blood film, ESR, Hb%, Urine – albumia, Sugar, Stool ME. 	Rheumatology • Joints ⇐ (Look & feel) • Inspection • Palpation • Movement Muscle • Wasting • Swelling Skeleton • Survey GIT • Inspection of oral cavity & oropharynx • Abdomen Inspection / Palpation • Test for ascites • Percussion/ auscultation □ Per-rectal examination □ Examination of stool, vomitus, groin, genitalia, perianal region □ Aspiration of peritoneal fluid Urinary system • Kidneys • Bladder • Uretheral orifice • Urine analysis Haemopoetic system Tropical and infectious illness Animal bite – snakebite, dog bite	

Annex - 1

Department of Medicine <u>CARD - 1</u> Medical College (3rd Year)

Clinical Registration No.		Grading A = 75 - 100 B = 60 - 74 C = 50 - 59 D = 40 - 49 E = 00 - 39
Name :		$\frac{A - 73 - 100}{B - 60 - 74}$
Roll No	Batch	C = 50 - 59
Medicine unit :		D = 40 - 49
Professor :		= E = 00 - 39

Duration of Placement (1st Round) from ______ to ____

No.	Items	Marks Obtained	Signature of teacher
1.	Procedure of History taking and writing and questions related to elaboration of different systems.		
2.	General examination and questions related to general examination.		
3.	Systemic examination of the Alimentary system and related questions.		
4.	Systemic examination of the Respiratory system and related questions.		
5.	Systemic examination of the Cardiovascular system and related questions.		
6.	Systemic examination of the Renal system and related questions.		
7.	Systemic examination of the Nervous system and related questions.		
8.	Examination of the haemopoietic system and related questions.		
9.	Examination of the musculoskeletal system and related questions.		
10.	Miscellaneous e.g. examination of the hands, lower limbs, neck etc.		
11.	Teaching learning on basic concept of behavioral science with the expectation of demonstration by learners in all systems (mandatory to pass)		
Total	attendance days, out of		days

Marks obtained in all items (%) ______ & in Card final Examination _____

Comment

Professor Department of Medicine Registrar

Department of Medicine

Appendix -2

Clinical Teaching

3 rd Phase	2 nd Round	6 Weeks
Learning Objectives	Cont	tents Teaching Hours
 Continue to develop skills in history taking & physical examination. Students will be able to: interpret the findings in terms of diseases, possible causes, make a differential diagnosis & plan investigations. 	Approach to Sign & Symptom GIT & HBS • Ascites • Hepatosplenomegaly • Oral ulcer • Abdominal swelling • Abdominal pain • Vomiting & diarroehea • Haematemesis, melaena • Jaundice	
	CVS• Respiratory distress• Chest pain• Jugular Venous Pulse (JVP)• Hypertension• Abnormal heart sound & m• Pulse Respiratory System • Haemoptysis• Cough• Pleural effusion• Pneumothorax• Collapse, Consolidation, Fi• Breath sound• Sputum analysis	nurmur

Learning Objectives	Contents	Teaching Hours
 Students will be able to: interpret the findings in terms of diseases, possible causes, to make a differential diagnosis & plan investigations. 	Urinary System Approach to patient with : • Oliguria, polyuria, anuria • Anasarca • Urine analysis Nervous System • Unconscious patient • Hemiplegia, monoplegia, paraplegia • Upper Motor Neuron Lesion (UML) • Lower Motor Neuron Lesion (LML) • Cerebellar sign • Extrapyramidali sign • Involuntary movement • Vertigo & Headache Haematology	
 Students will be able to: be acquainted with instruments commonly used for medical procedure observe the doctors performing the procedures 	Approach to patient with : • Bleeding disorder • Anaemia • Lymphadenopathy <u>Rheumatology</u> Approach to patient with • polyarthiritis • oligoarthiritis <u>Clinical skills</u> • Lumbar puncture • Bone marrow aspiration • Aspiration of serous fluid/ synovial fluid • Ryles tube • Catheterization • I/V fluid, IV Canula • Stomach wash	

Department of Medicine

Card - II (4th Year)

(4	4 th Year)	Grading A = 75 - 100 B = 60 - 74 C = 50 - 59 D = 40 - 49 E = 00 - 39
Name of the student:		A = 73 - 100 B = 60 - 74
Roll No.		C = 50 - 59
Medicine unit:		D = 40 - 49 E = 00 - 30
Name of Professor:		$\mathbf{E} = 00 \cdot 39$
Duration of Placement (2 nd Round) from	to	

Total attendance ______ days, out of ______ days

No.	Items	Marks	Signature of
		obtained	Teacher
1.	Review of clinical methods (interpret the findings in		
	terms of diseases, possible causes, to make a differential		
	diagnosis & plan investigations)		
2.	Respiratory diseases (interpret the findings in terms of		
	diseases, possible causes, to make a differential diagnosis		
	& plan investigations)		
3.	Cardiovascular diseases (interpret the findings in		
	terms of diseases, possible causes, to make a differential		
	diagnosis & plan investigations)		
4.	Alimentary & Hepatobiliary disorders (interpret		
	the findings in terms of diseases, possible causes, to make		
	a differential diagnosis & plan investigations)		
5.	Renal diseases (interpret the findings in terms of		
	diseases, possible causes, to make a differential diagnosis		
	& plan investigations0		
6.	Endocrine disorders (interpret the findings in terms of		
	diseases, possible causes, to make a differential diagnosis		
	& plan investigations)		

7.	Haemopoietic disorders (interpret the findings in	
	terms of diseases, possible causes, to make a differential	
	diagnosis & plan investigations)	
8.	Diseases of Nervous system (interpret the findings in	
	terms of diseases, possible causes, to make a differential	
	diagnosis & plan investigations)	
9.	Infectious diseases (interpret the findings in terms of	
	diseases, possible causes, to make a differential diagnosis	
	& plan investigations)	
10.	Common Laboratory investigations	
11.	Basic knowledge on X-ray & ECG	

Marks Obtained: Comments:

Professor

Registrar

Department of Medicine

Department of Medicine

Appendix -3

Clinical Teaching

4 th Phase	3 rd Round	12 Weeks
Learning Objectives		Contents Teaching Hours
 Students will be able to : take detailed history from a patient carry out detailed general and systemic examination present long cases on different body sy Respiratory System Cardiovascular System Gastro-intestinal System Endocrine System Urinary System Haematology system Nervous System Rheumatology Infections plan appropriate investigations plan appropriate treatment of common conditions 	year) year) c clinical <i>Case discussion</i> Long cases <u>Respiratory System</u> COPD Bronchogenic car Pneumonia <i>CVS</i> CVS CCF CHD HD VHD Photo to be a set CVB	g & clinical examinations (3 rd year, 4 th

Learning Objectives	Contents	Teaching Hours
 Students will be able to: evaluate the patients by follow up and monitoring assist in managing critically ill patients interpret various common investigation reports – ECG, X-rays, Biochemical tests, etc. assist doctors in counselling patients and their families about treatment, follow up and prevention. 	<i>GIT</i> Haematemesis&mealena PUD V. Hepatits CLD Carcinoma of Liver Pancreatitis Heapatic failure <i>Endocrine</i> Hyperthyroidism Hypothyroidism DM <i>Rheumatology</i> Rheumatoid arthritis Seronegative arthritis Seronegative arthritis Osteoarthritis Gout <i>Urinary</i> Glomerulonephritis Nephrotic Syndrome Acute Kidney Injury Chronic Kidney Disease Urinary Tract Infection <i>Haematology</i> Anaemia Leukaemia Bleeding diathesis 	

Learning Objectives	Contents	Teaching Hours
 Students will be able to: demonstrate in-depth skills, in history taking, clinical examination, diagnosis and management of NS diseases & infectious diseases. 	Nervous System• CVD• Multiple Sclerosis• Myasthenia Gravis• Parkinsonism• Peripheral neuropathy• GBS• Cranial neuropathyInfection• Enteric fever• Malaria• Kala Azar• Filarisis• Amoeabiasis• Tetanus• Rabies• Poisoning• Snake bite• Tuberculosis• Diarroehea & Dysentery• Shock• Dengue	

Learning Objectives	Contents	Teaching Hours	
Students will be able to: • present short cases on different body system	Short Cases : Image: Hepato or Splenomegaly or both Image: Pleural effusion Image: Pneumothorax Image: Consolidation Image: Consolidation <td></td>		
 Students will be able to: demonstrate certain skills carry out certain procedures e.g. lumbar puncture under supervision, IM injection, IV injection, Infusion 	Clinical skills : Bone Marrow aspiration Aspiration of serous fluid Pleural Peritoneal Pericardial Foley's catheterization Intercostal tube I/V canula Lumbar puncture Venesection CPR		

Learning Objectives	Contents	Teaching Hours
 Students will be able to : interpret routine examination findings for Blood, Stool, Urine interpret FBS, GTT and HbA1C 	 Interpretation of Laboratory Data General: Blood for R/E Urine for R/E Stool for R/E FBS / GTT 	
• interpret certain specific laboratory tests e.g. Liver Function Tests etc.	 Specific : Liver function test (LFT) Thyroid function test (TFT) Kidney function test (TFT) Kidney function tests (PFT) Test for malabsorption Test for rheumatology Test for neurology Cardiac function test Haematological test Test for certain infectious diseases, e.g. Widal test. 	
 Students will be able to: interpret common radiological findings on plain skiagrams of chest, skull, sinuses, neck, abdomen, pelvis, upper and lower extremities 	 Radiology: X-ray chest X-ray Bones Skull Joints X-ray abdomen 	

Learning Objectives	Contents	Teaching Hours
 Students will be able to: interpret findings on certain contrast X-rays e.g. Barium Meal etc. 	 Contrast X-rays : Barium Meal Barium Follow through Barium Enema ERCP Myelogram) IVU. 	
 establish a good-student patient relationship communicate with patients in understanding manner. 	USGCT & MRI	
• observe and assist in terminal care	Communication Skills	
• observe in care of death & dying patient		
	Terminal Care	
	• Care of death and dying	

Note:

- 1. Each student will be able to get certain number of beds, they will write down their history, physical examination, follow-up, observe the management and follow-up including counselling.
- 2. Each student will submit a complete case history per week of placement in every assignment in medicine.

Department of Medicine

	<u>Card - III</u>			
	(5 th Year)			
Name of the student :			—— B = 60 - 74	
Roll No			C = 50 - 59	
Medicine unit :			D = 40 - 49	
Name of Professor :			E = 00 - 39	
Duration of Placement (3 rd Round) from		to		
Total attendance	days, out of		days	

No.	Items	Marks obtained	Signature of Teacher
1.	Respiratory diseases		
2.	Cardiovascular diseases		
3.	Alimentary & Hepatobiliary disorders		
4.	Renal diseases		
5.	Endocrine disorders		
6.	Bones, joints & connective issue diseases		
7.	Diseases of nervous system		
8.	Haemopoietic disorders		
9.	Interpretation of X-ray		
10.	Interpretation of ECG		
11.	Instrumental uses in clinical practice		
12.	Interpretation of laboratory investigations		

Marks obtained (%):

Professor

Department of Medicine

Registrar Department of Medicine

Learning Objectives	Contents	Teaching Hours
 Students will be able to: describe historical aspect, spectrum of physical medicine & rehabilitation describe rehabilitative management of certain conditions including: Low back pain and common spinal disorder Rheumatoid Arthritis and other inflammatory arthritides Stroke and other common neurological conditions Arthritis and allied conditions Degenerative Joint diseases Cerebral palsy and other paediatrics conditions Chronic pain and palliative care Common geriatric disorders Orthopedic conditions and sports injury Cardiopulmonary rehabilitative conditions identify the various modalities of physical therapy plan to apply physical therapy for certain clinical conditions 	CORE: • Principles of management and rehabilitation of musculoskeletal and neurological disorders	5 th year 5 hours lecture

Physical Medicine and Rehabilitation Clinical Attachment (WARD DUTY) 4th Year- 2 weeks

Learning Objectives	Contents	Teaching Hours
 Students will be able to: outline the role and importance of Physical Medicine & Rehabilitation identify the various modalities of Physical Medicine & Rehabilitation management plan to apply physical therapy for certain clinical conditions 	 Introduction to Physical Medicine & Rehabilitation History Background Spectrum Visit to Physical Medicine & Rehabilitation Ward Modalities of Physical Medicine & Rehabilitation Ward Modalities of Physical Therapy Management and Rehabilitation of Neck pain & Back pain Soft tissue Rheumatism Painful Conditions of upper & lower extremities Neurological conditions including Stroke Spinal cord injuries Arthritis & allied conditions Cerebral Palsy Non-surgical & post-operative complications Cardiopulmonary rehabilitations 	2 hr 2 hrs 12 hrs

CARD for Physical Medicine and Rehabilitation

ITEM	MARKS	Signature
Definition, Historical aspects, background, spectrum of Physical Medicine & visit in Physical Medicine		
ward		
Various modalities of Physical therapy		
Management and Rehabilitation of Neck Pain & Back Pain		
Management and Rehabilitation soft tissue metabolism		
Management and Rehabilitation of painful conditions of upper & lower limbs		
Management and Rehabilitation of stroke and other Neurological conditions		
Management and Rehabilitation of Spinal cord injuries		
Management and Rehabilitation of Arthritis and allied conditions		
Management and Rehabilitation of non surgical orthopaedic & post operative complication		
Management and Rehabilitation of Cerebral Palsy and other paediatric neurological conditions		

Time Schedule				
Medicine & Allied Subjects (lecture)				

Discipline	2 nd phase	3 rd phase	4 th phase	Total hours
	(In hrs.)	(In hrs.)	(In hrs.)	
Internal medicine	22	25	90	137
Psychiatry	02	-	18	20
Dermatology	-	-	17	17
Pediatrics	04	20	22	46
Physical Medicine	-	-	04	04
Emergency	-	-	-	-
Total	28hrs	45 hrs	151 hrs	224 hrs

Ward duty Subjects (weeks) Time: 9.30-11.30am & 7.00pm- 9.00pm (4 hours)

Phase	Medicine (weeks)	Emergency (weeks)	Pediatrics (weeks)	Psychiatry (weeks)	Skin & VD (weeks)	Physical Medicine (weeks)	Total weeks
2 nd	14	-	04	-	-	02	20
3 rd	6+2 (OPD)	02	-	02	02	-	14
4 th	12	-	06	02	02	-	22
Total	34 wks.	2 wks.	10 wks.	04 wks.	04 wks.	02 wks	56

Note: Teachers for supervising the evening duties must be available

Final professional examination

Assessment of Medicine

Assessment systems and mark distribution

Components		Marks		Total Marks	
WRITTEN EXAMINATION					
Paper – I- Internal Medicine a) MCQ (Format- 10 multiple true false and 10 single best response) b) SAQ+ SEQ	20 70			100	
c) Marks from formative assessment		10			
Paper - II- Internal medicine with allied subjects & Paediatrics	Int.Me. & Allied	Paediatrics	Total	_	
Psychiatry, Dermatology& Veneral disease, Neurology, Poisoning, Infections, Geriatrics,	mt.me. & Ameu	raculatrics	Total	100	
Genetics, Cardiology, Nephrology and Paediatrics a) MCQ (Format-10 multiple true	10	10	20		
false and 10 single best response)	35	35	70		
b) SAQ+SEQc) Marks from formative assessment	05	05	10		
		Total		200	
OSPE	10	0 stations x 05		50	
	1			Continued (P.T.O)	

Oral 40 Marks for Each Board	160
(10 marks for each board for Xray, ECG, lab data,	
	(Oral- 30 marks x 4
structured oral examination)	boards) = 120
, , , , , , , , , , , , , , , , , , ,	(Practical-10 marks x
	4 boards = 40
	,
Clinical	
a) Day-1:	
i) 1 Long case $=20$ Marks (IM)	
ii) 3 Short cases=30 Marks (IM)	90
b) Day-2:	
i) 1 Long case =20 Marks (Paed)	
(1 for Paed)+(1 for Skin & VD/ Psychiatry)	
Grand Total	500
	 40 Marks for Each Board (10 marks for each board for Xray, ECG, lab data, photographs etc and 30 marks for each board for structured oral examination) Clinical a) Day-1: i) 1 Long case =20 Marks (IM) ii) 3 Short cases=30 Marks (IM) b) Day-2:

There will be separate Answer Script for MCQ. Pass marks 60% in each of written, oral and practical examinations. After aggregating obtained marks of **4** oral boards (comprising of SOE & Practical) students pass or fail will be finalized in oral section.

INTEGRATED TEACHING EXERCISE

- The integrated teaching should be established as a routine
- It should be on selected topics
- It should be started from year 3 M.B.B.S Class
- It should involve teachers of pre-clinical, para-clinical & clinical subjects
- It should be on theoretical, clinical & Paraclinical aspects aided by audio-visual devices
- Programme should be made well ahead of commencement of the course & concerned persons shall be informed in time
- It should be mostly community, Primary Health Care & National Health problems oriented
- It should be held preferably twice a year ,each for two hours between 9 11 am
- It should involve all clinical students & teachers and the site, lecture theatre & attendance must be recorded

Some examples of Multi-Disciplinary Integrated Exercise topics are:

Trauma
Cancer
Tuberculosis
C P R
Jaundice
Acid base electrolyte balance / imbalance
Death and dying
Medical ethics
• Maternal and child health

Diabetes Mellitus

Departments: MEDICINE + SURGERY + OBGYNE Day : Thursday

Day: ThursdayTime: 09.00 - 11.00 a.m.Frequency: Once in a month

WARD PLACEMENT

- To introduce uniform card system and feasible card in all the medical colleges
- To prepare a central card for different components of medicine incorporating teachers of all medical colleges on priority basis
- Each card will carry 100 marks, 10% of the card marks will be added to the summative assessment
- 52 weeks- 100 mark.

OPPORTUNITY FOR COMMUNITY ORIENTATION

- Teaching learning sessions will be organised in inpatient departments in different wards e.g. Internal medicine, Paediatrics, Psychiatry, Dermatology, etc., outpatient departments, emergency room, infections diseases hospital
- The patients attending the different areas will mostly represent the community
- Medical college hospitals cover a good area of community health problems
- Attempt can be made to motivate students for meeting health needs of people
- For further attitudinal shift to serve people, field site training in 3rd 4th year and a short stay (1-2 weeks) during internship in Thana Health Complex will be of much help

BLOCK POSTING		ING	WORKING HOURS
Гime	: Total 4 weeks		
Break up	: Internal medicine	12days	• 09.00 am. – 02.30 pm (Compulsory for all)
	Paediatrics	6 days	• 02.30 pm. – 08.30 pm.(Roaster duty time)
	Psychiatry	3 days	
	Dermatology	3days	Teaching / learning schedule: to be arranged locally
			The duties of the students during block posting will include:
			a. small group teaching,
BLOC	K POSTING is a most imp	ortant part of clinical	b. ward round
	It is a preparation to step in	-	c. roaster duty during morning and evening hours
	full time trainir	1 0	Every student will have a separate log book for his attendance,
		-6	performance etc.
			$\hat{\mathbf{I}}$ on book to be attached with the formative assessment

Log book to be attached with the formative assessment

SKIN & VD

Course Objectives:

At the end of the course students will be able to:

- take appropriate history from the patients of skin & VD
- perform the dermatological examination properly
- select and interpret relevant investigations
- diagnose and manage the most common skin and venereal diseases prevalent in Bangladesh
- deal with dermatological and venereological emergencies
- identify problematic patients that require specialised care and refer them appropriately
- communicate effectively with patients, relatives and colleagues regarding complications, prognosis and others
- participate in the related national disease control programs of skin & VD
- conduct relevant research

List of Competencies to acquire :

- Taking appropriate history from patients of skin & VD
- Performing proper dermatological examination of the said patients
- Performing the relevant investigations and interpreting the results
- Diagnosing common skin & VD cases
- Managing common skin & VD cases
- Counselling the cases of skin & VD
- Referring the complicated cases timely & to the appropriate authority for better management

Learning Objectives and Course Contents in SKIN & VD (lectures)

Learning Objectives	Contents	Teaching Hours
	CORE:	
Students will be able to:describe the structure and functions of the skin as an organ	 Structure and functions of the skin Cutaneous Signs /Symptoms Scabies and Pediculosis 	1 hour 1 hour 1 hour
 mention the symptoms of skin diseases & their causes mention the cutaneous lesions & their causes describe the etiology, pathogenesis & clinical features of common skin and venereal diseases 	 Atopic Dermatitis & Contact and Seborrhoeic dermatitis Superficial fungal infections Pyoderma Bullous diseases (Pemphigus) Cutaneous manifestations of systemic diseases 	1 hour 1 hour 1 hour 1 hour 1 hour
 mention the differential diagnosis of each disease with differentiating features request and interpret investigations like gram staining/ AFB / skin scraping for fungus microscopy & culture/VDRL/ TPHA/ skin biopsy diagnose and manage common skin and venereal diseases 	 Viral disease (Herpes) Syphilis & Genital ulcers AIDS Gonorrhoea, Non-Gonococcal Urethritis Psoriasis Acne Skin Tuberculosis Urticaria 	1 hour 1 hour 1 hour 1 hour 1 hour 1 hour 1 hour 1 hour 1 hour 1 hour
	 Pigmentary diseases (Vitiligo), Alopecia 	1 hour Total: 17 hours

CARD for Skin & Venereal Diseases

ITEM	MARKS	Signature
Procedure of dermatological history taking and writing		
Examination of the integumentary system (skin, hair, nail & mucosa)		
Symptomatology of skin (generalised & localised pruritus)		
Symptomatology of skin (generalised & localised pigmentation)		
Maculo-papular lesions (Scabies, Pediculosis, Eczema)		
Scaly lesions (Psoriasis, SD, Dermatophytosis, Pityriais, Rosea)		
Pyogenic lesions (Impetigo centagiosa, Bullus Impetigo, SSSS)		
Vesicobullous lesions (Herpes, Pemphigus, Pemphigoid, STS)		
Acne		
TB, Leprosy		
Drug reactions & urticaria		
Urethral/vaginal discharge (Gonorrhoea & NGU)		
Genital ulcer (Syphilis & Chancroid)		
AIDS		

Skin & Venereal Diseases Clinical Attachment (WARD DUTY)

Total 96 hours (24 Days) in 3rd Phase (2 wks) & 4th Phase (2 wks)

Learning Objectives	Contents	Teaching Hours	
 Students will be able to: take appropriate history from the patients of skin & VD perform the dermatological examination properly select and interpret relevant investigations describe Aetiology & clinical features of common skin and venereal diseases diagnose and manage the most common skin and venereal diseases prevalent in Bangladesh deal with dermatological and venereological emergencies acquaint with universal precautions, syndromic management, counselling of STD/ AIDS Cases. 	Dermatology CORE:Structure and function of the skinCutaneous symptom- generalized pruritusCutaneous symptom- G. hyperpigmentationCutaneous symptom- hypopigmentationTypes & causes of cutaneous lesionsScabies and PediculosisAtopic DermatitisSeborrhoeic Dermatitis & other DermatitisContact DermatitisFungal infections-Dermatophytosis & CandidiasisAcnePsoriasisParapsoriasis & Pityriasis RoseaErythrodermaViral Diseases (Herpes simplex, Herpes zoster, wart, molluscumcontagiosum)LeprosyBacterial infections of the skin(impetigo contagiosa, B impetigo, SSSS)Filariasis	 4 hours 4 hours 2 hours 2 hours 2 hours 2 hours 4 hours 2 hours 4 hours 4 hours 4 hours 2 hours 4 hours 	

Learning Objectives	Contents	Hours/days
 Students will be able to describe the clinical feature, management. Interpret result of patch test/ prick test / tuberculin test. perform gram staining/ bubo aspiration request& interpret tests like VDRL/ TPHA/ ELISA/ Western blot/ CFT for chlamydia. 	Additional: • Drug Reactions • Urticaria & angioedema • Skin tuberculosis • Genodermatoses (Ichthyosis, Neurofibromatosis, etc.) • Melanocytic & non melanocytic nevi • Skin tumours • Bullous diseases (Pemphigus, Dermatitis herpetiformis) • Systemic diseases and the skin • Chronic arsenicosis • Hair (AA, Telogen effluvium, Anagen effluvium, Androgenetic alopecia) • Hypertrichosis & Hirsutism • Nail diseases-(fungal infection, LP, Psoriasis) • Mucous membrane diseases (Aphthous ulcer, stomatitis/glossitis) Venereology CORE • Basics of STI (definition & classification) • Syphilis • Chancroid & other genital ulcers • Gonorrhoea & Nonspecific Urethritis • AIDS • Syndromic management of STI	2 hours 2 hours 2 hours 4 hours 2 hours 2 hours 4 hours 2 hours 4 hours 2 hours 4 hours 2 hours

While taking history and examining a patient the following steps should be followed by students:

Greetings to the patient Introduction of self as a medical student Explanation to the patient what is to be done Use of understandable language of patient Seeking permission and co-operation Adequate exposure in lighted area having maintaining privacy Giving thanks to the patient at the end of examination Adopting correct procedure by use of appropriate instrument while doing procedure.

Instructions for Item Cards:

Students should complete the cards during clinical attachment Teacher should sign the card against the item completed At the end of the attachment the card must be submitted to the Head of the department for countersigning.

Psychiatry

Course Objectives

After completion of the course a medical student will be able to:

- comprehend the concept of mental health care and be aware of the role of the medical doctor in detecting common mental disorder in the community
- provide appropriate management to patients in the community
- comprehend the historical concept of psychiatry and its gradual development.
- comprehend normal and abnormal human behaviour in terms of personality, memory, intelligence, and learning.
- classify psychiatric disorders, recognise clinical manifestation of common psychiatric syndrome during clinical assessment and plan their appropriate management.
- deal psychiatric emergencies in hospital and community.
- diagnose and manage common psychiatric disorders
- develop communication skill and doctor patient relationship

Learning Objectives	Contents	Teaching Hours
 Students will be able to : describe the historical concepts related to psychiatry describe psychosocial aspects of patients in medical settings explain the basic concepts related to learning, memory, personality, and intelligence classify common psychiatric disorders prevalent in Bangladesh describe the aspects of mental health care to patients at the community level including drug abuse classify common child psychiatric, neurological, behavioral, and psychosocial disorders prevalent in Bangladesh recognise clinical manifestation of common psychiatric 	 CORE : Historical concepts & classification communication skill and doctor patient relationship Behavioural Science Learning, memory, personality, intelligence Symptommatology Organic psychiatry: Dementia & Delirium Substance Abuse & Alcoholosim Child psychiatry including Autism Psychosexual Disorders Dementia & Delirium 	20 hours 1 hour 1 hour 1 hour 2 hour 1 hour 2 hour 1 hour 2 hour 1 hour
 Provide care to the patients presenting with psychiatric emergencies in hospital give long term care to patients at the community level provide preventive mental health care especially to high risk 	 Psychoparmacology Behavioral addiction(internet,socialmedia,gaming,pornographyetc) Clinical Placement: 	1 hours 2 hours
groups	 Mental state exam Schizophrenia Mood Disorders: Depression & Bipolar Mood Disorder (BMD) Anxiety Disorders: GAD, phobia, obsession, panic dis. Psychiatric emergencies Psychotherapy 	1 hours 1hour 1 hour 1 hour

Learning Objectives and Course Contents in Psychiatry

CARD for Psychiatry

ITEM	MARKS	Signature
History taking		
Mental State Examination		
Symptomatology		
Schizophrenia		
Mood Disorder – Mania		
Mood Disorder Depression - Suicide & DSH		
Anxiety Disorders (GAD, phobic disorders, OCD, panic disorder, PTSD, ASD)		
Somatoform Disorder (Somatization, Hypochondriasis, body dysmorphic disorders, chronic pain)		
Delirium – Dementia		
Childhood Psychiatric Disorders including Autism		
Substance Abuse Disorder & Alcoholism		
Psychotherapy & ECT		

<u>Learning Objectives and Course Contents in Psychiatry</u> Psychiatric Diseases Clinical Attachment (WARD DUTY) Total 96 hours (12 days in 3rd phase + 12 days in 4th phase) = 24 Days in 3rd & 4th phase

Learning Objectives	Contents	Teaching Hours	
 Students will be able to: Identify common psychiatric sign, symptoms in patient. 	 Mood- anxiety, depression, elation, irritability, anger. Perceptual symptoms- Hallucination, imagery, illusion. Thought symptoms- delusion, different types of delusion, obsession, compulsion 	2 hrs	
	 Disturbance of thinking process- speech abnormality. Motor symptoms and signs. Disturbance of body image self, memory, consciousness. Attention, concentration Insight Different between psychosis and neurosis. 	2 hrs	
 Students will be able to: Prepare the patient for interview Starting, continuing and completing interview Finding out proper information Proper history taking of a psychiatric patient Analysis of personality of patient Identify all points of mental status examination Carry out neuro psychiatric 	 History taking Personality analysis Mental status examination- appearance and behavior Rapport establishment Speech- rate, rhythm, content, flow mood Suicidal ideation Thoughts Perception Cognitive function- orientation, attention, concentration, memory 	hrs 2 hrs 2 hrs 2	
	 Students will be able to: Identify common psychiatric sign, symptoms in patient. Students will be able to: Prepare the patient for interview Starting, continuing and completing interview Finding out proper information Proper history taking of a psychiatric patient Analysis of personality of patient Identify all points of mental status examination 	Students will be able to:Mood- anxiety, depression, elation, irritability, anger.Identify common psychiatric sign, symptoms in patient.Mood- anxiety, depression, elation, irritability, anger.Perceptual symptoms- Hallucination, imagery, illusion.Thought symptoms- delusion, different types of delusion, obsession, compulsionDisturbance of thinking process- speech abnormality.Disturbance of thinking process- speech abnormality.Motor symptoms and signs.Disturbance of body image self, memory, consciousness.Disturbance of body image self, memory, consciousness.Disturbance of body image self, memory, consciousness.Attention, concentrationInsightDifferent between psychosis and neurosis.History takingStudents will be able to:History takingPrepare the patient for interviewHistory takingStarting, continuing and completing interviewHistory takingProper history taking of a psychiatric patientMental status examination- appearance and behavior Rapport establishment Speech- rate, rhythm, content, flow moodNoodSuicidal ideation ThoughtsIdentify all points of mental status examinationPerception Cognitive function- orientation, attention, concentration, memory	

Subject	Learning Objectives	Contents	Teaching Hours	
3. Personality & Personality disorder	 Students will be able to: Understand personality pattern of the patient Understand different type of personality disorder Diagnose and manage common personality disorder 	 Origin of personality Classification of abnormal personality Different personality disorder Diagnosis and management of personality disorder 	2 hrs 2 hrs	
4. Reaction to stressful experience	 Students will be able to: Understand the response to stressful events Identify sign symptom of ASD, PTSD, Adjustment disorder Diagnose and manage cases of ASD, PTSD, Adjustment disorder identify special kinds of adjustment 	 Response to stressful event Defense mechanism ASD- sign symptom, etiology, diagnosis and management PTSD- sign symptom, etiology, diagnosis and management Adjustment disorder- sign symptom, etiology, diagnosis and management Adjustment to physical illness and handicap Grief Bereavement Adjustment to sexual abuse 	2hr - 1 hr - 1 hr - 1 hr - 1 hr - 1 hr	
5.Generalized anxiety disorder (GAD)	 Students will be able to: Identify clinical features and etiology of GAD Take appropriate history from patient Perform mental status examination of GAD patient Diagnose and manage case of GAD 	• GAD- sign symptom, etiology, diagnosis and management	- 4 hrs	
6. Phobic anxiety disorder	 Students will be able to: Identify clinical features and etiology of Phobic disorder Diagnose and manage case of Phobic disorder 	 Specific phobia Social phobia Agoraphobia 	2 hrs	

Subject	Learning Objectives	Contents	Teaching Hours
7. Panic disorder	 Students will be able to: Identify clinical features and etiology of Panic disorder Take appropriate history from patient Perform mental status examination of Panic disorder patient Diagnose and manage case of Panic disorder 	• Panic disorder - sign symptom, etiology, diagnosis and management	2 hrs
8. Obsessive compulsive disorder (OCD)	 Students will be able to: Identify clinical features and etiology of OCD Take appropriate history from patient Perform mental status examination of OCD patient Diagnose and manage case of OCD 	• OCD - sign symptom, etiology, diagnosis and management	2 hrs
9. Major depressive disorder (MDD)	 Students will be able to: Identify clinical features and etiology of MDD Take appropriate history from patient Perform mental status examination of MDD patient Diagnose and manage case of MDD 	• MDD - sign symptom, etiology, types diagnosis and management	2 hrs 3 hrs
10. Bipolar disorder	 Students will be able to: Identify clinical features and etiology of Bipolar disorder Take appropriate history from patient Perform mental status examination of Bipolar disorder patient Diagnose and manage case of Bipolar disorder 	• Bipolar disorder - sign symptom, etiology, types, diagnosis and management	2 hrs 3 hrs

Subject	Learning Objectives	Contents	Teaching Hours
11. Schizophrenia	 Students will be able to: Identify clinical features and etiology of Schizophrenia Take appropriate history from patient Perform mental status examination of Schizophrenia patient Diagnose and manage case of Schizophrenia 	 Schizophrenia - sign symptom, etiology, types Diagnosis and management 	 - 2 hrs - 4 hrs
12. Dementia	 Students will be able to: Identify clinical features and etiology of Dementia Take appropriate history from patient Perform mental status examination of Dementia patient Diagnose and manage case of Dementia 	• Dementia - sign symptom, MMSE, etiology, types, diagnosis and management	4 hrs
13. Movement disorder	 Students will be able to: Identify common movement disorder prevalent in psychiatric patient Diagnose & manage movement disorder in psychiatric patient 	 EPSE Parkinson's disease Tics 	2 hrs
14. Seizure disorder	 Students will be able to: Understand seizure and pseudo seizure Differentiate different types of seizures Identify clinical features and etiology of Seizure disorder Take appropriate history from patient Perform mental status examination of Seizure disorder patient Diagnose and manage case of Seizure disorder Understand psychiatric aspect of epilepsy 	 Seizure disorder- sign symptom, etiology, types, diagnosis and management Pseudo seizure Different types of seizure Preictal, ictal, postictal, interictal disturbance and social aspect of epilepsy 	4 hrs

Subject	Learning Objectives	Contents	Teaching Hours
15. Eating disorder	 Students will be able to: Identify clinical features of Eating disorder Diagnose and manage case of Eating disorder 	 Sign symptom, etiology, types, diagnosis and management of – Anorexia Bulimia nervosa Eating disorder (NOS) 	2 hrs
16. Sleep disorder	 Students will be able to: Identify clinical features and etiology of Sleep disorder Take appropriate history from patient Diagnose and manage case of Sleep disorder 	Sign symptom, etiology, types, diagnosis and management of – • Insomnia • Narcolepsy • Breathing related sleep disorder • Parasomnias	4 hrs
17. Sexual disorder	 Students will be able to: Identify clinical features and etiology of Sexual disorder No classification of sexual disorder Take appropriate history from patient Diagnose and manage case of Sexual disorder 	 Sign symptom, etiology, types, diagnosis and management of – Sexual dysfunction- in case of male and female Paraphilia Gender dysphoria 	4 hrs
18. Somatoform disorder	 Students will be able to: Identify clinical features and etiology of Somatoform disorder Take appropriate history from patient Perform mental status examination of Somatoform disorder patient Diagnose and manage case of Somatoform disorder 	• Somatoform disorder- sign symptom, etiology, types, diagnosis and management	2 hrs
19. Conversion disorder	 Students will be able to: Identify clinical features and etiology of Conversion disorder Take appropriate history from patient Perform mental status examination of Conversion disorder patient Diagnose and manage case of Conversion disorder 	• Conversion disorder- sign symptom, etiology, types, diagnosis and management	4 hrs

Subject	Learning Objectives	Contents	Teaching Hours
20. Psychiatric aspect of obstetrics and gynaecology	 Students will be able to: Identify clinical features and etiology of Psychiatric diseases in obstetrics and gynecological cases Take appropriate history from patient Perform mental status examination of patients Diagnose and manage the case 	 Sign symptom, etiology, types, diagnosis and management of – Pseudocyesis Postpartum mental disorders- maternity blue, Postpartum psychosis Premenstrual syndrome 	2 hrs
21. Suicide and deliberate self- harm	 Students will be able to: Identify clinical features and etiology of Suicide / deliberate self-harm Take appropriate history from patient Perform mental status examination of Suicide / deliberate self-harm patient Diagnose and manage case of Suicide/ deliberate self-harm 	 Suicide /deliberate self-harm - sign symptom, etiology, types, diagnosis and management Assessment of suicidal risk Care of suicidal patient Motive for deliberate self-harm Suicide prevention 	4 hrs
22. Substance related disorder	 Students will be able to: Identify clinical features and etiology of Substance related disorder Take appropriate history from patient Perform mental status examination of Substance related disorder patient Diagnose and manage case of Substance related disorder 	 Terminology- intoxication, Abuse, Dependence, Tolerance, Withdrawal state Sign symptom, etiology, types, diagnosis and management of- Alcohol related disorder Opioid related disorder Benzodiazepine related disorder Cannabis related disorder Amphetamine related disorder Social media related disorder 	1 hr 1 hr 1 hr 1 hr 1 hr 1 hr 1 hr 1 hr
23. Psychopharmac ology	 Students will be able to: Understand classification, mechanism of action indication, contra indication, adverse effects, dosages, and advises regarding use of psychotropic medicines. 	 Class of drugs- Antipsychotic Antidepressant Mood Stabilizer Anxiolytic Hypnotic Psychostimulant 	4 hrs

Subject	Learning Objectives	Contents	Teaching Hours
24. Psychologica l treatment	 Students will be able to: Understand different types of psychological treatment applicable on psychiatric patients 	 Types of psychological treatment- counselling Cognitive behavior therapy Supportive psycho therapy Insight oriented psycho therapy Dialectic behavior therapy Family therapy Couple therapy 	4 hrs
25. Child psychiatric disorder	 Students will be able to: Identify clinical features and etiology of Child psychiatric disorder Take appropriate history from patient Perform mental status examination of patients Diagnose and manage case of Child psychiatric disorder 	 Sign symptom, etiology, types, diagnosis and management of – ASD ADHD Conduct disorder Intellectual disability disorder 	4 hrs

Paediatrics

The curriculum in pediatrics, 2002 has been revised and updated in 2012 to emphasize the issues related to child health problems of the country.

The undergraduate medical students need to know these common childhood problems and how to manage these efficiently. This need based revised curriculum will certainly enable them to serve the community.

The contents of the curriculum as well as the skills to be acquired by the students are categorized as "must know", "useful to know", "nice to know" according to their importance at this level. These categories are marked as ***, ** and * respectively. Teachers are requested to follow this guideline while planning their teaching-learning sessions.

Departmental Objective:

To train medical graduates who will be able to manage common childhood problems in the community. Hence, at the end of the course they will be able to -

- manage common pediatric and neonatal problems at hospital and the community level.
- manage acute neonatal and pediatric emergencies efficiently
- identify neonatal and pediatric problems that require secondary and tertiary care and refer them appropriately.
- To diagnosis and manage pediatric emergencies commonly encountered in hospital practice.
- refer appropriately for rehabilitation where necessary
- use growth chart in order to assess the growth of a child to differentiate normal from abnormal.
- provide emergency cardiopulmonary resuscitation to newborns and children
- select and interpret relevant investigations
- perform routine therapeutic procedures
- communicate effectively with the child, parents, relatives and colleagues.
- counsel, explain and guide parents and relatives regarding the illness, the management plan, the possible complications and the prognosis
- participate in the national programmes providing both service and training and preventive activities: IMCI, NNS, EPI and other programmes
- serve the community during disaster and epidemics
- update with latest information related to core paediatric problems
- conduct research
- perform/discharge medico-legal and ethical responsibilities

List of Competencies to acquire:

- communicate and counsel patients, parents and relatives.***
- demonstrate empathy and humane approach towards patients, parents and relatives. ***
- exihibit a proper attitude towards colleagues and other staffs.***
- take relevant history and perform clinical examination to arrive at a working diagnosis***
- perform the anthropometric measurements in order to assess the growth of a child.***

- use and interpret the growth chart to compare the anthropometric values with the standard one.***
- suggest appropriate investigations keeping in mind their relevance and cost effectiveness***
- plan and outline a treatment at primary facilities which is need based, cost effective and evidence based***
- recognize situations which need urgent treatment at secondary and tertiary level hospitals and be able to make a prompt referral with a referral note after giving first aid or emergency treatment at primary health care facilities.***
- use and interpret the Integrated Management of Childhood Illness (IMCI) Chart prepared by WHO***
- prepare and administer oral rehydration therapy (ORT)***
- explain mother about appropriate positioning and attachment in breast feeding & effective suckling**

Students must observe the following skills

- Hand/ forearm washing***
- Cardio-pulmonary resuscitation (CPR)***
- First aid to children and neonates including endotracheal intubation and mouth to mouth breathing.**
- Lumbar puncture***
- Bone marrow aspiration***
- Thoracocentesis/ paracentesis*
- Umbilical catheterization*
- Exchange transfusion*
- Blood and blood products transfusion including mobile transfusion***
- I/V cannulation, collection of samples for routine examination (RE)*
- Use of AMBU bag***
- Administration of an enema*
- Phototherapy**
- Incubator (open and closed) care*
- Oxygen therapy***
- Nebulization***
- Bedside urine for albumin & sugar***
- Capillary blood glucose estimation**
- Preparing balanced diet**
- Performing intradermal / subcutaneous/ intramuscular/intravenous or per rectal injections in children*
- Constructing a vaccination schedule for a child*
- Applying vaccine to children*
- Mantoux test and interpret the result*
- Introduction of nasogastric tube*
- Managing hyperpyrexia or hypothermia and convulsion and other paediatric emergencies*

- Applying otoscope, tongue depressor during examination of the child*
- Writing discharge certificate*

Final Professional Examination:

Marks distribution:

Total marks - 500 (Summative)

Pediatrics -130

Written = 50

- MCQ-MTF (05) + SBA(05)=10
- \circ 2SEQ 20-+ 6SAQ 15 = 35
- \circ Formative assessment = 05

Oral, Practical and Clinical=80

- Oral, Practical =30 +10 =40
- Clinical-1 long case-20
- -1 Short case-10
- \circ OSPE =10.

Components		Marks		Total Marks
Paper 1 – Internal Medicine				
Paper - 11 - Medicine with allied and				
Pediatrics	Int Me.& Allied	Pediatrics		
Pediatrics MCQ (MTF, 5 + SBA, 5)	10	10	20	100
Total 2 SEQ + 6SAQ Group B1 - 1SEQ 10+3SAQ (2.5X3) Group B2 - 1SEQ10 +3SAQ(2.5X3)	35	35	70	
Formative assessment	05	05	10	
	Total			
OSPE		10		
Oral, Practical and clinical		30+10+30		
	Total	130		
		(For Pediatrics)		

Paediatrics

Learning Objectives	Contents	Teaching Hours
 At the end of the sessions, students will be able to define Pediatrics and Primary health care state the stages of a child's life describe the current child health status in Bangladesh describe the major child health problems in the country describe Millennium Developmental Goals (MDG), particularly MDG 4 	Preventive Paediatrics <u>CORE:</u> • An introduction to Paediatrics& MDG*** • IMCI***	1 hr 2 hrs
 describe thindhind Developmental Court (the C), particularly the C 1 describe the components of essential service package (ESP) and essential newborn care (ENC) discuss the emergency triage assessment and treatment state the National Child Health programmes describe the preventive programmes of pediatrics e.g. Integrated Management of Childhood Illness (IMCI), EPI, National Nutrition Services (NNS), Infant and Young Child Feeding (IYCF), vitamin-A supplementation 	 EPI*** IYCF*** IDD** ENC** NNS*** ETAT** ECD** Vitamin-A supplementation** 	1hr Total = 4 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions, students will be able to	Neonatology	
• describe the procedure for taking care of new-born e.g. maintenance of body temperature, feeding, care of eyes etc.	CORE: Care of a normal newborn***	
• define perinatal asphyxia, hypoxic ischemic encephalopathy (HIE),	Perinatal asphyxia***	1hr
describe APGAR Score, causes, management (Newborn resuscitation) & complication of perinatal asphyxia.	Neonatal resuscitation*** Neonatal seizure**	
 state the common causes of respiratory distress in newborn (RDS & meconium aspirates) & clinical presentation and management 	• Birth injuries *	
• define preterm & low birth weight, epidemiology, causes, clinical presentation, complications & management of preterm low birth weight	Pre-term/ Low birth weight/ SGA***	1hr
babies. describe the common infections of newborn (neonatal sepsis), their etiology /organism patterns, risk factors and types of neonatal sepsis	Neonatal infection***	
• describe the clinical presentation of neonatal sepsis, diagnosis (e.g. sepsis screening), treatment and prevention of neonatal sepsis	Respiratory distress in newborn*	1hr
 describe the causes of neonatal jaundice, clinical presentation, complications& management of different types of neonatal Jaundice. State the causes and clinical presentations of neonatal convulsions and it's 	• Neonatal jaundice***	
 diagnosis and treatment describe the different types of birth injuries & their management 		1hr
		Total = 4 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Infant and young child feeding (IYCF)	
• define Infant and young child feeding (IYCF)	CORE:	
• describe IYCF global & national perspectives and IYCF recommendations	Breast feeding***	1 hr
• describe the effective breast feeding; exclusive breast feeding (including		
colostrum)		
• describe advantages of breastfeeding and hazards of artificial feeding	 Complementary feeding*** 	1hr
describe anatomy of breast and physiology of lactation		
• describe techniques of breastfeeding: position and attachment & effective		
suckling		
• counsel for breast feeding & complimentary feeding		
describe the baby friendly hospital initiatives		
• describe breast milk substitute (BMS) code		
• describe maternal nutrition & drugs in breastfed mother		Total =
• describe guiding principle of complementary feeding & advantage of		2 hrs
complementary feeding, age specific appropriate food		

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Growth and Development, ECD	
• define growth and development	CORE:	
• describe normal growth and development of a child	Growth & Development***	1 hr
• describe factors influencing growth and development		
• state the principles of development		
• describe early childhood development (ECD) and its importance	Failure to thrive**	
• describe ways of assessing growth and development of a child	• Early childhood development*	1hr
• describe growth chart		
• define failure to thrive and state it's causes and management		Total =
		2hrs
At the end of the sessions the students will be able to	Nutritional Disorders	
• define and classify protein energy malnutrition (PEM)	CORE:	
• define severe acute malnutrition (SAM)	PEM, SAM & CMAM***	1 hr
• state the risk factors of protein energy malnutrition		
• describe the clinical presentation, complications & management of a child	• Vitamin deficiencies (Xerophthalmia,	
with severe acute malnutrition	Rickets, Scurvy)***	
• describe the various types of vitamin deficiency disorders & their	Micro nutrient deficiencies (Iron, Zinc,	1 hr
management	Calcium)**	
• describe micro nutrients and their importance in malnutrition/child health	Obesity*	Total =
• list the causes of obesity, consequences & management of obesity		2 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Infectious Diseases	
 list the common infectious diseases of children in Bangladesh discuss the aetiology, clinical presentation, complications, treatment & prevention of vaccine preventable disease. discuss the pathogenesis, clinical presentation, diagnosis & treatment of 	CORE: • Tetanus** • Diphtheria** • Pertussis***	1 hr
 enteric fever discuss the aetiology, clinical presentations of dengue fever and the complications 	 Tuberculosis*** 	1hr
 describe the management of a case of dengue haemorrhagic fever (DHF) and dengue shock syndrome (DSS) describe the aetio-pathology, clinical presentation, complications and management of kala-azar 	 Measles** Mumps** Poliomyelitis*** 	1hr
 describe the aetio-pathology, clinical presentation, complications and management of malaria describe national programme for eradication of kala-azar and malaria 	 Enteric fever*** Dengue*** Malaria*** Kala-azar*** 	1hr 1hr 1hr 1hr
		Total = 7 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Gastrointestinal disorders	
• define diarrhoea, it's actio-pathogenesis, classification, clinical presentation,	CORE:	
complications of diarrhoea	Diarrhoeal disorders & management***	
• define persistent diarrhoea and dysentery	- Acute watery diarrhoea***	
• assess dehydration & to offer appropriate management (Plan A, B,C)	– Dysentery***	1 hr
• select relevant investigations and their interpretation	 Persistent diarrhoea*** 	
• describe the composition of ORS, Cholera Saline, Ringer's solution.		
describe prevention of diarrhoea	Abdominal Pain &Helminthiasis**	1 hr
describe helminthiasis and their management		
		Total =
		2 hrs
At the end of the sessions the students will be able to	Respiratory Disorders	
state the common respiratory illnesses of children	CORE:	
• describe aetiology, clinical presentation, complication& management of	• ARI***	1 hr
pneumonia	Pneumonia***	
• describe aetiology, clinical presentation, complication& management of	Bronchiolitis***	
bronchiolitis		
• state the common causes of respiratory distress	Childhood Asthma***	1hr
• differentiate asthma, pneumonia and bronchiolitis		
• define childhood asthma & describe the presentation & management of asthma.	• Croup and other causes of stridor	
• describe the common differential diagnoses of stridor in children	And their management**	1hr
• describe the management of a case of acute laryngotracheobronchitis	J	
		Total =
		3 hrs

Learning Objectives	Contents	Teaching Hours
 At the end of the sessions the students will be able to list the common causes of anaemia in children classifyanaemia. 	Haematological Disorders	1hr
 classify anachna. describe the risk factors, clinical presentation & management of iron deficiency anaemia. describe the pathogenesis, clinical & laboratory features and management of congenital haemolyticanaemia (CHA) differentiate the laboratory features of these 2 diseases 	 Iron deficiency anaemia*** ITP *** Haemophilia*** Congenital haemolyticanaemia *** Hypoplasticanaemia/ aplastic anaemia** 	1 hr
 counsel the parents about the prognosis of CHA. describe the cause/ differential diagnoses of bleeding disorder. describe the etiopathogenesis, clinical presentations, laboratory features and management of ITP, hemophilia, von Willebrand disease and aplastic anaemia 		Total = 2 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to		
• list the common causes of generalized swelling and haematuria among	Renal disorder	
children		
• define and classify nephrotic syndrome	CORE:	
• describe the aetio-pathology, cardinal features, complication, diagnosis,	Nephrotic syndrome***	1 hr
treatment and prognosis of nephrotic syndrome.		
• describeaetio-pathogenesis of acute glomerulonephritis, clinical	Acute glomerulonephritis***	1 hr
presentation, complication & management of acute glomerulonephritis.	Acute Renal Failure**	
• identify & describe management of a child with hypertensive	Fluid & Electrolytes & acid base balance***	
encephalopathy & acute LVF		
• differentiate nephrotic syndrome from acute glomerulonephritis		
• describe the aetiology, risk factors, pathogenesis, cardinal features,	Urinary Tract Infection***	1hr
complications, laboratory findings & management of UTI in children		
• counsel the parent for prevention of UTI		
• describe the causes, clinical presentation, complication & management of		
acute renal failure		Total =
• describe the fluid & electrolytes homeostasis and acid base homeostasis		3hrs
• name common fluid, electrolytes and describe acid base imbalance.		

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Diseases of Liver	
• state the different causes of jaundice	CORE:	
• describe the clinico-pathological consequences of hepatotrophic viruses	Viral hepatitis ***	1 hr
• describe the aetiopathogenesis, clinical presentation and complications of	Fulminant hepatic failure***	
acute hepatitis	• Hepatic coma/ hepatic encephalopathy***	
• describe the stigmata of chronic liver diseases (CLD)/ cirrhosis of liver		
• list the relevant investigations for a child with liver disease e.g. acute	Portal hypertension **	
hepatitis or chronic liver disease etc and their interpretation.	Chronic liver disease eg. cirrhosis**	1 hr
• describe the treatment of a child with acute hepatitis or chronic liver		
diseases		
• describe the clinical presentation & management of hepatic coma.		
• list the common causes of haematemesis in children		
• describe the aetio-pathogenesis, clinical presentation of a case of portal		Total = 2 hrs
hypertension.		1 Star – 2 mS
• outline the management of a case of hematemesis and malaena		

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Disease of Cardio-vascular system	
classify congenital heart diseases	CORE:	
describe the haemodynamics, clinical presentation, complication &	• Congenital heart disease (ASD, VSD, TOF	2 hrs
management of common congenital heart diseases e.g. ASD, VSD, TOF &	& PDA)***	
PDA.	Rheumatic fever & Rheumatic heart	
describe actio- pathogenesis of acute rheumatic fever	disease***	1 hr
• describe the clinical presentation, diagnosis, & management of acute	• Heart failure in infancy & childhood***	
rheumatic fever and rheumatic carditis.		
describe the prevention of acute rheumatic fever		
• describe the causes, clinical presentation & management of heart failure in		Total =
infant & children		3 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Disease of Nervous system	
describe causes of convulsions in children	CORE:	
• describe the criteria of diagnosis & management of febrile convulsion	Febrile convulsion ***	
• describe the aetio-pathogenesis, clinical presentation & management &	Epilepsy**	
prognosis of acute pyogenic and viral meningitis	Meningitis & Encephalitis	
• describe the aetio-pathogenesis, clinical presentation & management &		1hr
prognosis of encephalitis	Mental retardation **	
• describe the pathogenesis, clinical staging, management & prognosis of	Cerebral palsy**	
tubercular meningitis.		
• describe the CSF findings of acute bacterial, tubercular and viral	Acute Flaccid Paralysis (AFP)***	
meningitis	GuillainBarre syndrome	1hr
• define and classify epilepsy	Transverse myelitis	
• describe the clinical presentation, management & prognosis of epilepsy	Polio myelitis	
• define and list the differential diagnoses of acute flaccid paralysis (AFP).		
• describe the clinical presentation, management & complication of		
GuillainBarre syndrome (GBS), poliomyelitis and transverse myelitis		
• differentiate GBS, polio and transverse myelitis		
• describe causes of mental retardation, it's management, counseling &		Total =
rehabilitation		2 hrs
• define cerebral palsy & describe its causes, types, clinical feature,		
management, counseling & rehabilitation		

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Malignant diseases	
Enumerate common childhood malignancies	CORE:	
define and classify leukaemia	Leukaemia***	1 hr
• describe the clinical presentation and diagnosis of acute leukaemia	Lymphoma & other tumours*	
• describe the blood & bone marrow features of acute leukemia		
• describe the treatment of acute leukaemia		
classify lymphoma		
At the end of the sessions the students will be able to	Endocrine and Chromosomal Disorders	
describe the causes of short stature	CORE:	
• describe the aetiopathology, clinical presentation, diagnosis &	Short stature ***	1 hr
management of hypothyroidism	• Hypothyroidism***	
• classify diabetes mellitus & describe the clinical presentation, diagnosis	_	
& management of type I (IDDM) Diabetes Mellitus	Diabetes Mellitus *	
classify the chromosomal disorders	Down syndrome***	1hr
describe clinical presentation, management and prognosis of Down		
syndrome		Total =
• counsel parents about the prognosis of the diseases mentioned above		2 hrs

Learning Objectives	Contents	Teaching Hours
At the end of the sessions the students will be able to	Connective Tissue & Musculo-skeletal	
• list the common causes of pain and swelling of joints	Disorders	
• classify juvenile idiopathic arthritis (JIA)	CORE:	
• describe clinical manifestations and complications of JIA.	Juvenile idiopathic arthritis (JIA)***	
• describe relevant investigation and interpretation	Myopathy	
• enumerate the different treatment options of JIA	Pseudohypertrophic muscular	1 hr
classify myopathy	dystrophy**	
• describe the clinical features and diagnosis of pseudo hypertrophic		
muscular dystrophy/ Duchene muscular dystrophy (DMD)		
• describe the relevant investigations and their interpretation		
• describe the management including counseling & rehabilitation of		
pseudo hypertrophic muscular dystrophy (DMD)		
At the end of the sessions the students will be able to	Accidental poisoning & Drowning	
• list the common accidents and emergencies of children	CORE:	
• describe the principles and management of poisoning	Kerosene***	
• describe the clinical presentation, complications and management of	Organophosphorus compound***	1 hr
kerosene poisoning		
• describe the clinical presentation, complications and management of	• Snake bite**	
organophosphorus poisoning	Drowning**	1hr
• describe the aetio-pathogenesis, clinical presentation and management of		
snake bite		Total =
• describe the pathogenesis and clinical presentation of drowning (salt and		2 hrs
fresh water drowning)		

Learning Objectives	Contents	Teaching Hours
	Paediatric Psychological and Psychiatric	
At the end of the sessions the students will be able to	disorder	
• state the common behavioral disorders of children	CORE:	
• describe the risk factors & management of nocturnal enuresis	Childhood behavioural disorders**	
differentiate true seizure from pseudo-seizure	• Autism spectrum disorder (ASD)***	
• describe causes, early identification management & counseling of autism	Somatoform disorder**	1 hr
spectrum disorder (ASD)	• Enuresis*	
• describe child abuse and neglect		
	Communication & Counseling	
At the end of the sessions the students will be able to		
describe the steps of communication /counseling	CORE:	1 hr
• counsel a parent or care giver regarding any illness	• Counseling	

Pediatrics Teaching/ Learning Methods & Aids

Teaching methods	Aids
Lectures:	OHP/ Multimedia presentation, Video, Slide
Large group teaching & lectures	• Patients
Small Group teaching:	Simulated Patients
(Clinical)	Dummy (Manikins)
 Bedside teaching 	• Charts e.g. growth chart, IMCI Chart
 Case demonstration & practice 	Reading materials
 Practical Skills (Video) 	• Modules & national guidelines on different childhood
	illnesses
• Field Site training : (with Community Medicine)	• Study guide
Integrated Teaching	 Books, journals
Self-directed learning	• Others e.g. ECG, Instruments, X-ray, photographs

ACADEMIC CALENDAR – PAEDIATRICS

	2 nd Phase			3 rd Phase	4 th Phase / Final	Phase
[T]	4 hour	'S		20 hours	26 hours	
LECTURE	INTRODUCTIONIYCF, Growth & developmePREVENTIVEdisorders, Infectious diseasePAEDIATRICStuberculosis, Respiratory disGastrointestinal disorders, A		IYCF, Growth & development, Nutritional disorders, Infectious diseases, Childhood tuberculosis, Respiratory disorders, Gastrointestinal disorders, Accidental poisoning	Neonatology, Hematologic disorders, Renal disorders, Disease of liver, Disease of cardiovascular system, Diseases of nervous system, Malignant diseases, Endocri chromosomal disorders, Connective tissue & musculoskeletal disorders, Paedia Psychological and Psychiatric disorders, Communication and counseling		
	4 weel				6 weeks	
	2 WEE	KS	2 WEEKS		INDOOR PLACEMENT	
	Day	IMCI	Neonatology		Morning (2 hours)	Evening (2 hours)
	1	IMCI	History writing	No clinical placement in 4 th year	1st WeekD1-2 : Introduction + history takingD3 : IMCID4-5 : Cough & difficult breathing, diarrheaD6 : Presentation & discussion	Self-directed learning Self-directed learning Self-directed learning
	2	IMCI	Clinical examination of i. Newborn ii. Child		2 nd Week D1 : Bleeding disorder D2 : Pallor	Self-directed learning Self-directed learning
	3	IMCI			D3-4 : Fever, Leukaemia D5 : Accidental poisoning	Self-directed learning Self-directed learning
	4	IMCI			D6 : Presentation & discussion	
CAL	5	IMCI	Common neonatal problems:		3 rd Week D1- 2: PEM	Self-directed learning Self-directed learning
CLINICAL	6	IMCI	Perinatal asphyxiaLow birth weightNeonatal sepsis		D3-4: Hepatosplenomegaly D5 : Lymphadenopathy D6 : Presentation & discussion	Self-directed learning Self-directed learning
	7	IMCI	 Neonatal Jaundice Neonatal convulsion 		4 th Week D1- 3: Scanty urine, ARF, NS/AGN D4 : RF & RHD	Self-directed learning Self-directed learning
	8	IMCI	-		D5 : Joint swelling D6 : Presentation & discussion 5th Week	Self-directed learning Self-directed learning
	9	IMCI			D1-4 : Neonatology D5 : IYCF D6 : Presentation & discussion	Self-directed learning Self-directed learning Self-directed learning
	10	IMCI	IYCF	1	6th Week D1-2: Convulsion	Self-directed learning
	11	Assessment	Assessment		D3 : Developmental Assessment D4- 5: OSCE D6- : Feedback	Self-directed learning
	12	Feedback	Feedback			

nnex-		FIRS	ST PROF.	SECON	ND PROF.		THIRD) prof.		FINALPROF.
6m	6m	6m	бm	6m	6m	6m		6m	бm	6m
			4 LE	CTURE	20 L	ECTURE	Ξ	22 LE	CTURE	
			MDG -1 IMCI-2 National pro		IYCF-2 (breast complementary Growth & devel Protein energy r SAM, CMAM- Other Nutritiona Infectious diseas Respiratory disc Gastrointestinal Accidental Poise	feeding-1 lopment-2 nalnutritic 1 al disorder ses -7 orders- 3 disorders) 2 on, rs -1 -2	Renal disord Disease of liv Disease of ca system – 2 Disease of ne 2 Malignant di Endocrine an disorders – 2 Musculoskel 1 Pediatric psy psychiatric d Communicat counseling	c disorders -2 ers -3 ver -3 rdiovascular ervous system $-$ sease -1 d chromosomal etal disorders chological and isorders -1 ion and	
			CLINICAL 4 WEEKS					CLINICAL 6 WEEKS		10 days for block
										teaching
0	Yr	-1	3 rd	Yr -2	4 th	Yr -3		5^{th}	Yr -4	Yr -5

PLAN FOR ACADEMIC CALENDAR – PAEDIATRICS

Name	:		
Session	:Batch	: Roll Number :	•••
Group :	Phase II :	Phase IV	•••
Period o	of attachment :		
	Phase II :	Phase IV :	•••

Contact address with phone No :

NOTE:

- Students must complete the activities shown on the card during the clinical attachment in Paediatrics.
- Card will be signed by registrar grade and above.
- At the end of the attachment the card must be submitted and signed by the Head of Department. The card will be retained by the Department.
- During 2nd round, students have to write down history, to perform physical examination, to observe the management and follow-up including counseling in two of their allocated beds.
- Each student will submit five complete case history.
- At the end of each phase formative assessment will take place and marks of formative assessment will be added to the summative assessment.
- Ward duties will start from 09:30 am to 11:30 am & from 06:00 pm to 08:00 pm (total 04 hours) in each day.

Summative assessment of Paediatrics

Assessment system and mark distribution:

Components	Marks
Formative assessment	5
Paper – II	
Paediatrics	
Written (Group B1 and B2)	
MCQ (Single based answer +	10(5+5)
Multiple True False)	
SEQ(2) + SAQ(6)	35
OSPE	10(5+5)
Oral & Practical	40(30+10)
Clinical:	
1 Long case	20
1 Short case	10
Grand Total	

Pass mark will be 60% in each written, oral, practical & clinical examination

<u>Prerequisite for appearing in Final Professional</u> <u>examination for Paediatrics</u>

After successful completion of Lectures, clinical placement, Integrated teaching & Block posting students will appear in final professional examination. Eligibility for final professional examination is subjected to

- 75% attendance in Lectures and integrated teaching.
- 75% attendance in Clinical placement and block posting.
- 60% marks in Formative assessment.

1st Round (2nd Phase MBBS) Duration – 4 weeks (96 hours)

Learning Objectives:

The student will be able to describe

- describe the definition of paediatrics
- Who is a child? Stages of a child's life
- The current child health statistics e.g. NMR, IMR, under 5 mortality etc.
- Definition and important components of MDG and SDG
- IMCI strategy, the principles of integrated care, IMCI case management process
- Major health problem in paediatrics
- Develop interpersonal and communication skills benefiting a physician in order to discuss illness and its outcome with patient and family.
- Different components of paediatric history particulars of the patient, presenting symptoms, history of the present illness, history of past illness, birth history, feeding history, immunization history, developmental history, treatment history, family history, personal & social history etc.
- Perform clinical examination and will be able to elicit different signs.
- National child health programme- IMCI, IYCF, EPI, CNCP, ETAT etc.

Time Management :

- 2^{nd} Phase = 4 weeks
- 6 days / week, 24 days in Total
- 32 hours in morning
- 32 hours in evening
- 16 hours in Outpatient Department
- 16 hours in Emergency Department

SL	Date	Topic(morning) 9.30- 11.30 am	Teac her's initial	Topic (Evening) 6 - 8 pm	Teac her's initi al
1		 Introduction to Paediatrics. Introduction of IMCI. Introduction of IMCI 		• Reading on Introduction, General danger sign, cough & difficult breathing	
		 student's hand book Introduction of IMCIWall Chart, case recording form Booding on introduction of 		• Practice on relevant cases	
		 Reading on introduction of General danger signs, cough or difficult breathing 			
2		 Video exercise on general danger sign, cough & difficult breathing Case demonstration 		Reading on diarrheaPractice on relevant cases	
		 Case demonstration Clinical practice by the students (up to cough & difficult breathing) 			
3		 Reading on diarrhea Video exercise on diarrhea Control de la control de l		• Reading on fever and Measles	
		 & dehydration Case demonstration on diarrhoea Clinical practice by the students upto diarrhoea 		• Practice on relevant cases	
		• Reading on fever and measles			
4		 Video exercise on fever & measles Case demonstration on fever & measles 		 Reading on ear problem & checking nutritional status: malnutrition & anaemia 	
		 Clinical practice by the students upto fever & measles 		 Practice on relevant cases up to fever 	
		 Readingon ear problem & checking nutritional status: malnutrition & anaemia 			
5		 Video on ear problem, malnutrition & anaemia Demonstration of WHO 		• Reading on immunization status, assessing the child's feeding up to other problems	
		growth chartsCase demonstration on		 Practice on relevant cases 	

	1	
	 malnutrition Reading on immunization status, assessing the child's feeding up to other problems 	
6	 Clinical practice on full assessment by the student Drill on fast breathing Reading Identify treatment & treat the child 	• Reading on identify treatment & treat the child
7	 Reading on counseling & follow-up Introduction of backside of case recording form Clinical practice on full assessment by the students including the backside 	 Reading on counseling & follow-up Practice on relevant cases
8	 Role play on treat the child, demonstration & practice by students Reading on sick young infant Introduction of case recording form of sick young infant 	Reading on sick young Infant
9	 Video on sick young infant &feeding assessment (Positioning &attachment) Case demonstration on sick young infant Clinical practice by the student on sick young infant 	 Practice on full assessment of the students includ back side
10	 Demonstration on feeding assessment (Positioning& attachment) Clinical practice by the students on feeding assessment(Positioning & attachment)in the postnatal ward Drill on weight for age Review & feed back 	 Reading on infant& young child and early childhood development Review
11	Newborn Resuscitation	History Taking
12	Low Birth weight	General Examination
13	Neonatal Jaundice	Examination of GIT

14	• Examination of Respiratory System	Examination of CVS
15	• Examination of Nervous System	Practice on relevant cases
16	Examination of Musculo Skeletal System	Practice on relevant cases
17	• Assessment by OSPE+ MCQ+SAQ	
18	• Feedback with all faculty members	

Marks Obtained (%):

Comment:

GRADING A = 75-100% B = 60-74% C = 50-59% D = 40-49% E = 00-39%

Professor

Department of Paediatrics

Registrar Department of Paediatrics

2nd Round (4th Phase MBBS) Duration – 06 weeks (144 hours)

Learning Objectives:

At the end of round students will be able to-

- develop skills in history taking & physical examination.
- identify sign & symptom of different systems.
- Interpret the findings in terms of diseases, make differential diagnosis & an laboratory investigations.
- Identify instruments commonly used for medical procedures and observe the doctor performing the procedures.
- assess the growth and development of the child and early childhood development(ECD).
- know different nutritional disorders.
- Know the infectious diseases.
- know common neonatal problems.
- diagnose and manage diseases of different systems given below:
 - Alimentary tract, Liver, Biliary tract and pancreatic disease
 - Cardiovascular disease
 - **Respiratory Disease**
 - Kidney and Genito-urinary disease
 - Neurological diseases

Blood disorders Musculoskeletal and connective tissue disorders Endocrine and metabolic diseases Genetic and chromosomal diseases Accidental poisoning and Drowning Paediatric psychiatric and psychological disorders

• To know communication skills and counseling patients

Time Management :

4th Phase = 6 weeks 6 days / week, 36 days in Total 48 hours in morning 48 hours in evening 24 hours in Outpatient Department 24 hours in Emergency Department

Duration of Placement (2 nd Round) from	1to	
Total attendance		

A. History writing :

SL	Case	Date	Supervisor

B. Case Management to be observed

Serial	Case Management	Date	Signature of the
Number	to be observed		teacher
1.	Nutritional: PEM (MAM, SAM), Xerophthalmia ,Rickets		
2.	Cardiovascular: Ventricular septal defect, TOF, HF		
3.	Respiratory: Pneumonia, bronchiolitis, asthma		
4.	Gastrointestinal: diarrhea, hepatitis, chronic liver disease		
5.	Renal: NS, AGN		
6.	Nervous system: Febrile convulsion, meningitis, encephalitis		
7.	Infection: Enteric fever, UTI, Dengue fever, malaria, TB,Kala-azar		
8.	Hematology: ITP, Hemophilia, Thalassemia, Aplastic anemia		
9.	Rheumatology: Rheumatic fever, JIA, HSP, SLE		
10.	Endocrine: Congenital hypothyroidism, DM		
11.	Genetic: Down syndrome, Turner syndrome		
12.	Malignancy: ALL, Lymphoma		
13.	Neonatal: Perinatal asphyxia, LBW, Sepsis, neonatal jaundice		
14.	Accidental poisoning: OPC poisoning, Kerosene poisoning,		
	Corrosive poisoning, Drowning, Snake bite.		

C. Events to be observed:

SL	Events name	Date	Signature
1.	Lumber Puncture		
2.	Bone Marrow Aspiration		
3.	Insertion of Intravenous Line		
4.	Naso-gastric tube introduction		
5.	Per rectal diazepam		
6.	Breast feeding (Positioning & attachment)		
7.	Tepid sponging		
8.	Mantoux test/BCG		

9.	Blood Transfusion/Mobile transfusion
10.	Collection of blood samples
11.	Pulse/Temp/Resp recording
12.	B.P. recording
13.	Collection of throat swab
14.	Collection of urine/stool
15.	Aspiration of Fluid-pleural/abdominal
16.	Use of Pulse Oxymeter, ambu bag
17.	Enema Simplex
18.	Nebulization
19.	Use of glucometer
20.	CPR

D. Clinical classes to attend:

SL No.	Date	Торіс	Signature of the teacher	Signature of evening teacher
01		Introduction		0
02		History taking		
03		IMCI, IYCF		
04		Developmental Assessment		
		And Growth chart		
05		A child with malnutrition		
06		A child with malnutrition		
07		Diarrhoea in children		
08		A Child with cough &		
		difficult breathing		
09		A Child with cough &		
		difficult breathing		
10		Recurrent wheeze in children		
11		Approach to child with fever		
		and rash		
12		An approach to child with		
		jaundice		
13		A Child with		
		lymphadenopathy		
14		A Child with fever, pallor &		
		hepatosplenomegaly		
15		Management of pallor		
16		Congenital Heart disease &		
		Heart failure		
18		Bleeding disorder in children		
		Bleeding disorder in children		
19		A child with joint swelling		
20		A child with joint swelling		
21		A Child with scanty		
		micturition		
22		A Child with scanty		
		micturition		
23		Convulsion In Children		
24		Convulsion In Children		

25	Accidental Poisoning	
26	Snake bite, Drowning	
27	Breast feeding, IYCF	
28	Low Birth Weight	
29	PNA with neonatal resuscitation	IC
30	Neonatal Sepsis	
31	Neonatal Jaundice	
32	Vaccination	
33	Assessment	
34	Feedback	

E. Practical works to be done:

SL		Date	Teacher
1.	Pulse/Respiration Rate /Temperature		
	Measurement		
2.	Use of ambu bag		
3.	Measurement of weight, height/Length/OFC & MUAC		
4.	Use of growth chart		
5.	E.N.T examination-auroscope, tongue depressor		

F. Paedatric Emergency management to be observed

S1		Date	Teacher
1.	Convulsion		
2.	Severe dehydration		
3.	Childhood poisoning Accidents		
4.	Respiratory distress- Acute Asthma		
5.	Heart failure		
6.	Shock		

G. Activities in Child OPD

Activities in Child OPD		Date	Teacher	
(1)	ORT corner			
	i) Preparation ORT			
	ii) Monitoring ORT			
	iii) Counseling mother		••••	
	iv) Preparation of high energy densit	y food		
	(khichuri, halwa)			
(2)	Immunization clinic		•••	
	i) EPI Vaccination observed/practice	e OPV		
	ii) Counseling witnessed practice			
	iii) Cold chain observed		••••	
(3)	Shishu Bikashkendro		••••	
(4)	Lactation Management Centre		••••	
	(identification of problem in breastfee	ding,		
Positioning and attachment)				

H. Activities on Neonatal Ward		Date	Teacher
(1)	Examination of Newborn		
	i)		
	ii)		
(2)	Case management to be observed		
	i) Perinatal Asphysia		
	ii) Low birth weight		
	iii) Prematurity		
	iv) Neonatal jaundice		
	v) Neonatal infection		
	Pneumonia		
	Septicaemia		
	Umbilical infection		
	Oral thrush		
	vi) Essential newborn Care		
(3)	Events to be observed	Date	Teacher
	1. Hand washing		
	2. Breast feeding		
	3. Endotracheal intubation/CPR		
	4. N.G. tube feeding		
	5. Phototherapy		
	6. Exchange transfusion		
	7. Umbilical Catherization		

Marks Obtained (%): Comment:

Professor Department of Paediatrics **Registrar** Department of Paediatrics