

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, elucidate the clinical problems based on these and identify the means of solving the problems
- write requisition form for relevant laboratory tests and perform common bed side lab procedures, justify and interpret them
- outline the principles of management of various diseases considering the patient's socio-economic circumstances
- diagnose and manage medical emergencies
- recognize & provide competent initial care and refer complicated cases to secondary and tertiary care centres at appropriate time
- perform 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:

- diagnose and manage various common medical conditions prevalent in the community and give proper counselling to patients and relatives
- recognize & provide competent initial care and refer complicated cases to secondary and tertiary care centres at appropriate time
- diagnose and manage medical emergencies commonly encountered in hospital practice
- demonstrate the awareness of the need to keep abreast to new knowledge and techniques in medicine

Distribution of teaching - learning hours

| Subject | Lecture (in hours) | | | | Tutorial classes | Integrated teaching | Clinical (bedside teaching), in weeks | | | Total weeks | Block posting | Formative Exam | Summative exam |
|--------------------|-----------------------|-----------------------|-----------------------|------------|------------------|---------------------|---------------------------------------|-----------------------|-----------------------|-------------|----------------|---|---|
| | 2 nd phase | 3 rd phase | 4 th phase | Total | | | 2 nd phase | 3 rd phase | 4 th phase | | | | |
| Internal medicine | 26 | 24 | 110 | 160 | 200 | 20 hrs. | 14 | 06 | 12+2(OP D) | 34 | 4 weeks | Preparatory leave-15 days Exam time -15 days | Preparatory leave-15 days Exam time -30 days |
| Psychiatry | - | - | 20 | 20 | - | | 03 | - | 03 | | | | |
| Dermatology | - | - | 20 | 20 | - | | 03 | - | 03 | | | | |
| Pediatrics | 04 | 20 | 26 | 50 | 25 | | 04 | - | 06 | 10 | | | |
| Physical Medicine | - | - | 05 | 05 | - | | - | 02 | - | 02 | | | |
| Emergency | - | - | - | - | - | | 02 | - | - | 02 | | | |
| Total | 30 | 44 | 181 | 255 | 225 | 20 hrs. | 20 | 14 | 20 | 54 | 4 weeks | | |
| Grand Total | 500 hours | | | | | 58 weeks | | | | | 75 days | | |

Time for exam, preparatory leave, formative & summative assessment is common for all subjects of the phase

Teaching-learning methods, teaching aids and evaluation

| Teaching Methods | | | | Teaching aids | In course evaluation |
|--------------------------------|---|--|---------------------------------------|---|---|
| Large group | Small group | Self learning | Others | | |
| Lecture Integrated Teaching | Bed side clinical teaching in ward, emergency room, OPD, Clinical teaching in CCU/ ICU. Clinical case presentation. Demonstration of Xray,CT scan,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 o Modules & guidelines on different childhood /adult illnesses o Study guide o Books, journals | Item Examination Card final (written), Term Examination Term final (written, OSPE,oral+ practical+ clinical) |

Final Professional Examination:

Marks distribution:

Total marks – 500 (Summative)

- Written = 200(MCQ-40+ SAQ -140+marks for formative assessment -20 =200)
- Oral and Clinical-(Oral 150+Clinical 100= 250)
- OSPE 50.

Related Equipments:

Stethoscope, BP Machine, Hammer, Fluid bags, Blood bags, I.V sets & canula, 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

Learning Objectives and Course Contents in Medicine

| Learning Objectives | Contents | Teaching Hours |
|---|--|--|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • 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 counselling | <p>Introduction to General Medicine (to be covered in 3rd year classes)</p> <p>Overview of Medicine as a discipline and subject</p> <p>Learning Clinical Approach</p> <ol style="list-style-type: none"> 1. Doctor- Patient Relationship, Medical Ethics, Patient's safety. 2. Communication Skills 3. Behavioural Science <p>Approach to common symptoms of disease:</p> <ul style="list-style-type: none"> • 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 • Diarrhoea, Dysentery and Constipation • Oedema and Ascites • Jaundice • Syncope and Seizures • Fainting and Palpitations • Headache and Vertigo • Paralysis, movement disorders & disorders of gait • Coma and other disturbances of consciousness • Common urinary symptoms including anuria, oliguria, nocturia, polyuria, incontinence and enuresis • Anaemia and Bleeding • Enlargement of Lymphnodes, Liver and Spleen • Joint pain, neck pain and back ache | <p>L- 24 hrs.</p> <p>4 hrs(1x4)</p> <p>20 hrs.(1x20)</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|-------------------|
| <p>The students will be able to :</p> <ul style="list-style-type: none"> • 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 recognise the clinical features, provide treatment and advise for prevention and treatment of vitamin deficiency diseases • list and recognise the clinical features, provide treatment and advise to be given for prevention and treatment of deficiency diseases • list and recognise the clinical features, provide treatment and advice to be given for prevention of obesity • apply basic principles of nutrition in clinical medicine | <p>Clinical Medicine: Nutritional Factors in diseases</p> <p>CORE :</p> <ul style="list-style-type: none"> • Energy yielding nutrients • Protein energy malnutrition in adult • The vitamins- deficiency <p>Additional</p> <ul style="list-style-type: none"> • Nutrition of patients in hospital • Obesity <p>Lectures to be covered on</p> <ol style="list-style-type: none"> 1.Nutrients and vitamin deficiency 2.Obesity | <p>L - 2 hrs.</p> |
| <p>The students will be able to :</p> <ul style="list-style-type: none"> • 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 : <ul style="list-style-type: none"> • Arsenic problem • Lead poisoning • Environmental radiation | <p>Climatic and environmental factors in disease</p> <p>CORE :</p> <ul style="list-style-type: none"> • Disorders related to temperature • Disorders related to pollution • Drowning, electrocution and radiation hazards • Health hazards due to climate change | <p>L - 2 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|------------------|
| <p>The students will be able to:</p> <ul style="list-style-type: none"> • 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. | <p>Diseases due to infections</p> <p>CORE :</p> <ul style="list-style-type: none"> • Approach to infectious diseases-diagnostic and therapeutic principles • General principles and rational use of antibiotics • Enteric fever • Acute Diarrhoeal Disorders • Cholera & food poisoning • Amoebiasis, Giardiasis • Tetanus • Influenza and infectious mononucleosis • Malaria • Kala-azar • Filariasis • Helminthic diseases <ul style="list-style-type: none"> ▪ Nematodes ▪ Cestodes ▪ Trematodes • HIV and infections in the immuno compromised conditions • Rabies • Herpes simplex & herpes zoster • Chickenpox • Viral haemorrhagic fever: dengue • Anthrax • Brucellosis | <p>L-17 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|--------------------|
| <p>The student will be able to define, describe prevalence, aetiologic factors, pathophysiology, pathology, investigations and principles of treatment of the common problems in haematology.</p> | <p>Diseases of the blood CORE:</p> <ul style="list-style-type: none"> • Anemia • Leukaemia • Lymphoma • Multiple myeloma • Bleeding disorders • Coagulation disorders <p>Additional:</p> <ul style="list-style-type: none"> • Transfusion medicine • Bone marrow transplantation | <p>L - 9 hrs.</p> |
| <p>The students will be able to:</p> <ul style="list-style-type: none"> • describe applied anatomy and physiology & explain lung function tests; • describe prevalence, aetiologic factors, pathophysiology, pathology, investigations and principles of treatment of common respiratory diseases. | <p>Diseases of the respiratory system CORE :</p> <ul style="list-style-type: none"> • 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 cor pulmonale • Bronchial asthma & pulmonary eosinophilia • Acute and chronic respiratory failure • Neoplasm of the lung <p>Additional:</p> <ul style="list-style-type: none"> • Common occupational lung disease with DPLD | <p>L - 13 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|--------------------|
| <p>The student will be able to :</p> <ul style="list-style-type: none"> • describe applied anatomy, applied physiology and investigations for the diseases of cardiovascular system • describe aetiology, pathophysiology, clinical features, investigations and treatment of Ischaemic heart disease • describe aetiology, pathophysiology, clinical features, investigations and treatment of acute rheumatic fever & rheumatic heart diseases • describe aetiology, pathophysiology, clinical features, investigations and treatment of valvular diseases • describe aetiology, pathophysiology, clinical features, investigations, treatment and complications of infective endocarditis • describe aetiology, pathophysiology, clinical features, investigations, treatment and complications of systemic hypertension • define and describe cardiac arrhythmias | <p>Diseases of the cardiovascular system CORE :</p> <ul style="list-style-type: none"> • Applied anatomy and physiology and investigations • Ischaemic heart disease <ul style="list-style-type: none"> □ Angina pectoris □ Myocardial infarction □ Sudden (cardiac) death • Rheumatic fever • Valvular diseases of heart <ul style="list-style-type: none"> □ Mitral stenosis & regurgitation □ Aortic stenosis & regurgitation □ Tricuspid & pulmonary valve diseases • Infective endocarditis • Hypertension • Cardiac arrhythmias (common) <ul style="list-style-type: none"> ✚ Sinus rhythms ✚ Atrial tachy arrhythmias ✚ Ventricular tachyarrhythmias ✚ Cardiac arrest ✚ Anti arrhythmic drugs • Heart block and pacemakers. • Heart failure – acute and chronic • Acute and chronic pericarditis, pericardial effusion, & cardiac tamponade <p>Additional :</p> <ul style="list-style-type: none"> • Peripheral arterial diseases • Common congenital heart diseases in child and adult • Venous Thrombosis and Pulmonary Thromboembolism | <p>L - 12 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|--|--------------------|
| <ul style="list-style-type: none"> • 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 aetiology, pathophysiology, clinical features, investigations, treatment and complications of diseases of the pericardium | Congenital heart diseases <ul style="list-style-type: none"> ▪ ASD ▪ VSD ▪ PDA ▪ TOF ▪ Coarctation of Aorta Acute circulatory failure Diseases of pericardium <ul style="list-style-type: none"> ▪ Acute pericarditis ▪ Pericardial effusion Cardiac tamponade Cardiomyopathies | |
| <p>The student will be able to</p> <ul style="list-style-type: none"> • define, describe the aetiology, pathophysiology, investigation, complications and management. of peptic ulcer disease • define, describe the aetiology, 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 aetiology, pathophysiology, investigation and management of dysphagia. • define & describe the aetiology pathophysiology, investigation and management of malabsorption disorders • define & describe the aetiology, pathophysiology, investigation and management of Inflammatory bowel disease - Crohn's disease, Ulcerative colitis. • define & describe the aetiology, pathophysiology, investigation and management of acute pancreatitis • define & describe the aetiology, pathophysiology, investigation and management of functional disorders of GIT • define & describe the aetiology, pathophysiology, investigation, complications and management of acute and chronic liver disease | <p>Diseases of the Gastro-intestinal and Hepato-biliary systems</p> <p>CORE :</p> <ul style="list-style-type: none"> • Applied physiology and investigation of the alimentary tract. • Stomatitis and Mouth Ulcers • Peptic Ulcer disease and non-ulcer dyspepsia • Malabsorption syndrome • Irritable bowel syndrome • Inflammatory bowel disease • Acute viral hepatitis • Chronic Liver Diseases and its complications • Acute and chronic Pancreatitis <p>Additional:</p> <ul style="list-style-type: none"> • Dysphagia • Hepatotoxicity of drugs • Carcinoma of stomach/colon, Hepatocellular carcinoma | <p>L – 12 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>The students will be able to</p> <ul style="list-style-type: none"> • 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. | <p>Nephrology & Urinary System</p> <p>CORE :</p> <ul style="list-style-type: none"> • Nephritic & Nephrotic Illness • UTI/ Pyelonephritis • ARF/Acute Kidney Injury • Chronic Kidney Disease • Renal manifestations of systemic diseases <p>Additional:</p> <ul style="list-style-type: none"> • Adult polycystic kidney disease | <p>5 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|----------------|
| <p>Student should be able to:</p> <ul style="list-style-type: none"> • 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 • perform acute management & Subsequent management. • identify complicating, management • value the importance of rehabilitation / return of function • 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. • identify emergencies and manage • make D/D • describe management & Rehabilitation | <p>Neurology</p> <ul style="list-style-type: none"> • Concept of neurological diagnosis including investigations • Cerebrovascular diseases(I &II) • Headache • Meningitis: viral, bacterial and tuberculous • Encephalitis • Peripheral neuropathy • Disorder of cranial nerves | <p>13 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------------------|
| <p>Student should be able to:</p> <ul style="list-style-type: none"> • 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 aetiologic 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 Neuromuscular junctional defect. • plan investigations in a suspected muscle diseases • provide treatment for myasthenia gravis. • advises & genetic counselling for muscular dystrophy. | <ul style="list-style-type: none"> • Epilepsy • Extrapyramidal diseases • Common compressive and noncompressive spinal cord syndromes • Myasthenia gravis • Myopathies and skeletal muscle disease | <p>13 hrs. (Total)</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|-------------------|
| <p>The students will be able to :</p> <ul style="list-style-type: none"> • describe causes, clinical features and management of fluid and electrolyte disorders including <ul style="list-style-type: none"> □ Hyponatremia □ Hypernatremia □ Hyperkalemia □ Hypokalemia • describe causes, clinical features and management of disorders of acid-base balance in particular relevance to vomiting, diagnoses of uraemia and diabetic ketoacidosis. | <p>Water and electrolytes and acid-base homeostasis</p> <p>CORE :</p> <ul style="list-style-type: none"> • Disorders due to Sodium and Potassium imbalance • Disorders of acid-base balance | <p>L – 2 hrs.</p> |
| <p>The student will be able to :</p> <ul style="list-style-type: none"> • describe applied anatomy, physiology and investigations of endocrine disorders • describe epidemiology, aetiology, pathophysiology, clinical features, complications, investigation, treatment and management of diabetes mellitus • describe epidemiology, aetiology, pathophysiology, clinical features, complications, investigation, treatment and management of disorders of thyroid including <ul style="list-style-type: none"> □ Hyperthyroidism □ Hypothyroidism □ Solitary thyroid nodule □ Parathyroid disorders and calcium metabolism • describe epidemiology, aetiology, pathophysiology, clinical features, complications, investigation, treatment and management disorders of adrenal gland including <ul style="list-style-type: none"> □ Cushing’s syndrome □ Addison’s disease • describe epidemiology, aetiology, pathophysiology, clinical features, complications, investigation, treatment and management of disorders of hypothalamus and pituitary gland including <ul style="list-style-type: none"> □ Acromegaly, Sheehan’s syndrome | <p>Endocrine and Metabolic diseases</p> <p>CORE :</p> <ul style="list-style-type: none"> • Diabetes mellitus(I & II) • Thyrotoxicosis • Hypothyroidism. • Cushing’s syndrome and Addisons disease. • Hypo- and Hyperparathyroidism • Calcium and Vitamin –D related disorders <p><i>Additional</i></p> <ul style="list-style-type: none"> • Acromegaly and Sheehan’s syndrome | <p>L – 6 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|-------------------|
| <p>The students will be able to:</p> <ul style="list-style-type: none"> • classify diseases of the connective tissues, joints and bones • mention the epidemiology, aetiology, pathology, clinical features, complications, investigation, treatment and management of Inflammatory joint diseases . • mention epidemiology, aetiology, pathogenesis, clinical features, investigation, diagnosis, treatment and management of osteoarthritis. • mention the epidemiology, aetiology, pathogenesis, clinical features, investigation, diagnosis, treatment and management of connective tissue diseases including systemic lupus erythematosus & systemic sclerosis • mention the epidemiology, aetiology, clinical features, investigation, diagnosis, treatment and management of gout • mention the causes, clinical features, investigations, treatment and management of back disorders including lowback pain & spondylosis | <p>Connective tissue Disorder</p> <p>CORE :</p> <ul style="list-style-type: none"> • Rheumatoid arthritis • Degenerative joint diseases • Gout • Ankylosing spondylitis and other spondyloarthropathies. • The collagen vascular diseases including systemic lupus erythematosus, systemic sclerosis • Osteoporosis | <p>L - 6 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|-------------------|
| <p>The students will be able to :</p> <ul style="list-style-type: none"> • 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. | <p>Geriatric medicine</p> <p>CORE :</p> <ul style="list-style-type: none"> • General Principles of treating the elderly • Health problems of the elderly • Four Geriatric Giants – Acute confusional State, Falls, Incontinence and Frailty. • Healthy aging • Rehabilitation and Physical medicine. | <p>L – 3 hrs.</p> |
| <p>The students will be able to describe medical genetics including</p> <ul style="list-style-type: none"> ❑ Genes and chromosomes ❑ Mutation ❑ Genes in individual ❑ Genes in families ❑ Disorders of multifactorial causation ❑ Chromosomal aberrations <p>The student will be able to describe the techniques of Medical genetics including</p> <ul style="list-style-type: none"> ❑ Cyto genetics ❑ Biochemical genetics ❑ Molecular genetics ❑ Prenatal diagnosis ❑ Neoplasia : chromosomal & DNA analysis | <p>Genetic Disorders</p> <p>CORE :</p> <ul style="list-style-type: none"> • General concept of genetic diseases and management of genetic disorder • Single gene disorder • Clinical aspects of medical biotechnology • Chromosomal disorder(Down, Turner, klinefelters) | <p>L -2 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|--------------------------------------|
| <p>The students will be able to describe basic facts of immunology including</p> <ul style="list-style-type: none"> • Immunoglobulins & antibodies • Cellular immunity • Autoimmunity <p>The students will be able to describe aetiology, pathogenesis, pathology, clinical features, investigations and treatment of</p> <ul style="list-style-type: none"> • Immunologic deficiency diseases • Autoimmune disease • Allergic disease | <p>Immunologic disorders</p> <p>CORE :</p> <ul style="list-style-type: none"> • Immunologic deficiency diseases • Auto immunity, Allergy & hypersensitivity and immunogenetics & transplantation • Immunosuppressive drugs | <p>2 hrs.</p> |
| <p>The students will be able to describe :</p> <ul style="list-style-type: none"> • prevention and early detection of common cancers • primary cancer treatment including <ul style="list-style-type: none"> □ Surgery and radiation □ Chemotherapy □ Adjuvant therapy • evaluation of tumour response including <ul style="list-style-type: none"> □ Tumour size □ Tumour markers □ General well being and performance status • role of nuclear medicine in diagnosis and treatment in Medical conditions. | <p>Oncology, Principles</p> <p>CORE :</p> <ul style="list-style-type: none"> • General principles of diagnosis and management of neoplastic diseases • Palliative care | <p>2 hr.</p> <p>1hr</p> <p>1 hr.</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>The students will be able to describe :</p> <ul style="list-style-type: none"> • initial evaluation of the patient with poisoning or drug overdose • general principles of management including <ul style="list-style-type: none"> ❑ Care of unconscious patient ❑ Respiratory support ❑ Cardiovascular support ❑ Special problems such as hypothermia, hypertension, arrhythmia, convulsions • management of common specific poisonings including <ul style="list-style-type: none"> ❑ 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 . | <p>Poisoning and drug overdose</p> <p>CORE :</p> <ul style="list-style-type: none"> • Initial evaluation of the patient with poisoning or drug overdose and general principles of management • Treatment of common specific poisonings <ol style="list-style-type: none"> a) Organophosphorous compounds b) Sedatives and Hypnotics c) Household Poisons • Venomous stings, insect bites, poisonous snakes and insects. <p>Additional:</p> <ul style="list-style-type: none"> • Acute and chronic effects of alcohol and Methanol and their management • Copper sulphate, Paracetamol, Kerosene etc | <p>6 hrs.</p> |
| <p>The students will be able to describe :</p> <ul style="list-style-type: none"> • general principles of intensive care • acute disturbances of haemodynamic function including Shock • aetiology, pathogenesis, clinical features, investigations, and management in acute medical emergency | <p>Emergency medicine</p> <p>CORE :</p> <ul style="list-style-type: none"> • 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 <p>Environmental disease & heat illness Global warming & Health hazards</p> | <p>6 hrs.</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|---|
| <p>The students should be able to :</p> <ul style="list-style-type: none"> • 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 : <ul style="list-style-type: none"> □ 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 abnormal biochemical laboratory values of common disease • 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 • write a complete case record with all necessary details | <p>Clinical Methods in the Practice of Medicine</p> <p>CORE :</p> <ul style="list-style-type: none"> • History Taking • Physical Examination • Investigations • Diagnosis • Principles of treatment • Interpersonal skills • Communication skills • Doctor - Patient relationship • Ethical Behaviour • Patient's Safety • Referral services • Medical Certificate • Common Clinical Procedures <ul style="list-style-type: none"> □ Injections □ IV infusion and transfusion □ FIRST AID □ Intubation □ CPR □ Hyperpyrexia □ ECG □ Skin Sensitivity Test | <p>W-14 weeks (3rd year) See Appendix-1</p> <p>W – 6 weeks (4th year) See Appendix-2</p> <p>W - 12weeks (5th year) See Appendix-3</p> <p>Opd-2 weeks</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|----------------|
| <ul style="list-style-type: none"> • 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 • perform 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 | <p>CORE</p> <ul style="list-style-type: none"> • Lumbar puncture • Bone marrow aspiration • Thoracocentesis / paracentesis • Oxygen Therapy • Oropharyngeal suction • Shock management • Bronchodilator inhalation technique, nebulization • Urethral Catheterisation <p>Additional</p> <ul style="list-style-type: none"> • Administration of Enema • Postural drainage • Dialysis • Electro convulsive therapy | |
| <p>Attitude :</p> <p>The student should:</p> <ol style="list-style-type: none"> 1. develop a proper attitude towards patients, colleagues and the staff. 2. demonstrate empathy and humane approach towards patients, relatives and attendants. 3. maintain ethical behaviour in all aspects of medical practice. 4. develop a holistic attitude towards medicine taking in social and cultural factors in each case 5. obtain informed consent for any examination / procedure 6. appreciate patients right to privacy 7. adopt universal precautions for self protection against HIV and hepatitis and counsel patients 8. be motivated to perform skin sensitivity tests for drugs and serum | <p>Attitudes to be supervised by clinical teachers.</p> | |

Clinical Taching

| 2 nd Phase | 1 st Round | 14 Weeks | |
|--|---|----------------|--|
| Learning Objectives | Contents | Teaching Hours | |
| <p>The student will be able to :</p> <ul style="list-style-type: none"> • narrate the role of ward duties in learning clinical medicine. • develop interpersonal and communication skills befitting a physician in order to discuss illness and its outcome with patient and family • elicit different components of history and understand its importance – particulars of the patient, the presenting symptoms, the history of the present illness, H/O previous illness, Family history, Personal & Social history, Drug history, & allergy, menstrual history (in female) • record and analyze symptoms of presentation <p>History taking</p> <p>The student will be able to ask patients about :</p> <ul style="list-style-type: none"> • cough- nature, relation with chest pain, time of the day, any particular condition aggravates or relieves: • shortness of breath- onset, duration, relation with exertion, episodic or not etc. • haemoptysis- amount, is it rusty or fresh blood • sputum- amount, colour, odour, associated with wheezing. | <p>Introduction to clinical ward duties and approach to a patient</p> <ul style="list-style-type: none"> □ Art of Medicine □ Doctor patient relationship □ Different component of history □ Symptom analysis in relation to diseases of different systems: • Respiratory System <ul style="list-style-type: none"> □ Shortness of breath □ Haemoptysis □ Cough □ Sputum □ Chest pain □ Fever | | |

| Learning Objectives | Contents | Teaching Hours |
|--|--|----------------|
| <ul style="list-style-type: none"> • 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. <p>The student will be able to ask patients about :</p> <ul style="list-style-type: none"> • H/O vaccination, transfusion • Chronology of development of symptoms with different parameters. | <p><u>CVS</u></p> <ul style="list-style-type: none"> • Palpitation • Chest pain • Leg oedema • Shortness of breath <p><u>GIT</u></p> <ul style="list-style-type: none"> • Abdominal pain • Haematemesis and Melaena • Loss of appetite • Diarrhoea & Constipation • Haematochezia • Nausea, Vomiting • Weight loss • Difficulty in swallowing <p>Hepatobiliary</p> <ul style="list-style-type: none"> • Jaundice • Abdominal swelling • Impaired consciousness <p><u>Rheumatology</u></p> <ul style="list-style-type: none"> • Multiple joint pain • Monoarticular joint pain | |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>The student will be able to:</p> <ul style="list-style-type: none"> 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. <p>The student will be able to:</p> <ul style="list-style-type: none"> ask the patients about the presenting symptom define – oliguria, anuria, polyuria, dysuria <p>Students will be able to take relevant history, related to disorders of Haemopoetic system</p> <p>The student will be able to :</p> <ul style="list-style-type: none"> take detail history about fever and different tropical & infection diseases, animal bite diseases, animal bite like snakebite, dog bite. | <p><u>Nervous System</u></p> <ul style="list-style-type: none"> Loss of consciousness Fit or convulsion Syncope Paralysis Headache Vertigo <p><u>Urinary System</u></p> <ul style="list-style-type: none"> Puffiness of face Oliguria & anuria, Polyuria Dysuria Incontinence Nocturnal enuresis Loin pain Pus per urethra <p><u>Endocrine System</u></p> <ul style="list-style-type: none"> Swelling of neck Weight gain Weight loss <p><u>Haemopoetic system</u></p> <ul style="list-style-type: none"> Pallor Bleeding <p><u>Other</u></p> <ul style="list-style-type: none"> Tropical and infections diseases | |

| Learning Objectives | Contents | Teaching Hours |
|--|--|----------------|
| <p>The student will be able to</p> <ul style="list-style-type: none"> perform general physical examination and observe record and interpret findings. | <p><u>General examination</u></p> <ul style="list-style-type: none"> 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 |
|--|--|----------------|
| <p>Students will be able to :</p> <ul style="list-style-type: none"> • 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 <p>Students will be able to :</p> <ul style="list-style-type: none"> • inspect the chest, palpate trachea, chest for expansion, vocal fremitus • percuss the lungs. • auscultate for breath sounds, rhonchi, creps, pleural rub. | <p><u>Systemic examination</u></p> <p><u>CVS</u></p> <ul style="list-style-type: none"> • Pulse, BP, JVP • Pericardium <ul style="list-style-type: none"> □ Inspection □ Palpation □ Percussion □ Auscultation of heart □ Auscultation of lung base • Related G/E of CVS e.g. clubbing, cyanosis, edema. <p><u>Respiratory System</u></p> <ul style="list-style-type: none"> • Respiration rate /Type • Inspection • Palpation • Percussion, Auscultation • Examination of sputum • Lung function test • Pleural fluid aspiration | |

| Learning Objectives | Contents | Teaching Hours |
|---|--|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • assess levels of consciousness • identify the facial expression • examine cranial nerves <p>Students will be able to:</p> <ul style="list-style-type: none"> • 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 | <p><u>Nervous System</u></p> <ul style="list-style-type: none"> • Higher mental function <ul style="list-style-type: none"> □ Co-operation □ Appearance □ Level of consciousness □ GCS □ Memory □ Speech □ Orientation of time, space, person □ Hallucination, Delusion, Illusion • Cranial nerves. (1st -12th) • Motor function • Sensory function • Gait • Signs of meningeal irritation • Examination of peripheral nerves • Involuntary movement <p>CSF Study</p> <p><u>Ophthalmoscopy</u></p> <ul style="list-style-type: none"> • Ophthalmoscope | |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • assess joints and muscles by inspection, palpation • test range of movement • test muscle around joints • assess posture <p>Students will be able to:</p> <ul style="list-style-type: none"> • inspect oral cavity, oropharynx. • palpate abdomen e.g. Liver, spleen, kidney • demonstrate fluid thrill, shifting dullness • perform PR examination • observe aspiration of peritoneal fluid <p>Students will be able to:</p> <ul style="list-style-type: none"> • detect general signs of renal disease • perform bimanual palpation of kidney, renal tenderness • examination gthitalia • examine urine for sugar, albumin. • prepare and read blood film (eg. Malarial parasite) <p>The student will be able to do: physical examination and certain minor procedures e.g. blood film, ESR, Hb%, Urine – albumia, Sugar, Stool ME.</p> | <p><u>Rheumatology</u></p> <ul style="list-style-type: none"> • Joints → (Look & feel) • Inspection • Palpation • Movement <p>Muscle</p> <ul style="list-style-type: none"> • Wasting • Swelling <p>Skeleton</p> <ul style="list-style-type: none"> • Survey <p><u>GIT</u></p> <ul style="list-style-type: none"> • Inspection of oral cavity & oropharynx • Abdomen Inspection / Palpation • Test for ascites • Percussion/ auscultation <ul style="list-style-type: none"> □ Per-rectal examination □ Examination of stool, vomitus, groin, genitalia, perianal region □ Aspiration of peritoneal fluid <p><u>Urinary system</u></p> <ul style="list-style-type: none"> • Kidneys • Bladder • Urethral orifice • Urine analysis <p><u>Haemopoetic system</u></p> <p><u>Tropical and infectious illness</u></p> <p><u>Animal bite – snakebite, dog bite</u></p> | |

Clinical Registration No. _____

Name : _____

Roll No. _____ Batch _____

Medicine unit : _____

Professor : _____

Duration of Placement (1st Round) from _____ to _____**Grading****A = 75 - 100****B = 60 - 74****C = 50 - 59****D = 40 - 49****E = 00 - 39**

| 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. | | |

Total attendance _____ days, out of _____ days

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

Comment _____

Professor
Department of MedicineRegistrar
Department of Medicine

Clinical Teaching

3rd Phase2nd Round

6 Weeks

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>Continue to develop skills in history taking & physical examination.</p> <p>Students will be able to:</p> <ul style="list-style-type: none"> interpret the findings in terms of diseases, possible causes, make a differential diagnosis & plan investigations. | <p>Approach to Sign & Symptom</p> <p><u>GIT & HBS</u></p> <ul style="list-style-type: none"> Ascites Hepatosplenomegaly Oral ulcer Abdominal swelling Abdominal pain Vomiting & diarrhoea Haematemesis, melaena Jaundice <p><u>CVS</u></p> <ul style="list-style-type: none"> Respiratory distress Chest pain Jugular Venous Pulse (JVP) Hypertension Abnormal heart sound & murmur Pulse <p><u>Respiratory System</u></p> <ul style="list-style-type: none"> Haemoptysis Cough Pleural effusion Pneumothorax Collapse, Consolidation, Fibrosis Breath sound Sputum analysis | |

| Learning Objectives | Contents | Teaching Hours |
|--|--|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> interpret the findings in terms of diseases, possible causes, to make a differential diagnosis & plan investigations. <p>Students will be able to:</p> <ul style="list-style-type: none"> be acquainted with instruments commonly used for medical procedure observe the doctors performing the procedures | <p><u>Urinary System</u> Approach to patient with :</p> <ul style="list-style-type: none"> Oliguria, polyuria, anuria Anasarca Urine analysis <p><u>Nervous System</u></p> <ul style="list-style-type: none"> Unconscious patient Hemiplegia, monoplegia, paraplegia Upper Motor Neuron Lesion (UML) Lower Motor Neuron Lesion (LML) Cerebellar sign Extrapyramidal sign Involuntary movement Vertigo & Headache <p><u>Haematology</u> Approach to patient with :</p> <ul style="list-style-type: none"> Bleeding disorder Anaemia Lymphadenopathy <p><u>Rheumatology</u> Approach to patient with</p> <ul style="list-style-type: none"> polyarthritis oligoarthritis <p><u>Clinical skills</u></p> <ul style="list-style-type: none"> 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)**Grading****A = 75 - 100****B = 60 - 74****C = 50 - 59****D = 40 - 49****E = 00 - 39**

Name of the student: _____

Roll No. _____

Medicine unit: _____

Name of Professor: _____

Duration of Placement (2nd Round) from _____ to _____

Total attendance _____ days, out of _____ days

| No. | Items | Marks obtained | Signature of Teacher |
|-----|--------------------------------------|----------------|----------------------|
| 1. | Review of clinical methods | | |
| 2. | Respiratory diseases | | |
| 3. | Cardiovascular diseases | | |
| 4. | Alimentary & Hepatobiliary disorders | | |
| 5. | Renal diseases | | |
| 6. | Endocrine disorders | | |
| 7. | Haemopoietic disorders | | |
| 8. | Diseases of Nervous system | | |
| 9. | Infectious diseases | | |
| 10. | Common Laboratory investigations | | |
| 11. | Basic knowledge on X-ray & ECG | | |

Marks Obtained:***Comments:*****Professor**

Department of Medicine

Registrar

Department of Medicine

Clinical Teaching

| 4 th Phase Learning Objectives | 3 rd Round Contents | 12 Weeks Teaching Hours |
|--|---|----------------------------|
| <p>Students will be able to :</p> <ul style="list-style-type: none"> • take detailed history from a patient • carry out detailed general and systemic clinical examination • present long cases on different body system including <ul style="list-style-type: none"> 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 medical conditions | <p>Review of history taking & clinical examinations (3rd year, 4th year)</p> <p><i>Case discussion</i></p> <ul style="list-style-type: none"> □ Long cases <p><u>Respiratory System</u></p> <ul style="list-style-type: none"> □ COPD □ Bronchogenic carcinoma □ Pneumonia <p><i>CVS</i></p> <ul style="list-style-type: none"> □ CCF □ CHD □ IHD □ VHD □ Rheumatic heart disease □ Hypertension □ Pericardial diseases | |

| Learning Objectives | Contents | Teaching Hours |
|---|--|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • 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. | <p style="text-align: center;"><i>GIT</i></p> <ul style="list-style-type: none"> • Haematemesis & meelena • PUD • V. Hepatitis • CLD • Carcinoma of Liver • Pancreatitis • Hepatic failure <p style="text-align: center;"><i>Endocrine</i></p> <ul style="list-style-type: none"> • Hyperthyroidism • Hypothyroidism • DM <p style="text-align: center;"><i>Rheumatology</i></p> <ul style="list-style-type: none"> • Rheumatoid arthritis • Seronegative arthritis • Osteoarthritis • Gout <p style="text-align: center;"><i>Urinary</i></p> <ul style="list-style-type: none"> • Glomerulonephritis • Nephrotic Syndrome • Acute Kidney Injury • Chronic Kidney Disease • Urinary Tract Infection <p style="text-align: center;"><i>Haematology</i></p> <ul style="list-style-type: none"> • Anaemia • Leukaemia • Bleeding diathesis | |

| Learning Objectives | Contents | Teaching Hours |
|---|--|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> demonstrate in-depth skills, in history taking, clinical examination, diagnosis and management of NS diseases & infectious diseases. | <p>Nervous System</p> <ul style="list-style-type: none"> CVD Multiple Sclerosis Myasthenia Gravis Parkinsonism Peripheral neuropathy GBS Cranial neuropathy <p>Infection</p> <ul style="list-style-type: none"> Enteric fever Malaria Kala Azar Filarisis Amoebiasis Tetanus Rabies Poisoning Snake bite Tuberculosis Diarroeha & Dysentery Shock Dengue | |

| Learning Objectives | Contents | Teaching Hours |
|---|---|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • present short cases on different body system <p>Students will be able to:</p> <ul style="list-style-type: none"> • demonstrate certain skills • carry out certain procedures e.g. lumbar puncture under supervision, IM injection, IV injection, Infusion | <p>Short Cases :</p> <ul style="list-style-type: none"> ❑ Hepato or Splenomegaly or both ❑ Pleural effusion ❑ Pneumothorax ❑ Consolidation ❑ Collapse ❑ Fibrosis ❑ Hemiplegia ❑ Paraplegia ❑ Facial nerve palsy (UMN + LMN) ❑ Ascites ❑ Lymphadenopathy ❑ Thyroid ❑ Examination of knee ❑ Examination of precordium ❑ Auscultation of lung <p>Clinical skills :</p> <ul style="list-style-type: none"> • Bone Marrow aspiration • Aspiration of serous fluid <ul style="list-style-type: none"> ❑ Pleural ❑ Peritoneal ❑ Pericardial • Foley’s catheterization • Intercostal tube • I/V canula • Lumbar puncture • Venesection • CPR | |

| Learning Objectives | Contents | Teaching Hours |
|--|---|----------------|
| <p>Students will be able to :</p> <ul style="list-style-type: none"> • interpret routine examination findings for Blood, Stool, Urine • interpret FBS, GTT and HbA1C • interpret certain specific laboratory tests e.g. Liver Function Tests etc. <p>Students will be able to:</p> <ul style="list-style-type: none"> • interpret common radiological findings on plain skiagrams of chest, skull, sinuses, neck, abdomen, pelvis, upper and lower extremities | <p>Interpretation of Laboratory Data</p> <ul style="list-style-type: none"> • General : <ul style="list-style-type: none"> □ Blood for R/E □ Urine for R/E □ Stool for R/E □ FBS / GTT • Specific : <ul style="list-style-type: none"> □ Liver function test (LFT) □ Thyroid function test (TFT) □ Kidney function test □ Pulmonary 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. • Radiology : <ul style="list-style-type: none"> □ X-ray chest □ X-ray <ul style="list-style-type: none"> • Bones • Skull • Joints □ X-ray abdomen | |

| Learning Objectives | Contents | Teaching Hours |
|--|---|----------------|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • interpret findings on certain contrast X-rays e.g. Barium Meal etc. • establish a good-student patient relationship • communicate with patients in understanding manner. • observe and assist in terminal care • observe in care of death & dying patient | <ul style="list-style-type: none"> • Contrast X-rays : <ul style="list-style-type: none"> □ Barium Meal □ Barium Follow through □ Barium Enema □ OCG □ ERC □ Myelogram □ IVU. • USG • CT & MRI • Communication Skills • 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

Card - III (5th Year)

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

Name of the student : _____

Roll No. _____

Medicine unit : _____

Name of Professor : _____

Duration of Placement (3rd 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 tissue 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

Physical Medicine

| Learning Objectives | Contents | Teaching Hours |
|---|--|--|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • describe historical aspect, spectrum of physical medicine, and various modalities of physical therapy • describe rehabilitative management of certain conditions including: <ul style="list-style-type: none"> □ Rheumatoid Arthritis and other inflammatory arthritides □ Degenerative Joint diseases □ Stroke □ Degenerative Joint diseases □ Stroke and other neurological diseases • identify the various modalities of physical therapy • plan to apply physical therapy for certain clinical conditions | <p>CORE:</p> <ul style="list-style-type: none"> • Introduction to physical Medicine and Rehabilitation | <p>5th year 5 hours lecture</p> |

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

| Learning Objectives | Contents | Teaching Hours |
|---|---|--|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • outline the role and importance of Physical Medicine • identify the various modalities of Physical Medicine • plan to apply physical therapy for certain clinical conditions | <ul style="list-style-type: none"> • Introduction to Physical Medicine <ul style="list-style-type: none"> □ History □ Background □ Spectrum □ Visit to Physical Medicine Ward • Modalities of Physical Therapy • Management and Rehabilitation of <ul style="list-style-type: none"> □ Neck pain □ Back pain □ Painful Conditions of upper & lower extremities □ Neurological conditions including Stroke □ Spinal injuries □ Arthritis & allied conditions □ Non-surgical & post operative complications | <p>2 hr</p> <p>2 hrs</p> <p>12 hrs</p> |

CARD for Physical Medicine

| 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 | | |
| Management and Rehabilitation of Back Pain | | |
| Management and Rehabilitation of painful conditions of upper & lower limbs | | |
| Management and Rehabilitation of stroke and other Neurological conditions | | |
| Management and Rehabilitation of Spinal 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 paralytic conditions | | |

**Time Schedule
Medicine lecture**

| Discipline | 2nd phase (In hrs.) | 3rd phase (In hrs.) | 4th phase (In hrs.) | Total hours |
|----------------------|---|---|---|--------------------|
| Internal Medicine | 26 | 24 | 110 hours | 160 |
| Pediatrics | 04 | 20 | 26 hours | 50 |
| Psychiatry | - | - | 20 hours | 20 |
| Skin & VD | - | - | 20 hours | 20 |
| Physical Medicine | - | - | 05 hours | 05 |
| Total | 30 hrs. | 44 hrs. | 181 hrs. | 255 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 Infectious disease | Total weeks |
|-----------------|-----------------------------|------------------------------|-------------------------------|-------------------------------|---|------------------------|
| 2 nd | 14 | 02 | 04 | - | - | 20 |
| 3 rd | 6 | PHYSICAL MEDICINE 02 | - | 03 | 03 | 14 |
| 4 th | 12+2 (OPD) =14 | - | 06 | - | - | 20 |
| Total | 34 wks. | 4 wks. | 10 wks. | 03 wks. | 03 wks. | 54 |

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 MCQ (Format- 10 multiple true false and 10 single best response) SAQ Marks from formative assessment | | | | 100 |
| | 20 70 10 | | | |
| Paper - II- Internal medicine with allied subjects & Paediatrics Psychiatry, Dermatology& Veneral disease, Neurology, Poisoning, Infections, Geriatrics, Genetics and Paediatrics MCQ SAQ Marks from formative assessment | Int.Me.& Allied | Paediatrics | Total | 100 |
| | 10 | 10 | 20 | |
| | 35 | 35 | 70 | |
| | 05 | 05 | 10 | |
| | | | Total | 200 |
| OSPE | | 10 stations x 05 | | 50 |
| ORAL & CLINICAL | | Oral | | 150 |
| 6 Examiners in 3 boards. Board- I- 1 examiner from internal Medicine 1 examiner from internal Medicine Board-II- 1 examiner from Internal Medicine 1 examiner from sub specialities/ allied subjects Board- III- 1 examiner from Paediatrics 1 examiner from Paediatrics <u>Examiner will be selected according to seniority</u> During oral examination Xrays, ECG, photographs, lab data etc. are to be included and 50 marks are to be allotted for this purpose No temp. Chart, slides, specimen in Practical Exam. | | 50 Marks for Each Board (10 marks for each board for Xray, ECG,lab data, photographs etc and 40 marks for each board for structured oral examination) Clinical 1 Long case =50 Marks (IM) 3 Short cases=30 Marks (IM) 2 Short cases=20 Marks (Paed) | | (Oral- 40 marks x 3 boards) =120 (Practical-10 marks x 3 boards) =30 |
| | | | | 100 |
| Grand Total | | | | 500 |

There will be separate Answer Script for MCQ. Pass marks 60% in each of written, oral and practical examinations.

After aggregating obtained marks of 3 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 a.m
- 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
Time : 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

| | |
|----------|----------------------------|
| Time | : Total 4 weeks |
| Break up | : Internal medicine 12days |
| | Paediatrics 6 days |
| | Psychiatry 3 days |
| | Dermatology 3days |

WORKING HOURS

- 09.00 a.m. – 02.30 p.m (Compulsory for all)
- 02.30 p.m. – 08.30 p.m.(Roaster duty time)

Teaching / learning schedule: to be arranged locally

The duties of the students during block posting will include:

- a. small group teaching,
- b. ward round
- c. roaster duty during morning and evening hours

Every student will have a separate log book for his attendance, performance etc

Log book to be attached with the formative assessment

SKIN & VD

Course Objectives:

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

- grasp the importance of dermatology and venereology in modern medicine
- take appropriate history from the patients and perform relevant clinical examination
- select and interpret relevant investigations
- diagnose and manage the most common skin and venereal diseases prevalent in Bangladesh
- deal 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
- conduct relevant research

List of Competencies:

- Appropriate history from the patients with the following diseases
- Proper cutaneous examination of the said patients
- Perform the relevant investigations and interpret the results
- Manage and counsel the patient after proper diagnosis of Skin / Venereal Disease
- Refer the complicated cases to appropriate authority for better management.

Skin & Venereal Diseases
Clinical Attachment (WARD DUTY)
Total 72 hours (18 Days) in 3rd Phase

| Learning Objectives | Contents | Teaching Hours |
|--|---|---|
| <p>Students will be able to:</p> <ul style="list-style-type: none"> • describe aetiology, clinical features, and management of common skin and venereal diseases • acquaint with universal precautions, syndromic management, counselling of STD/ AIDS Cases. • take appropriate history from the patients and perform clinical examination • diagnose and manage common skin and venereal diseases • demonstrate nerve thickening in leprosy. • demonstrate punch biopsy, electrocautery, cryosurgery, PUVA procedures. | <p><u>Dermatology</u></p> <p>CORE:</p> <ul style="list-style-type: none"> • Cutaneous signs/symptoms • Scabies and Pediculosis • Pyoderma • Atopic Dermatitis • Contact and Seborrhoeic Dermatitis • Dermatophytosis • Candidiasis • Acne • Psoriasis • Viral Diseases(Herpes simplex, Herpes zoster, wart, molluscum contagiosum) • Leprosy | <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> |

| Learning Objectives | Contents | Hours/days |
|--|---|--|
| <p>Students will be able to</p> <ul style="list-style-type: none"> • describe the clinical feature, management. • Interpret result of patch test/ prick test / tuberculin test. • be acquainted with syndromic management/ universal precaution, counselling on STD/ AIDS • perform gram staining/ bubo aspiration • request & interpret tests like VDRL/ TPHA/ ELISA/ Western blot/ CFT for chlamydia. | <p><u>Additional:</u></p> <ul style="list-style-type: none"> • Drug Reactions • Urticaria • Skin tuberculosis • Genodermatoses (Ichthyosis, Neurofibromatosis, etc.) • Skin tumours • Bullous diseases (Pemphigus, Dermatitis herpetiformis) <p><u>Venereology</u></p> <p>CORE</p> <ul style="list-style-type: none"> • Sexually transmitted infection • Syphilis • Chancroid • Gonorrhoea • Nonspecific Urethritis • AIDS | <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> <p>2 hours</p> |

Integrated Teaching: SKIN & VD

| Topic | Learning Objective | Department |
|---------------------|--|---|
| Leprosy | Student should be able to: <ul style="list-style-type: none"> • describe epidemiology, aetiology, investigations clinical feature and management. • demonstrate partial nerve thickening/Anaesthesia • request and interpret investigations like Slit Skin smear for AFB and BI / MI. | Skin & VD Community Medicine Microbiology Leprosy Hospital |
| AIDS | <ul style="list-style-type: none"> • describe epidemiology/ aetiology/ investigations/ CF / management • request investigation like ELISA/Western Blot. | Skin & VD Medicine Virology (Pathology) Community Medicine |
| Chronic Arsenicosis | <ul style="list-style-type: none"> • describe the epidemiology, investigation clinical features and management | Skin & VD Medicine |

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.

Learning Objectives and Course Contents in Psychiatry

| Learning Objectives | Contents | Teaching Hours 20 hours |
|---|---|---|
| <p>Students will be able to :</p> <ul style="list-style-type: none"> • 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 syndrome during clinical assessment • plan their appropriate management. • 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 groups | <p>CORE :</p> <ul style="list-style-type: none"> • Historical concepts & classification • Behavioural Science • Learning, memory, personality, intelligence • Symptomatology • Organic psychiatry: Dementia & Delirium • Substance Abuse & Alcoholism • Child psychiatry including Autism • Psychosexual Disorders • Psychopharmacology <p>Clinical Placement:</p> <ul style="list-style-type: none"> • Mental state exam • Schizophrenia • Mood Disorders: Depression & Bipolar Mood Disorder (BMD) • Anxiety Disorders: GAD, phobia, obsession, panic dis. • Psychiatric emergencies • Psychotherapy | <p>1 hour 1 hour 1 hour 2 hour 1 hour 1 hour 2 hour 1 hour 1 hour</p> <p>1 hours 2 hours 2 hours 2 hour 1 hour 1 hour</p> |

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 | | |

Paediatrics

The curriculum in paediatrics, 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 paediatric and neonatal problems at hospital and the community level.
- manage acute neonatal and paediatric emergencies efficiently
- identify neonatal and paediatric problems that require secondary and tertiary care and refer them appropriately.
- 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 be acquired:

- communicate and counsel patients, parents and relatives.***
- demonstrate empathy and humane approach towards patients, parents and relatives. ***
- exhibit 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 canulation, collection of samples for routine examination (RE)*
- Use of AMBU bag***
- Administration of an enema*
- Phototherapy**
- Incubator (open and closed) care*
- Oxygen therapy***
- Nebulisation***
- 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*

Paediatrics

| Learning Objectives | Contents | Teaching Hours |
|--|---|--|
| <p>At the end of the sessions, students will be able to</p> <ul style="list-style-type: none"> • 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 • 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 paediatrics e.g. Integrated Management of Childhood Illness (IMCI), EPI, National Nutrition Services (NNS), Infant and Young Child Feeding (IYCF), vitamin-A supplementation | <p style="text-align: center;">Preventive Paediatrics</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • An introduction to Paediatrics & MDG*** • IMCI*** • EPI*** • IYCF*** • IDD** • ENC** • NNS*** • ETAT** • ECD** • Vitamin-A supplementation** | <p>1 hr</p> <p>2 hrs</p> <p>1hr</p> <p>Total = 4 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|--|---|
| <p>At the end of the sessions, students will be able to</p> <ul style="list-style-type: none"> describe the procedure for taking care of new-born e.g. maintenance of body temperature, feeding, care of eyes etc. define perinatal asphyxia, hypoxic ischaemic encephalopathy (HIE), describe APGAR Score, causes, management (Newborn resuscitation) & complication of perinatal asphyxia. state the common causes of respiratory distress in newborn (RDS & meconium aspirates) & clinical presentation and management define preterm & low birth weight, epidemiology, causes, clinical presentation, complications & management of preterm low birth weight babies. describe the common infections of newborn (neonatal sepsis), their aetiology /organism patterns, risk factors and types of neonatal sepsis describe the clinical presentation of neonatal sepsis, diagnosis (e.g. sepsis screening), treatment and prevention of neonatal sepsis 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 diagnosis and treatment describe the different types of birth injuries & their management | <p style="text-align: center;">Neonatology</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> Care of a normal newborn*** Perinatal asphyxia*** Neonatal resuscitation*** <p>Pre-term/ Low birth weight/ SGA***</p> <p>Neonatal infection***</p> <p>Neonatal jaundice***</p> <p>Neonatal seizure**</p> <ul style="list-style-type: none"> Birth injuries * Respiratory distress in newborn* | <p>1hr</p> <p>1hr</p> <p>1hr</p> <p>1hr</p> <p>1hr</p> <p>Total = 5 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • define Infant and young child feeding (IYCF) • describe IYCF global & national perspectives and IYCF recommendations • describe the effective breast feeding; exclusive breast feeding (including colostrum) • describe advantages of breastfeeding and hazards of artificial feeding • 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 • describe guiding principle of complementary feeding & advantage of complementary feeding, age specific appropriate food | <p>Infant and young child feeding (IYCF)</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Breast feeding*** • Complementary feeding*** | <p>1 hr</p> <p>1hr</p> <p>Total = 2 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|--|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • define growth and development • describe normal growth and development of a child • describe factors influencing growth and development • state the principles of development • describe early childhood development (ECD) and its importance • describe ways of assessing growth and development of a child • describe growth chart • define failure to thrive and state its causes and management | <p style="text-align: center;">Growth and Development, ECD</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Growth & Development*** Failure to thrive** • Early childhood development* } | <p>1 hr</p> <p>1hr</p> <p>Total = 2hrs</p> |
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • define and classify protein energy malnutrition (PEM) • define severe acute malnutrition (SAM) • state the risk factors of protein energy malnutrition • describe the clinical presentation, complications & management of a child with severe acute malnutrition • describe the various types of vitamin deficiency disorders & their management • describe micro nutrients and their importance in malnutrition/child health • list the causes of obesity, consequences & management of obesity | <p style="text-align: center;">Nutritional Disorders</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • PEM, SAM & CMAM*** • Vitamin deficiencies (Xerophthalmia, Rickets, Scurvy)*** • Micro nutrient deficiencies (Iron, Zinc, Calcium)** • Obesity* } | <p>1 hr</p> <p>1 hr</p> <p>Total = 2 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|--|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • 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 enteric fever • discuss the aetiology, clinical presentations of dengue fever and the complications • 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 • describe the aetio-pathology, clinical presentation, complications and management of malaria • describe national programme for eradication of kala-azar and malaria | <p style="text-align: center;">Infectious Diseases</p> <p>CORE:</p> <ul style="list-style-type: none"> • Tetanus** • Diphtheria** • Pertussis*** <p style="text-align: right;">}</p> <ul style="list-style-type: none"> • Tuberculosis*** • • Measles** • Mumps** • Poliomyelitis*** <p style="text-align: right;">}</p> <ul style="list-style-type: none"> • Enteric fever*** • Dengue*** • Malaria*** • Kala-azar*** | <p style="text-align: center;">1 hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">Total = 7 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|--|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> define diarrhoea, its aetio-pathogenesis, classification, clinical presentation, complications of diarrhoea define persistent diarrhoea and dysentery assess dehydration & to offer appropriate management (Plan A, B,C) select relevant investigations and their interpretation describe the composition of ORS, Cholera Saline, Ringer's solution. describe prevention of diarrhoea describe helminthiasis and their management | <p style="text-align: center;">Gastrointestinal disorders</p> <p>CORE:</p> <ul style="list-style-type: none"> Diarrhoeal disorders & management*** <ul style="list-style-type: none"> Acute watery diarrhoea*** Dysentery*** Persistent diarrhoea*** Abdominal Pain & Helminthiasis** | <p>1 hr</p> <p>1 hr</p> <p>Total = 2 hrs</p> |
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> state the common respiratory illnesses of children describe aetiology, clinical presentation, complication& management of pneumonia describe aetiology, clinical presentation, complication& management of bronchiolitis state the common causes of respiratory distress differentiate asthma, pneumonia and bronchiolitis define childhood asthma & describe the presentation & management of asthma. describe the common differential diagnoses of stridor in children describe the management of a case of acute laryngotracheobronchitis | <p style="text-align: center;">Respiratory Disorders</p> <p>CORE:</p> <ul style="list-style-type: none"> ARI*** Pneumonia*** Bronchiolitis*** Childhood Asthma*** Croup and other causes of stridor And their management** | <p>1 hr</p> <p>1hr</p> <p>1hr</p> <p>Total = 3 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • list the common causes of anaemia in children • classify anaemia. • describe the risk factors, clinical presentation & management of iron deficiency anaemia. • describe the pathogenesis, clinical & laboratory features and management of congenital haemolytic anaemia (CHA) • differentiate the laboratory features of these 2 diseases • 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 | <p style="text-align: center;">Haematological Disorders</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Iron deficiency anaemia*** • • Congenital haemolytic anaemia *** • Hypoplastic anaemia/ aplastic anaemia** <ul style="list-style-type: none"> • ITP *** • Haemophilia*** | <p>1hr</p> <p>1 hr</p> <p>1 hr</p> <p>Total = 3 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|--|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> list the common causes of generalized swelling and haematuria among children define and classify nephrotic syndrome describe the aetio-pathology, cardinal features, complication, diagnosis, treatment and prognosis of nephrotic syndrome. describe aetio-pathogenesis of acute glomerulonephritis, clinical presentation, complication & management of acute glomerulonephritis. identify & describe management of a child with hypertensive encephalopathy & acute LVF differentiate nephrotic syndrome from acute glomerulonephritis describe the aetiology, risk factors, pathogenesis, cardinal features, 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 describe the fluid & electrolytes homeostasis and acid base homeostasis name common fluid, electrolytes and describe acid base imbalance. | <p style="text-align: center;">Renal disorder</p> <p>CORE:</p> <ul style="list-style-type: none"> Nephrotic syndrome*** Acute glomerulonephritis*** Urinary Tract Infection*** Acute Renal Failure** Fluid & Electrolytes & acid base balance*** | <p>1 hr</p> <p>1 hr</p> <p>1hr</p> <p>1hr</p> <p>Total = 4 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|--|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> state the different causes of jaundice describe the clinico-pathological consequences of hepatotropic viruses describe the aetiopathogenesis, clinical presentation and complications of acute hepatitis describe the stigmata of chronic liver diseases (CLD)/ cirrhosis of liver list the relevant investigations for a child with liver disease e.g. acute hepatitis or chronic liver disease etc and their interpretation. 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 hypertension. outline the management of a case of hematemesis and malaena | <p style="text-align: center;">Diseases of Liver</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> Viral hepatitis *** Fulminant hepatic failure*** Hepatic coma/ hepatic encephalopathy*** <p style="text-align: right;">}</p> <ul style="list-style-type: none"> Portal hypertension ** Chronic liver disease eg. cirrhosis** <p style="text-align: right;">}</p> | <p>1 hr</p> <p>1 hr</p> <p>Total = 2 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|---|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • classify congenital heart diseases • describe the haemodynamics, clinical presentation, complication & management of common congenital heart diseases e.g. ASD, VSD, TOF & PDA. • describe aetio- pathogenesis of acute rheumatic fever • describe the clinical presentation, diagnosis, & management of acute rheumatic fever and rheumatic carditis. • describe the prevention of acute rheumatic fever • describe the causes, clinical presentation & management of heart failure in infant & children | <p style="text-align: center;">Disease of Cardio-vascular system</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Congenital heart disease (ASD, VSD, TOF & PDA)*** • Rheumatic fever & Rheumatic heart disease*** • Heart failure in infancy & childhood*** | <p>2 hrs</p> <p>1 hr</p> <p>Total = 3 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|--|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • describe causes of convulsions in children • describe the criteria of diagnosis & management of febrile convulsion • describe the aetio-pathogenesis, clinical presentation & management & prognosis of acute pyogenic and viral meningitis • describe the aetio-pathogenesis, clinical presentation & management & prognosis of encephalitis • describe the pathogenesis, clinical staging, management & prognosis of tubercular meningitis. • describe the CSF findings of acute bacterial, tubercular and viral meningitis • define and classify epilepsy • describe the clinical presentation, management & prognosis of epilepsy • define and list the differential diagnoses of acute flaccid paralysis (AFP). • describe the clinical presentation, management & complication of Guillain Barre syndrome (GBS), poliomyelitis and transverse myelitis • differentiate GBS, polio and transverse myelitis • describe causes of mental retardation, it's management, counseling & rehabilitation • define cerebral palsy & describe its causes, types, clinical feature, management, counseling & rehabilitation | <p style="text-align: center;">Disease of Nervous system</p> <p>CORE:</p> <ul style="list-style-type: none"> • Febrile convulsion *** • Epilepsy** • Meningitis & Encephalitis <ul style="list-style-type: none"> • Mental retardation ** • Cerebral palsy** <ul style="list-style-type: none"> • Acute Flaccid Paralysis (AFP)*** <ul style="list-style-type: none"> • Guillain Barre syndrome • Transverse myelitis • Polio myelitis | <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">Total = 3 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|--|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • Enumerate common childhood malignancies • define and classify leukaemia • describe the clinical presentation and diagnosis of acute leukaemia • describe the blood & bone marrow features of acute leukemia • describe the treatment of acute leukaemia • classify lymphoma | <p style="text-align: center;">Malignant diseases</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Leukaemia*** • Lymphoma & other tumours* | <p style="text-align: center;">1 hr</p> |
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • describe the causes of short stature • describe the aetiopathology, clinical presentation, diagnosis & management of hypothyroidism • classify diabetes mellitus & describe the clinical presentation, diagnosis & management of type I (IDDM) Diabetes Mellitus • classify the chromosomal disorders • describe clinical presentation, management and prognosis of Down syndrome • counsel parents about the prognosis of the diseases mentioned above | <p style="text-align: center;">Endocrine and Chromosomal Disorders</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Short stature *** • Hypothyroidism*** • Diabetes Mellitus * • Down syndrome*** | <p style="text-align: center;">1 hr</p> <p style="text-align: center;">1hr</p> <p style="text-align: center;">Total = 2 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|--|---|---|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • list the common causes of pain and swelling of joints • classify juvenile idiopathic arthritis (JIA) • describe clinical manifestations and complications of JIA. • describe relevant investigation and interpretation • enumerate the different treatment options of JIA • classify myopathy • 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) | <p style="text-align: center;">Connective Tissue & Musculo-skeletal Disorders</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Juvenile idiopathic arthritis (JIA)*** • Myopathy <ul style="list-style-type: none"> • Pseudohypertrophic muscular dystrophy** | <p>1 hr</p> |
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • list the common accidents and emergencies of children • describe the principles and management of poisoning • describe the clinical presentation, complications and management of kerosene poisoning • describe the clinical presentation, complications and management of organophosphorus poisoning • describe the aetio-pathogenesis, clinical presentation and management of snake bite • describe the pathogenesis and clinical presentation of drowning (salt and fresh water drowning) | <p style="text-align: center;">Accidental poisoning & Drowning</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Kerosene*** • Organophosphorus compound*** • Snake bite** • Drowning** | <p>1 hr</p> <p>1hr</p> <p>Total = 2 hrs</p> |

| Learning Objectives | Contents | Teaching Hours |
|---|--|----------------------------|
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • state the common behavioral disorders of children • describe the risk factors & management of nocturnal enuresis • differentiate true seizure from pseudo-seizure • describe causes, early identification management & counseling of autism spectrum disorder (ASD) • describe child abuse and neglect | <p align="center">Paediatric Psychological and Psychiatric disorder</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Childhood behavioural disorders** • Autism spectrum disorder (ASD)*** • Somatoform disorder** • Enuresis* | <p align="center">1 hr</p> |
| <p>At the end of the sessions the students will be able to</p> <ul style="list-style-type: none"> • describe the steps of communication /counseling • counsel a parent or care giver regarding any illness | <p align="center">Communication & Counseling</p> <p><u>CORE:</u></p> <ul style="list-style-type: none"> • Counseling | <p align="center">1 hr</p> |

Paediatrics

Teaching/ Learning Methods & Aids

| Teaching methods | Aids |
|---|---|
| <p>Lectures:</p> <ul style="list-style-type: none"> • Large group teaching & lectures • Small Group teaching: (Clinical) <ul style="list-style-type: none"> ▪ Bedside teaching ▪ Case demonstration & practice ▪ Practical Skills (Video) • Field Site training : (with Community Medicine) • Integrated Teaching • Self-directed learning | <p>OHP/ Multimedia presentation, Video, Slide</p> <ul style="list-style-type: none"> • Patients • Simulated Patients • Dummy (Manikins) • Charts e.g. growth chart, IMCI Chart • Reading materials <ul style="list-style-type: none"> ○ Modules & national guidelines on different childhood illnesses ○ Study guide ○ Books, journals • Others e.g. ECG, Instruments, X-ray, photographs |

ACADEMIC CALENDAR – PAEDIATRICS

| LECTURE | 2 nd Phase | | | 3 rd Phase | 4 th Phase / Final Phase | |
|----------|---|------------|--|---|---|--|
| | 4 hours | | | 20 hours | 26 hours | |
| | INTRODUCTION PREVENTIVE PAEDIATRICS | | | 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, Endocrine and chromosomal disorders, Connective tissue & musculoskeletal disorders, Paediatric Psychological and Psychiatric disorders, Communication and counseling | |
| CLINICAL | 4 weeks | | | | 6 weeks | |
| | 2 WEEKS | | 2 WEEKS | No clinical placement in 4 th year | INDOOR PLACEMENT | |
| | Day | IMCI | Neonatology | | Morning (2 hours) | Evening (2 hours) |
| | 1 | IMCI | History writing | | <p>1st Week D1-2 : Introduction + history taking D3 : IMCI D4-5 : Cough & difficult breathing, diarrhoea D6 : Presentation & discussion</p> <p>2nd Week D1 : Bleeding disorder D2 : Pallor D3-4 : Fever, Leukaemia D5 : Accidental poisoning D6 : Presentation & discussion</p> <p>3rd Week D1- 2: PEM D3-4: Hepatosplenomegaly D5 : Lymphadenopathy D6 : Presentation & discussion</p> <p>4th Week D1- 3: Scanty urine, ARF, NS/AGN D4 : RF & RHD D5 : Joint swelling D6 : Presentation & discussion</p> <p>5th Week D1-4 : Neonatology D5 : IYCF D6 : Presentation & discussion</p> <p>6th Week D1-2: Convulsion D3 : Developmental Assessment D4- 5: OSCE D6- : Feedback</p> | Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning Self-directed learning |
| | 2 | IMCI | Clinical examination of i. Newborn ii. Child | | | |
| | 3 | IMCI | | | | |
| | 4 | IMCI | | | | |
| | 5 | IMCI | Common neonatal problems: <ul style="list-style-type: none"> • Perinatal asphyxia • Low birth weight • Neonatal sepsis • Neonatal Jaundice • Neonatal convulsion | | | |
| | 6 | IMCI | | | | |
| | 7 | IMCI | | | | |
| | 8 | IMCI | | | | |
| | 9 | IMCI | | | | |
| | 10 | IMCI | | | | |
| | 11 | Assessment | Assessment | | | |
| 12 | Feedback | Feedback | | | | |

PLAN FOR ACADEMIC CALENDAR – PAEDIATRICS

Annex-

FIRST PROF.

SECOND PROF.

THIRD PROF.

FINALPROF.

| 6m | 6m | 6m | 6m | 6m | 6m | 6m | 6m | 6m | 6m |
|----|-------|-----------------|--|-----------------|---|-----------------|--|-------|----------------------------------|
| | | | 4 LECTURE | | 20 LECTURE | | 26 LECTURE | | |
| | | | Introduction to Paediatrics, MDG -1 | | IYCF-2 (breast feeding-1, complementary feeding-1) | | Neonatology – 5 Haematologic disorders – 3 Renal disorders – 4 Disease of liver – 3 Disease of cardiovascular system – 2 Disease of nervous system – 3 Malignant disease – 1 Endocrine and chromosomal disorders – 2 Musculoskeletal disorders -- 1 Paediatric psychological and psychiatric disorders – 1 Communication and counseling -- 1 | | |
| | | | IMCI-2 | | Growth & development-2 | | | | |
| | | | National programmes-1 | | Protein energy malnutrition, SAM, CMAM- 1 | | | | |
| | | | | | Other Nutritional disorders -1 | | | | |
| | | | | | Infectious diseases -7 | | | | |
| | | | | | Respiratory disorders- 3 | | | | |
| | | | | | Gastrointestinal disorders -2 | | | | |
| | | | | | Accidental Poisoning -- 2 | | | | |
| | | | CLINICAL | | | | CLINICAL | | |
| | | | 4 WEEKS | | | | 6 WEEKS | | 10 days for block teaching |
| 0 | Yr -1 | 3 rd | Yr -2 | 4 th | Yr -3 | 5 th | Yr -4 | Yr -5 | |

Pediatric Assessment Card

Name of the student :.....

Batch:..... Roll:..... Group:.....

Period of attachment: from.....to

Instruction to the students/ teachers

- Students must complete the activities shown on the card during the clinical attachment in pediatrics
- The teacher will sign the card when each item has been completed to a satisfactory standard
- The level of the teachers will be at least Registrar grade or above
- At the end of the attachment the card must be presented to the Head of Department (HOD) who will countersign it and also check whether an appropriate standard has been maintained. The card will be retained by the department (Registrar's responsibility)

Standard of performance expected

When the activity involves interaction with patients and parents or the performance of an examination/ a procedure, the teacher will be expected to see whether an acceptable standard of performance has been achieved in the following ways:

- introduction of oneself as a student
- good communication with the patient/ parents (giving salam/ greetings)
- explanation of what is to be done
- taking consent
- appropriate and understandable language used
- application of correct method of examination
- adequate exposure during examination

In case of performing a procedure, the teacher will concentrate on the following activities of the students in relation to the use of instrument:

- correct use of the instrument
 - correct procedure followed
 - demonstration of findings to the teacher
 - proper disposal of the instrument used
 - communication with patient/ parents about the findings
 - explaining to the patient/ parents about the findings
 - giving thanks to the patient/ parents at the end of procedure
- In all cases the ability of the students to interpret the findings of the examination or procedure is expected.

Activities in Pediatric Out Patient Department (OPD)

The student is expected to take an active part in the activities listed below and not only doing mere observation

At the end of clinical attachment, the card must be presented for final review and signature by HOD

| | Cases | Date | Supervisor |
|---|-------|-------|------------|
| A. History writing | | | |
| (1) | ----- | ----- | ----- |
| (2) | ----- | ----- | ----- |
| (3) | ----- | ----- | ----- |
| (4) | ----- | ----- | ----- |
| (5) | ----- | ----- | ----- |
| B. Cases to be observed in the management of the following (at least 10 cases) | | | |
| (1) Diarrhoea | | ----- | ----- |
| (2) Pneumonia/ bronchiolitis/ asthma | | ----- | ----- |
| (3) SAM (marasmus/ kwashiorkor/ MK | | ----- | ----- |
| (4) Febrile convulsion/ meningitis/ encephalitis | | ----- | ----- |
| (5) NS/ AGN/ARF | | ----- | ----- |
| (6) IDA/ thalassemia/ aplastic anemia | | ----- | ----- |
| (7) ITP/ ALL/ Hemophilia | | ----- | ----- |
| (8) Enteric fever/ tuberculosis/ FOU | | ----- | ----- |
| (9) Rheumatic fever/ RHD | | ----- | ----- |
| (10) Viral fever/ CLD | | ----- | ----- |
| (11) Malaria/ kala-azar | | ----- | ----- |

Students should longitudinally follow up the cases since admission till discharge taking the notes of history, physical findings, investigations and treatment in separate sheets to be presented to the teacher on demand.

| C. Procedures to be performed | Date | Supervisor |
|--|-------|------------|
| (1) Recording PTR | ----- | ----- |
| (2) Measurement of BP | ----- | ----- |
| (3) Clinical examination (different systems) | ----- | ----- |
| (4) Child restrain for painful examination (Throat with spatula and ear with auriscope) | ----- | ----- |
| (4) Anthropometry (wt/ Ht/OFC/ MUAC) | ----- | ----- |

| D. Procedures to be observed | Date | Supervisor |
|---|-------|------------|
| (1) Lumber puncture | ----- | ----- |
| (2) Bone marrow aspiration | ----- | ----- |
| (3) Opening IV line | ----- | ----- |
| (4) Drug administration in different routes (IV/ IM/ SC/ ID) | ----- | ----- |
| (5) NG tube introduction | ----- | ----- |
| (6) Enema administration | ----- | ----- |
| (7) Blood transfusion | ----- | ----- |
| (8) Collection of blood samples | ----- | ----- |
| (9) Collection of throat swab | ----- | ----- |
| (10) Thoracentesis/ paracentesis | ----- | ----- |
| (11) CPR | ----- | ----- |
| (12) Positioning & Attachment of breast feeding | ----- | ----- |
| (13) Hand Washing | ----- | ----- |
| (14) Preparation of F-75, F-100 | ----- | ----- |

| E. Pediatric accidents and emergency management observation | | |
|--|-------|-------|
| (1) Acute asthma | ----- | ----- |
| (2) Convulsion | ----- | ----- |
| (3) Heart failure | ----- | ----- |
| (4) Acute poisoning (Kerosene, OPC) | ----- | ----- |
| (5) Snake bite | ----- | ----- |
| (6) Drowning | ----- | ----- |

F. Activities in OPD observation

(1) Management of moderate dehydration -----
(ORS preparation, administration) -----

G. Activities in LMC observation

(Counseling, positioning and attachment) -----

H. EPI activities observation

(cold chains, vaccines, administration, routes) -----

I. Activities in the neonatal wards

| (1) History writing | Cases | Date | Supervisor |
|---------------------|-------|-------|------------|
| (a)----- | ----- | ----- | ----- |
| (b)----- | ----- | ----- | ----- |

(J) To be observed in the management of the following cases

| | | |
|------------------------|-------|-------|
| (1) Perinatal asphyxia | ----- | ----- |
| (2) LBW | ----- | ----- |
| (3) Septicemia | ----- | ----- |
| (4) Neonatal jaundice | ----- | ----- |

K. Procedures to be observed

| | | |
|--------------------------------|-------|-------|
| (1) Ligation of umbilical cord | ----- | ----- |
| (2) Care of umbilical cord | ----- | ----- |
| (3) Hand washing | ----- | ----- |
| (4) Phototherapy | ----- | ----- |
| (5) Exchange transfusion | ----- | ----- |
| (6) Resuscitation | ----- | ----- |

(use of Ambu bag, mouth to mouth breathing
endotracheal intubation, cardiac compression)

Signature of the student

Signature of HOD

Integrated Teaching

(4th year & 5th year)

| Sl. | Diseases | Discipline |
|----------|----------------------|--|
| 1 | Diarrhoeal diseases | <ol style="list-style-type: none"> 1. Community Medicine 2. Microbiology 3. Paediatrics |
| 2 | PEM: SAM, CMAM | <ol style="list-style-type: none"> 1. Community Medicine 2. Paediatrics 3. Radiology |
| 3 | ARI diseases | <ol style="list-style-type: none"> 1. Community Medicine 2. Microbiology 3. Paediatrics 4. Radiology |
| 4 | Tuberculosis | <ol style="list-style-type: none"> 1. Community Medicine 2. Microbiology 3. Paediatrics/ Pharmacology 4. Radiology |
| 5 | IYCF | <ol style="list-style-type: none"> 1. Paediatrics 2. Obstetrics & gynaecology |
| 6 | LBW | <ol style="list-style-type: none"> 1. Paediatrics 2. Obstetrics & gynaecology |
| 7 | Perinatal Asphyxia | <ol style="list-style-type: none"> 1. Paediatrics 2. Obstetrics & gynaecology |
| 8 | Rheumatic fever/ AGN | <ol style="list-style-type: none"> 1. Microbiology 2. Paediatrics |
| 9 | Nephrotic syndrome | <ol style="list-style-type: none"> 1. Pathology 2. Paediatrics |