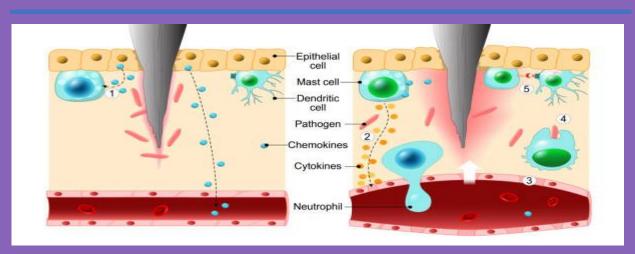
SWAT MEDICAL COLLEGE SWAT

DEPARTMENT OF MEDICAL EDUCATION





3RD YEAR MBBS

BLOCK: G

CLASS OF 2021-26

TOTAL DURATION: 6 WEEKS

FROM: 19 MARCH TO 7 MAY

STUDENT NAME

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1 Academic Calendar

				Calendar MBBS – 2023-24 cal College, Swat					
Activity/ Events	Week	Date	1st Year	2 nd Year	3 rd Year	4 ⁱⁿ Year	5 th Year		
Orientation Week	1	12th to 16th Feb							
Regular Classes	2	19th to 23rd Feb			Foundation II		Previous 5 th Year		
Regular Classes	3	26th Feb to 1st March	Foundation I (6 weeks)	Neurosciences-IA (6 W99K8)	(5 weeks) 22nd March, Module	Neurosciences – II (6 weeks)	Preparatory leaves and annual exam		
Regular Classes	4	4th to 8th March	22 nd March, Module	22 nd March, Module	Exam	25th and 26th March	dilitidal Gadili		
Regular Classes	5	11th to 15th March	Exam	Exam		Block J Exam	Foundation-III		
Regular Classes	6	18th to 22nd March					(2 weeks) 22 rd March Module Exan		
Regular Classes	7	25th to 29th March			Infection &		Blood & Immunology-I		
Regular Classes	8	1 st to 5 th April	Blood & Immunology		Inflammation		(2 weeks) 5 th April Module Exam		
Spring Break/Eid ul Fitr	9	8th to 12th April	(5 Weeks)	Neurosciences-IB	(6 weeks) 6th May to 7th May Block		MSK-III		
Sports Week	10	15th to 19th April	6th & 7th May Block A	(5 weeks)	G exam	GIT and Hepatobiliary	(2 weeks)		
Regular Classes	11	22 nd to 26 th April	exam	13th & 14th May Block D	S onem	-iI	06th & 07th May Block N		
Regular Classes	12	29th to 3rd May				(9 weeks)	exam		
Regular Classes	13	6th to 10th May				10 th and 11 th June Block K Exam	Cardiorespiratory-III		
Regular Classes	14	13th to 17th May			Multisystem (5 weeks)	IV EXCIII	(5 weeks)		
Regular Classes	15	20th to 24th May			Module Exam 31st May		3 st & 4 th June Block O		
Regular Classes	16	27th May to 31st May	MSK-I	GIT, Hepatobiliary &			Exam		
Regular Classes	17	3 rd to 7 th June	(δ Weeks)	Metabolism-			Renal- III Module		
Regular Classes	18	10th to 14th June	1st & 2nd July Block-B Exam	(8 iveeks)	Blood & immunology (3 weeks)	Renal – II Module (4 weeks)	(2 weeks) 14th June Module Exam		
Eid-ul-Adha Holidays	19	17th to 21th June		1st & 2mt July	1st & 2nd July module		Endocrine &		
Regular Classes	20	24th to 28th June			exam	1 st and 2 nd July Module Exam	Reproduction-III		
Summer Vacations	21-23	3rd to 21st July				L/MIII	(3 weeks) 29th & 30th July Block P		
Regular Classes	24	22nd to 26th July		Renal			Exam		
Regular Classes	25	29th July to 2nd Aug	CVS-I	(3 weeks) 12th to 13th August Block	MSK-II (5 weeks) 2nd Sen 3rd Sen	(5 weeks) not Sep 3rd Sep Block H exam CVS-II (3 weeks) Endocrine and Reproduction – II (8 weeks) 16th and 17th September Block-L exam	Neurosciences - III		
Regular Classes	26	5th to 9th Aug	(5 weeks) 23 rd August Module	E			(3 weeks) 16 th August Module		
Regular Classes	27	12th to 16th Aug	Exam	Endonrino I	Block H exam		Exam		
Regular Classes	28	19th 23rd Aug		Endocrine-I (4 weeks)			GIT & Hepatobiliary		
Regular Classes	29	26th to 30th Aug	Respiratory-I	6 th Sep			(2 weeks)		
Regular Classes	30	2 nd to 6 th Sep	(4 weeks)				6th Sep Module Exam		
Regular Classes	31	9th to 13th Sep	23rd -24th SEP	Reproduction-I	20th September Module		Multisystem-II		
Regular Classes	32	16th to 20th Sep	Block-C Exam	(4 iveeks)	exam	exam EYE and EN	EYE and ENT	(4 weeks)	
Regular Classes/ Preparatory Leaves	33	23rd to 27th Sep		30th Sep 1st Oct	RESJI	1 1/2" TO 18" LICE BLOCK BILL	7th -8th Oct Block Q		
Regular Classes/ Preparatory Leaves	34	30th Sep to 4th Oct			(4 WPPKS)	1	(4 IVEENS) D MO Evans		
Regular Classes/ Preparatory Leaves	35	7th to 11th Oct	PREPARATORY						
Regular Classes/ Preparatory Leaves	36	14th to 18th Oct	LEAVES	PREPARATORY		DIOCK L CAGIII	DIDOK E GARIII	DIDOK E GARIII	
Regular Classes/ Preparatory Leaves	37	21st to 25th Oct		LEAVES					
Regular Classes/ Preparatory Leaves	38	28 th Oct to 1 st Nov		22,120					
Regular Classes/ Preparatory Leaves	39	4th to 8th Nov							
Regular Classes/ Preparatory Leaves	40	11th to 15th Nov			PREPARATORY	PREPARATORY	PREPARATORY		
Regular Classes/ Preparatory Leaves	41	18 th to 22 nd Nov	Annual Example no.		LEAVE\$	LEAVES	LEAVES		
Regular Classes/ Preparatory Leaves	42	25th to 29th Nov	Annual Exam as per KMU schedule.	Annual Exam as per		LLAVES	LLAVES		
Regular Classes/ Preparatory Leaves	42	2 nd to 6 th Dec	KMO JUICUUIC.						
Regular Classes/ Preparatory Leaves	43	9th to 13th Dec		KillO					
Regular Classes/ Preparatory Leaves	44	16th to 20th Dec							
Regular Classes/ Preparatory Leaves	45	23 rd to 27 th Dec			Annual Exam as per				
Regular Classes/ Preparatory Leaves	46-49	November 2024			KMU schedule.				
Regular Classes/ Preparatory Leaves	50-53	December 2024	Winter vacation	Winter vacation					
Regular Classes/ Preparatory Leaves	54-57	January 2025			Winter vacation	Annual Exam as per KMU schedule.			
Start of new acad	emir sessi	inn 2025-26	February 2025	February 2025	February 2025	February 2025	March 2025		

Note: The given dates are tentative and may be subject to change as needed/demanded. The KMU will share the annual exam schedule at the end of the current session.

Dear Student

The Department of Medical Education (DME) has successfully conducted faculty training for the curation of study guides. In accordance with the guidelines set by Khyber Medical University, Peshawar, this study guide has been meticulously developed by the respective block coordinator. For any queries or concerns, kindly refer to the "Query and Troubleshooting" section for contact information.

Please be advised that the timetables provided in the study guides are tentative, and the final versions will always be accessible on the official website, notice boards, and social media platforms.

It is crucial to acknowledge that this guide is subject to continuous improvement, aligning with updates to module learning objectives and blueprints by KMU Peshawar. It is noteworthy that the learning objectives and blueprints outlined in this guide represent an enhanced and revised version of those originally provided by KMU.

For more information on modules and examination blueprints, please visit https://kmu.edu.pk/examination/guidelines.

Your login link of official website: https://mis.swatmedicalcollege.edu.pk/login/student_login

List Of Abbreviation

KEY:	Abbreviation	KEY:	Abbreviation		
Anat-L	Anatomy Lecture	MCQ:	Multiple Choice Questions		
Anat-SGD	Small Group Discussion in Anatomy	EMQ:	Extended Matching Question		
Bio-L	Biochemistry Lecture	IL:	Interactive Lectures		
Bio-P	Biochemistry Practical	CBL:	Case Based Learning		
CMed	Community Medicine	SBL:	Scenario Based Learning		
DSL	Directed Self Learning	OSPE:	Objective structured Practical Evaluation		
FDT	Film/Demonstration/Tutorial	OSCE:	Objective structured Clinical Evaluation		
FMed	Forensic Medicine	HEC:	Higher Education Commission		
Histo-P	Histology Practical	MIT:	Mode of transfer of informations		
IPS	Islamiyat/Pak Studies	QEC:	Quality Enhancement Cell		

2 Module Committee:

s.no	Name	Department	Role
•	Prof. Dr. Aziz Ahmad	Dean / p	rincipal
•	Dr. M Junaid Khan	DME	Director
		Module Team	
	Prof. Dr. Imran-ud-Din	Pathology	Chairperson
•	Dr. Younas Khan	Forensic Medicine & Toxicology	Block Coordinator
•	Dr. Muneed Khan	Community Medicine	Member
•	Dr. Rehman Shah	Pharmacology	Member
•	Dr. Shabir Ahmed	Pathology	Member
•	Dr. Siyab Ahmed	Pathology	Member
•	Prof. Dr. Mukammil Shah	Pathology	Member



3 Recommended List Of Icons



Introduction To Case



For Objectives



Critical Questions



Assessment



Resource Material

4 Mission/ Vision of the College

4.1 Mission Statement of the Institution:

To impart quality medical education through evidence based teaching incorporating professionalism, patient safety, research, critical thinking, ethics and leadership.

4.2 Vision Statement of the Institution:

To be a center of excellence in medical education, patient care and research globally.

5 Overview of the Module/ Preface

Welcome to the 3rd year MBBS program/foundation Module-II, where the overarching goal is to equip students with a profound understanding of medical science and practice. Throughout the curriculum/Foundation module, emphasis is placed on integrating theoretical knowledge with practical applications, ensuring a comprehensive educational experience. The core themes of modules, including Molecules, bacteria and cell injury, Aging and Death are meticulously designed to foster a deep understanding of pathology, pharmacology, forensic Medicine, Community medicine and clinical skills.

Students will gain hands-on experience through clinical rotations in diverse settings such as Skill lab, interactive lectures and SGD, providing a well-rounded education. The study guide serves as a crucial reference for assessment and evaluation. It outlines the components that will be assessed, such as knowledge and basic sciences practical implications, and the corresponding assessment tools, which include MCQs, SEQ and OSPE.

6 Introduction/ Organization of Module

6.1 Introduction:

Block G has two modules in it, i.e., 1. Foundation Module-II and 2.Infection and Inflammation Module.

6.2 Rational:

The pathogenesis of various diseases involves the understanding of the pathogen and the body response in the form of inflammation along with healing and repair of the wound.

6.3 Organization of the Study guide:

THE STUDY GUIDE IS ORGANIZED AROUND THREE THEMES.

(Pain and Fatigue)

(Trauma and Repair)

(Fever and Infection)

6.4 Teaching Strategies:

The content of this module will be delivered by a combination of different teaching strategies. These include interactive lectures, small group discussion (SGD), large group discussion (LGF), self-directed learning (SDL), history taking, patient examination, laboratory tests, practicals and clinicopathological conferences.

The following teaching/learning methods are used to promote better understanding:

A. Large Group Formats:

Interactive Lectures: In large group, the lecturer introduces a topic or common clinical conditions and explains the underlying phenomena through questions, pictures, videos of patients' interviews, exercises, etc. Students are actively involved in the learning process.

Directed Self Learnig:Directed self-learning is an active learning approach where the learners are provided with predefined learning objectives and some facilitation through the learning process in the form of guidance and supervision. It helps establish a strong foundation for autonomous and deep learning.

Self Directed Learning:Students' assume responsibilities of their own learning through individual study, sharing and discussing with peers, seeking information from Learning Resource Center, teachers and resource persons within and outside the college. Students can utilize the time within the college scheduled hours of self-study

B. Small Group Formats:

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

Practical Demonstration:Basic science practicals related to anatomy, biochemistry and physiology are scheduled for student learning.

6.5 Assessment strategies

Assessments within the MBBS program at STMC consist of both formative and summative evaluations. These assessments are integral to monitoring student progress and academic performance.

Formative Assessment:

Formative assessments, accounting for 10% of the total marks assigned to each block, serve as ongoing evaluations designed to provide feedback and facilitate learning. The allocation of this 10% can be determined in accordance with the blueprint of KMU and further distributed as per the academic council's recommendations at STMC. Formative assessments are conducted after the completion of each module, ensuring that students receive timely feedback to enhance their understanding and performance.

Summative Assessment:

Summative assessments, which comprise the majority of the assessment weighting (90% of all marks), are conducted and overseen by KMU, as part of the annual examination process. The summative annual examination is organized and conducted by KMU, which carries out the evaluation and grading. This summative assessment evaluates students' comprehensive understanding of the curriculum and accounts for a significant portion of their final scores.

Assessment Tools:

Various assessment tools are employed to gauge students' knowledge and competencies. These tools include:

Written Examinations: These encompass Multiple Choice Questions (MCQ) and Short Essay Questions (SEQ) that evaluate students' theoretical knowledge.

Performance Assessments: Objective Structured Practical Examinations (OSPE) and Objective Structured Clinical Examinations (OSCE) are used to assess practical skills and clinical competence.

In-Training Assessments: Clinical logbooks provide a comprehensive record of students' practical experiences and serve as a valuable tool for tracking their progress.

Assignments: Presentations, projects, and self-reflection assignments are included in the assessment process to enhance students' critical thinking and research skills

Students will be assessed via MCQs, SEQs, SAQs, OSPE/OSCE and assignments/Presentations.

6.6 Feedback mechanism and summary

At the end of each module a "Module Evaluation Form" will be provided to the students whether in hard copies or online and the students will give their opinion regarding the "Course Contents", "Learning Resources", "Teaching Methods", "Engagement& Motivation" and "Assessment Methods

The students feedback will be taken at the end of each module to further improve the medical education quality and their learning capabilities so as to continually upgrade the standards of medical education.

In short, The study guides will help the students a lot by facilitating them in studying various subjects being integrated in various modules alongwith bringing improvement in learning by the students, assessment through various means and with feedback.

7 Table Of Specification

		No.		Asse	essmen	t		
		of		IPA			M	Assign
Subject	weigh tage	hour s alloc ated in SG	Percent Distribu tion*	OSCE/O SPE	VI VA	Case study/ DSL /	CQ	ment
Pathology	32.40%	46	34.59%	05	2		23	04
Forensic Medicine & Toxicology	11.26%	12	09.02%	02	2		08	02
Pharmacol ogy	28.20%	35	26.31%	02	2		20	03
Communit y Medicine	14.10%	15	11.27%	01	2		10	02
ENT	04.22%	5	03.77%	-	-		03	
Eye	02.82%	3	02.26%	-	-		02	
Prime including research		2+5	05.27%	-	•		00	
Family Medicine	-	2	01.50%	-	-		00	
Medicine(h istory & Physical examinatio n)	01.40%	1	00.76%	01	-		01	
Surgery(his tory & Physical examinatio n)	2.80%	3	02.25%	01	-		02	
Paediatrics	01.40%	2	01.50%				01	
Gynaecolo gy	1.40%	2	01.50%				01	
Total	100%	133	100%	12	08		71	11

Note: *Number of hours allocated in SG for specific subject/total hours $\times\,100$ Weightage based on MCQs eg., No. of MCQs allocated in subject/ total no. of MCQs $\times\,100$



8 Learning Objectives

8.1 General Learning Outcomes

By the end of this module the students would be able to;

- 1. Describe the process of acute & chronic inflammation with their outcomes
- 2. Relate different aspects of healing and repair
- 3. Differentiate common pathogenic bacteria based on morphology, pathogenesis &lab diagnosis.
- 4. Relate bacterial pathogenic factors to clinical manifestations of commoninfectious diseases.
- 5. Describe the pharmacological details of anti-inflammatory drugs
- 6. Apply/relate the pharmacokinetics & pharmacodynamics of chemotherapeuticagents to their use in infectious

diseases

- 7. Construct / Write prescriptions for various inflammatory and infectious diseases
- 8. Describe medico legal aspects of HIV patient.
- 9. Describe mechanism of wound causation.
- 10. Describe medico legal aspects of parameters used for personal identification inreal life situation
- 11. Apply parameters of a person's identification in a simulated environment
- 12. Describe the epidemiology of common infectious diseases.
- 13. Explain the preventive and control measures for infectious diseases.
- 14. Explain the control & preventive measures for nosocomial infections.
- 15. Describe the risks associated with hospital waste and its management.

8.2 Specific Learning Outcomes

1 THEME-I: Pain and Fatique

			_	
SNO	Subject:Pharmacology	Learning Outcomes	hours	MIT
	Topics			
1	Overview to anti inflammatory drugs	 Classify anti-inflammatory drugs Describe the role of DMARDs and glucocorticoids as anti inflammatory agents 	1	IL
2	NSAIDs (Non-selective cox inhibitors: Aspirin & other commonly used NSAIDs)	Classify NSAIDS -Differentiate between non-selective COXinhibitors and selective COX-2 inhibitors based on mechanism of actionName the prototype non-selective COX inhibitorDescribe the pharmacokinetics of Aspirin -Describe the mechanism of action of aspirin as anti-platelet, analgesic, antipyretic and antiinflammatory agentGive the dose of Aspirin as anti- platelet, analgesic/antipyretic and as anti-inflammatory drugDescribe clinical uses of NSAIDsDescribe the adverse effects of NSAIDsDescribe the pharmacokinetics with emphasis on dosage, duration of action and elimination of Diclofenac, Ibuprofen, Indomethacin, Mefanamic acid and Piroxicam in contrast to Aspirin -Relate pharmacokinetics and pharmacodynamics of NSAIDs to their clinical applications	1	
3	Selective COX-2 inhibitors	Describe the mechanism of action of selective COX-2 inhibitorsDescribe the clinical uses of selective COX-2 inhibitors -Describe the adverse effects of selective COX-2 inhibitors	1	IL

		-Describe the merits and demerits of selective COX-2 inhibitors and non-selective COXinhibitors.		
4	Paracetamol (Acetaminophen)	Describe the pharmacokinetics of Paracetamol -Describe the mechanism of action of ParacetamolDescribe the clinical uses of ParacetamolDescribe the adverse effects of ParacetamolGive therapeutic and fatal doses of ParacetamolDescribe the drug treatment of	1	IL
	Anti-histamines	Paracetamol poisoning -Classify anti-histamines -Differentiate between first and second generation anti-histamines -Describe the pharmacologic effects of H1-receptor antagonistsDescribe the clinical uses of H1-receptorantagonistsEnlist the adverse effects of H1-receptorantagonistsDescribe the drug interactions of H1-receptorantagonists	1	IL
	Serotonin agonist and antagonist	 Enlist serotonin agonists Classify serotonin antagonists Describe the mechanism of action of serotonin Describe the organ system effects of serotonin. Describe the clinical uses of serotonin agonists and antagonists Describe the pharmacological basis of ondansetrone in chemotherapy induced vomiting. 	1	IL
	Pathology			
1	Cells of Inflammation	Describe different cells of inflammation -Describe the functions of various cells ofinflammation - Enumerate different causes of leukopenia and leucocytosis(each neutrophil, lymphocyte, monocyte, eosinophil, basophil seperately)	1	IL

2	Overview to Acute Inflammation and vascular phase	-Define acute inflammation -Describe causes of acute inflammation -Describe the vascular events of acuteinflammation	1	IL
3	Recognition of Microbes	Describe various molecular patterns and appropriate receptors used by the inflammatorycells to identify microbes -Relate the recognition of microbes to the initiation of inflammation	1	IL
4	Cellular phase of acute inflammation	Describe the sequence of events and cellular changes involved in cellular phase of acuteinflammation	1	IL
5	Plasma Derived Mediators	Enumerate plasma derived mediators -Enlist the functions of each mediator -Describe the different cascades involved in the generation of mediators	1	IL
6	Cell Derived Mediators	-Enumerate cell derived mediators -Enlist the functions of each mediator	1	IL
7	Morphological patterns, outcomes, defects of inflammation	-Enumerate the different morphological patterns of inflammation -Describe the histological changes in each pattern - Enlist the outcomes of inflammation -Enumerate the various defects of inflammation -Describe the consequences of the defects of inflammation	1	IL
8	Overview to chronic inflammation	-Define chronic inflammation -Differentiate chronic from acute inflammation -Describe the causes and morphological features of chronic inflammation	1	IL
9	Granulomatous inflammation	Define granulomatous inflammation -Describe the morphological features and mediators involved in granulomatous	1	IL

10	Cells and mediators of chronic inflammation Systemic effects of	-Enlist the cells of chronic inflammation -Enumerate the mediators of chronic inflammation -Describe the function of the mediators -Relate the functions of mediators to the morphological changes seen in chronic inflammation Enumerate the systemic effects of	1	IL IL
	inflammation	inflammation -Describe the pathophysiology of the systemic effects of inflammation	1	IL.
Foi	rensic Medicine & 1	Гохіcology		
1	Antidotes	Define and classify antidotes Describe the mechanism of action of different antidotes	1	IL
2	Steps of management in a case of poisoning	Describe general steps of management in a case of poisoning	1	IL
Cor	nmunity Medicine			
1	Infectious disease epidemiology	Define incubation period □ Explain the principles of disease eradication and control □ Define serial intervals □ Define infectivity period	1	IL
2	Disease careers	Define the basic definition related to infectious disease epidemiology Review the role of susceptible host for successful parasitism, modes of transmission and the host defense system List and explain the various classifications of communicable Diseases with special reference to the scope and purpose of the International classification of Disease (ICD -10). Enlist the common infectious diseases affecting the population of Pakistan as per National institute of Health Pakistan. Explain the effect of climate change and seasonal variation on specific diseases globally and in Pakistan. Explain the role of personal hygiene &PPE in infection control. Define disease careers	1	IL

	☐ Reservoirs of infection ☐ Disinfection ☐ Communicable disease control measure (aimed at agent, host, others, administrative measures and vector control measures	 □ Explain the reservoirs of infection □ Differentiate between sterilization and disinfection □ Explain the types and procedures of disinfection □ Discuss Communicable disease control measure (aimed at agent, host, others, administrative measures and vector control measures 		
The		d Danain		
ine	me 2- Trauma an	ia Repair	ı	1
	Pathology			
1	Prostaglandins	Enlist various prostaglandins Describe the mechanism of action of Prostaglandins Describe the organ system effects of Prostaglandins Describe the clinical uses of Prostaglandins.	1	IL
2	Overview to tissue healing and repair	-Differentiate between regeneration and repair -Describe various steps involved in the process of tissue healing and repair		
3	Tissue regeneration	-Define regeneration -Enlist organs capable of regeneration -Describe the process and mediators involved in regeneration	1	IL
	Cell Cycle and its role in repair	-Define cell cycle -Describe the initiation, various phases and proteins involved in the cell cycle -Discuss cells capable of entering the cell cycle -Describe proliferative capabilities of various cells		
4	Repair by scarring	Describe the various steps involved in process ofrepair by scarring -Describe the various mediators involved in the steps of scarring		
5	Growth factors and receptors	enumerate various growth factors and their receptors -Describe the most common pathways by which growth factors affect tissue repair and regeneration	1	IL
	ECM	Classify various components of ECM		

	T			I
		-Describe the role and importance of		
	F ((()	ECM in tissue repair		
6	Factors affecting	Enlist the various factors that influence	1	IL
	wound	wound healing		
	healing/abnormal	-Describe the mechanism by which		
	scarring	these factors affect wound healing		
		-Describe the abnormalities of repair		
_		and their consequences		
	orensic Medicine a			
1	Overview to	Describe mechanism of wound causation	1	IL
	medico-legal			
	aspects of trauma			
	(Wound causation)	Describe the modice legal aspects of	1	
2	Toxicity by	Describe the medico legal aspects of toxicity by aspirin and paracetamol	1	IL
	analgesics			
	Community I			
1	Nosocomial	Describe the prevalence of the	1	IL
	infection & its	nosocomial infections globally and		
	control	Specifically in Pakistan.		
		☐ Identify the cause of nosocomial		
		infections in Pakistan.		
		☐ Enlist common nosocomial infections.		
		☐ Describe the importance of different		
		modes of transmission for causation of		
		the nosocomial infections.		
		☐ Explain the control & preventive		
		measures for nosocomial		
TI. .	2 5 11-0	infections		
ine	me 3- Fever and Inf			
	Pharmaco			
1	Introduction to	1. Define basic terms like	2	IL
	Chemotherapy	chemotherapy, antibiotic,		
		antimicrobial, MIC, MBC,		
		chemoprophylaxis, empirical therapy		
		and post-antibiotic effect,		
		bacteriostatic and bactericidal		
		antimicrobials.		
		2. Explain advantages of drug		
		combinations. 3. Describe various mechanisms of		
		bacterial resistance against antibiotics. 4. Differentiate between concentration		
		and time dependent killing with		
		examples.		
		evambres.		

		5. Classify antimicrobials on the basis of		
2	Penicillins	mechanism of action (MOA) 1. Classify beta-lactam antibiotics 2. Enlist narrow and broad spectrum Penicillins. 3. Enlist anti-pseudomonal, anti- staphylococcal/ beta lactamase Resistant Penicillin. 4. Enlist long- and short-acting Penicillins 5. Describe anti-bacterial spectrum of Penicillins. 6. Describe pharmacokinetics in respect of emphasis on route of administration	2	IL
		and excretion of Penicillins 7. Describe mechanism of action of Penicillins 8. Describe clinical uses of Penecillins 9. Describe adverse effects of Penicillins,		
		10. Describe contraindications of Penicillins. 11. Describe principal mechanism of bacterial resistance to Penicillins 12. Describe drug interactions of Penicillins 13. Apply formula for interconversion of milligrams and units of Penicillin G. 14. Relate pharmacokinetics and pharmacodynamics of Penicillin with their clinical applications / uses.		
3	Cephalosporins	 Classify Cephalosporins Describe anti-bacterial spectrum of Cephalosporins. Describe pharmacokinetics of Cephalosporins with special emphasis On route of administration and excretion. Describe clinical uses of Cephalosporins Describe the adverse effects of Cephalosporins. Describe drug interactions of Cephalosporins with Ethanol. Describe the principal bacterial mechanism of resistance to Cephalosporins. 	1	IL

		8. Relate pharmacokinetics and		
		pharmacodynamics of Cephalosporin		
		With their clinical applications / uses.		
1	Pota lactamaco	1. Enlist beta-lactamase inhibitors	1	11
4	Beta lactamase inhibitors		1	IL
	IIIIIDICOI S	2. Explain the rationale for using beta		
		lactamase inhibitors in combination		
		with B-lactam antibiotics.		
5	Monobactams &	1. Describe the antibacterial spectrum		
	Carbapanem	of Monobactams and Carbapanem		
		2. Describe the clinical uses of		
		Monobactams and Carbapanem		
6	Vancomycin	1. Describe the MOA of Vancomycin.	1	IL
		2. Describe clinical uses of Vancomycin		
		3. Describe the use of vancomycin in		
		MRSA(Methicillin-resistant Staph		
		aureus).		
		4. Describe adverse effects		
		ofVancomycin		
		5. Describe "Red man/Red neck"		
		syndrome.		
7	Fosfomycin	1. Enlist clinical uses of Fosfomycin,	1	IL
,	Bacitracin &	Bacitracin & Cycloserine	_	'-
	Cycloserine	Ductification a systems into		
8	Protein synthesis	Classify bacterial protein synthesis	1	IL
0	inhibitors:	inhibitors	1	IL.
9	Tetracyclines	Classify Tetracyclines.	1	IL
,	r der de y et mes	☐ Describe anti-bacterial spectrum of	_	'-
		Tetracyclines.		
		□ Describe the pharmacokinetics of		
		Tetracycline with special emphasis on		
		absorption of Tetracyclines.		
		☐ Describe mechanism of action of		
		Tetracyclines.		
		☐ Describe the principal mechanism of		
		resistance to Tetracyclines.		
		☐ Describe clinical uses of		
		Tetracyclines.		
		☐ Describe adverse effects of		
		Tetracyclines		
		☐ Describe Black Bone disease.		
		Describe the teratogenic effects of		
		Tetracyclines.		
		☐ Describe drug interactions of		
		•		
		Tetracyclines.		
		□ Describe the adverse effect related to		
		the use of outdated (expired)		
		Tetracycline products.		

	1			
		☐ Relate pharmacokinetics and		
		pharmacodynamics of Tetracycline with		
_		their clinical applications / uses.		
F	Pathology			
1	Bacteria: Pyrogenic	Define boil and furuncle	1	IL
	Bacteria	-Enlist organisms responsible for		
		pyrogenic infections		
		-Describe important properties, Patho-		
		physiology, lab diagnosis of GPC &GNC		
2	Bacteria: Rickettsia	-Define Rickettsia	1	IL
		-Describe the important properties,		
		pathophysiology, lab diagnosis of		
		diseases caused by Rickettsia		
3	Spore forming GProds	Enumerate spore forming GP rods	1	IL
		- Describe the important properties,		
		pathophysiology, clinical features and		
	Non Coore forming CD	lab diagnosis of spore forming GP rods		
	Non Spore forming GP rods	Enumerate non spore forming GP rods Describe the important properties,		
	Tods	patho physiology, clinical features and		
		lab diagnosis of non-spore forming GP		
		rods		
4	Chlamydia	Describe the important properties,	1	IL
-	Cinarrydia	pathophysiology, clinical features and	-	"-
		lab diagnosis of chlamydia.		
5	Miscellaneous:	Define sepsis and septic shock	1	IL
	Sepsis and Septic	-Enlist organisms capable of causing		
	Shock	sepsis andinducing septic shock		
		-Describe the pathophysiology and		
		clinical features of septic shock		
6	Zoonotic	-Enlist organisms causing zoonotic	1	IL
	Infections	infections		
		-Describe the important properties,		
		pathophysiology, clinical features and		
		lab diagnosis of different zoonotic		
		diseases		
Fo	orensic medicine an	d Toxicology		
1	General outlines of	Describe methods and parameters of	2	IL
	identification	identification		
	Fetal age	Write important physical developmental		
	determination	stages of fetus for age estimation		
	Age determination	Write important skeletal points of age		
	by skeletal study	estimation		
	Age estimation by	Write important dental points for age		
	dental study	estimation		

	Ages of medico	Enlist important ages of legal significance		
	legal significance			
	Pharmacolog			
1	Aminoglycosides	Enlist Aminoglycosides. Describe anti-bacterial spectrum of Aminoglycosides. Describe the pharmacokinetics of Aminoglycosides with special emphasis on route of administration, concentration-dependent killing and post-antibiotic effect. Describe mechanism of action of Aminoglycosides. Describe the principal mechanism of resistance to Aminoglycosides. Describe clinical uses of Aminoglycosides. Describe adverse effects of Aminoglycosides. Describe the drug interactions of Aminoglycosides. Relate pharmacokinetics and pharmacodynamics of Aminoglycosides with their clinical applications / uses.	1	IL
2	Macrolides & other related drugs	Enlist Macrolides. Describe anti-microbial spectrum of Macrolides Describe pharmacokinetics of Macrolides Describe the mechanism of action of Macrolides Describe the principal mechanism of resistance to Macrolides Describe clinical uses of Macrolides Describe adverse effects of Macrolides. Describe drug interactions of Macrolides Differentiate the salient features of Erythromycin, Clarithromycin and Azithromycin in respect of dosing and clinical use. Relate pharmacokinetics and pharmacodynamics of Macrolides with their clinical applications / uses.	2	IL

3	Linezolid	Describe mechanism of action of Linezolid Describe clinical uses of Linezolid with special emphasis on methicillin resistant staphylococci and vancomycin- resistant enterococci	1	IL
	Clindamycin	Describe mechanism of action of Clindamycin. □ Enumerate clinical uses of Clindamycin. □ Describe antibiotic associated (pseudomembranous) colitis.		
	Streptogramins	Enumerate Streptogramins. □ Describe clinical use of Quinupristin- □ Dalfopristin in VRE (Vancomycin- resistant enterococci).		
4	Chloramphenicol	Describe anti-microbial spectrum of Chloramphenicol Describe mechanism of action of Chloramphenicol Enlist clinical uses of Chloramphenicol Describe the reason for obsoleting the systemic use of Chloramphenicol Enlist adverse effects of Chloramphenicol	1	IL
5	Quinolones	Describe Gray baby syndrome. Classify Quinolones. Describe the pharmacokinetics of Fluroquinolones with special emphasis on halflife of Moxifloxacin Enlist respiratory Quinolones. Describe anti-microbial spectrum of Fluoroquinolones. Describe mechanism of action of Fluoroquinolones. Describe the principal mechanism of resistance to Fluroquinolones, Describe clinical uses of Fluroquinolones Describe adverse effects of Fluroquinolones Relate pharmacokinetics and pharmacodynamics of Fluoroquinolones with their clinical applications / use.	1	IL

2	Sulfonamides and	Classify Sulfonamides	2	Lu
2	Trimethoprim	Classify Sulfonamides	2	IL
	ппеспорин	☐ Describe anti-microbial spectrum of		
		Sulfonamides		
		□ Describe mechanism of action of		
		Sulfonamides and Trimethoprim		
		□ Describe mechanism of resistance to		
		Sulfonamides		
		 Describe clinical uses of Sulfonamides and Trimethoprim 		
		☐ Describe adverse effects of		
		Sulfonamides and Trimethoprim		
		☐ Describe the advantages of combining		
		sulfamethoxazole with trimethoprim		
		(CoTrimoxazole)		
		☐ Describe the drug interaction of		
		☐ Sulphonamides with Phenytoin.		
	Pathology			
1	Parasites: Hydatid	Describe the life cycle and important	1	IL
1	Cyst	properties of Echinococcus	1	"
	Cyst	☐ Relate the pathogenesis to the clinical		
		features and lab work up of		
		Echinococcus		
		☐ Identify cysts of Echinococcus in the		
		lab		
	Leishmania	Describe the life cycle, and important		
	2013111141114	properties of Leishmania		
		☐ Relate the pathogenesis to the clinical		
		featuresand lab work up of Leishmania		
2	Toxoplasma	Describe the life cycle and important	2	IL
-		properties of Toxoplasma		-
		☐ Relate the pathogenesis to the clinical		
		features and lab work up of Toxoplasma		
	Malaria	Describe the life cycle and important		
		propertiesof Malarial parasite		
		☐ Relate the pathogenesis to the clinical		
		features and lab work up of Malaria		
	Tenia	Describe the life cycle, important		
		properties, ofTenia saginata and solium		
		☐ Relate pathogenesis to the clinical		
i		, ,		
		features andlab work up of Tenia		
	Forensic Medicin	features andlab work up of Tenia saginata and solium		
1	Sex determination	features andlab work up of Tenia saginata and solium e & Toxicology Describe parameters of sex determination	2	IL
1		features andlab work up of Tenia saginata and solium e & Toxicology	2	IL

	Forensic odontology	Write the application of odontology in forensic medicine		
	Forensic	Describe medico legal aspects of forensic		
	Anthropometry	anthropometry		
	Community Med	dicine		
1	Epidemiology and control of vector borne diseases Malaria Dengue and other Viral haemorrhagic fevers and Arboviral infections Plague Filariasis	Describe the epidemiological determinants, frequency and distribution of Malaria Compare the prevalence/incidence of malaria in different provinces of Pakistan. Explain the preventive and controlmeasures of Malaria Describe the scope/function of Malaria control program. Explain the types, risk factors, complications and control measures of viral hemorrhagic fevers including Dengue fever	2	IL
2	Epidemiology & control of Leishmaniasis	Describe the epidemiological determinants, frequency and distribution of Leishmaniasis Explain the preventive and control measures of Leishmaniasis	1	IL
3	zoonotic and direct contagious diseases Rabies Anthrax Plague Brucellosis Tetanus Scabies Leprosy Trachoma	□ Explain the pre and post exposure prophylaxis of Rabies □ Explain the epidemiology, types of Anthrax and its preventive measures □ Discuss the history, types and prevention of Plague □ Explain the etiology, risk factors, clinical features and prevention of Brucellosis □ Explain the preventive measures of Scabies □ Discuss the etiology, risk factors, clinical features and prophylaxis of pre and post exposure of Tetanus Explain the etiology, risk factors, stages and preventive measures of Leprosy □ Explain the etiology, risk factors, complications and preventive measures of Trachoma	2	IL
	Far	nily medicine		

1	Malaria & Hepatitis control program teams	Explain the etiology, clinical features, types, investigations and management of Malaria in family practice Describe the red-flags in a patient with Malaria for referral to specialty care Identify at risk patients of hepatitis and Malaria and offer them screening	1	IL
Pha	rmacology			
1	Antimalarials	Describe terms like chemoprophylaxis, causal prophylaxis, terminal Prophylaxis and radical cure with examples of drugs. □ Classify antimalarial drugs. □ Enlist drugs used for chemoprophylaxis of malaria.	3	IL
		Enlist drugs used for radical cure of malaria. Describe the pharmacokinetics of Chloroquine with special emphasis onvolume of distribution and dosing Describe mechanism of action of Chloroquine, Quinine, Mefloquine, Halofantrine, Primaquine, Pyrimethamine and Artemisinins. Describe adverse effects of antimalarial drugs Describe Cinchonism and Blackwater fever. Enlist the antimalarial drugs relatively safe in pregnancy. Describe the antimalarial drugs contraindicated in G6PD deficiency. Relate pharmacokinetics and pharmacodynamics of antimalarial drugs with their clinical applications / use.		
2	Antifungal drugs	Classify Antifungal drugs. Describe the pharmacokinetics of Amphotericin B and Ketoconazole Describe the advantages of liposomal preparation of Amphotericin B Describe mechanism of action of Azoles, Amphotericin B, Griseofulvin, Turbinafine, and Nystatin.	2	IL

		 □ Describe clinical uses of Azoles, Amphotericin B, Griseofulvin, Turbinafine, and Nystatin. □ Describe adverse effects of Azoles, Amphotericin B, Griseofulvin, Turbinafine, and Nystatin. □ Describe drug interactions of Ketoconazole and Amphotericin B 		
3	Antivirals	Classify antiviral drugs	1	IL
4	Anti-herpes	 Enlist anti- Herpes drugs Describe the pharmacokinetics of Acyclovir Describe mechanism of action of Acyclovir Describe clinical uses of Acyclovir. Describe adverse effects of Acyclovir Describe the role of Ganciclovir in CMV retinitis. 	1	IL IL
5	Anti-HIV drugs	Classify anti-HIV drugs.	3	IL
		integrase inhibitors, protease inhibitors,NRTIs and NNRTIs in HIV treatment Describe adverse effects of Zidovudine and Indinavir Describe the rationale of HAART therapy.		
6	Viruses: Corona	Describe the structure, important	1	IL
	Viruses: HIV	properties, pathogenesis and clinical features along with labwork up of Corona Virus. Describe the structure, important properties, pathogenesis and clinical features along with labwork up of HIV		
7	Viruses: Herpes viruses	Describe the structure, important properties, pathogenesis and clinical features along with labwork up of Herpesviruses	1	IL
	Viruses: TumorViruses	Describe the structure, important properties, pathogenesis and clinical features along with labwork up of Tumor viruses		
	Viruses: MMR	Describe the structure, important properties, pathogenesis and clinical features along with lab work up of MMR viruses		

Fungi: Aspergillus	Describe the structure, important properties, pathogenesis and clinical features along with labwork up of Aspergillus	1	IL
Fungi: Candida	Describe the structure, important properties, pathogenesis and clinical features along with lab work up of Candida		
Tenia	Describe the structure, important properties, pathogenesis and clinical features along with labwork up of Tenia		
ensic Medicine and	Toxicology		
Medico legal issues related to HIV patient	Describe legal issues related to HIV patient	1	IL
Dactylography	Describe medico legal aspects of dactylography		
DNA finger printing	Define DNA finger printing ☐ Write its application in forensic practice ☐ Write methods of collection of samples and dispatch to laboratory	1	IL
Tattoos, Scar marks, Superimposition and facial reconstruction	Describe medico legal aspects of tattoo marks, Describe medico legal aspects of scar tissue, □ Describe medico legal aspects of superimposition		
Polygraph	Describe medico legal aspects of polygraph		
Narcoanalysis	Describe medico legal aspects of narcoanalysis		
nily Medicine			
TORCH infections	Define TORCH infection Describe the steps of investigations for TORCH infections Describe the preventive strategies for TORCH infections & their complications	1	
Community Med	licine		
Epidemiology & control of airborne diseases	Describe the epidemiological determinants, frequency and distribution of measles, mumps, chickenpox, rubella, Diphtheria, Pertissus and meningitis	1	IL
	Fungi: Candida Tenia Pensic Medicine and Medico legal issues related to HIV patient Dactylography DNA finger printing Tattoos, Scar marks, Superimposition and facial reconstruction Polygraph Narcoanalysis mily Medicine TORCH infections Community Medicine Epidemiology & control of airborne	properties, pathogenesis and clinical features along with labwork up of Aspergillus Pungi: Candida Describe the structure, important properties, pathogenesis and clinical features along with lab work up of Candida Tenia Describe the structure, important properties, pathogenesis and clinical features along with lab work up of Candida Pensic Medicine and Toxicology Medico legal issues related to HIV patient Dactylography Describe legal issues related to HIV patient Dactylography Describe medico legal aspects of dactylography Define DNA finger printing write its application in forensic practice write methods of collection of samples and dispatch to laboratory Tattoos, Scar marks, Superimposition and facial reconstruction Polygraph Narcoanalysis Describe medico legal aspects of superimposition Polygraph Describe medico legal aspects of polygraph Narcoanalysis Describe medico legal aspects of narcoanalysis mily Medicine TORCH infections Define TORCH infection Describe the steps of investigations for TORCH infections Describe the preventive strategies for TORCH infections Describe the preventive strategies for TORCH infections Describe the preventive strategies for TORCH infections & their complications Community Medicine Epidemiology & Control of airborne diseases Describe the epidemiological determinants, frequency and distribution of measles, mumps, chickenpox, rubella, Diphtheria,	properties, pathogenesis and clinical features along with labwork up of Aspergillus Fungi: Candida Describe the structure, important properties, pathogenesis and clinical features along with lab work up of Candida Tenia Describe the structure, important properties, pathogenesis and clinical features along with labwork up of Tenia ensite Medicine and Toxicology Medico legal issues related to HIV patient issues related to HIV patient Dactylography Describe legal issues related to HIV patient issues related to HIV patient Dactylography Describe medico legal aspects of dactylography Write its application in forensic practice Write methods of collection of samples and dispatch to laboratory Tattoos, Scar marks, Superimposition and facial reconstruction Polygraph Narcoanalysis Describe medico legal aspects of superimposition Polygraph Narcoanalysis Describe medico legal aspects of polygraph Narcoanalysis Describe medico legal aspects of narcoanalysis mily Medicine TORCH infections Define TORCH infection Describe the steps of investigations for TORCH infections Describe the preventive strategies for TORCH infections and their complications Community Medicine Epidemiology & Control of airborne diseases Describe the epidemiological determinants, frequency and distribution of measles, mumps, chickenpox, rubella, Diphtheria, Pertissus and meningitis

	1	managers of manalas mumns & rubolla		
		measures of measles, mumps & rubella with reference to Pakistani context.		
2	Epidemiology &	Describe the epidemiological	1	II.
2	control of Corona	determinants, frequency and	1	'L
	virus infection	Distribution of corona		
	vii do iiii eccion	☐ Compare the prevalence/incidence of		
		corona in different parts of the world.		
		☐ Describe the preventive and control		
		measures of corona		
		Describe the role of Pakistani		
		government in corona control program.		
3	Epidemiology and	Enumerate common water borne	2	IL
	prevention of water	diseases		
	borne diseases:	□ Explain the epidemiology &		
	□ Cholera	prevention measures of these diseases		
	□ Typhoid	describe the current situation of these		
	☐ Acute Diarrhea	diseases on Pakistan and worldwide		
	and Dysentery			
	□ Polio			
	☐ Hepatitis A and E			
	☐ Food poisoning			
	Amebiasis and			
	Giardiasis			
	☐ Brucellosis			
	☐ Leptospirosis			
	☐ Worm infestations			
	Practica	l Work		
We	ek 1 Practicals			
Patho				
	Cell of	Identify Cells of inflammation in the	1.5	
	inflammation	microscope		
	Acute Appendicitis	Identify the histopathological changes in acute appendicitis	1.5	
Fore				
Medi				
	Gastric Lavage	Demonstrate the steps of gastriclavage	1.5	
We	ek 2 Practicals			
Path	ology			
	Chronic	-Identify the morphological changes	1.5	
	cholecystitis	occurring in chronic cholecystitis		
	Granuloma	- Identify the various cells and their	1.5	
		arrangement in a granuloma		

Week 3 Practicals			
Pathology			
Granulation Tissue	-Identify the histological features of granulation tissue	1.5	
Week 4 Practicals			
Pathology			
Catalase test	Perform and interpret the result of catalase test by tube and slide method	1.5	
Coagulase test	Perform and interpret the result of coagulase test by tube method		
Oxidase test	Perform and interpret the result of coagulase test		
Culture media	-Identify blood agar, Mannitol saltagar, Chocolate media, Cary Blair transport media in the lab -Identify different types of haemolysis on blood agar		
Pharmacology			
	Prescription Writing		
Acute Tonsillitis	Construct a prescription for a patient with acute tonsillitis.		
Forensic Medicine			
Sex determination through bones	Identify human sex through bones	1.5	
Hair, Fibre	Identify human hair through microscopy Differentiate between hair and fibre		
Week 5 Practicals			
Pharmacology			
	Prescription Writing		
Malaria	Construct a prescription for a patient with Malaria		
Week 6 Practicals			
Pathology			
Hydatid Cyst	Identify cysts and ova of Echinococcus in the lab	1.5	
Leishmania	Identify leishmania in slides of bonemarrow/ skin biopsies		
Malaria	Identify Malarial parasite trophozoites and gametocytes under microscope		
Taenia saginata/solium	Identify ova of Taenia in the lab		

Community medicine			
Communicable diseases models	Identify the models related to the communicable diseases Explain the complication, preventive measures and the identification signs of concerned disease	1.5	

 $\label{eq:mitigated} \mbox{MIT:mode of information transfer. E.g. lecture, SGD, DSL, Practical, skill lab etc etc}$



9 Learning Opportunities and Resources

9.1 Instruction (if any)

Following study material will help a student to grasp full the content of the subjects taught.

Recommended books are to be studied first, followed by reference books if needed..

9.2 Books:

Subjects	Textbooks					
Community	1.Community Medicine by Parikh					
Medicine	2. Community Medicine by M Illyas					
	3. Basic Statistics for the Health Sciences by Jan W Kuzm					
Forensic	1. Nasib R. Awan. Principles and practice of Forensic					
Medicine	Medicine 1st ed. 2002.					
	2. Parikh, C.K. Parikh's Textbook of Medical Jurisprudence,					
	Forensic Medicine and Toxicology. 7th ed.2005.					
	3. Knight B. Simpson's Forensic Medicine. 11th ed.1993.					
	4. Knight and Pekka. Principles of forensic medicine. 3rd ed.					
	2004					
	5. Krishan VIJ. Text book of forensic medicine and					
	toxicology (principles and practice). 4th ed. 2007					
	6. Dikshit P.C. Text book of forensic medicine and					
	toxicology. 1st ed. 2010					
	7. Polson. Polson's Essential of Forensic Medicine. 4th					
	edition. 2010.					
	8. Rao. Atlas of Forensic Medicine (latest edition).					
	9. Rao.Practical Forensic Medicine 3rd ed ,2007.					
	10. Knight: Jimpson's Forensic Medicine 10th 1991,11th					
	ed.1993					
	11. Taylor's Principles and Practice of Medical					
	Jurisprudence. 15th ed.1999					
Pathology	1. Robbins & Cotran, Pathologic Basis of Disease, 9th					
	edition.					
	2. Rapid Review Pathology, 4th edition by Edward F. Goljan					
	MD					
PHARMACOLOGY	1. Lippincott Illustrated Pharmacology					
	2. Basic and Clinical Pharmacology by Katzung					

9.3 Website:





https://www.medscape.com

https://www.PathologyOutlines.com







https://pubmed.ncbi.nlm.nih.gov

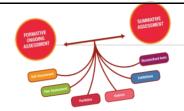
https://scholar.google.com





https://medlineplus.gov

https://medicine.nus.edu.sg/pathweb



11.Examination and Methods of Assessment:

9.4 Introduction:

3rd year will be assessed in three blocks

Block G

Block H

Block I

Paper G has total of 268 marks, with 120 marks for theory and 120 marks for OSPE and 28 marks for internal assessment. Summative Assessment consists of Modular Exam. Module exam will be assessed by any of the following assessment methods:

- MCQ
- SEQ
- OSPE

Annual Exam is cumulative of:

- Internal Evaluation = 10%
- Final Exam= 90%
 Theory: MCQs, SEQs Practical: Viva & OSPE

9.5 Internal:

Internal assessment has 14 marks each for theory and for Ospe in block G

9.6 University Exam:

9.7 Total marks distribution- 3rd Year MBBS

Table-1 ASSESSMENT PLAN OF 3 RD YEAR								
THEORY PAPER	MODULES	THEORY MARKS	INTERNAL Assessment theory(10%)	OSPE/ OSCE	Internal assessment OSPE (10%)	Total marks		
Paper G	Foundation-II Inf. & inflammation	120	14	120	14	268		
Paper H	Multisystem Blood MSK	120	13	120	14	267		
Paper I	CVS-II Respiratory-II	120	13	120	12	265		
Total Marks		360	40	360	40	800		

Table-3 OSP	$^{\circ}E$		
Subject	OSPE/OSCE	Viva stations	Total *
Pharmacology	2	2	4
Pathology	5	2	7
Forensic medicine	2	2	4
Community	1	2	3
medicine			
Medicine (history	1	0	1
and physical			
examination)			
Surgery (history and	1	0	1
physical			
examination)			
Total	12	8	20

• A minimum of 20 stations will be used in final exams. Total marks will be 120 (6 marks for each station).

12.Tentative Timetables

SWAT MEDICAL COLLEGE, SWAT

Department of Medical Education Time Table **3rdYear MBBS** Class Session 2026

Block-G: (infection and inflammation module)

Week-1) Pain and Fatigue

Day/Date	08:00AM-09:00AM	09:00AM10:00AM	10:00-11:00AM	11:15-
				01:15PM
18-03-24	F.M-L1	Eye-L1	Patho-L1	Hospital work
monday	Antidotes	Acute and chronic	Overview in acute	
Inonday	Dr. Hidayatur Rehman	dacrocyst	inflammation	
		Prof. Dr. Haroon	Dr. Aurangzeb	
		Rasheed		
19-03-24	Research-L1	Patho-L2	F.M-L2	
tuesday	Prof.Dr. Zahid Iqbal	Pyogenic	Steps of poison	
tucsuay		Prof. Dr. ShahJehan	management	
			Dr. Hidayat	
20-03-24	Pharma-L1	Patho-L3	Pharma-L2	
wednesday	NSAIDS & Paracetamol	Cells of inflammation	Aspirin	
wednesday	Prof. Dr. Zahid Iqbal	Prof. Dr. Imranuddin	Prof. Dr. Zahid Iqbal	
21-03-24	SDL (SLRC)	ENT-L1	Family Medicine-L1	
thursday		Acute & Chronic	Malaria & Heparin	
thursday		Pharyngitis Dr.	control program teams	
		Bakht Taj	Dr. Rafiullah	
22-03-24	Paeds-L1	Pharma-L3	CM-L4	SDL
Friday	PUO	Introduction to	Infectious disease	
	Dr.Ibrahim	chemotherapy	epidemiology	
			Prof. Dr. Sartaj khan	

Block-G: (infection and inflammation module)

Week-2

Day/Date	08:00-09:00AM	09:00AM10:00AM	10:00-11:00AM	11:15-01:15PM
25-03-24	Pharma-L4	Patho-L5	CM-L2	Hospital work
Monday	Anti-histamine	Morphological &	Epidemiology and	
	Dr.Fawad Khalid	defect of	control of	
		inflammation	leshmaniasis	
		Prof. Dr.	Dr.Zarak	
		Mukammil Shah		
26-03-24	Patho-L6	Patho-L7	SDL	
Tuesday	Plasma derived	Pyogenics-II		
	and cell derived	Prof.Dr.Shahjehan		
	mediators			
	Dr. Sehrish			
27-03-24	SDL	FM-	ENT-L2	
Wednesday		Toxicity with	Acute & chronic	
		analgesics	rhinitis	
		Dr.Shahkar Ali	Dr. Bakht taj	
28-03-24	Paeds-L2	CM-L3	SDL	
Thursday	Child with rash	Infection control-I		
	Dr. Ibrahim	Prof.Dr. Sartaj		
29-03-24	Patho-L8	CM-L4	Pharma-L6	SDL
Friday	Cells of acute	Infection control-II	Penicillins	
	inflammation	Dr. Sartaj	Dr.fawad Khalid	
	Dr.Aurangzeb			

Week-3 Trauma and repair

	VVCC	k-3 Trauma and repa		
Day/Date	08:00-09:00AM	09:00AM10:00AM	10:00-11:00AM	11:15-
				01:15PM
01-04-24	F.M-L5	Pharma-L7	Patho-L9	Hospital work
Monday	sex determination	Cephalosporin	Cell and mediator of	
	&examination of hair	Dr. Rehman shah	chronic	
	Dr.Hidayaturrehman		inflammation	
			Dr. shabir ahmed	
02-04-24	Pharma-L8	Patho-L10	F.M-L6	
Tuesday	Monobactems,	Granulomatous	Race determination	
	carbapanem and other	inflammation	and forensic	
	mono bactems	Dr.aurangzeb	odontology	
	Dr.Fawad		Dr.Hidayaturrehma	
			n	
03-04-24	Pharma-L9	Patho-L11	SDL	
Wednesday	Vancomycin,fasfomycin	Growth factors and		
	& Bacitracin	receptors ECM		
	Dr. Fawad Khalid	Dr. Bilal		
04-04-24	Surgery L1	Eye-L3	Patho-L12	
Thursday	Surgical infections	Infective	Candida	
	Dr. Manzoor Ali	conjunctivitis	Dr.Sehrish	
		Prof.Dr. Haroon		
		Rashid		
05-04-24	ENT-L3	Patho-L13	C.M-L5	CM-L6
Friday	Acute & chronic	Leishmania, malaria	Vector-borne	Vector borne
	sinusitis	Prof.Dr. Mukammal	diseases	diseases
	Dr. Bakht Taj	shah	Prof.Dr.Sartaj khan	Prof.Dr.Sartaj
				khan

Week 4 (fever and infection)

Day/Date	8:00-9:00am	9:00-10:00am	10:00-	12:00-	01:30-3:00pm
,,			12:00pm	1:30pm	·
15-04-24	Pharma-L10	FM-L7	Hospital	Practical	Patho-L5
Monday	Tetracycline	Medicolegal issues	work	work	Tenia hydatid
	Dr.Rehman Shah	related to HIV			Prof.Dr.Mukamil
		patients			shah
		Dr.Younas khan			
16-04-24	FM-L8	Pharma-L11		Practical	Patho-L16
Tuesday	DNA fingerprinting	Aminoglycosides			Repair& healing
	Dr.Younas	Prof.Dr. Zahid Iqbal			Prof.Dr.Imranud
					din
17-04-24	Research-L2	Patho-L17		Practical	Pharma-L12
Wednesday	Prof.Dr.Zahid Iqbal	Pyogenic-III			Macrolides and
		Prof.Dr.Shah Jehan			other related
					drugs
					Prof.Dr.Zahid
18-04-24	Pharma-L13	ENT-L4		SDL	Pharma-L14
Thursday	Linezolid,clindamyci	Acute & chronic			Quinolones
	n,	sinusitis			Dr.Rehman shah
	streptogramins	Dr.Bakht Taj			
	Dr.Fawad Khalid				
19-04-24	Pharma-L15	Patho-L19	CM-L&8	Prayers	SDL
Friday	Chloramphenical	Repair by scaring	Zoonotic	break	
	Dr.Fawad Khalid	and factor	and direct		
		affecting healing	contagiou		
		Prof.Dr.	s diseases		
		Imranuddin	Prof.Dr.Sa		
			rtaj		

Week 5

10:00-12:00pm Hospital work	12:00-1:30pm	01:30- 3:00pm
Hospital work	u vo ati a a la	3:00pm
Hospital work		
	practicals	Patho-L20
		Corona,HIV
		viruses
		Dr.Shabir
	practicals	Patho-L22
		Zoonotic
		infection
		Dr.Sehrish
	practicals	Pharma-
		L20
		Antivirals
		Dr.Rehman
		shah
	Surgery-L2	SDL
	Anesthesia &	
	pain relief	
	Dr.Anwer zeb	
10:00-11:00am	11:0012:00pm	CM-L7
Patho-L23	ENT-L5	Epidemiolo
HIV,Tumor,	Acute &	gy &
MMR virus	chronic	control of
Dr.Ayaz	tonsillitis	airborne
	Dr. Bakht Taj	diseases
		Prof.Dr.
		Sartaj khan
	Patho-L23 HIV,Tumor, MMR virus	practicals Surgery-L2 Anesthesia & pain relief Dr.Anwer zeb 10:00-11:00am Patho-L23 HIV,Tumor, MMR virus Dr.Ayaz Practicals Surgery-L2 Anesthesia & pain relief Dr.Anwer zeb Acute & chronic tonsillitis

Week 6

Day/Date	8:00-9:00am	9:00-10:00am	10:00-12:00pm	12:00-1:30pm	01:30-3:00pm		
29-04-24	Paeds-L2	Pharma-L21	Hospital work	practicals	Patho-L24		
Monday	Child with rash	Anti-HIV			Septic shock		
	Dr.Ibrahim	Dr.Rehman			Dr.Aurangzeb		
		Shah					
30-04-24	Pharma-L23	Patho-L25		practicals	Patho-L26		
Tuesday	Serotonin	Toxoplasma,			Spore forming		
	agonist &	tenia saginata			bacteria		
	antagonist	Prof.Dr.Mukamil			Prof.Dr.Shahjehan		
	Dr.Safeena Arif	Shah					
01-05-24		Labour		Day			
Wednesday							
02-05-24	F.M L-4	CM-L8		practicals	CM-L9		
Thursday	Toxicity by	Infection			Infection control-		
	analgesics	control-I			II		
	Dr.Azmat	Prof.Dr.Sartaj			Prof.Dr.Sartaj		
		khan			khan		
03-05-24	Block						
Friday	Preparation leave						

Week 7

Day/Date	8:00-9:00am	9:00-10:00am	10:00-12:00pm	12:00-1:30pm	01:30-3:00pm
06-05-24			Block G exam-		
Monday			Theory paper		
07-05-24	Block G exam-				
Tuesday	OSPE				
08-05-24	Block H starts				
Wednesday					

Whole module timetable with tentative dates

13. For inquiry and troubleshooting



Please contact

Dr. Younas Khan Forensic Medicine & Toxicology Block Coordinator +92 335 9439240

14. Module Evaluation Form

This is an example of feedback form and real-time feedback will be obtained through an electronic link and/or your LMS

Date:	MBBS Year: Block:				Modu	ule:		
To what extent did the course contents align with the stated learning objectives of the module?	Date	:						
No. Question 1	1. (U	1. (Unsatisfactory) 2 (Fair) 3 (Satisfactory)			Good)		5 (Excellent)
1 To what extent did the course contents align with the stated learning objectives of the module? 2 How clear and comprehensive were the course materials provided in this module? 3 Were the core topics adequately covered, ensuring a well-rounded understanding of the subject? 4 How current and up-to-date were the course contents in reflecting recent advancements? 5 Did the module incorporate real-world applications and case studies effectively? Category: Learning Resources 6 Were the learning resources (e.g., textbooks, online materials, laboratory facilities) readily available and easily accessible? 7 How helpful were additional learning resources such as supplementary readings or multimedia content? 8 Did the module offer adequate support for research and independent study? 9 Were digital resources and online platforms effectively utilized to enhance the learning experience? 10 Were there sufficient opportunities for hands-on practice and practical application of knowledge? 11 How well did instructors engage with students and create a supportive learning environment? 12 Were diverse teaching methods (e.g., lectures, group discussions, simulations) effectively employed? 13 How responsive were instructors to questions, concerns, and feedback from students? 14 To what extent did instructors provide timely and constructive feedback on assignments and assessments? 15 Were opportunities for collaborative learning and peer-to-peer interactions encouraged and facilitated?	Cate	gory: Course Contents						
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No. Category: Engagement and Motivation		peer interactions encourag	ed and facilitated?					
	No.			•		L		l.

23	How would you rate the overall quality of this module?							
		(Very Poor)		(Fair)	(Good)	(E	xcel	lent
No.	Category: Overall Question	1	2 (Poor)	3	4	5		
22	How effectively were accommodations provided for studer knowledge?	nts with va	rying levels o	of prior				
21	Were efforts made to include diverse perspectives, culture curriculum?	s, and bacl	kgrounds in	the				
20	How well did the module accommodate different learning among students?	styles and	preferences					
Cate	gory: Inclusivity and Diversity	•	•	•	•			
19	Were assessments designed to challenge and motivate students to excel in their studies?							
	pursue their individual interests within the subject matter?							
18	Did the module provide opportunities for students to							
17	How well were active learning techniques (e.g., problemsolving, case studies) integrated into the curriculum?							
4-	and practical applications to engage students?							
16	To what extent did the module use real-world examples							

15.Students Diary/Notes

S.NO	DATE	TASK	PENDING/COMPLETED	COMMENTS
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PROGESS:	ACHIEVMENT: